



**Centers for Medicare & Medicaid  
Services  
CMS eXpedited Life Cycle (XLC)**

**Medicaid and CHIP Program (MACPro)**

**S4 - Mandatory Eligibility Groups RU PRA  
Document**

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# 1. S4 - Mandatory Eligibility Groups Screenshots

## 1.1 Package Header

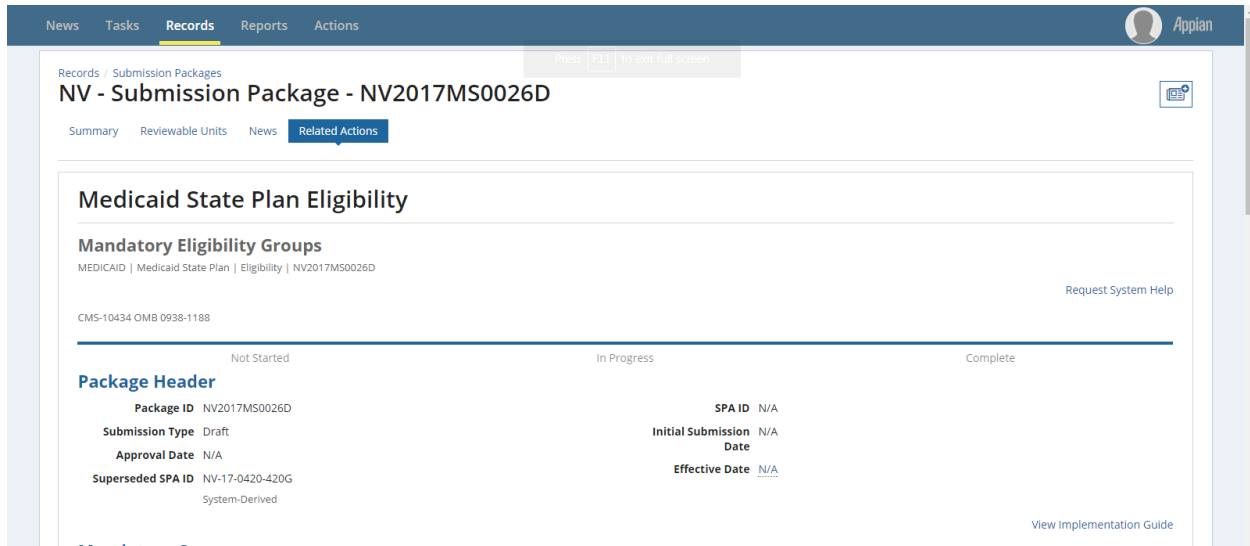


Figure 1: Package Header

## 1.2 Mandatory Coverage – Section A - Part 1

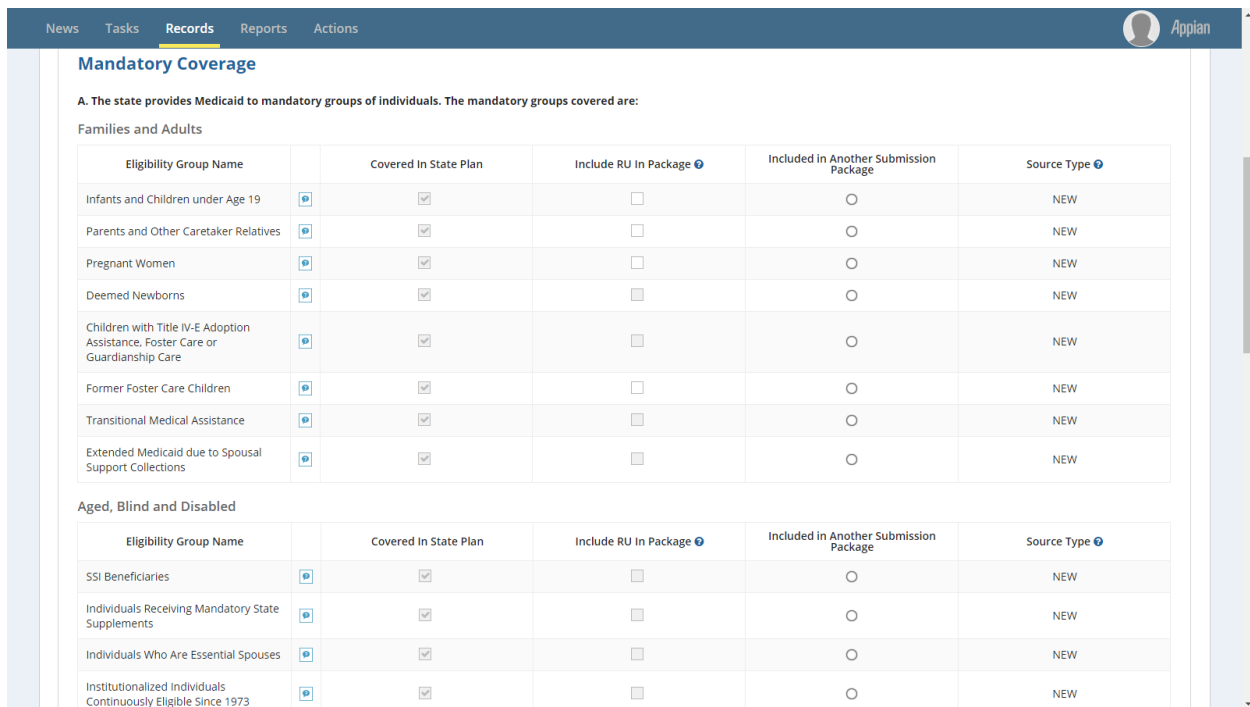


Figure 2: Section A-Part 1

### 1.3 Mandatory Coverage – Section A-Part 2 and Section B

Eligibility Group Name	Covered In State Plan	Include RU In Package	Included in Another Submission Package	Source Type
Blind or Disabled Individuals Eligible in 1973	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	NEW
Individuals Who Lost Eligibility for SSI/SSP Due to an Increase in OASDI Benefits in 1972	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	NEW
Individuals Who Would be Eligible for SSI/SSP but for OASDI COLA Increases since April, 1977	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	NEW
Disabled Widows and Widowers Ineligible for SSI due to Increase in OASDI	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	NEW
Disabled Widows and Widowers Ineligible for SSI due to Early Receipt of Social Security	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	NEW
Working Disabled under 1619(b)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	NEW
Disabled Adult Children	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	NEW
Qualified Medicare Beneficiaries	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	NEW
Qualified Disabled and Working Individuals	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	NEW
Specified Low Income Medicare Beneficiaries	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	NEW
Qualifying Individuals	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	NEW

**B. The state elects the Adult Group, described at 42 C.F.R. §435.219. \***  
 Yes  No

Eligibility Group Name	Covered In State Plan	Include RU In Package	Included in Another Submission Package	Source Type
Adult Group	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="radio"/>	NEW

Figure 3: Section A-Part 2 and Section B

### 1.4 Mandatory Coverage – Section C

**C. Additional Information (optional)**

Character count: 0/4000

#### Eligibility Groups Deselected from Coverage

The following eligibility groups were previously covered in the source approved version of the state plan and deselected from coverage as part of this submission package:

- N/A

#### Validation & Navigation

Would you like to validate the reviewable unit data?  
 Yes  No

Navigate to Reviewable Unit  
 -- Select Reviewable Unit --

Warning: Any field containing more than 4000 characters will be truncated when saved.

Progress: Not Started | In Progress | Complete

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EXIT | SAVE REVIEWABLE UNIT | GO TO SELECTED REVIEWABLE UNIT

Figure 4: Section C