Medicaid and CHIP Disaster Relief MAGI-Based Verification Plan Addendum

The State Medicaid and CHIP agencies will implement the following changes to its policies and procedures described in this MAGI-based verification plan addendum, which are different from the policies and procedures otherwise applied under the state's current MAGI-based verification plan, during the following period: March 1, 2020 through the end of the month in which the COVID-19 Public Health Emergency ends.

Check off each item and fill in the requested information if the state is electing the flexibility. Only indicate areas that are changes to your current verification plan elections. Do not check off the item if you currently use the indicated flexibility. For example, if the state currently accepts attestation of residency, that item does not need to be checked off in this addendum. For additional information regarding disaster-related verification flexibilities, refer to the CMS Disaster Preparedness Toolkits.

Effective Date:	
Section A – Verifi	cation Procedures for Factors of Eligibility
The agen	'erification Processes - Reasonable Compatibility and Documentation: cy will utilize a reasonable compatibility standard threshold as follows (percent and/or eshold):
circumsta below): <u>When inc</u> the COVID – 19 D X T when, post-enro	cy will accept self-attestation without additional verification of income under the ances specified here (note: changes in use of data sources are included in Section B dividuals cannot obtain or submit documentation due to COVID-19 restrictions under disaster Declaration and verification is not available via electronic data sources. The agency will conduct post-enrollment verification of income at application. Specify collment, the agency will conduct the post-enrollment verification: 19 emergency period is over, Delaware will conduct post enrollment eligibility
	eries of phases. Individuals will be required to provide information as needed in order
The agen Reside Reside Age/D House Receil Other	rate of Birth chold composition ot of other coverage (such as Medicare) (as permissible under applicable statute and regulations):
of eligibil conduct Reside Age/D House	cy will conduct post-enrollment verification of the following non-income related factor ity at application as specified here (include when, post-enrollment, the agency will the post-enrollment verification): ency (Time Period:) vate of Birth (Time Period:) ehold composition (Time Period:) of other coverage (such as Medicare) (Time Period:)

_	Other (as permissible under applicable statute and regulations): (Time Period:)
Section B	– Use of Electronic Data Sources
periodica - - - - - -	The agency has determined that the following income-related data sources will not be checked ally between initial application and regular renewals: _ Internal Revenue Service _ Social Security Administration (SSI and SSDI) _ State Wage Income Collection Agency _ State Unemployment Compensation _ Supplemental Nutrition Assistance Program (SNAP) _ Temporary Assistance for Needy Families (TANF) _ The Work Number/TALX _ PARIS _ Other:
Add	litional Information/Changes:
Other – I	ndicate Any Additional Changes to Verification Processes That Have Not Been Addressed
Oth	er: