

MAGI-BASED ELIGIBILITY VERIFICATION PLAN
 (Insert Medicaid, CHIP, or Both) Medicaid & CHIP
 State: Missouri
 Last Updated: 10/12/23

Section A. Verification Procedures for Factors of Eligibility

Eligibility Factor	Self-Attestation Accepted without Additional Verification (Y/N)	Self-Attestation Accepted with Post-Eligibility Verification (Y/N)	Electronic Data Source Used (Y/N)	Reasonable Compatibility Standard Used	Specify Reasonable Compatibility Standard for Income	Ask for a Reasonable Explanation from the Individual (Y/N)	Paper Documentation Required from the Individual (Y/N)	Comments
Income*	NO	NO	YES	Both are above, at or below the applicable income standard. Percent Threshold	10%	YES	YES	If individual attests to income below the applicable income standard and data sources indicate income above the applicable standard, but the difference between the two is 10% or less consider information reasonably compatible and determine eligibility. If the difference is more than 10%, FSD will seek a reasonable explanation from the participant. Paper documentation is required as a last resort. Income is deemed incompatible only if affects eligibility. If the individual attests to income above the applicable standard and data source indicates income below the standard, the participant will be determined ineligible for the program and referred to the FFM. To the extent that no electronic resource is available for an income type (such as, but not limited to self-employment, pensions, short or long-term disability) self-attestation will be accepted. For financial data, information used in other benefit programs and hub data are primary sources of information. If the information from those sources is insufficient to determine eligibility, other no-cost electronic sources may be used, followed by electronic resources requiring an associated cost.
Residency	YES	NO	NO	N/A	N/A	YES	YES	Self- attestation is accepted as a rule. However, if information deemed discrepant by the state is received indicating a participant is no longer a Missouri resident and eligibility is affected, after exploring all available information the state may seek a reasonable explanation from the participant. The state may require paper documentation as a last resort.
Age (Date of Birth)	YES	NO	NO	N/A	N/A	YES	YES	Self- attestation is accepted as a rule. However, if information deemed discrepant by the state is received indicating participant's age is incorrect and eligibility is affected, after exploring all available information, the state may seek a reasonable explanation from the participant. The state may require paper documentation as a last resort.
Social Security Number **	NO	NO	YES	N/A	N/A	N/A	YES	Paper documentation required if unable to verify through the electronic data source.
Citizenship **	NO	NO	YES	N/A	N/A	N/A	YES	Paper documentation required if unable to verify through the electronic data source.
Immigration Status **	NO	NO	YES	N/A	N/A	N/A	YES	Paper documentation required if unable to verify through the electronic data source.
Household Composition	YES	NO	YES	N/A	N/A	YES	YES	Self- attestation is accepted as a rule. However, if information deemed discrepant by the state is received indicating household composition is incorrect and eligibility is affected, after exploring all available information, the state may seek a reasonable explanation from the participant. The state may require paper documentation as a last resort.

Eligibility Factor	Self-Attestation Accepted without Additional Verification (Y/N)	Self-Attestation Accepted with Post-Eligibility Verification (Y/N)	Electronic Data Source Used (Y/N)	Reasonable Compatibility Standard Used	Specify Reasonable Compatibility Standard for Income	Ask for a Reasonable Explanation from the Individual (Y/N)	Paper Documentation Required from the Individual (Y/N)	Comments
Pregnancy ***	YES	NO	NO	N/A	N/A	YES	YES	Self-attestation is accepted as a rule. However, if information deemed discrepant by the state is received indicating a participant is not pregnant and eligibility is affected, after reviewing available resources, the state may seek a reasonable explanation from the participant. The state may require paper documentation as a last resort.
Caretaker Relative	YES	NO	NO	N/A	N/A	YES	YES	Self-attestation is accepted as a rule. However, if information deemed discrepant by the state is received indicating a caretaker relative relationship does not exist and eligibility is affected, after reviewing available resources, the state may seek a reasonable explanation from the participant. The state may require paper documentation as a last resort.
Medicare	NO	NO	YES	N/A	N/A	YES	YES	The state will rely on electronic data sources as a rule. However, if information deemed discrepant by the state is received, the state may seek a reasonable explanation from the participant. The state may require paper documentation as a last resort.
Application for Other Benefits	YES	YES	YES	N/A	N/A	YES	YES	There is currently no available electronic source that can be used to verify a person has applied for other benefits such as short or long-term disability or a pension. For those benefits for which there is a source, such as referral form received from Social Security Administration when participant has applied for benefits, Missouri uses that source pre and post enrollment.
Other: (Please describe any other eligibility factors in the space below)								
					N/A			
					N/A			
<p>* States must check electronic data sources determined useful to verify income in accordance with 42 CFR 435.948 but can be done post-enrollment. If the information obtained from electronic data sources and the information provided by or on behalf of the individual are both above, at or below the applicable income standard, the State must determine the applicant eligible or ineligible for Medicaid/CHIP. (NOTE: this option is prepopulated for the state and is not an option that can be changed).</p> <p>** States must follow statute, regulations, and guidance for verification of SSN, citizenship and immigration status including obtaining such information through the federal data services hub if available.</p> <p>*** States must accept self-attestation of pregnancy unless they have information that is not reasonably compatible with such attestation.</p>								

