DEPARTMENT OF HEALTH CARE FINANCE

NOTICE OF FINAL RULEMAKING

The Director of the Department of Health Care Finance (DHCF), pursuant to the authority set forth in An Act to enable the District of Columbia (District) to receive federal financial assistance under Title XIX of the Social Security Act for a medical assistance program, and for other purposes approved December 27, 1967 (81 Stat.774; D.C. Official Code § 1-307.02 (2012 Repl. & 2014 Supp.)) and Section 6(6) of the Department of Health Care Finance Establishment Act of 2007, effective February 27, 2008 (D.C. Law 17-109; D.C. Official Code § 7-771.05(6) (2012 Repl.)), hereby gives notice of the adoption of an amendment to Chapter 95 (Medicaid Eligibility) of Title 29 (Public Welfare) of the District of Columbia Municipal Regulations (DCMR).

Under Section 1925 of the Social Security Act (the Act), as amended, 42 U.S.C.A. § 1396r-6, state Medicaid programs may extend Transitional Medical Assistance (TMA) to families and dependent children with low-incomes. TMA may be provided to families who no longer qualify under Section 1931 of the Act due to increased earned income or working hours of the caretaker relative's employment, or the loss of a time-limited earned income disregard. Under TMA, state Medicaid programs may offer temporary Medicaid for two six (6)-month periods or one twelve (12)-month period. DHCF has elected to provide one twelve (12)-month period of TMA to improve the health outcomes of families living in the District of Columbia, with low-incomes and with dependent children. Accordingly, this rule establishes standards governing TMA eligibility determinations and coverage.

The corresponding amendment to the State Plan was approved by the Council of the District of Columbia (Council) on March 27, 2015 (PR21-0044). The U.S. Department of Health and Human Services (HHS), Centers for Medicaid and Medicare Services (CMS) approved the State Plan Amendment (SPA) on April 15, 2015. The Notice of Proposed Rulemaking was published in the *D.C. Register* on February 6, 2015 at 62 DCR 001710. No comments were received and no substantive changes have been made. The Director adopted these rules on May 22, 2015 and they shall become effective on the date of publication of this notice in the *D.C. Register*.

Chapter 95, MEDICAID ELIGIBILITY, of Title 29 DCMR, PUBLIC WELFARE, is amended by adding a new Section 9510 to read as follows:

9510 TRANSITIONAL MEDICAID

Under Section 1925 of the Social Security Act (the Act), as amended, 42 U.S.C §§ 1396r-6, the Department of Health Care Finance (DCHF) may extend Transitional Medical Assistance (TMA) to certain families and dependent children with low-income who were: Medicaid eligible (includes retroactive eligibility) during at least three (3) of the six (6) months immediately preceding the month in which the family became ineligible.

- Twelve (12) months of full Medicaid coverage under TMA may be provided to families who no longer qualify under Section 1931 of the Act due to:
 - (a) Increased earned income, or working hours, from a parent or other caretaker relative's employment, or
 - (b) The loss of a time-limited earned income disregard.
- 9510.3 TMA shall begin on the date of termination of Medicaid.

9510.99 **DEFINITIONS**

For the purposes of this section, the following terms shall have the meanings ascribed:

Disregard: means the amount(s) of income deducted in determining financial eligibility for Medicaid.