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State/Territory Name: Florida

State Plan Amendment (SPA) #: FL-13-0002

(In addition to the SPA noted above, this package contains other state plan amendment approvals)

This file contains the following documents in the order listed:

- 1) Approval Letter
- 2) SPA Summary Form
- 3) Approved SPA Pages
- 4) Additional Attachments that are part of the state plan

The complete title XXI state plan for Florida consists of the most recent state plan posted on Medicaid.gov under CHIP and State Plan Amendments. The link is provided below. The following approved templates are in addition to, or replace sections of the state's posted current state plan. The attached approval letter(s) explain how these templates fit into that state plan.

Link to state title XXI state plans and amendments: <http://medicaid.gov/Medicaid-CHIP-Program-Information/By-Topics/Childrens-Health-Insurance-Program-CHIP/CHIP-State-Program-Information.html>

DEPARTMENT OF HEALTH & HUMAN SERVICES
Centers for Medicare & Medicaid Services
7500 Security Boulevard, Mail Stop: S2-01-16
Baltimore, Maryland 21244-1850



Children and Adults Health Programs Group

Mr. Justin Senior
Acting Deputy Secretary
Agency for Health Care Administration
2727 Mahan Drive, MS #20
Tallahassee, FL 32308-5403

NOV 18 2013

Dear Mr. Senior:

I am pleased to inform you that your Title XXI Children’s Health Insurance Program (CHIP) state plan amendments (SPAs) numbered FL-13-0001 and FL-13-0002 submitted on September 13, 2013 and related to Modified Adjusted Gross Income (MAGI) Eligibility have been approved with an effective date of January 1, 2014.

MAGI Eligibility & Methods:

In this SPA, page CS15 provides assurance that the state will apply methodologies based on MAGI for all separate CHIP covered groups. Page CS7 indicates that, using the approved MAGI conversion plan income thresholds, the state will cover targeted low-income children, including a special program for children with disabilities. Page CS10 allows the state to cover children who have access to public employee coverage and updates the supporting documentation. These pages are attached to this letter and should be incorporated into the current CHIP state plan according to the table below. Where the current CHIP state plan contains relevant information, the new pages should replace and supersede the corresponding information throughout the current state plan.

New State Plan Page	Impact on Current State Plan Section
CS15: MAGI-Based Income Methodologies	Section 4.3: Add new subsection and supersede information on income eligibility and methods
CS7: Targeted Low-Income Children (except Children with Disabilities)	Sections 4.1.1, 4.1.2, 4.1.3: Supersede all
CS7: Special Program for Children with Disabilities	Sections 3.1, 3.2, 4.1.6, 4.1.9, 4.3 and 4.4.1: Supersede information on Children’s Medical Services Network
CS10: Children Who Have Access to Public Employee Coverage	Section 4.4.1: Supersede information on dependents of employees of a public agency
CS10: Maintenance of Agency Contribution	Appendix: Supersede current documentation

XXI Medicaid Expansion:

SPA number FL-13-0002 converts the state's existing income eligibility standards to modified adjusted gross income (MAGI)-equivalent standards, by age group, for children covered in its title XXI-funded Medicaid program. A copy of the approved state plan page (CS3) is attached, and should be incorporated into the state's approved CHIP state plan. This page supersedes the current Medicaid expansion Section (4.0) of the current CHIP state plan.

Your Title XXI project officer is Ms. LaVern Baty. She is available to answer questions concerning this amendment. Ms. Baty's contact information is as follows:

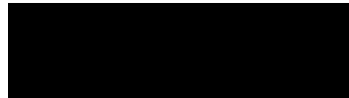
Centers for Medicare & Medicaid Services
Center for Medicaid & CHIP Services
7500 Security Boulevard, Mail Stop S2-01-16
Baltimore, MD 21244-1850
Telephone: (410) 786-5480
Facsimile: (410) 786-5882
E-mail: Lavern.Baty@cms.hhs.gov

Official communications regarding program matters should be sent simultaneously to Ms. Baty and to Ms. Jackie Glaze, Associate Regional Administrator, Centers for Medicare & Medicaid Services, Region 4, Ms. Jackie Glaze, Division of Medicaid and Children's Health Operations. Ms. Glaze's address is:

Centers for Medicare & Medicaid Services
Division of Medicaid and Children's Health Operations
Atlanta Federal Center, 4th Floor
61 Forsyth Street, SW, Suite 4T20
Atlanta, GA 30303-8909

If you have additional questions, please contact Ms. Linda Nablo, Director, Division of State Coverage Programs at (410) 786-5143. We look forward to continuing to work with you and your staff toward the approval of your remaining MAGI Eligibility SPAs.

