MAGI-BASED ELIGIBILITY VERIFICATION PLAN
(Insert Medicaid, CHIP, or Both)   Medicaid & CHIP
State: South Carolina

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*	YES	NO	YES	Both are above, at or below the applicable income standard. Percent Threshold	10%	YES	YES	When attestation below income standard and data source above, if difference between attestation and source is <=10%, accept attestation that is reasonably compatible, otherwise request explanation. Paper Documentation is required only if Reasonable Explanation is questionable. Self-Attestation Accepted without Additional Verification: If data sources for income are not available, accept self-attestation for income equal to or below $300. For income above $300 request explanation and if applicable paper documentation if not reasonably compatible with data sources. The process when an individual attests to income above the applicable standard and data source indicates income below the standard is that the state will take the attestation and make the person ineligible and screen for APTC.

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
Residency	YES	NO	NO	N/A	N/A	NO	NO	State accepts self-attestation. If a post-enrollment check through PARIS shows that the indiviudal may live in another state, will verify in TANF, SNAP, or DMV and/or seek additional information from the individual. May also pursue additional information if lead information is received from other sources, such as fraud hotline.
Age (Date of Birth)	NO	NO	YES	N/A	N/A	NO	YES	Paper Documentation only if cannot verify electronically. Will use secondary data sources after SSA before documenation.
Social Security Number **	NO	NO	YES	N/A	N/A	N/A	YES	Paper Documentation only if cannot verify electronically.
Citizenship **	NO	NO	YES	N/A	N/A	N/A	YES	Paper Documentation only if cannot verify electronically.
Immigration Status **	NO	NO	YES	N/A	N/A	N/A	YES	Paper Documentation only if cannot verify electronically.
Household Composition	YES	NO	NO	N/A	N/A	NO	NO	May pursue additional information if lead information is received from other sources, such as fraud hotline.
Pregnancy ***	YES	NO	NO	N/A	N/A	NO	NO	Accept self-attestation once per pregnancy.
Caretaker Relative	YES	NO	NO	N/A	N/A	NO	NO	
Medicare	NO	NO	YES	N/A	N/A	YES	YES	MMA Interface. Only request an explanation or paper documenation if the information from the electronic data source is inconsistent.
Application for Other Benefits	NO	NO	YES	N/A	N/A	NO	YES	Worker/system will determine if applicant should have applied for Social Security, Unemployment Compensation, Railroad Retirement, or Veteran Benefits (exemption: Pregnancy). If determined they should have and there is no electronic verification of applicant having applied then proof of application will be required.
Other: (Please describe any other eligibility factors in the space below)								

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

* 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).

** 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.

*** States must accept self-attestation of pregnancy unless they have information that is not reasonably compatible with such attestation.

MAGI-BASED ELIGIBILITY VERIFICATION PLAN
(Insert Medicaid, CHIP, or Both)   Medicaid & CHIP
State: South Carolina

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	YES	YES	NO	NO	NO	NO	NO	NO	NO		We are opting out of receiving and using the IRS data because of the timeliness of the data and security requirements. We will be using SSA, SC Department of Employment and Workforce - State Wage and State Unemployment, State Retirement and Work Number.
2. Social Security Administration (SSA) (SSI, Title II)	YES	YES	YES	YES	YES	YES	NO	YES	YES	YES	Other (specify in comments)	Will check at application, annual review and redetermination due to change. Post-enrollment checks are made with current SSA data interface. Income changes are verified at the time they are reported. BENDEX is a daily interface: Once a BENDEX interface exchange is established (at application or approval), SSA sends any changes in SSA income. Changes to the income amounts in MEDS produce alerts for the worker and sets the BG status to review (if income changes are a factor for that pay category).