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 State: Missouri

Section B1. Use of Electronic Data Sources

Financial:

Electronic Data Source	Determined Useful (Y/N) ¹	Accuracy Considered(Y/N)	Timeliness Considered(Y/N)	Ability to Access Considered (Y/N)	Age of Data Considered(Y/N)	Comprehensive Considered(Y/N)	Other Criteria Used (Y/N) (Please Describe in Comments section)	Data Source Used at Application (Y/N)	Data Source Used at Renewal (Y/N)	Data Source Used Post-Enrollment (Y/N)	If Data Source Used for Post-Enrollment - Frequency Used (e.g., monthly, quarterly)	Comments
1. Internal Revenue Service (IRS)	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO		
2. Social Security Administration (SSA) (SSI, Title II)	YES	YES	YES	YES	YES	YES	NO	YES	YES	NO	Other	This data source is used to confirm SSA or SSI income and Medicare. This resource may be reviewed at application, renewal, and/or due to a change in circumstance.
3. State Wage Information Collection Agency (SWICA)	YES	YES	YES	YES	YES	YES	NO	YES	YES	NO	Other	This data source can be used to confirm wages. This resource may be reviewed at application, renewal, and/or due to a change in circumstance.

Electronic Data Source	Determined Useful (Y/N) ¹	Accuracy Considered (Y/N)	Timeliness Considered (Y/N)	Ability to Access Considered (Y/N)	Age of Data Considered (Y/N)	Comprehensive Considered (Y/N)	Other Criteria Used (Y/N) (Please Describe in Comments section)	Data Source Used at Application (Y/N)	Data Source Used at Renewal (Y/N)	Data Source Used Post-Enrollment (Y/N)	If Data Source Used for Post-Enrollment - Frequency Used (e.g., monthly, quarterly)	Comments
4. State Unemployment Compensation	YES	YES	YES	YES	YES	YES	NO	YES	YES	NO	Other	This data source can be used to confirm receipt of Missouri unemployment compensation. This resource may be reviewed at application, renewal, and/or due to a change in circumstance.
5. State Administered Supplementary Payment Program	YES	YES	YES	YES	YES	YES	NO	YES	YES	NO	Other	This data source can be used to verify financial information and confirm non-financial information. This resource may be reviewed at application, renewal, and/or due to a change in circumstance.
6. State General Assistance Programs	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO		Source not used as state does not have a general assistance program.
7. Supplemental Nutrition Assistance Program (SNAP)	YES	YES	YES	YES	YES	YES	NO	YES	YES	NO	Other	This data source can be used to verify financial information and confirm non-financial information. SNAP may be reviewed at application, renewal, and/or due to a change in circumstance.
8. Temporary Assistance for Needy Families (TANF)	YES	YES	YES	YES	YES	YES	NO	YES	YES	NO	Other	This data source can be used to verify financial information and confirm non-financial information. TANF may be reviewed at application, renewal, and/or due to a change in circumstance.
9. Office of Child Support Enforcement (OCSE)	YES	YES	YES	YES	YES	YES	NO	YES	YES	NO	Other	Information from Child Support Enforcement may be used to verify financial information such as countable alimony. This resource may be reviewed at application, renewal, and/or due to a change in circumstance.
10. State Income Tax	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO		The state does not have an agreement to receive state income tax data.
11. Commercial database: (Please describe any commercial databases in the space below)												
PARIS	YES	YES	YES	YES	YES	YES	NO	NO	NO	YES	Quarterly	The VA PARIS match is used to explore potential changes in income.
TALX/The Work Number	YES	YES	YES	YES	YES	YES	YES	YES	YES	YES	Quarterly	This data source can be used to verify financial information and confirm non-financial information. This resource may be reviewed at application, renewal, and/or due to a change in circumstance.
12. Other: (Please describe any additional electronic data sources in the space below)												

