

MAGI-BASED ELIGIBILITY VERIFICATION PLAN
 (Insert Medicaid, CHIP, or Both)
 State:

Medicaid & CHIP
 Alabama

Section A. Verification Procedures for Factors of Eligibility

Eligibility Factor	Self-Attestation Accepted without Additional Verification (Y/N)	Self-Attestation Accepted with Post-Eligibility Verification (Y/N)	Electronic Data Source Used (Y/N)	Reasonable Compatibility Standard Used	Specify Reasonable Compatibility Standard for Income	Ask for a Reasonable Explanation from the Individual (Y/N)	Paper Documentation Required from the Individual (Y/N)	Comments
Income*	YES	NO	YES	Both are above, at or below the applicable income standard. Percent Threshold	10%	YES	YES	<p>Plan to use Federal Hub data, and TALX data.</p> <ol style="list-style-type: none"> If individual self-attestation of income and data match are both below the Medicaid/CHIP MAGI eligibility level, individual will be determined eligible for Medicaid/CHIP benefits. If individual self-attestation of income and data match are both above the Medicaid/CHIP MAGI eligibility level, individual will be determined ineligible, and account transferred to FFM for APTC eligibility. If individual self-attestation of income is above Medicaid/CHIP MAGI level, but data match puts applicant below the Medicaid/CHIP MAGI eligibility level, individual will be determined ineligible and account transferred to FFM for APTC eligibility. If there is no database source available, self-attestation will be accepted. If individual self-attestation of income is below Alabama Medicaid/CHIP MAGI level, but data match puts applicant above the Medicaid/CHIP MAGI eligibility level, reasonable compatibility level of 10% will be applied. <p>If less than 10% difference, data is considered reasonably compatible and individual will be determined eligible for Medicaid/CHIP benefits. If more than 10% difference and individual can provide a reasonable explanation/paper documentation (either already indicated on the application, or after formal request from the state), the individual will be determined eligible for Medicaid/CHIP benefits. If more than 10% difference and individual cannot provide a reasonable explanation/paper documentation, the individual will be determined ineligible for Medicaid/CHIP benefits account transferred to FFM for APTC eligibility.</p> <p>Alabama Medicaid has an approved state plan to use SNAP and TANF income findings through ELE at application and renewal for family planning and children under 19. Paper documentation will be required only if there are inconsistencies found. Post eligibility checks will be made with regard to unearned income through the state' current data match with IRS and PARIS matches.</p>
Residency	YES	NO	NO	N/A	N/A	NO	NO	Will have access to PARIS and could use for residency. Do not actively use it for verification for each individual.
Age (Date of Birth)	YES	NO	NO	N/A	N/A	NO	NO	Will have access to SSA and could use for age / DOB. Do not actively verify age / DOB for each individual.
Social Security Number **	NO	NO	YES	N/A	N/A	N/A	NO	<p>SSA data through Federal Hub</p> <p>Will follow-up with individual and SSA to try and resolve the inconsistencies. We will not ask for paper as the record has to be updated from SSA. We will retrieve the record at a later date through a follow-up electronic match once the person has resolved the inconsistency with SSA.</p>
Citizenship **	NO	NO	YES	N/A	N/A	N/A	YES	SSA data through Federal Hub
Immigration Status **	NO	NO	YES	N/A	N/A	N/A	YES	DHS data through Federal Hub
Household Composition	YES	NO	NO	N/A	N/A	NO	NO	
Pregnancy ***	YES	NO	NO	N/A	N/A	NO	NO	
Caretaker Relative	YES	NO	NO	N/A	N/A	NO	NO	
Medicare	NO	YES	YES	N/A	N/A	YES	YES	Will use SSA SVES, SDX, or EDB file to verify Medicare status. If attested information is different from electronic data source, will follow-up with individual and request paper documentation if necessary.
Application for Other Benefits	YES	NO	NO	N/A	N/A	NO	NO	
Other: (Please describe any other eligibility factors in the space below)								

