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## **Table of Contents**

**State/Territory Name: Massachusetts**

**State Plan Amendment (SPA) #: MA-14-0006**

This file contains the following documents in the order listed:

- 1) Approval Letter
- 2) SPA Summary Form
- 3) Approved SPA Pages

The complete title XXI state plan for Massachusetts 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>



Children and Adults Health Programs Group

SEP 22 2014

Robin Callahan  
Deputy Medicaid Director  
Massachusetts Executive Office of Health and Human Services  
Office of Medicaid  
1 Ashburton Place, 11<sup>th</sup> Floor  
Boston, MA 02108

Dear Ms. Callahan:

I am pleased to inform you that the Centers for Medicare & Medicaid Services has approved your Children's Health Insurance Program (CHIP) state plan amendment (SPA) number MA-14-0006, submitted on March 28, 2014, with additional information provided on September 17, 2014. This SPA relates to Modified Adjusted Gross Income (MAGI) Eligibility and has an effective date of January 1, 2014.

The SPA number MA-14-0006 is approved to clarify the state's non-financial eligibility policies on residency, citizenship, social security numbers, substitution of coverage, non-payment of premiums and presumptive eligibility. Copies of the approved state plan pages are attached, and these approved pages supersede sections of Massachusetts' current state plan as detailed below:

New State Plan Page	Impact on Current State Plan Section
CS17: Non-Financial Eligibility – Residency	Section 4.1.5
CS18: Non-Financial Eligibility – Citizenship	Section 4.1.0; 4.1-LR; 4.1.1-LR
CS19: Non-Financial Eligibility – Social Security Number	Section 4.1.9.1
CS20: Non-Financial Eligibility – Substitution of Coverage	Section 4.4.4
CS21: Non-Financial Eligibility – Non-Payment of Premiums	Section 8.7
CS28: General Eligibility - Presumptive Eligibility for Children	Section 4.3.2

Your title XXI project officer is Mr. Martin Burian. He is available to answer questions concerning this amendment. Mr. Burian's contact information is as follows:

Centers for Medicare & Medicaid Services  
Center for Medicaid and CHIP Services  
7500 Security Boulevard, Mail Stop S2-01-16  
Baltimore, MD 21244-1850

Telephone: (410) 786-3246  
Facsimile: (410) 786-5882  
E-mail: [Martin.Burian@cms.hhs.gov](mailto:Martin.Burian@cms.hhs.gov)

Official communications regarding program matters should be sent simultaneously to Mr. Burian and to Mr. Richard McGreal, Associate Regional Administrator in our Boston Regional Office. Mr. McGreal's address is:

Centers for Medicare & Medicaid Services  
Division of Medicaid and Children's Health Operations  
JFK Federal Building  
15 New Sudbury St, Room 2325  
Boston, MA 02203-0003

If you have additional questions, please contact Ms. Kelly Whitener, Director, Division of State Coverage Programs, at (410) 786-0719. We look forward to continuing to work with you and your staff toward the approval of your remaining MAGI Eligibility SPAs.

Sincerely,

A solid black rectangular box used to redact the signature of Eliot Fishman.

Eliot Fishman  
Director

Enclosures

cc:  
Richard McGreal, ARA, CMS Region I

Control Panel

General Information

File Management

Tribal Input

Summary

### Children's Health Insurance Program Eligibility: Summary Page

State/Territory Massachusetts

name: **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.

MA-14-0006

#### Type of SPA:

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

#### Proposed Effective Date

01/01/2014 (mm/dd/yyyy)

#### Federal Statute/Regulation Citation

42 CFR 457.320, 42 CFR 457.340(b), Sections 2105(c)(9) and 2107(e)(1)(J) of the SSA an

#### Federal Budget Impact

- This SPA has a budget impact.

Total budget impact:

State Funds: \$ 8316.18

Federal Funds: \$ 15444.34

Please attach a revised CHIP budget.

**Document**

#### Subject of Amendment

Please provide a brief summary of SPA changes.

Character Count: 682 out of 2000

This amendment codifies the states policies related to non-financial eligibility, including requirements related to residency, presumptive eligibility for unborn children determined by qualified hospitals, social-security number, citizenship and substitution of coverage, and non-payment of

#### Signature of State Agency Official

Submitted By: Alison Kirchgasser

Last Revision Sep 23, 2014

Date:

Submit Date: Mar 28, 2014



# CHIP Eligibility

OMB Control Number: 0938-1148

Expiration date: 10/31/2014

## Separate Child Health Insurance Program Non-Financial Eligibility - Residency

CS17

42 CFR 457.320

### Residency

- The CHIP Agency provides CHIP to otherwise eligible residents of the state, including residents who are absent from the state under certain conditions.

