Revision: HCFA-PE-87-4 (BERC) HARCH 1987

State: California

1

Citation

6.5

2.3 Residence

435.10 and 435.403, and 1902(b) of the Act, P.L. 99-272 (Section 9529) and P.L. 99-509 (Section 9405)

Hedicaid is furnished to eligible individuals who are residents of the State under 42 CFR 435.403, regardless of whether or not the individuals maintain the residence permanently or maintain it at a fixed address.

TN No. <u>87-08</u> Supersedes TN No. <u>86-11</u>

HCFA ID: 1006P/0010P

SUPERSEDING PAGES OF STATE PLAN MATERIAL						
TRANSMITTAL NUMBER:	STATE:					
13-0025 MM	California					
PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT:	PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable):					
S88 Non-Financial Eligibility- State Residency	Section 2.3: Page 13, TN 87-08 Attachment 2.6-A: Page 3, #4, TN 13-0026 MM					



OMB Control Number 0938-1148 OMB Expiration date: 10/31/2014

Non-Financial Eligibility State Residency							
42	CFR	435.403					
Sta	State Residency						
V	The state provides Medicaid to otherwise eligible residents of the state, including residents who are absent from the state under certain conditions.						
	Individuals are considered to be residents of the state under the following conditions:						
	Non-institutionalized individuals age 21 and over, or under age 21, capable of indicating intent and who are emancipated or married, if the individual is living in the state and:						
		Intends to reside in the state, including without a fixed address, or					
		Entered the state with a job commitment or seeking employment, whether or not currently employed.					
Individuals age 21 and over, not living in an institution, who are not capable of indicating intent, are residents of the stat which they live.							
	Non-institutionalized individuals under 21 not described above and non IV-E beneficiary children:						
	Residing in the state, with or without a fixed address, or						
	The state of residency of the parent or caretaker, in accordance with 42 CFR 435.403(h)(1), with whom the individuely resides.						
	Individuals living in institutions, as defined in 42 CFR 435.1010, including foster care homes, who became inca indicating intent before age 21 and individuals under age 21 who are not emancipated or married:						
		Regardless of which state the individual resides, if the parent or guardian applying for Medicaid on the individual's behavior resides in the state, or	alf				
		Regardless of which state the individual resides, if the parent or guardian resides in the state at the time of the individu placement, or	al's				
		If the individual applying for Medicaid on the individual's behalf resides in the state and the parental rights of the institutionalized individual's parent(s) were terminated and no guardian has been appointed and the individual is institutionalized in the state.					
		Individuals living in institutions who became incapable of indicating intent at or after age 21, if physically present in the sta unless another state made the placement.	ite,				
		Individuals who have been placed in an out-of-state institution, including foster care homes, by an agency of the state.					
		Any other institutionalized individual age 21 or over when living in the state with the intent to reside there, and not placed institution by another state.	n the				
		IV-E eligible children living in the state, or					



Otherwise meet the requirements of 42 CFR 435.403.



Meet the criteria specified in an interstate agreement.							
• Y	es C No						
The state has interstate agreements with the following selected states:							
	🖂 Alabama	X Illinois	🔀 Montana	Rhode Island			
	🛛 Alaska	Indiana	🗙 Nebraska	South Carolina			
	Arizona	🖂 Iowa	Nevada	South Dakota			
			_				
	Arkansas	Kansas	New Hampshire	Tennessee			
	🛛 California	Kentucky	🛛 New Jersey	🔀 Texas			
	🔀 Colorado	🛛 Louisiana	New Mexico	🖂 Utah			
	Connecticut	🔀 Maine	New York	Vermont			
	Delaware	Maryland	North Carolina	🔀 Virginia			
	District of Columbia	Massachusetts	North Dakota	Washington			
	🔀 Florida	Michigan	🖾 Ohio	🔀 West Virginia			
	🔀 Georgia	Minnesota	🔀 Oklahoma	🔀 Wisconsin			
	🛛 Hawaii	Mississippi	🕅 Oregon	Wyoming			
	🔀 Idaho	Missouri	🔀 Pennsylvania				
The interstate agreement contains a procedure for providing Medicaid to individuals pending resolution of their residency status and criteria for resolving disputed residency of individuals who (select all that apply):							
Are IV-E eligible							
Are in the state only for the purpose of attending school							

Are out of the state only for the purpose of attending school

Retain addresses in both states

Other type of individual

The state has a policy related to individuals in the state only to attend school.

🔿 Yes 💿 No

Otherwise meet the criteria of resident, but who may be temporarily absent from the state.

The state has a definition of temporary absence, including treatment of individuals who attend school in another state.

• Yes C No



Provide a description of the definition:

As required by 42 CFR 435.403(j)(3) the Medi-Cal eligibility of a California resident will not be denied or terminated "...because of that person's temporary absence from the state if the person intends to return when the purpose of the absence has been accomplished, unless another state has determined that the person is a resident there for purposes of Medicaid."

An absence from the state of more than 60 days is presumptive evidence of intent to change residence to a place outside of California unless the individual declares orally or in writing an Intent to return to California and including but not limited to one of the following:

- (A) Illness or emergency circumstances which prohibit return to California.
- (B) Family members with whom the applicant or beneficiary lives are California residents and are physically present in the State.
- (C) The applicant or beneficiary maintains California housing arrangements.

PRA Disclosure Statement

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0938-1148. The time required to complete this information collection is estimated to average 40 hours per response, including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection. If you have comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: CMS, 7500 Security Boulevard, Attn: PRA Reports Clearance Officer, Mail Stop C4-26-05, Baltimore, Maryland 21244-1850.