Electronic Data Source	Determined Useful (Y/N) ¹	Accuracy Considered(Y/N)	Timeliness Considered(Y/N)	Ability to Access Considered (Y/N)	Age of Data Considered(Y/N)	Comprehensive Considered(Y/N)	Other Criteria Used (Y/N) (Please Describe in Comments section)	Data Source Used at Application (Y/N)	Data Source Used at Renewal (Y/N)	Data Source Used Post-Enrollment (Y/N)	If Data Source Used for Post-Enrollment - Frequency Used (e.g., monthly, quarterly)	Comments
Quarterly Wage Match	YES	YES	YES	YES	YES	YES	NO	YES	YES	YES	Quarterly	This resource can be used to verify financial information. This resource may be reviewed at application, renewal, and/or due to a change in circumstance.
Directory of New Hire Matches	YES	YES	YES	YES	YES	YES	NO	YES	YES	YES	Other (specify in comments)	This resource can be used to verify financial information. This resource may be reviewed at application, renewal, and/or due to a change in circumstance.

1. The state marked any criterion YES if they were considered in determining the usefulness of the electronic data source; however, the determination of whether

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Medicaid & CHIP

State:

Missouri

Section B2. Use of Electronic Data Sources Non-Financial

Electronic Data Source	To Be Used (Y/N)	Social Security Number	Citizenship	Immigration Status	Residency	Age/DOB	Pregnancy	Household Composition	Caretaker Relative	Medicare	Application for other Benefits	Other	Data Source Used at Application (Y/N)	Data Source Used at Renewal (Y/N)	Data Source Used Post-Enrollment (Y/N)	If Used for Post-Enrollment Frequency Used (i.e., monthly, quarterly)	Comments
1. Social Security Administration (SSA)	YES	YES	YES	NO	NO	NO	NO	NO	NO	YES	YES	NO	YES	NO	NO		This resource matches with SSA to confirm the SSN of participants. For certain participants this resource may verify citizenship status or may verify if a participant is exempt from the requirement to provide citizenship documentation, if hub verification is not available.
2. Department of Homeland Security (DHS) - SAVE	YES	NO	NO	YES	NO	NO	NO	NO	NO	NO	NO	NO	YES	YES	NO		If the hub returns information from SAVE, the hub information is used as verification of immigration status. If hub data is insufficient or unavailable, a direct connection is made to SAVE to verify immigration status.
3. Vital Statistics	YES	NO	YES	NO	NO	NO	NO	NO	NO	NO	NO	NO	YES	NO	YES	Other (specify in comments)	Vital statistics is used to verify citizenship for participants born in Missouri, if SSA via the hub does not confirm citizenship.

Electronic Data Source	To Be Used (Y/N)	Social Security Number	Citizenship	Immigration Status	Residency	Age/DOB	Pregnancy	Household Composition	Caretaker Relative	Medicare	Application for other Benefits	Other	Data Source Used at Application (Y/N)	Data Source Used at Renewal (Y/N)	Data Source Used Post-Enrollment (Y/N)	If Used for Post-Enrollment Frequency Used (i.e., monthly, quarterly)	Comments
5. Temporary Assistance for Needy Families (TANF)	YES	YES	YES	YES	NO	NO	NO	NO	NO	NO	NO	NO	YES	YES	YES	Other (specify in comments)	As self-attestation is accepted for most non-financial eligibility factors, this resource is not a primary resource to verify non-financial eligibility. This resource may be reviewed at application, renewal, and/or due to a change in circumstance.
6. Supplemental Nutrition Assistance Program (SNAP)	YES	YES	YES	YES	NO	NO	NO	NO	NO	NO	NO	NO	YES	YES	YES	Other (specify in comments)	As self-attestation is accepted for most non-financial eligibility factors, this resource is not a primary resource to verify non-financial eligibility. This resource may be reviewed at application, renewal, and/or due to a change in circumstance.
7. Office of Child Support Enforcement	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO		
8. State General Assistance Programs	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO		
9. Women, Infants and Children Program (WIC)	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO		
10. State Income Tax	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO		
11. Commercial database: <i>(Please describe any commercial databases in the space below)</i>																	
Accruint for Government Eligibility (AFGE)	YES	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO	YES	YES	YES	NO		As self-attestation is accepted for most non-financial eligibility factors, this resource is not a primary resource to verify non-financial eligibility, however this resource may provide information regarding incarceration and death. This resource may be reviewed at application, renewal,