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
3. State Wage Information Collection Agency (SWICA)	YES	YES	YES	YES	NO	YES	NO	YES	YES	YES	Quarterly	Will check at application, annual review and post-enrollment due to reported change from individual or electronic data source. Post-enrollment is to identify and verify changes. Population: Parents, Pregnant Women, Caretaker Relative.
4. State Unemployment Compensation	YES	YES	YES	YES	YES	YES	NO	YES	YES	YES	Monthly	Will check at application, annual review and post-enrollment due to reported change from individual or electronic data source. Post-enrollment is to identity and verify changes. Population: Parents, Pregnant Women, Caretaker Relative
5. State Administered Supplementary Payment Program	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO		Not applicable in SC. This program does not exist in SC.
6. State General Assistance Programs	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO		Not applicable in SC. This program does not exist in SC.
7. Supplemental Nutrition Assistance Program (SNAP)	YES	YES	YES	YES	YES	YES	NO	YES	YES	NO		Used as part of Express Lane Eligibility for Children. Exploring option to use it for parents/caretaker relatives.
8. Temporary Assistance for Needy Families (TANF)	YES	YES	YES	YES	YES	YES	NO	YES	YES	NO		Used as part of Express Lane Eligibility for Children. Exploring option to use it for parents/caretaker relatives.

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
9. Office of Child Support Enforcement (OCSE)	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO		SC does not have electronic access to this data source at this time. The South Carolina Department of Social Services has responsibility for this data source.
10. State Income Tax	NO	YES	NO	NO	NO	NO	NO	NO	NO	NO		We are opting out of receiving and using the State Income Tax data because of the timeliness of the data and security requirements. We will be using SSA, SC Department of Employment and Workforce - State Wage and State Unemployment, State Retirement, Verify Direct and Work Number.
11. Commercial database: (Pease describe any commercial databases 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
Work Number and Verify Direct	YES	YES	YES	YES	YES	NO	NO	YES	YES	YES	Other (specify in comments)	Will check at application, annual review and post-enrollment due to reported change from individual or electronic data source. Population: Parents, Pregnant Women, Caretaker Relatives. Information is timely and comprehensive for individuals working with companies that are in the Work Number and VerifyDirect. Our development work will not be complete to connect to Verify Direct/Work Number on Day 1. We will continue to use current process.
12. Other: (Please describe any additional electronic data sources in the space below)												

MAGI-BASED ELIGIBILITY VERIFICATION PLAN
(Insert Medicaid, CHIP, or Both)   Medicaid & CHIP
State: South Carolina

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	YES	NO	NO	NO	YES	YES	NO	YES	YES	YES	Other (specify in comments)	Renewal and post-enrollment checks are for Medicare and Application for other benefits. Daily feed from SSA
2. Department of Homeland Security (DHS) - SAVE	YES	NO	NO	YES	NO	NO	NO	NO	NO	NO	NO	NO	YES	YES	YES	Other (specify in comments)	Will check at application, renewal and on document expiration date (if document expiration date is available) during the enrollment period.
3. Vital Statistics	YES	NO	YES	NO	NO	NO	NO	NO	NO	NO	NO	YES	NO	NO	YES	Monthly	Date of death. Used a back up for citizenship if inconsistency with SSA.
4. Department of Motor Vehicles (DMV)	NO	NO	YES	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO		Can be used for residency and age/dob if needed post-eligibility due to a discrepancy. It can be used for Citizenship if no other electronic matches available as long as license was issued on or after June 1, 2002. This data souce is only used if verified in accordance with Medicaid/CHIP rules

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	YES	NO	NO	NO	NO	NO	NO	YES	YES	NO		Only use for citizenship and immigration status if they have been verified in accordance with Medicaid/CHIP rules. This data source is used as part or ELE. Can be used for residency if needed post-eligibility due to a discrepancy.
6. Supplemental Nutrition Assistance Program (SNAP)	YES	YES	YES	YES	NO	YES	NO	NO	NO	NO	NO	NO	YES	YES	NO		Only use for citizenship and immigration status if they have been verified in accordance with Medicaid/CHIP rules. This data source is used as part or ELE. Can be used for residency if needed post-eligibility due to a discrepancy.
7. Office of Child Support Enforcement	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO		not applicable
8. State General Assistance Programs	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO		not applicable
9. Women, Infants and Children Program (WIC)	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO		not applicable

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
10. State Income Tax	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO		not applicable
11. Commercial database: *(Please describe any commercial databases in the space below)*																	
13. Other: *(Please describe additional electronic data sources in the space provided below)*																	
12. PARIS*	YES	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO	YES	NO	NO	YES	Quarterly	Used to determine if individual has benefits in another state. Can be used for residency if needed post-eligibility due to a discrepancy.

