This memo provides instructions for implementation of new federal poverty level (FPL) standards. The new standards take effect April 1, 2022. Related manual references will be updated with the next scheduled revision.

Applicable to all Medical Programs:
- Medical Assistance Updates
- Special Processes
- Presumptive Eligibility
- Self-Service Portal Eligibility Check

Applicable to Family Medical Programs only:
- Elimination of $50.00 Premium (CHIP Only)

I. FEDERAL POVERTY LEVEL CHANGES

This change provides new income standards for Caretaker Medical, Medicaid Pregnant Women and Children, CHIP, the Medicare Savings Programs, and Working Healthy. It also impacts Presumptive Eligibility determinations for Pregnant Women, Children and Caretakers. The Kansas Medical Assistance Standards (Appendix Item F-8 on the KDHE Eligibility Policy website) has been updated with the new standards and updated tax deduction limits. The updated form is included with this memo.

A. MEDICAL ASSISTANCE UPDATES

The poverty level standards have been updated in the KEES system and are effective for any determinations for the benefit month of April 2022 or later. There will not be an exclusive automated KEES mass change to implement these changes. For ongoing cases,
the new level will be considered the next time eligibility is redetermined. This is accomplished when EDBC is executed, accepted, and saved for the specific benefit month. The new levels will be loaded into KEES over the week of February 14, 2022. However, because the new levels are not effective until April 2022, the values and calculations will not be available for the worker executed EDBCs until February 17, 2022, when the month of April 2022 is available. The values will be available for system executed EDBCs occurring on or after this date.

**B. SPECIAL PROCESSES**

Although no automatic updates were processed in the KEES system to implement the FPL change, other processes, such as the batch review process, will use the new FPL levels upon execution.

**1. NEW APPLICATIONS**

New requests for coverage that fail eligibility due to excess income in March 2022 will require a second determination for the month of April if the initial determination placed the applicant within five (5%) percentage points of the applicable poverty level. The results of both determinations shall be documented in the journal. Please note that an EDBC for April may be required even though the EDBC for March was high dated.

Applications that may be processed as a renewal shall be completed using the new values. Special instructions are not necessary, while keeping in mind current COVID-19 policies outlined in PD2020-03-01, PD2021-02-01, PM2020-04-01, PM2020-11-01 and PM2021-03-01.

**2. RENEWALS**

Upon expiration of the Public Health Emergency (PHE), renewals expiring on or after April 2022 will use the new federal poverty level standards. The outcome will be based on the new limits. It is not necessary to reprocess ‘Super Passive’ or ‘Passive’ renewals unless there is a change reported that requires a new EDBC. All Pre-Populated reviews will be processed using the new standards, so special instructions are not necessary.

**C. PRESUMPTIVE ELIGIBILITY**

The new income standards are also implemented for Presumptive Eligibility (PE) determinations. Income limits in the PE tool are adjusted beginning April 1, 2022. The new standards will be used for any determination completed on or after this date. This information is being shared with the PE Qualified Entities, but no additional action is necessary to implement the changes.
D. SELF-SERVICE PORTAL ELIGIBILITY CHECK

The high-level eligibility check feature available to the public will also be updated with the new income standards. The updates to the SSP will also be available to any screening executed on or after April 1, 2022. Consumers using the self-check feature prior to April 1 will be presented a result using the 2021 FPL standards.

II. CHANGES IMPACTING FAMILY MEDICAL PROGRAMS ONLY

A. ELIMINATION OF $50.00 PREMIUM FOR CHIP

Effective January 1, 2010, the CHIP program was expanded to include a higher premium amount for individuals whose countable income was equal to or greater than 201% of the poverty level but less than 226%. When this occurred, the household was assessed a monthly premium of $50.00. However, with the updated FPL standards, effective upon the implementation of the 2022 standards in KEES, the $50.00 premium bracket will be eliminated. KFMAM 2440 has been updated to reflect this information. For members with a current premium of $50.00, the premium amount will remain until the next EDBC run or post-PHE renewal.

NOTE: The existing premium requirements for $20.00 and $30.00 premium will remain unchanged.

III. FORMS AND FACT SHEETS

Forms:

ES-3104.5  Determination of Need (Medical Assistance)
ES-3165  Working Healthy Premiums and ES-3165S Spanish Version
F-8  Kansas Medical Standards

Brochures:

KC-2110  Helpful Hints for Families and KC-2110S Spanish Version
KC-2700  Medicare Savings Programs and KC-2700S Spanish Version

Fact Sheets:

FS-1  Medical Coverage Basic Eligibility Requirements and FS-1S Spanish Version
FS-3  Overview of Programs for Elderly and Persons with Disabilities and FS-3S Spanish Version
FS-9  Medical Coverage for Children and FS-9S Spanish Version
FS-10  Medical Coverage for Parents or Caregivers of Children and FS-10S Spanish Version
FS-11  Medical Coverage for Pregnant Women and FS-11S Spanish Version
IV. QUESTIONS

For questions or concerns related to this document, please contact the KDHE Medical Policy Staff at KDHE.MedicaidEligibilityPolicy@ks.gov.

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Questions regarding any KEES issues are directed to the KEES Help Desk at KEES.HelpDesk@ks.gov.