

OK - Submission Package - OK2023MS0001O - (OK-24-0001) - Eligibility

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← Optional Eligibility Groups

Medicaid State Plan Eligibility

Eligibility Groups - Options for Coverage

Individuals Eligible for Family Planning Services

MEDICAID | Medicaid State Plan | Eligibility | OK2023MS0001O | OK-24-0001

Individuals, regardless of gender, who are not pregnant, and have household income at or below a standard established by the state, whose coverage is limited to family planning and related services.

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CMS-10434 OMB 0938-1188

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Package Header

Package ID	OK2023MS0001O	SPA ID	OK-24-0001
Submission Type	Official	Initial Submission Date	N/A
Approval Date	N/A	Effective Date	N/A
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	System-Derived		

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VIEW ALL RESPONSES

The state covers the family planning eligibility group in accordance with the following provisions:

A. Characteristics

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Individuals qualifying under this eligibility group must meet the following criteria:

1. Are not pregnant
2. Are not otherwise eligible for and enrolled in mandatory coverage under the state plan
3. Are not otherwise eligible for and enrolled in optional full Medicaid coverage under the state plan
4. Have household income that does not exceed the income standard established by the state for this group

B. Individuals Covered

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1. The state covers all individuals who meet the characteristics described in section A.

- Yes
- No

C. Income Standard Used

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1. The state uses the same income standard for all individuals covered.

- Yes
- No

2. The income standard for this eligibility group is:

205.00% FPL

D. Financial Methodologies

1. MAGI-based methodologies are used in calculating household income. Except as described in this section, for information on the methodology used for this group, please refer as necessary to MAGI-Based Methodologies, completed by the state.

[View approved version of MAGI-Based Methodologies](#)

2. The state uses the same financial methodology for all individuals covered.

- Yes
 No

3. In determining eligibility for this group, the state includes the following household members:

- a. All household members
 b. Only the individual

4. In determining eligibility for this group, the state increases the family size by one, counting the individual as two

- Yes
 No

5. In determining eligibility for this group, the state counts the income of:

- a. All household members
 b. Only the individual

E. Basis for Income Standard - Maximum Income Standard

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1. The state certifies that it has submitted and received approval for its converted income standard(s) for pregnant women to MAGI-equivalent standards and the determination of the maximum income standard to be used for this eligibility group.

2. The state's maximum income standard for this eligibility group is the highest of the following:

- a. The state's current effective income level for the Pregnant Women eligibility group (42 CFR 435.116) under the Medicaid state plan.
 b. The state's current effective income level for pregnant women under a Medicaid 1115 Demonstration.
 c. The state's current effective income level for Targeted Low-Income Pregnant Women under the CHIP state plan.
 d. The state's current effective income level for pregnant women under a CHIP 1115 Demonstration.

3. The amount of the maximum income standard is:

205.00% FPL

[View Approved Version of Pregnant Women - Income Standard Used Section](#)

F. Family Planning Benefits

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Benefits for this eligibility group are limited to family planning and related services described in the Benefit and Payments section of the state plan.

G. Additional Information (optional)

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