Eligibility Factor	Self-Attestation Accepted without Additional Verification (Y/N)	Self-Attestation Accepted with Post-Eligibility Verification (Y/N)	Electronic Data Source Used (Y/N)	Reasonable Compatibility Standard Used	Specify Reasonable Compatibility Standard for Income	Ask for a Reasonable Explanation from the Individual (Y/N)	Paper Documentation Required from the Individual (Y/N)	Comments
<p>* States must check electronic data sources determined useful to verify income in accordance with 42 CFR 435.948 but can be done post-enrollment. If the information obtained from electronic data sources and the information provided by or on behalf of the individual are both above, at or below the applicable income standard, the State must determine the applicant eligible or ineligible for Medicaid/CHIP. (NOTE: this option is prepopulated for the state and is not an option that can be changed).</p> <p>** States must follow statute, regulations, and guidance for verification of SSN, citizenship and immigration status including obtaining such information through the federal data services hub if available.</p> <p>*** States must accept self-attestation of pregnancy unless they have information that is not reasonably compatible with such attestation.</p>								

MAGI-BASED ELIGIBILITY VERIFICATION PLAN (Insert Medicaid, CHIP, or Both) State: Medicaid & CHIP Alabama												
Section B1. Use of Electronic Data Sources												
Financial:												
Electronic Data Source	Determined Useful (Y/N) ¹	Accuracy Considered (Y/N)	Timeliness Considered (Y/N)	Ability to Access Considered (Y/N)	Age of Data Considered (Y/N)	Comprehensive Considered (Y/N)	Other Criteria Used (Y/N) (Please Describe in Comments section)	Data Source Used at Application (Y/N)	Data Source Used at Renewal (Y/N)	Data Source Used Post-Enrollment (Y/N)	If Data Source Used for Post-Enrollment - Frequency Used (e.g. monthly, quarterly)	Comments
1. Internal Revenue Service (IRS)	YES	YES	YES	YES	YES	YES	NO	YES	YES	YES		Data from Federal Hub at application and renewal. The state will only use IRS data through the HUB at renewal if consent provided by the individual. This data will not be used post enrollment. Post eligibility checks will be made with regard to unearned income through the state's current data match with IRS on an ad-hoc basis.
2. Social Security Administration (SSA) (SSI, Title II)	YES	YES	YES	YES	YES	YES	NO	YES	YES	NO		This data will not be used post enrollment.
3. State Wage Information Collection Agency (SWICA)	NO	NO	NO	YES	YES	YES	NO	NO	NO	NO		Medicaid/CHIP agency does not have access to this data.
4. State Unemployment Compensation	NO	NO	NO	YES	NO	NO	NO	NO	NO	NO		Medicaid/CHIP agency does not have access to this data.
5. State Administered Supplementary Payment Program	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO		Does not cover our population
6. State General Assistance Programs	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO		None available
7. Supplemental Nutrition Assistance Program (SNAP)	YES	YES	YES	YES	YES	YES	YES	YES	YES	NO		Used at application and renewal for ELE for Family Planning and children under age 19.
8. Temporary Assistance for Needy Families (TANF)	YES	YES	YES	YES	YES	YES	YES	YES	YES	NO		Used at application and renewal for ELE for Family Planning and children under age 19.
9. Office of Child Support Enforcement (OCSE)	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO		Medicaid/CHIP agency does not have access to this data.
10. State Income Tax	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO		Medicaid/CHIP agency does not have access to this data.
11. Commercial database: (Please describe any commercial databases in the space below)												
TALX /Work Number	YES	YES	YES	YES	YES	YES	NO	YES	YES	NO		Data used for income verification at application and renewal. This data will be through the HUB on Day 1.
12. Other: (Please describe any additional electronic data sources in the space below)												
PARIS	YES	YES	YES	YES	YES	YES	NO	NO	NO	YES	Quarterly	PARIS data used to check duplicate benefits, and income through DOD, VA

1. The state marked any criterion YES if they were considered in determining the usefulness of the electronic data source; however, the determination of whether the data source was useful/not useful did not rest solely on these criteria.