Electronic Data Source	To Be Used (Y/N)	Social Security Number	Citizenship	Immigration Status	Residency	Age/DOB	Pregnancy	Household Composition	Caretaker Relative	Medicare	Application for other Benefits	Other	Data Source Used at Application (Y/N)	Data Source Used at Renewal (Y/N)	Data Source Used Post-Enrollment (Y/N)	If Used for Post-Enrollment Frequency Used (i.e., monthly, quarterly)	Comments
																	and/or due to a change in circumstance.
Electronic Data Source	To Be Used (Y/N)	Social Security Number	Citizenship	Immigration Status	Residency	Age/DOB	Pregnancy	Household Composition	Caretaker Relative	Medicare	Application for other Benefits	Other	Data Source Used at Application (Y/N)	Data Source Used at Renewal (Y/N)	Data Source Used Post-Enrollment (Y/N)	If Used for Post-Enrollment Frequency Used (i.e., monthly, quarterly)	Comments
TALX/Work Number	YES	NO	NO	NO	YES	YES	NO	NO	NO	NO	NO	NO	YES	YES	YES		As self-attestation is accepted for most non-financial eligibility factors, this resource is not a primary resource to verify non-financial eligibility, however this resource may provide information regarding incarceration and death. This resource may be reviewed at application, renewal, and/or due to a change in circumstance.
12. PARIS*	YES	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO	YES	NO	NO	YES	Quarterly	Report is received quarterly. Will be used most of the time after the completion of a case. Will use for identification of duplicate participation in Medicaid and interstate TPL match.
13. Other: <i>(Please describe additional electronic data sources in the space provided below)</i>																	

Electronic Data Source	To Be Used (Y/N)	Social Security Number	Citizenship	Immigration Status	Residency	Age/DOB	Pregnancy	Household Composition	Caretaker Relative	Medicare	Application for other Benefits	Other	Data Source Used at Application (Y/N)	Data Source Used at Renewal (Y/N)	Data Source Used Post-Enrollment (Y/N)	If Used for Post-Enrollment Frequency Used (i.e., monthly, quarterly)	Comments
MMIS	YES	NO	NO	NO	NO	NO	YES	NO	NO	NO	NO	NO	NO	NO	YES	Monthly	Staff check MMIS on a monthly basis. If there is information received in the MMIS claims system that is inconsistent with the participant's attestation of pregnancy such as a claim for a sterilization procedure, claims for family planning services for contraceptives, or no claims submitted for pregnancy related services within the nine-month eligibility period we will follow-up with the individual.
<p>* Under 42 CFR 435.945(d), all State Medicaid eligibility systems must conduct a match with PARIS for Interstate benefit information. If used for other purposes, please indicate in Section D.</p>																	

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(Insert Medicaid, CHIP, or Both)

Medicaid & CHIP

State:

Missouri

Section C. Additional Factors of Eligibility for Separate CHIP

Eligibility Factor	Self-Attestation Accepted without Additional Verification	Self-Attestation Accepted with Post-Enrollment Verification (Y/N)	Electronic Data Source Used (Y/N) <i>If Yes, please describe in comments</i>	Paper Documentation Required from the Individual (Y/N)	Non-Applicable (N/A)	Comments
1. Applicant does not have other coverage	YES	NO	NO	NO	Must be Applied	Self- attestation is accepted as a rule. However, if information deemed discrepant by the state is received indicating other coverage and eligibility is affected, after reviewing available resources, the state may seek a reasonable explanation from the participant. The state may require paper documentation as a last resort prior to taking any adverse action.
2. Applicant does not have access to affordable ESI	YES	NO	NO	NO		
3. When child has had coverage (as applicable to states' waiting period)	NO	NO	NO	NO	N/A	
4. Access to public employee coverage	YES	NO	NO	NO		
5a. Waiting period exception #1 (describe):	NO	NO	NO	NO		