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
State Wage Collection Agency/Unemployment	YES	NO	NO	NO	NO	NO	NO	NO	NO	NO	YES	NO	YES	NO	YES	Other (specify in comments)	Used for application for other benefits. Post-enrollment checks are ad hoc to check status if they have been referred to aplly for other benefits.

* 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.

MAGI-BASED ELIGIBILITY VERIFICATION PLAN
(Insert Medicaid, CHIP, or Both)   Medicaid & CHIP
State: South Carolina

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) *If Yes, please describe in comments*	Paper Documentation Required from the Individual (Y/N)	Non-Applicable (N/A)	Comments
1. Applicant does not have other coverage	NO	YES	YES	YES	Must be Applied	TPL Vendor is Blue Cross Blue Shield of South Carolina. Paper documentation requested if there is a discrepancy between the electronic source and the individual's report.
2. Applicant does not have access to affordable ESI						
3. When child has had coverage (as applicable to states' waiting period)						
4. Access to public employee coverage						
5a. Waiting period exception #1 (describe):						
5b. Waiting period exception #2 (describe):						
5c. Waiting period exception #3 (describe):						
5d. Waiting period exception #4 (describe):						
5e. Waiting period exception #5 (describe):						
5f. Waiting period exception #6 (describe):						

Eligibility Factor	Self-Attestation Accepted without Additional Verification	Self-Attestation Accepted with Post-Enrollment Verification (Y/N)	Electronic Data Source Used (Y/N) *If Yes, please describe in comments*	Paper Documentation Required from the Individual (Y/N)	Non-Applicable (N/A)	Comments
5g. Waiting period exception #7 (describe):						
5h. Waiting period exception #8 (describe):						
5i. Waiting period exception #9 (describe):						
5j. Waiting period exception #10 (describe):						
6. Other eligibility factors or exceptions to eligibility factors: *(Please describe in the space provided below)*						

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):	If information cannot be obtained electronically or the self-attestation and data sources are not reasonably compatible and eligibility is impacted, individual will be requested to give an explanation. If the explanation is questionable, paper documentation will be required. The state considered the administrative costs associated with establishing and using the data match vs. administrative costs associated with relying on paper documentation. The state also considered the impact on program integrity as there are potential for ineligible individuals to be approved as well as for eligible individuals to be denied coverage. As a result we decided to accept self-attestation for income equal to or below $300 if there are no data sources. For income above $300, check data sources and request explanation and if applicable paper documentation. State will be using all available data sources before requesting any additional information, including using vital statistics as a back-up for citizenship.
2	Please describe how the state uses PARIS?	Interstate Match: Recipients who are receiving Medicaid in more than one participating state for the same time period are reported. Workers are alerted to verify the whereabouts of the recipient during the overlapping period and terminate the Medicaid, if appropriate. Veteran's Administration & Federal Match: State plans to pursue agreement.
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).	NO

		Question	Response

		If (YES), please submit a letter to CMS requesting such approval describing how the the state meets the following requirements:
		    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.	

4		Please indicate (YES) or (NO) if the State intends to request Secretarial approval to use a mechanism other than the federal data services hub for information that is available through the hub.	NO

		If (YES), please submit a letter to CMS requesting such approval describing how the the state meets the following requirements:
		    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		Describe any additional MAGI-based eligibility verification policies and procedures that have not been covered in this verification plan (optional):	

Section A. Additional Comments

Section B1. Additional Comments

Section B2. Additional Comments

Section C. Additional Comments