Sincerely,



Eliot Fishman
Director

Enclosures

cc: Jackie Glaze, ARA, CMS Region IV
Gail Hansen, MediKids Program, Agency for Health Care Administration

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Children's Health Insurance Program Eligibility

FL.0315.R00.00 - Jan 01, 2014

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Children's Health Insurance Program Eligibility: Summary Page

State/Territory name: Florida

Transmittal Number:

Please enter the Transmittal Number (TN) in the format ST-YY-0000 where ST= the state abbreviation, YY = the last two digits of the submission year, and 0000 = a four digit number with leading zeros. The dashes must also be entered.

Type of SPA:

- MAGI Eligibility & Methods
 XXI Medicaid Expansion
 Establish 2101(f) Group
 Eligibility Processing
 Non-Financial Eligibility

Proposed Effective Date
 (mm/dd/yyyy)
Federal Statute/Regulation Citation

Federal Budget Impact
 This SPA has a budget impact.

Total budget impact:

State Funds: \$ Federal Funds: \$ **Subject of Amendment**

Please provide a brief summary of SPA changes.

Character Count: 303 out of 2000

Signature of State Agency Official

Submitted By: Gail Hansen

Last Revision Date: Oct 29, 2013

Submit Date: Sep 13, 2013

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CHIP Eligibility

OMB Control Number: 0938-1148

Expiration date: 10/31/2014

Eligibility for Medicaid Expansion Program					CS3
42 CFR 457.320(a)(2) and (3)					
Income eligibility for children under the Medicaid Expansion is determined in accordance with the following income standards: There should be no overlaps or gaps for the ages entered.					
Age and Household Income Ranges					
	From Age	To Age	Above (% FPL)	Up to & including (% FPL)	
+	0	1	192	206	X
+	6	19	112	133	X

PRA Disclosure Statement

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0938-1148. The time required to complete this information collection is estimated to average 50 hours per response, including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection. If you have comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: CMS, 7500 Security Boulevard, Attn: PRA Reports Clearance Officer, Mail Stop C4-26-05, Baltimore, Maryland 21244-1850.



CHIP Eligibility

OMB Control Number: 0938-1148

Expiration date: 10/31/2014

Separate Child Health Insurance Program MAGI-Based Income Methodologies

CS15

2102(b)(1)(B)(v) of the SSA and 42 CFR 457.315

- The CHIP Agency will apply Modified Adjusted Gross Income methodologies for all separate CHIP covered groups, as described below, and consistent with 42 CFR 457.315 and 435.603(b) through (i).

In the case of determining ongoing eligibility for enrollees determined eligible for CHIP on or before December 31, 2013, MAGI-based income methodologies will not be applied until March 31, 2014 or the next regularly-scheduled renewal of eligibility, whichever is later.

If the state covers pregnant women, in determining family size for the eligibility determination of a pregnant woman, she is counted as herself plus each of the children she is expected to deliver.

In determining family size for the eligibility determination of the other individuals in a household that includes a pregnant woman:

- The pregnant woman is counted just as herself.
- The pregnant woman is counted just as herself, plus one.
- The pregnant woman is counted as herself, plus the number of children she is expected to deliver.

Financial eligibility is determined consistent with the following provisions:

When determining eligibility for new applicants, financial eligibility is based on current monthly income and family size.

When determining eligibility for current beneficiaries, financial eligibility is based on:

- Current monthly household income and family size.
- Projected annual household income for the remaining months of the current calendar year and family size.

In determining current monthly or projected annual household income, the state will use reasonable methods to:

- Include a prorated portion of the reasonably predictable increase in future income and/or family size.
- Account for a reasonably predictable decrease in future income and/or family size.

Except as provided at 42 CFR 457.315 and 435.603(d)(2) through (d)(4), household income is the sum of the MAGI-based income of every individual included in the individual's household.

Household income includes actually available cash support, exceeding nominal amounts, provided by the person claiming an individual described at §435.603(f)(2)(i) as a tax dependent.

- The CHIP Agency certifies that it has submitted and received approval for the conversion for all separate CHIP covered group income standards to MAGI-equivalent standards.

An attachment is submitted.

PRA Disclosure Statement

SPA # FL-13-0001

Approval Date: NOV 18 2013

Effective Date: January 1, 2014



CHIP Eligibility

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0938-1148. The time required to complete this information collection is estimated to average 50 hours per response, including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection. If you have comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: CMS, 7500 Security Boulevard, Attn: PRA Reports Clearance Officer, Mail Stop C4-26-05, Baltimore, Maryland 21244-1850.



