



**GEORGIA DIVISION OF FAMILY AND CHILDREN SERVICES
MEDICAID POLICY MANUAL**

Chapter:	2100	Effective Date:	February 2020
Policy Title:	Parent/Caretaker with Children		
Policy Number:	2162	Previous Policy Update:	MT 47

REQUIREMENTS

Parent/Caretaker with Child(ren) provides Medicaid benefits for eligible children under the age of 19, and the eligible adult(s), who meet the tax filer or non-tax filer status for the child(ren).

BASIC CONSIDERATIONS

Basic Eligibility Criteria

Assistance Unit (AU) members must meet the following basic eligibility requirements:

- **Age** – A child must be under the age of 19 to be eligible. There is no age requirement for adult AU members. Refer to Section [2255](#), Age.
- **Application for Other Benefits** - The A/R must apply or agree to apply for and accept other benefits to which s/he or other AU members may be entitled.

The A/R is not required to apply for non-taxable income benefits for MAGI COAs; they should be notified of the potential benefit. These include, but are not limited to:

- Child Support
- Supplemental Security Income (SSI)
- Veterans Affairs (VA) benefits
- Worker's Compensation

An adult who does not meet this requirement, and the child(ren) included in the AU, are excluded from the AU. Refer to Section [2210](#), Application for Other Benefits.

- **Citizenship/Immigration Status/Identity** - Each AU member must be a U.S. citizen or meet immigration eligibility requirements. Refer to Section [2215](#), Citizenship/ Immigration Status.

BASIC CONSIDERATIONS (cont.)**Basic Eligibility Criteria (cont.)**

- **Enumeration** - The A/R must furnish, apply for, or agree to apply for a Social Security Number (SSN) for each AU member, unless Good Cause is established.

An adult who does not meet this requirement, without Good Cause, is penalized. The child(ren) in the AU that do not meet this requirement, without Good Cause, are excluded from the AU. Refer to Section [2220](#), Enumeration.

- **Child Support Services (DCSS)** - The AU must cooperate with DCSS in the attempt to obtain medical support from the absent parent (AP), unless Good Cause is established. A referral to, and cooperation with Child Support Services (DCSS) is, however **NOT** a requirement for child-only Medicaid cases.

A child-only Medicaid case is defined as a Medicaid AU in which no adults are receiving Medicaid. An AU which contains a penalized adult is **NOT** considered a child-only case.

NOTE: The AP of a child included in a Parent/Caretaker with child(ren) AU is not referred to DCSS if the AP provides health insurance for the child, unless the A/R wishes to pursue collection of child support monies.

An adult who does not cooperate with DCSS, without Good Cause, is penalized. Refer to Section [2250](#), Cooperation with DCSS.

- **Tax Filer and Non-Tax Filer Status** - Individuals expected to be included on the next tax return filed are potentially eligible to receive MAGI Medicaid. Individuals that meet non tax filer criteria are potentially eligible to receive MAGI Medicaid. Refer to Section [2245](#), Filer Status/Specified Relative Relationship.
- **Residency** - AU members must be residents of Georgia. Refer to Section [2225](#), Residency.
- **Third Party Liability Requirements** - The A/R is required to provide information regarding any Third-Party Liability (TPL) available to any AU member. The A/R must assign his/her TPL rights to DCH, unless Good Cause exists.

An adult who does not meet this requirement, without Good Cause, is penalized. Refer to Section [2230](#), Third Party Liability.

BASIC CONSIDERATIONS (cont.)**Financial Eligibility Criteria**

AU's must have income within the following limit:

- **Modified Adjusted Gross Income (MAGI)** - The total taxable net income of the AU must be equal to or less than the MAGI income limit of the AU size. Refer to [Appendix A2](#), Financial Limits for Family Medicaid.

Prospective budgeting is used in determining eligibility for the application month and the ongoing benefit period. If available, actual income may be used for intervening months. Data sources and/or active related programs verification is used prior to requesting verification.

Actual income is used to determine eligibility for retroactive three (3) months prior Medicaid. Refer to Section [2053](#), Retroactive Medicaid.

Modified Adjusted Gross Income (MAGI) financial methodologies are used to calculate the monthly MAGI income used for the BG. Pre-Tax deductions and 1040 deductions are given. Refer to Chapter [2663](#), Parent/Caretaker with Child(ren) Budgeting.

MAGI income deduction is 5% of the 100% Federal Poverty Level (FPL) of the AU size. Refer to Chapter [2663](#), Parent/Caretaker with Child(ren) Budgeting.