



# Medicaid Eligibility

State Name:

OMB Control Number: 0938 1148

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Expiration date: 10/31/2014

|                                                          |            |
|----------------------------------------------------------|------------|
| <b>Eligibility Groups - Options for Coverage</b>         | <b>S59</b> |
| <b>Individuals Eligible for Family Planning Services</b> |            |

1902(a)(10)(A)(ii)(XXI)  
42 CFR 435.214

**Individuals Eligible for Family Planning Services** - The state elects to cover individuals who are not pregnant, and have household income at or below a standard established by the state, whose coverage is limited to family planning and related services and in accordance with provisions described at 42 CFR 435.214.

Yes     No

### PRA Disclosure Statement

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