CHIP Eligibility

OMB Control Number: 0938-1148

Expiration date: 10/31/2014

Separate Child Health Insurance Program Eligibility - Targeted Low-Income Children

CS7

2102(b)(1)(B)(v) of the SSA and 42 CFR 457.310, 315 and 320

Targeted Low-Income Children - Uninsured children under age 19 whose household income is within standards established by the state.

The CHIP Agency operates this covered group in accordance with the following provisions:

Age

Must be under age 19.

Income Standards

Income standards are applied statewide. Yes

Are there any exceptions, e.g. populations in a county which may qualify under either a statewide income standard or a county income standard? No

Statewide Income Standards

Begin with lowest age range first.

Please note that the lower bound for CHIP eligibility should be the highest standard used for Medicaid poverty-level children for the same age group or groups entered here.

	From Age	To Age	Above (% FPL)	Up to & including (% FPL)	
+	1	6	140	210	X
+	6	19	133	210	X

Age ranges may overlap. If there is an overlap, provide an explanation. Include the age ranges for each income standard that has overlapping ages and the reason for having different income standards.

Special Program for Children with Disabilities

Does the state have a special program for children with disabilities? Yes

Is the program available to all eligible targeted low-income children? Yes

Program Description

NOV 18 2013



CHIP Eligibility

Describe disability criteria used.

Children's Medical Services Network (CMSN) offers a broad range of medical, therapeutic and supportive services for Title XXI eligible children with special health care needs. CMSN services focus on helping the child grow up healthier and includes prevention and early intervention services, primary care, medical and therapeutic specialty care, and long term care. Services are coordinated through nurses and social workers who help organize their child's care. Children enrolled in the CMSN receive the same benefits as those offered through the Medicaid program, including EPSDT services.

State law defines children with special health care needs as "those children younger than 21 years of age who have chronic and serious physical, developmental, behavioral, or emotional conditions and who require health care and related services of a type or amount beyond that which is generally required by children." (s. 391.021(2), F.S.)

The Florida KidCare application contains questions to identify a child has a special health care need. Such children are referred to CMSN for a clinical eligibility determination. CMSN uses a four level Clinical Eligibility Screening Guide. Except for levels three and four, screening is done by telephone with the parent. If a parent declines or cannot be located the child is reported as not clinically eligible. Level I identifies medical, developmental and behavioral health conditions that have lasted or are expected to last 12 months or longer. If clinical eligibility cannot be determined at the first level, the screener proceeds to Level II, which includes disability screening questions from the National Survey of Children with Special Health Care Needs. If clinical eligibility cannot be determined at Level II, Level III involves a medical record review. If clinical eligibility still cannot be determined, Level IV is a physical exam with the CMS medical director or designee.

Describe program, including additional benefits offered.

A child with a physical, developmental or behavioral special health care need receives the standard Medicaid benefit package, including the behavioral health services package, through the CMSN. Early intervention services, respite services, genetic testing, genetic and nutritional counseling, and parent support services may be offered, if such services are determined to be medically necessary. Effective July 1, 2009, CMSN clinically eligible children may elect to opt out of CMSN and enroll in MediKids or Healthy Kids, depending on their age.

Children who have serious emotional disturbance or substance dependence problems will be referred to the Department of Children and Families (DCF) for specialized behavioral health care services. DCF provides specialized behavioral health services for CMSN enrolled school-age children with serious emotional disturbance or substance abuse problems. These children receive their physical health care through CMSN.

The CMSN delivery system is a private provider network that includes local, regional and tertiary facilities and private health care providers. The delivery system incorporates a continuum of care that includes early intervention programs, primary and specialty care, and long term care. The specialty care providers are primarily Medicaid providers and meet additional credentialing criteria. The CMSN has a series of standards that are used to designate specialty components of the network. CMSN also has standards for the designation of hospital facilities in the network.

CMSN maintains physician-credentialing standards that exceed the standards of the National Committee for Quality Assurance. Specifically, primary care physicians must be Board Certified Pediatricians or Family Practitioners. There is a standard waiver process to grant exceptions to the standard under special circumstances and when in the best interests of the CMSN participants.

PRA Disclosure Statement



CHIP Eligibility

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0938-1148. The time required to complete this information collection is estimated to average 50 hours per response, including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection. If you have comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: CMS, 7500 Security Boulevard, Attn: PRA Reports Clearance Officer, Mail Stop C4-26-05, Baltimore, Maryland 21244-1850.