Eligibility Factor	Self-Attestation Accepted without Additional Verification	Self-Attestation Accepted with Post-Enrollment Verification (Y/N)	Electronic Data Source Used (Y/N) <i>If Yes, please describe in comments</i>	Paper Documentation Required from the Individual (Y/N)	Non-Applicable (N/A)	Comments
5b. Waiting period exception #2 (describe):	YES	NO	NO	NO		Full premium group kids are subject to a 90-day penalty when coverage closes for non-payment of premium after coverage begins.
5c. Waiting period exception #3 (describe):	NO	NO	NO	NO	N/A	
5d. Waiting period exception #4 (describe):	NO	NO	NO	NO	N/A	
5e. Waiting period exception #5 (describe):					N/A	
5f. Waiting period exception #6 (describe):					N/A	
5g. Waiting period exception #7 (describe):					N/A	
5h. Waiting period exception #8 (describe):					N/A	
5i. Waiting period exception #9 (describe):					N/A	
5j. Waiting period exception #10 (describe):					N/A	
6. Other eligibility factors or exceptions to eligibility factors: <i>(Please describe in the space provided below)</i>						

MAGI-BASED ELIGIBILITY VERIFICATION PLAN (Insert Medicaid, CHIP, or Both) State:		Medicaid & CHIP Missouri
Section D. Additional Verification Questions		
	Question	Response
1	If paper documentation is required when a data source is not available or the information obtained from a data source is not reasonably compatible with the information provided by or on behalf of the individual, briefly describe how the state determined that establishing and using an electronic data source was not effective, considering such factors as cost and program integrity in accordance with 42 CFR 435.952(c):	For factors for which we do not accept self-attestation, all available data sources will be utilized before requesting additional information from the individual. Paper documentation will be requested when information affecting eligibility is deemed discrepant by the state and cannot be resolved through electronic resources or a reasonable explanation from the participant. In such cases, the participant is given the opportunity to resolve the inconsistency prior to any adverse action.
2	Please describe how the state uses PARIS?	The PARIS report is used to match information to identify and control duplicate participation in Medicaid and ensure that all sources of a claimant's income and medical insurance are identified. State also uses federal match and VA match to follow up for possible sources of income.
3	Please indicate (YES) or (NO) if the State intends to request Secretarial approval to solely use alternative data sources for financial verification other than those listed in 42 CFR 435.948 (Numbers 1-8 in Section B-1). If (YES), please submit a letter to CMS requesting such approval describing how the state meets the following requirements: <ol style="list-style-type: none"> 1) Reduces administrative costs and burdens on both individuals and the State, 2) Maximizes accuracy and minimizes delay, 3) Meets the requirements related to confidentiality, disclosure, maintenance and use of information, and 4) Promotes coordination with other insurance affordable programs. 	NO

	Question	Response
	<p>If (YES), please submit a letter to CMS requesting such approval describing how the state meets the following requirements:</p> <ul style="list-style-type: none"> 5) Reduces administrative costs and burdens on both individuals and the State, 6) Maximizes accuracy and minimizes delay, 7) Meets the requirements related to confidentiality, disclosure, maintenance and use of information, and 8) Promotes coordination with other insurance affordability programs. 	
4	<p>Please indicate (YES) or (NO) if the State intends to request Secretarial approval to use a mechanism other than the federal dataservices hub for information that is available through the hub.</p>	NO
	<p>If (YES), please submit a letter to CMS requesting such approval describing how the state meets the following requirements:</p> <ul style="list-style-type: none"> 1) Reduces administrative costs and burdens on both individuals and the State, 2) Maximizes accuracy and minimizes delay, 3) Meets the requirements related to confidentiality, disclosure, maintenance and use of information, and 4) Promotes coordination with other insurance affordability programs. 	
5	<p>Describe any additional MAGI-based eligibility verification policies and procedures that have not been covered in this verification plan (optional):</p>	

Section A. Additional Comments
Implementation date is 4/3/2023.
Section B1. Additional Comments
Implementation date is 4/3/2023.
Section B2. Additional Comments
Implementation date is 4/3/2023.
Section C. Additional Comments
Implementation date is 4/3/2023.