Illinois Medicaid & CHIP Eligibility Changes and Requests to Address COVID-19

On March 13, 2020, the President of the United States declared the 2019 Novel Coronavirus Disease (COVID-19) a public health emergency. This declaration allows states to submit requests to the federal Centers for Medicare & Medicaid Services (CMS) to waive certain federal regulations and provide additional flexibility to address the emergency.

To quickly expand access to healthcare services and to meet the needs of residents throughout the COVID-19 public health emergency, HFS is requesting CMS approval of eligibility changes as a part of a package of requests to maximize flexibility within the Medicaid program. Examples of the eligibility flexibilities are listed below. HFS is working with CMS on the details of several of these flexibilities and may request additional flexibilities as needed.

Eligibility Flexibilities HFS is Enacting with Documentation to CMS:

<u>Accept Applicant Attestation without Documentation</u>: In determining Medicaid and CHIP eligibility for most applicants, accept client statement for income and several other factors of eligibility without requiring applicants to provide documentation. (email notification to CMS and CMS concurrence to state for Medicaid, CHIP SPA)

<u>Delay Eligibility Renewals</u>: Delay reviews of medical eligibility known as "redeterminations". (concurrence for Medicaid, 1115 Waiver and CHIP SPA to further extend for 12 months before next renewal)

<u>Delay Action on Changes that Would Adversely Affect Eligibility</u>: Delay state action on changes in circumstances that would end or reduce client eligibility for medical programs. (concurrence for Medicaid, CHIP SPA)

Eligibility Flexibilities for which HFS is Requesting CMS Approval:

<u>Accept Applicant Attestation Regarding Citizenship and Immigration Status</u>: In determining eligibility for Medicaid and CHIP, accept client statement for citizenship and immigration status without verification. (Medicaid 1115 Waiver, CHIP SPA)

<u>Disregard Assets</u>: In order to speed the processing of applications for those in the Aged, Blind and Disabled category, disregard all assets to determine eligibility. (Medicaid SPA)

<u>Waive Premiums and Co-Payments:</u> Waive client premiums and co-payments in the AllKids and Health Benefits for Workers with Disabilities programs. (Medicaid and CHIP SPAs)

<u>COVID-19 Testing and Treatment Coverage for the Uninsured:</u> Provide coverage of COVID-19 testing and treatment to uninsured Illinois residents. (1115 Waiver)

<u>COVID-19 Treatment Coverage for the Insured as Secondary Payer:</u> Provide coverage of cost sharing for COVID-19 testing and treatment to insured Illinois residents. (1115 Waiver)

<u>Cover Housing for Quarantined Homeless Persons</u>: Allow housing as a Medicaid benefit for homeless persons with COVID-19 during quarantine periods. (1115 Waiver)

<u>Grant Adults Presumptive Eligibility upon Receipt of Application:</u> As currently available for children and pregnant women, start presumptive eligibility upon receipt of an application indicating eligible income and citizen/immigration status. (Medicaid SPA for MAGI - adults under 65 and no Medicare, 1115 waiver for AABD)

<u>Remove Limit on Presumptive Eligibility for Children and Pregnant Women</u>: Remove provision that children may not have PE more than once a year or pregnant women more than once per pregnancy. (Medicaid SPA)

<u>Suspend Transfer of Assets Rule</u>: In determining eligibility, temporarily suspend 60-month review of asset transfers. (1115 Waiver)

<u>Diversify Eligibility Workforce</u>: Allow non-state staff to process Medicaid applications in additional locations. (1115 Waiver)

<u>Increase Reasonable Compatibility from 10% to 30%</u>: With applicant attestation of income, further reduce the number of applications that require eligibility staff to follow up with the applicant. In cases where eligibility is in question because verified income and applicant attested income vary by 30% or less, caseworkers will accept the applicant attested income amount without contacting the applicant. (Change verification plan submitted to CMS)

To see the submission to CMS visit: https://www.illinois.gov/hfs/Pages/coronavirus.aspx.