

SYNOPSIS

Rule 111-5-1-.06

Eligibility

STATEMENT OF PURPOSE AND MAIN FEATURES OF PROPOSED RULE

The purpose of this proposed amendment is to modify existing rules to eliminate repetitive eligibility determinations to allow updates only when a patient's financial status has changed.

DIFFERENCES BETWEEN EXISTING AND PROPOSED RULES

Rule 111-5-1-.06(1) is amended by deleting selected language.

Rule 115-1-.06(2) is amended by deleting the word "Net" and replacing with the word "Gross".

111-5-1-.06 Eligibility.

(1) In order to determine if an individual is eligible for participation in the Program the Department shall be required to obtain a self-declaration of income and expenses from the individual on a form specified by the Department. Applicants must furnish income and expenses for the four (4) week period prior to the date of the application which shall include, but not be limited to, Eligibility Records regarding the Gross Family Income for the family unit, child care expenses, and child support payments. The Department may seek Verification to confirm that the applicant qualifies for participation in the Program. ~~Such eligibility determinations shall be made for each and every encounter wherein the Patient seeks Health Care.~~ Such eligibility determinations shall be made upon notification by the patient that his or her financial status has changed.

(2) The Department shall use Net Gross Family Income to determine eligibility.

(3) If the Department determines that the applicant has intentionally omitted or failed to provide pertinent information and/or falsified or misrepresented information that the Department relied upon to determine eligibility, the Department shall terminate the applicant from participation in the Program, and the applicant will be considered ineligible for any further participation in the Program. Any challenge to the Department's determination shall be governed by O.C.G.A. Section 50-13-13 et seq. Despite such a termination, the Health Care Provider shall still be considered immune from liability and suit as set forth in Ga. Admin. Comp. Ch. 111-5-1-.11 as long as the Health Care Provider acted within the scope of services set forth in the Contract with the Department.

(4) An applicant who engages in conduct set forth in Paragraph 3 of this Rule may be, pursuant to O.C.G.A. Section 16-10-20, subject to, upon conviction, a fine of not more than \$1,000 or by imprisonment for not less than one nor more than five years, or both.

Authority O.C.G.A. §§ 16-10-20, 31-8-192.