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Office of Client and Community Services

**Number:** DMAP IM 14-015

**Authorized Signature**

**Issue Date:** 04/15/2014

**Topic:** Medical Benefits

**Subject:** OARs 410-200-0010 through 0510 updated and filed permanently, and rules available on intranet site.

**Applies to:**

- All DHS employees
- Area Agencies on Aging
- Children, Adults and Families
- County DD Program Managers
- County Mental Health Directors
- Aging and People with Disabilities
- Other (please specify): OHP Phonebank, OHP Eligibility Workers, Client Services Unit, OCCS Outreach workers

**Message:**

Oregon Administrative Rules (OAR) 410-200-0010 through 0510 have been filed permanently on 03/31/2014 with some substantive edits. See below for a summary of policy changes implemented with this filing:

- **410-200-0115 (Effective Dates)** was amended to reflect the waiver approval to further extend renewal dates:

Original Month of Renewal	Original Deferral (BED) Month	Newly Extended Deferral (BED) Month
October 2013	April 2014	July 2014
November 2013	May 2014	August 2014
December 2013	June 2014	September 2014

- **410-200-0215 (Citizenship and Alien Status)** was amended to add guidance regarding individuals whose deportation has been deferred under the Deferred Action for Childhood Arrivals (DACA) process. DACA individuals do not meet the non-citizen requirement for OCCS medical programs.

- **410-200-0230 (Verification)** was amended:

To identify the requirement to obtain applicant declaration of private health insurance (TPL):

- TPL verification may be part of the post-eligibility pend process as long as there verification is not available via the federal data services hub or an electronic data match
- If verification is available, then eligibility may not be approved until TPL verification is provided

To specify that non-citizens must be approved at the OHP Plus level and their non-citizen status verified as part of the post-eligibility process when:

- The applicant otherwise qualifies for an OCCS Medicaid or CHIP program; and
- The applicant declares an immigration status that would qualify them for OHP Plus benefits as listed in OAR 410-200-0215; and
- Nothing in the client's record indicates the applicant is not eligible at the OHP Plus level.

**For example:** An applicant states they are an LPR but does not tell us their date of entry or answer the rest of the non-citizen questions. In the absence of any other immigration information on the application, check to see if there any information about the applicant in TRACS, CO Siebel notes, etc.

If there is no information in the applicant's record indicating the applicant is not OHP Plus eligible and if the applicant is otherwise eligible for an OCCS medical program;

- Approve at the OHP Plus level
- Send a pend notice to the client requiring additional immigration information
- After approving, verify the non-citizen status using SAVE.
  - If not eligible for OHP Plus benefits, send a 10-day notice of reduction and reduce to CAWEM
  - There is no overpayment if an applicant who declares a status that meets the non-citizen status requirements

**Note:** *The CS Web Handbook was revised to include the workarounds necessary to support the new policy.*

**In addition to the rules that were amended as part of the permanent filing, the 2014 Federal Poverty Level (FPL) has been implemented into the Cover Oregon systems, Client Maintenance (CM) and OAR effective 04/12/2014.**

The newest versions of all of the OCCS medical program eligibility rules can be found at <https://inside.dhsoha.state.or.us/oha/occs-home/occs-rules.html>

- To access this site, you'll need to log in using your OR# and the password you use to log into your system.
- This intranet site will eventually not require a password to access, and the links on the left-hand column will be usable. At this time, those pages are still under construction.
- To quickly find the OAR you need, use the search feature (CTRL+F) to locate terms specific to your need within the table of contents or rule text.

Attached, please find the updated OCCS medical programs standard document. The first page still lists 2013 program and FPL standards; the second page has been updated with 2014 FPLs effective 04/12/2014.

*If you have any questions about this information, contact:*

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## 2013 OCCS Medical Programs

