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NOTICE OF PROPOSED RULEMAKING
INCLUDING STATEMENT OF NEED & FISCAL IMPACT

CHAPTER 410
OREGON HEALTH AUTHORITY
HEALTH SYSTEMS DIVISION: MEDICAL ASSISTANCE PROGRAMS

FILED
10/22/2024 10:08 AM
ARCHIVES DIVISION
SECRETARY OF STATE

FILING CAPTION: Amend Rule Regarding SSN Requirements for Religious Sects. Amend Rule Clarifying EXT Effective Start Date.

LAST DAY AND TIME TO OFFER COMMENT TO AGENCY: 11/21/2024 5:00 PM

The Agency requests public comment on whether other options should be considered for achieving the rule's substantive goals while reducing negative economic impact of the rule on business.

A public rulemaking hearing may be requested in writing by 10 or more people, or by a group with 10 or more members, within 21 days following the publication of the Notice of Proposed Rulemaking in the Oregon Bulletin or 28 days from the date the Notice was sent to people on the agency mailing list, whichever is later. If sufficient hearing requests are received, the notice of the date and time of the rulemaking hearing must be published in the Oregon Bulletin at least 14 days before the hearing.

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NEED FOR THE RULE(S)

Amend Rule Regarding SSN Requirements for Religious Sects. Amend Rule Clarifying EXT Effective Start Date.

DOCUMENTS RELIED UPON, AND WHERE THEY ARE AVAILABLE

410-200-0210: Code of Federal Regulations, 42 CFR 435.910(3); original OAR 410-200-0210.
410-200-0440: 42 C.F.R. § 435.110; Centers for Medicare and Medicaid Frequently Asked Questions
November 22, 2023; original OAR 410-200-0440.

STATEMENT IDENTIFYING HOW ADOPTION OF RULE(S) WILL AFFECT RACIAL EQUITY IN THIS STATE

None

FISCAL AND ECONOMIC IMPACT:

None

COST OF COMPLIANCE:

(1) Identify any state agencies, units of local government, and members of the public likely to be economically affected by the rule(s). (2) Effect on Small Businesses: (a) Estimate the number and type of small businesses subject to the rule(s); (b) Describe the expected reporting, recordkeeping and administrative activities and cost required to comply with the rule(s); (c) Estimate the cost of professional services, equipment supplies, labor and increased administration required to comply with the rule(s).

(1) None

(2)

(a) None

(b) None

(c) None

DESCRIBE HOW SMALL BUSINESSES WERE INVOLVED IN THE DEVELOPMENT OF THESE RULE(S):

None

WAS AN ADMINISTRATIVE RULE ADVISORY COMMITTEE CONSULTED? YES

RULES PROPOSED:

410-200-0210, 410-200-0440

AMEND: 410-200-0210

RULE SUMMARY: Text changes have been made to update rule language concerning when an applicant is not required to apply for or provide a Social Security Number, specific to when an individual of a religious sect or division of a religious sect adheres to its tenets or teachings.

CHANGES TO RULE:

410-200-0210

Requirement to Provide Social Security Number ¶¶

(1) The Agency may collect a Social Security Number (SSN) for the following purposes:¶¶

(a) The determination of eligibility for benefits. The SSN is used to verify income and other assets and to match with other state and federal records such as the Internal Revenue Service (IRS), Medicaid, spousal support, Social Security benefits, and unemployment benefits;¶¶

(b) The preparation of aggregate information and reports requested by funding sources for the program providing benefits;¶¶

(c) The operation of the program applied for or providing benefits;¶¶

(d) Conducting quality assessment and improvement activities;¶¶

(e) Verifying the correct amount of payments, recovering overpaid benefits, and identifying any individual receiving benefits in more than one household.¶¶

(2) As a condition of eligibility, except as provided in section (6) below, each applicant (including children) requesting medical benefits shall:¶¶

(a) Provide a valid SSN; or¶¶

(b) Apply for an SSN if the individual does not have one and provide the SSN when it is received.¶¶

(3) The agency may not deny or delay services to an otherwise eligible individual pending issuance or verification of the individual's SSN or if the individual meets one (1) of the exceptions identified in section (6) below.¶¶

(4) Except as provided in section (6) below, if an applicant does not recall their SSN or has not been issued an SSN and the SSN is not available to the Agency, the Agency shall:¶¶

(a) Obtain required evidence under SSA regulations to establish the age, the citizenship, or non-citizen status and the true identity of the applicant; and¶¶

(b) Either assist the applicant in completing an application for an SSN or, if there is evidence that the applicant has previously been issued an SSN, request SSA to furnish the number.¶¶

(5) The Agency may request that non-applicants provide an SSN on a voluntary basis. The Agency shall use the SSN for the purposes outlined in section (1) of this rule.¶¶

(6) An applicant is not required to apply for or provide an SSN if the individual:¶¶

(a) Does not have an SSN and the SSN may be issued only for a valid-non-work reason;¶¶

(b) Is not eligible to receive an SSN;¶¶

(c) Is a member of a religious sect or division of a religious sect that has continuously existed since December 31,

~~1950 and, the individual adheres to its tenets or teachings that prohibit applying for or using an SSN and for that reason is opposed to applying for or using a national identification number; or~~¶

(d) Is a newborn that is assumed eligible based on the eligibility of the mother of the newborn and who is under one (1) year of age.