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Medicaid & CHIP

State:

Alabama

Section B2. Use of Electronic Data Sources

Non-Financial:

Electronic Data Source	To Be Used (Y/N)	Social Security Number	Citizenship	Immigration Status	Residency	Age/DOB	Pregnancy	Household Composition	Caretaker Relative	Medicare	Application for other Benefits	Other	Data Source Used at Application (Y/N)	Data Source Used at Renewal (Y/N)	Data Source Used Post-Enrollment (Y/N)	If Used for Post-Enrollment Frequency Used (i.e. monthly, quarterly)	Comments
1. Social Security Administration (SSA)	YES	YES	YES	NO	NO	NO	NO	NO	NO	YES	NO	NO	YES	NO	NO		
2. Department of Homeland Security (DHS) - SAVE	YES	NO	YES	YES	NO	NO	NO	NO	NO	NO	NO	NO	YES	YES	NO		Used at renewal as needed to check for immigration status changes
3. Vital Statistics	YES	NO	YES	NO	NO	NO	NO	NO	NO	NO	NO	YES	NO	NO	YES	Monthly	death
4. Department of Motor Vehicles (DMV)	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO		
5. Temporary Assistance for Needy Families (TANF)	YES	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO	YES	YES	NO		Can be used to verify these areas as needed - Social Security Number, Residency, Age/DOB, Pregnancy, Household Composition and Caretaker Relative.
6. Supplemental Nutrition Assistance Program (SNAP)	YES	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO	YES	YES	NO		Can be used to verify these areas as needed - Social Security Number, Residency, Age/DOB, Pregnancy, Household Composition and Caretaker Relative.
7. Office of Child Support Enforcement	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO		
8. State General Assistance Programs	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO		

Electronic Data Source	To Be Used (Y/N)	Social Security Number	Citizenship	Immigration Status	Residency	Age/DOB	Pregnancy	Household Composition	Caretaker Relative	Medicare	Application for other Benefits	Other	Data Source Used at Application (Y/N)	Data Source Used at Renewal (Y/N)	Data Source Used Post-Enrollment (Y/N)	If Used for Post-Enrollment Frequency Used (i.e. monthly, quarterly)	Comments
9. Women, Infants and Children Program (WIC)	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO		
10. State Income Tax	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO		
11. Commercial database: <i>(Please describe any commercial databases in the space below)</i>																	
TALX	YES	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO	YES	YES	YES	NO		Used for Third party benefits
12. PARIS*	YES	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO	YES	NO	NO	YES	Quarterly	To check duplicate benefits. If needed, used for residency and other insurance
13. Other: <i>(Please describe additional electronic data sources in the space provided below)</i>																	
* Under 42 CFR 435.945(d), all State Medicaid eligibility systems must conduct a match with PARIS for Interstate benefit information. If used for other purposes, please indicate in Section D.																	

MAGI-BASED ELIGIBILITY VERIFICATION PLAN (Insert Medicaid, CHIP, or Both) Medicaid & CHIP State: Alabama						
Section C . Additional Factors of Eligibility for Separate CHIP						
Eligibility Factor	Self-Attestation Accepted without Additional Verification	Self-Attestation Accepted with Post-Enrollment Verification (Y/N)	Electronic Data Source Used (Y/N) <i>If Yes, please describe in comments</i>	Paper Documentation Required from the Individual (Y/N)	Non-Applicable (N/A)	Comments
1. Applicant does not have other coverage	NO	YES	YES	YES	Must be Applied	At enrollment and renewal applicants are bounced against the programs claims administrators insurance database. Any applicants currently active on other insurance or any applicants still within the waiting period are denied enrollment with the program. Applicants provide documentation verifying other insurance has cancelled or waiting period has expired. Send to claims filer to process for other insurance post-enrollment. This is performed in every instance for application and renewal.
2. Applicant does not have access to affordable ESI	YES	NO	NO	NO		
3. When child has had coverage (as applicable to states' waiting period)	NO	YES	YES	YES		At enrollment and renewal applicants are bounced against the programs claims administrators insurance database. Any applicants currently active on other insurance or any applicants still within the waiting period are denied enrollment with the program. Applicants provide documentation verifying other insurance has cancelled or waiting period has expired.
4. Access to public employee coverage	YES	NO	NO	NO		
5a. Waiting period exception #1 (describe):	NO	NO	NO	YES		Involuntary loss of health insurance due to job change, lay off, or termination by a non-household member.
5b. Waiting period exception #2 (describe):	NO	NO	NO	YES		termination of COBRA, or non-group coverage
5c. Waiting period exception #3 (describe):	NO	NO	NO	YES		termination of coverage due to reaching the lifetime benefit maximum.
5d. Waiting period exception #4 (describe):					N/A	
5e. Waiting period exception #5 (describe):					N/A	

