OF G 100 C	GEORGIA DIVISION OF FAMILY AND CHILDREN SERVICES MEDICAID POLICY MANUAL				
	Chapter:	2200	Effective Date:	July 2023	
	Policy Title:	Age (Family Medicaid)			
	Policy Number:	2255	Previous Policy Update:	MT 58	

REQUIREMENTS

An individual must be under a specified age to be eligible for Family Medicaid. The age limit depends on the Family Medicaid Class of Assistance (COA) for which eligibility is being considered.

NOTE: Refer to Section 2205, Age, Blind, Disabled Requirement for ABD Medicaid COAs.

BASIC CONSIDERATIONS

An individual must be under the following age limits to be eligible for that Family Medicaid COA.

AGE LIMIT	CLASS OF ASSISTANCE
65 years	Pathways
65 years	Women's Health Medicaid
45 years	Planning for Healthy Babies®
21 years	Foster Care Medicaid 21 years
	State Adoption Assistance Medicaid
26 years	Former Foster Care Medicaid
19 years	PeachCare for Kids®
19 years	Children Under 19 Years of Age Medicaid
19 years	Parent/Caretaker with Child(ren) Medicaid
19 years	Transitional Medical Assistance (TMA)
19 years	Four Months Extended Medicaid (4MEx)
19 years	Family Medicaid Medically Needy
13 months	Newborn Medicaid

NOTE: For Parent/Caretaker with Child(ren), TMA and 4MEx there is no age limit for the adults requesting/receiving assistance but there must be a child in the assistance unit under the age of 19 for the Parent, Caretaker or Specified Relative to receive Medicaid in these COAs.

BASIC CONSIDERATIONS (cont.)

A child's age affects the financial income limit used in determining eligibility for Children Under 19 Years of Age Medicaid. Refer to <u>Appendix A2</u>, Family Medicaid Financial Limits and to Section <u>2182</u>, Children Under 19 Years of Age Medicaid.

There is no age limit associated with Pregnant Women Medicaid (PgW).

Eligibility for a Medicaid COA ends at the end of the month in which the child reaches the age limit for that COA. A Continuing Medicaid Determination (CMD) must be completed and documented prior to denial or termination of any Medicaid COA.

PROCEDURES

Accept and document the A/R's statement of the child(ren)'s age, unless questionable.

If age is questionable, document the reason age is questioned.

Verify questionable age at the following times:

- at application
- when a child is added to the Family Medicaid AU
- when the agency becomes aware of a discrepancy.

Verify questionable age by one of the following:

- adoption records
- affidavit of persons present at birth
- baptismal or other church records
- birth certificate
- census record
- court record
- driver's license
- family Bible
- insurance record
- medical record

PROCEDURES (cont.)

- school record
- Social Security record
- U. S. passport
- vital statistic records
- any other reliable records indicating age or date of birth.

Document the date and source of verification.

If age is questionable and the A/R fails to provide acceptable verification, document the reason verification was requested, the date verification was requested, the date verification was due, and the A/R's failure to comply prior to denial or termination of Medicaid.