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CHIP Eligibility

OMB Control Number: 0938-1148

Expiration date: 10/31/2014

Separate Child Health Insurance Program Eligibility - Children Who Have Access to Public Employee Coverage

CS10

Sec. 2110(b)(2)(B) and (b)(6) of the SSA

- Children Who Have Access to Public Employee Coverage** - Otherwise eligible targeted low-income children who have access to public employee coverage on the basis of a family member's employment.

The CHIP Agency operates this covered group in accordance with the following provisions:

Select one of the following conditions as described in Section 2110(b)(6) of the Social Security Act:

- Maintenance of agency contribution as provided in 2110(b)(6)(B) of the SSA.
 Hardship criteria as provided in section 2110(b)(6)(C) of the Social Security Act.

Coverage under this option is extended to children whose household income is:

Select one of the options for the income standard when compared to Targeted Low Income Children

- The same as the standards for Targeted Low-Income Children
 Lower than the income standards for Targeted Low-Income Children

Indicate whether coverage under this option is extended to all children who have access to public employee coverage, or only certain children:

- All children who have access to public employee coverage
 Certain children who have access to public employee coverage:

- Attach methodology the state has used to calculate maintenance of agency contribution.

An attachment is submitted.

The state provides assurance that the state will, on an annual basis, recalculate expenditures for each participating public agency to determine if the maintenance effort condition continues to be met.

Children who are eligible for public employee health benefits coverage who are not described above are excluded from eligibility under the plan.

Children considered to have access to public employee coverage, and therefore not excluded from CHIP through this option, otherwise meet the definition of targeted low-income child provided at 42 CFR 457.310.

PRA Disclosure Statement

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0938-1148. The time required to complete this information collection is estimated to average 50 hours per response, including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection. If you have comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: CMS, 7500 Security Boulevard, Attn: PRA Reports Clearance Officer, Mail Stop C4-26-05, Baltimore, Maryland 21244-1850.

V.20130917

SPA # FL-13-0001

Approval Date: NOV 18 2013

Effective Date: January 1, 2014

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**Dependents of State Employee Coverage
Maintenance of Agency Contribution**

The charts below show the total monthly and annual premium for career service and payroll (payrolls includes executive, legislative and judicial branch agencies for employees with enhanced benefits) state employee family coverage, broken out by the family's premium and the state's expenditure. The Consumer Price Index for medical expenses (CPI-Medical) rate is shown for each year and the inflation column represents the previous year's state expenditure multiplied by the CPI-Medical for that year. The result is the last column entitled "1997 Annual State Expenditure Increased by CPI". In order to meet the maintenance of agency contribution requirement to cover state employees using Title XXI funding, the actual state expenditures need to exceed the annual state expenditure increased by the CPI. The charts below show that the State of Florida meets the maintenance of agency contribution requirement with the state annual expenditure exceeding the annual state expenditure increased by the CPI for each year since 1997. Going forward, each year will be computed to ensure continued compliance with the maintenance of agency contribution requirement.

