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State/Territory Name: Georgia

State Plan Amendment (SPA) #: GA-18-0027

This file contains the following documents in the order listed:

- 1) Approval Letter
- 2) State Plan Pages

The complete final approved title XXI state plan for Georgia consists of the most recent state plan posted on Medicaid.gov under CHIP and State Plan Amendments. The link is provided below.

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, MD 21244-1850



Children and Adults Health Programs Group

SEP 13 2018

Ms. Stefanie Ashlaw
Interim Director, PeachCare for Kids
State of Georgia, Department of Community Health
2 Peachtree Street, NW, 37th Floor
Atlanta, GA 30303

Dear Ms. Ashlaw:

I am pleased to inform you that your title XXI Children's Health Insurance Program (CHIP) state plan amendment (SPA) number GA-18-0027, submitted on July 16, 2018, has been approved. Through this SPA, Georgia updates its review process for eligibility and enrollment matters to be consistent with the state's Medicaid appeals process. This approval relates only to reviews conducted under the CHIP state plan and does not indicate approval of the Medicaid eligibility and enrollment appeals process. This SPA has an effective date of July 1, 2018.

Your title XXI project officer is Ms. Cassie Lagorio. She is available to answer questions concerning this amendment and other CHIP-related issues. Ms. Lagorio's contact information is as follows:

Centers for Medicare & Medicaid Services
Center for Medicaid and CHIP Services, Mail Stop S2-01-16
7500 Security Boulevard
Baltimore, MD 21244-1850
Telephone: (410) 786-4554
E-mail: Cassandra.Lagorio@cms.hhs.gov

Official communications regarding program matters should be sent simultaneously to Ms. Lagorio and to Ms. Shantrina Roberts, Associate Regional Administrator (ARA) in our Atlanta Regional Office. Ms. Roberts's address is:

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

If you have additional questions or concerns, please contact Ms. Amy Lutzky, Director, Division of State Coverage Programs, at (410) 786-0721. We look forward to continuing to work with you and your staff.

Sincerely,

/ Anne Marie Costello /

Anne Marie Costello
Director

cc: Shantrina Roberts, ARA, CMS Region IV

Section 12. Applicant and enrollee protections (Sections 2101(a))

- Check here if the state elects to use funds provided under Title XXI only to provide expanded eligibility under the state's Medicaid plan.**

Eligibility and Enrollment Matters

12.1 Please describe the review process for eligibility and enrollment matters that complies with 42 CFR 457.1130

Upon any adverse action as described in 42 CFR § 457.1130 (a), the parent or authorized representative (A/R) will be notified by mail of the reason for the adverse action and how to request a review if they believe the decision is in error. The notice of such action will meet the requirements of 457.340(e) and 457.1180. The opportunity for continued enrollment of a suspended or terminated enrollment will meet the requirements of 457.1170. If a hearing notice is required, it will meet the requirements of 457.1140.

A written request for an initial administrative review may be submitted to the TPA, Division of Family and Children Services (DFCS) and forwarded to the Right from the Start Group (RSM Group) for processing which must be completed within 5 days. The request must be submitted within thirty (30) days of the written notification in which s(he) disagrees. If a verbal request is made, the parent or A/R must submit a written request within fifteen (15) days of the original request. If the written request is not received, no further action is required. If the RSM group is able to review the case and determine eligibility was determined correctly, discuss the complaint with the parent or A/R, and a mutual agreement is made, the parent or A/R may choose to withdraw the hearing request. If the RSM group is unable to obtain a hearing withdrawal either verbally or in writing from the parent or A/R, a hearing notice will be mailed to the parent or A/R in which they will have 10 days to respond. If no response is received, the administrative review is considered complete and no further action is required. If the parent or A/R is not satisfied with the outcome of the administrative review, s/he can request a fair hearing which will be submitted to the Legal Services Office (LSO). If the RSM group finds the case was processed incorrectly, it will be corrected, and the same procedures as stated above will be followed accordingly.

The LSO will submit the hearing request to the Georgia Office of State Administrative Hearings (OSAH). OSAH will notify the parent or A/R of the time, place, and date of the hearing. Both the parent or A/R and RSM representative, on behalf of the state, can be present at the hearing. Each will be allowed to present their case to the Administrative Law Judge. The decision of the Administrative Law Judge will be provided in writing and will be final. The final decision could take up to 90 days from the date of the written request.

There will be no further administrative recourse for the parent or A/R or RSM worker.

NOTE: All hearing requests must be forwarded to the Legal Services Office (LSO) regardless of when the request was received. Untimely requests for a hearing will not be considered or forwarded to OSAH except for good cause. All hearing requests, oral or written, including requests received more than 30 days after notification is issued, must be forwarded to LSO within three (3) business days.

The decision of the Administrative Law Judge will be the final administrative recourse available to the parent or A/R. If at any level of the appeal, the child(ren) is/are determined eligible for enrollment in PeachCare for Kids®, the enrollment will become effective retroactive to the first day of the month in which the completed application, including any additional information affecting the outcome of the program's decision is received.

The State assures that in the review process, parents or A/R will have the opportunity to fully participate in the review process; decisions are made in writing; and impartial reviews are conducted in a reasonable amount of time and consideration is given for the need for expedited review when there is an immediate need for health services.