Family Size	MAA/MAF/ SAC Countable Limit (before 10/13)	MAA/SAC/ MAF Adjusted Limit (before 10/13)	MAA/SAC (effective 10/13)	OPU/OPC Standard (100%)	OPC Standard after adding Disregard (105%)	OP6		OPP		CHIP & MAGI CHIP (C21) Standard (300%)	OHP Premium Exempt
						Standard (133%)	Standard after adding Disregard (138%)	Standard (185%)	Standard after adding Disregard children only (190%)		
1	\$345	\$326	\$399	\$958	\$1,006	\$1,274	\$1,322	\$1,772	\$1,820	\$2,874	\$95.75
2	\$499	\$416	\$515	\$1,293	\$1,358	\$1,720	\$1,785	\$2,392	\$2,457	\$3,879	\$129.25
3	\$616	\$485	\$611	\$1,628	\$1,710	\$2,165	\$2,247	\$3,011	\$3,093	\$4,884	\$162.75
4	\$795	\$595	\$747	\$1,963	\$2,062	\$2,611	\$2,710	\$3,631	\$3,730	\$5,889	\$196.25
5	\$932	\$695	\$872	\$2,298	\$2,413	\$3,056	\$3,171	\$4,251	\$4,366	\$6,894	\$229.75
6	\$1,060	\$796	\$998	\$2,633	\$2,765	\$3,502	\$3,634	\$4,871	\$5,003	\$7,899	\$263.25
7	\$1,206	\$886	\$1,114	\$2,968	\$3,117	\$3,947	\$4,096	\$5,490	\$5,639	\$8,904	\$296.75
8	\$1,346	\$976	\$1,230	\$3,303	\$3,469	\$4,393	\$4,559	\$6,110	\$6,276	\$9,909	\$330.25
9	\$1,450	\$1,039	\$1,321	\$3,638	\$3,820	\$4,838	\$5,020	\$6,730	\$6,912	\$10,914	\$363.75
10	\$1,622	\$1,150	\$1,456	\$3,973	\$4,172	\$5,284	\$5,483	\$7,350	\$7,549	\$11,919	\$397.25
Each additional person	+172	+110	+136	+335	+352	+446	+463	+620	+637	+1005	+33.50

### 5% Monthly Income Disregard

Family Size	1	2	3	4	5	6	7	8	9	10	Each additional person
	\$48	\$65	\$82	\$99	\$115	\$132	\$149	\$166	\$182	\$199	17

### 100% Annual Income Test

Family Size	1	2	3	4	5	6	7	8	9	10	Each additional person
	\$11,490	\$15,510	\$19,530	\$23,550	\$27,570	\$31,590	\$35,610	\$39,630	\$43,650	\$47,670	4020

## 2014 OCCS Medical Programs

Family Size	Parents & Other Caretaker Relatives (PCR)		MAGI Child (age 1 - under 19) (CMO) / MAGI Adult (AMO)		MAGI Child (under age 1) (CMO) / MAGI Pregnant Woman (PWO)		MAGI CHIP (C21)	
	Standard	Standard after adding Disregard	Standard (133%)	Standard after adding Disregard (138%)	Standard (185%)	Standard after adding Disregard (190%)	Standard (300%)	Standard after adding Disregard (305%)
1	\$399	\$448	\$1,294	\$1,343	\$1,800	\$1,849	\$2,918	\$2,967
2	\$515	\$581	\$1,744	\$1,810	\$2,426	\$2,492	\$3,933	\$3,999
3	\$611	\$694	\$2,194	\$2,277	\$3,051	\$3,134	\$4,948	\$5,031
4	\$747	\$847	\$2,644	\$2,744	\$3,677	\$3,777	\$5,963	\$6,063
5	\$872	\$989	\$3,094	\$3,211	\$4,303	\$4,420	\$6,978	\$7,095
6	\$998	\$1,132	\$3,544	\$3,678	\$4,929	\$5,063	\$7,993	\$8,127
7	\$1,114	\$1,265	\$3,994	\$4,145	\$5,555	\$5,706	\$9,008	\$9,159
8	\$1,230	\$1,398	\$4,444	\$4,612	\$6,181	\$6,349	\$10,023	\$10,191
9	\$1,321	\$1,505	\$4,894	\$5,078	\$6,807	\$6,991	\$11,038	\$11,222
10	\$1,456	\$1,657	\$5,344	\$5,545	\$7,433	\$7,634	\$12,053	\$12,254
Each additional person	+136	+153	\$450	+467	+626	+643	\$1,015	+1,032

Family Size	Annual Standard (100%)
1	\$11,670
2	\$15,730
3	\$19,790
4	\$23,850
5	\$27,910
6	\$31,970
7	\$36,030
8	\$40,090
9	\$44,150
10	\$48,210
Each additional person	4060

## 5% Monthly Income Disregard

Family Size	1	2	3	4	5	6	7	8	9	10	Each additional person
	\$49	\$66	\$83	\$100	\$117	\$134	\$151	\$168	\$184	\$201	+17