Statutory/Other Authority: ORS 411.402, 411.404, 413.042, 414.534

Statutes/Other Implemented: ORS 411.400, 411.402, 411.404, 411.406, 413.032, 413.038, 414.025, 414.231, 414.534, 414.536, 414.706

AMEND: 410-200-0440

RULE SUMMARY: Clarification of effective start date of Extended Medical Assistance (EXT), to comply with updated guidance from the Centers for Medicare and Medicaid.

CHANGES TO RULE:

410-200-0440

Specific Requirements; Extended Medical Assistance ¶

(1) ~~Except for those receiving benefits under OAR 410-200-0420 (3),~~ individuals who lose eligibility for MAGI Parent or Caretaker Relative (PCR) due to the receipt or increase of earned income are eligible for a period of ~~up to twelve~~ (12) months of Extended Medical Assistance (EXT) if:¶

(a) They were eligible for and receiving MAGI PCR benefits for any one (1) of the six (6) months preceding the receipt or increase in earned income that resulted in the loss of MAGI PCR eligibility;¶

~~(b) Eligibility is redetermined and the individual is found ineligible for any Medicaid program except BCCTP or Substitute Care; and¶~~

~~(c) They are the parent or caretaker relative of a dependent child living in their home.¶~~

(2) ~~Except for those receiving benefits under OAR 410-200-0420 (3),~~ individuals who lose eligibility for MAGI PCR due to the receipt or increase of spousal support are eligible for a period of ~~up to four~~ (4) months of EXT if:¶

(a) They were eligible for and receiving MAGI PCR benefits under OAR 410-200-0420 (1) and (2) for any three (3) of the six (6) months preceding the receipt or increase in spousal support that resulted in the loss of MAGI PCR eligibility; ¶

~~(b) Eligibility is redetermined and the individual is found ineligible for any Medicaid program except BCCTP or Substitute Care; and¶~~

~~(c) They are the parent or caretaker relative of a dependent child living in their home.¶~~

(3) The dependent children of individuals described in sections (1) and (2) of the rule above are eligible for EXT for the same time period as their parent or caretaker relative if:¶

(a) They lost Medicaid eligibility due to the parent or caretaker relative's receipt or increase of earned income or spousal support; and¶

(b) Eligibility is redetermined and they are not eligible for any Medicaid program.¶

(4) ~~The first month of the EXT eligibility period is established as described in sections (1) and (2) of this rule, beginning the first of the month following the month in which the beneficiary experienced the receipt or increase in earned income or spousal support resulting in loss of MAGI PCR eligibility. For individuals who receive other Medicaid/CHIP benefits during above is established as follows: ¶~~

~~(a) If the determination is made on or before the 15th of the month, the EXT eligibility period:¶~~

~~(a) Such months are not an overpayment;¶~~

~~(b) Any month in which an individual receives other Medicaid/CHIP benefits when they were eligible for EXT is counted as a month of the EXT eligibility period. shall begin the first of the following month. ¶~~

(b) If the determination is made on or after the 16th of the month, the EXT eligibility period shall begin the first of the month following the next month. ¶

(5) Individuals described in sections (1) through (3) of this rule above who lose EXT eligibility for one (1) of the following reasons may regain EXT eligibility for the remainder of the original EXT eligibility period if:¶

(a) EXT eligibility was lost because the individual left the household during the EXT eligibility period. The individual may regain EXT eligibility if they return to the household; or¶

(b) EXT eligibility was lost due to a change in circumstance that resulted in eligibility for another Medicaid program, and then a subsequent change in circumstance occurred that resulted in loss of eligibility for all Medicaid Programs.¶

(6) Individuals who lose eligibility for MAGI PCR and ~~would~~may be eligible to receive EXT except that they are determined eligible for another Medicaid program, and their dependent children, shall receive EXT benefits for the remainder of their original EXT eligibility period if:¶

(a) They subsequently lose eligibility for all Medicaid programs; and¶

(b) They continue to meet the non-financial eligibility requirements of MAGI PCR.

Statutory/Other Authority: ORS 411.095, 411.402, 411.404, 413.038, 414.025

Statutes/Other Implemented: ORS 411.095, 411.400, 411.402, 411.404, 411.406, 411.439, 411.443, 413.032, 413.038, 414.025, 414.231, 411.447, 414.706