OTHER ELIGIBILITY REQUIREMENTS

AUTHORIZATION

Description:

Medicaid is granted to an eligible person on the basis of a signed authorization. The authorization is initiated by the district. In addition to initial eligibility determination, authorizations are required for recertifications, reauthorizations, changes and closings.

Policy:

An authorization is initiated for all persons determined eligible for Medicaid. A reauthorization is initiated to continue Medicaid previously authorized. No authorization or reauthorization, except those done for SSI recipients, may exceed a period of one year beyond the date of application or recertification. When retroactive coverage is appropriate, a case may be authorized for up to 15 months, 3 months retroactive and 12 months prospective.

References: SSL Sect. 366.1(a)

Dept. Reg. 360-6.2

354.1

GISs 02 MA/012

98 MA/041

Interpretation:

An authorization is completed for all persons determined eligible for Medicaid. Common Benefit Identification Cards or rosters are issued for all eligible individuals (see page 395). Authorizations are initiated to grant Medicaid and affect changes, such as suspension or termination of Medicaid and changes in information affecting eligibility.

Most children under age 19 are guaranteed Medicaid coverage for 12 months. Each time eligibility is determined (i.e., initial determination, and at every renewal or redetermination), children under age 19, who are found fully eligible for Medicaid, are authorized for 12 months continuous coverage regardless of any changes in income or circumstances. This period of continuous coverage applies to all children who are eligible under Low Income Family (LIF) or expanded eligibility budgeting. It also applies to children in families who are on Temporary Assistance cases receiving LIF Medical Assistance, Non IV-E Foster Care children and IV-E Foster Care children, including children in the custody of the Office of Children and Family Services in IV-E eligible settings.

OTHER ELIGIBILITY REQUIREMENTS

AUTHORIZATION

When an authorization is used to change eligibility information, such as family composition, marriage, change of name, death of a member of a family, living arrangements, address or limitations on care or services, it is not necessary to use more than one authorization to make changes which take place at the same time. For example, at **renewal**, a case can be reauthorized for another year and an address change made on the same form.

In all situations, the authorization is signed and a copy kept in the record.

UPDATED: FEBRUARY 2005		394.2
	•	

(THIS PAGE WAS INTENTIONALLY LEFT BLANK)