Career Service State Employees									
Year	State Employee Health Insurance			State Employee Health Insurance			CPI-Medical	Inflation	1997 Annual State Expenditure Increased by CPI
	Total Family Monthly Premium	Employee Monthly Family Premium	State Monthly Expenditure	Total Family Annual Premium	Employee Annual Family Premium	State Annual Expenditure			
1997	\$361.72	\$93.58	\$268.14	\$4,340.64	\$1,122.96	\$3,217.68			\$3,217.68
1998	\$456.20	\$93.58	\$362.62	\$5,474.40	\$1,122.96	\$4,351.44	3.2%	\$102.97	\$3,320.65
1999	\$470.23	\$107.61	\$362.62	\$5,642.76	\$1,291.32	\$4,351.44	3.5%	\$116.22	\$3,436.87
2000	\$507.80	\$116.20	\$391.60	\$6,093.60	\$1,394.40	\$4,699.20	4.1%	\$140.91	\$3,577.78
2001	\$583.96	\$133.62	\$450.34	\$7,007.52	\$1,394.00	\$4,699.00	4.6%	\$164.58	\$3,742.36
2002	\$659.83	\$151.00	\$508.83	\$7,918.00	\$1,812.00	\$6,106.00	4.7%	\$175.89	\$3,918.25
2003	\$765.50	\$175.17	\$590.33	\$9,186.00	\$2,102.00	\$7,084.00	4.0%	\$156.73	\$4,074.98
2004	\$842.00	\$175.17	\$666.83	\$10,104.00	\$2,102.00	\$8,002.00	4.4%	\$179.30	\$4,254.28
2005	\$895.92	\$180.00	\$715.92	\$10,751.00	\$2,160.00	\$8,591.00	4.2%	\$178.68	\$4,432.96
2006	\$967.58	\$180.00	\$787.58	\$11,611.00	\$2,160.00	\$9,451.00	4.0%	\$177.32	\$4,610.28
2007	\$1,016.00	\$180.00	\$836.00	\$12,192.00	\$2,160.00	\$10,032.00	4.4%	\$202.85	\$4,813.13
2008	\$1,127.75	\$180.00	\$947.75	\$13,533.00	\$2,160.00	\$11,373.00	3.7%	\$178.09	\$4,991.21
2009	\$1,127.75	\$180.00	\$947.75	\$13,533.00	\$2,160.00	\$11,373.00	3.2%	\$159.72	\$5,150.93
2010	\$1,184.14	\$180.00	\$1,004.14	\$14,209.68	\$2,160.00	\$12,050.00	3.4%	\$175.13	\$5,326.06
2011	\$1,243.34	\$180.00	\$1,063.34	\$14,920.08	\$2,160.00	\$12,760.00	3.0%	\$159.78	\$5,485.85
2012	\$1,243.34	\$180.00	\$1,063.34	\$14,920.08	\$2,160.00	\$12,760.00	3.7%	\$202.98	\$5,688.82
2013	\$1,243.34	\$180.00	\$1,063.34	\$14,920.08	\$2,160.00	\$12,760.00			

NOV 18 2013

Payall State Employees									
Year	State Employee Health Insurance			State Employee Health Insurance			CPI-Medical	Inflation	1997 Annual State Expenditure Increased by CPI
	Total Family Monthly Premium	Employee Monthly Family Premium	State Monthly Expenditure	Total Family Annual Premium	Employee Annual Family Premium	State Annual Expenditure			
1997	\$361.72	\$0.00	\$268.14	\$4,340.64	\$0.00	\$4,340.64			\$3,217.68
1998	\$456.20	\$0.00	\$362.62	\$5,474.40	\$0.00	\$5,474.40	3.2%	\$102.97	\$3,320.65
1999	\$470.23	\$0.00	\$362.62	\$5,642.76	\$0.00	\$5,642.76	3.5%	\$116.22	\$3,436.87
2000	\$507.80	\$0.00	\$391.60	\$6,093.60	\$0.00	\$6,093.60	4.1%	\$140.91	\$3,577.78
2001	\$583.96	\$0.00	\$450.34	\$7,007.52	\$0.00	\$7,007.52	4.6%	\$164.58	\$3,742.36
2002	\$508.83	\$0.00	\$508.83	\$6,106.00	\$0.00	\$6,106.00	4.7%	\$175.89	\$3,918.25
2003	\$590.33	\$0.00	\$590.33	\$7,084.00	\$0.00	\$7,084.00	4.0%	\$156.73	\$4,074.98
2004	\$666.83	\$0.00	\$666.83	\$8,002.00	\$0.00	\$8,002.00	4.4%	\$179.30	\$4,254.28
2005	\$715.92	\$0.00	\$715.92	\$8,591.00	\$0.00	\$8,591.00	4.2%	\$178.68	\$4,432.96
2006	\$787.58	\$0.00	\$787.58	\$9,451.00	\$0.00	\$9,451.00	4.0%	\$177.32	\$4,610.28
2007	\$836.00	\$0.00	\$836.00	\$10,032.00	\$0.00	\$10,032.00	4.4%	\$202.85	\$4,813.13
2008	\$947.75	\$0.00	\$947.75	\$11,373.00	\$0.00	\$11,373.00	3.7%	\$178.09	\$4,991.21
2009	\$1,127.75	\$0.00	\$947.75	\$13,533.00	\$0.00	\$13,533.00	3.2%	\$159.72	\$5,150.93
2010	\$1,184.14	\$30.00	\$1,004.14	\$14,209.68	\$360.00	\$13,849.68	3.4%	\$175.13	\$5,326.06
2011	\$1,243.34	\$30.00	\$1,063.34	\$14,920.08	\$360.00	\$14,560.08	3.0%	\$159.78	\$5,485.85
2012	\$1,243.34	\$30.00	\$1,063.34	\$14,920.08	\$360.00	\$14,560.08	3.7%	\$202.98	\$5,688.82
2013	\$1,243.34	\$30.00	\$1,063.34	\$14,920.08	\$360.00	\$14,560.08			

NOV 18 2013