Eligibility Factor	Self-Attestation Accepted without Additional Verification	Self-Attestation Accepted with Post-Enrollment Verification (Y/N)	Electronic Data Source Used (Y/N) <i>If Yes, please describe in comments</i>	Paper Documentation Required from the Individual (Y/N)	Non-Applicable (N/A)	Comments
5f. Waiting period exception #6 (describe):					N/A	
5g. Waiting period exception #7 (describe):					N/A	
5h. Waiting period exception #8 (describe):					N/A	
5i. Waiting period exception #9 (describe):					N/A	
5j. Waiting period exception #10 (describe):					N/A	
6. Other eligibility factors or exceptions to eligibility factors: <i>(Please describe in the space provided below)</i>						

MAGI-BASED ELIGIBILITY VERIFICATION PLAN (Insert Medicaid, CHIP, or Both) State:		Medicaid & CHIP Alabama
Section D. Additional Verification Questions		
	Question	Response
1	If paper documentation is required when a data source is not available or the information obtained from a data source is not reasonably compatible with the information provided by or on behalf of the individual, briefly describe how the state determined that establishing and using an electronic data source was not effective, considering such factors as cost and program integrity in accordance with 42 CFR 435.952(c):	Paper documentation only required if Citizenship or Immigration Status not available through data match with HUB and vital statistics. A match with state vital statistics will be initiated if unable to match with the HUB for verification of citizenship. Applicant will be awarded if otherwise eligible and provided a reasonable opportunity period of 90 days to provide documentation of citizenship or immigration status. The state accepts self-attestation for many factors of eligibility and electronic verification is utilized. Paper documentation will be required only if there are inconsistencies found.
2	Please describe how the state uses PARIS?	Program Integrity Division will use PARIS to determine if recipient is enrolled in Medicaid in another state. PARIS will also be used to verify Department Of Defense information and Veteran's benefits.
3	Please indicate (YES) or (NO) if the State intends to request Secretarial approval to solely use alternative data sources for financial verification other than those listed in 42 CFR 435.948 (Numbers 1-8 in Section B-1).	NO

	Question	Response
	<p>If (YES), please submit a letter to CMS requesting such approval describing how the the state meets the following requirements:</p> <ol style="list-style-type: none"> 1) Reduces administrative costs and burdens on both individuals and the State, 2) Maximizes accuracy and minimizes delay, 3) Meets the requirements related to confidentiality, disclosure, maintenance and use of information, and 4) Promotes coordination with other insurance affordability programs. 	
4	<p>Please indicate (YES) or (NO) if the State intends to request Secretarial approval to use a mechanism other than the federal data services hub for information that is available through the hub.</p>	NO
	<p>If (YES), please submit a letter to CMS requesting such approval describing how the the state meets the following requirements:</p> <ol style="list-style-type: none"> 1) Reduces administrative costs and burdens on both individuals and the State, 2) Maximizes accuracy and minimizes delay, 3) Meets the requirements related to confidentiality, disclosure, maintenance and use of information, and 4) Promotes coordination with other insurance affordability programs. 	
5	<p>Describe any additional MAGI-based eligibility verification policies and procedures that have not been covered in this verification plan (optional):</p>	

Section A. Additional Comments

Clarification - We will be using hub income sources and self attestation and will apply the reasonable compatibility rules at application. We will accept this determination without additional verification if the information is reasonably compatible, or else follow-up with the individual to collect further verification at that time.

Section B1. Additional Comments

We will not be using post-eligibility verifications except for unearned income through IRS and PARIS.

Section B2. Additional Comments

Section C. Additional Comments