A child is considered to be a resident of the state under the following conditions:

- A non-institutionalized child, if capable of indicating intent and who is emancipated or married, if the child is living in the state and:
  1. Intends to reside in the state, including without a fixed address, or
  2. Has entered the state with a job commitment or seeking employment, whether or not currently employed.
- A non-institutionalized child not described above and a child who is not a ward of the state:
  1. Residing in the state, with or without a fixed address, or
  2. The state of residency of the parent or caretaker, in accordance with 42 CFR.435.403(h)(1), with whom the individual resides.
- An institutionalized child, who is not a ward of the state, if the state is the state of residence of the child's custodial parent or caretaker at the time of placement, or
- A child who is a ward of the state regardless of where the child lives, or
- A child physically located in the state when there is a dispute with one or more states as to the child's actual state of residence.

If the state covers pregnant women, a pregnant woman is considered to be a resident under the following conditions:

- A non-institutionalized pregnant woman who is living in the state and:
  1. Intends to reside in the state, including without a fixed address, or if incapable of indicating intent, is living in the state, or
  2. Entered with a job commitment or seeking employment, whether or not currently employed.
- An institutionalized pregnant woman placed in an out-of-state-institution, as defined in 42 CFR 435.1010, including foster care homes, by an agency of the state, or
- An institutionalized pregnant woman residing in an in-state-institution, as defined in 42 CFR 435.1010, whether or not the individual established residency in the state prior to entering the institution, or
- A pregnant woman physically located in the state when there is a dispute with one or more states as to the pregnant woman's actual state of residence.

The state has in place related to the residency of children and pregnant women (if covered by the state):



# CHIP Eligibility

One or more interstate agreement(s).  No

A policy related to individuals in the state only for educational purposes.  No

### 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.

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# CHIP Eligibility

OMB Control Number: 0938-1148

Expiration date: 10/31/2014

## Separate Child Health Insurance Program Non-Financial Eligibility - Citizenship CS18

Sections 2105(c)(9) and 2107(e)(1)(J) of the SSA and 42 CFR 457.320(b)(6), (c) and (d)

### Citizenship

The CHIP Agency provides CHIP eligibility to otherwise eligible citizens and nationals of the United States and certain non-citizens,  including the time period during which they are provided with reasonable opportunity to submit verification of their citizenship, national status or satisfactory immigration status.

The CHIP Agency provides eligibility under the Plan to otherwise eligible individuals:

Who are citizens or nationals of the United States; or

Who are qualified non-citizens as defined in section 431 of the Personal Responsibility and Work Opportunity Reconciliation Act (PRWORA) (8 U.S.C. §1641), or whose eligibility is required by section 402(b) of PRWORA (8 U.S.C. §1612(b)) and is not prohibited by section 403 of PRWORA (8 U.S.C. §1613); or

Who have declared themselves to be citizens or nationals of the United States, or an individual having satisfactory immigration status, during a reasonable opportunity period pending verification of their citizenship, nationality, or satisfactory immigration status consistent with requirements of 1903(x), 1137(d), and 1902(ee) of the Act, and 42 CFR 435.406, 407, 956 and 457.380.

The reasonable opportunity period begins on and extends 90 days from the date the notice of reasonable opportunity is received by the individual.

The agency provides for an extension of the reasonable opportunity period if the individual is making a good faith effort to resolve any inconsistencies or obtain any necessary documentation, or the agency needs more time to complete the verification process.

 Yes

The agency begins to furnish benefits to otherwise eligible individuals during the reasonable opportunity period on a date earlier than the date the notice is received by the individual.

 Yes

The date benefits are furnished is:

The date of application containing the declaration of citizenship or immigration status.

The date the reasonable opportunity notice is sent.

Other date, as described:

The CHIP Agency elects the option to provide CHIP coverage to otherwise eligible children up to age 19, lawfully residing in the United States, as provided in Section 2107(e)(1)(J) of the SSA (Section 214 of CHIPRA 2009, P.L. 111-3).

 Yes

Otherwise eligible children means children meeting the eligibility requirements of targeted low-income children with the exception of non-citizen status.

The CHIP Agency provides assurance that lawfully residing children are also covered under the state's Medicaid program.



# CHIP Eligibility

The CHIP Agency elects the option to provide CHIP coverage to otherwise eligible pregnant women, lawfully residing in the United States, as provided in Section 214 of CHIPRA 2009, P.L. 111-3. The state may not select this option unless the state also elects to cover lawfully residing children. A state may not select this option unless the state also covers Targeted Low-Income Pregnant Women.

No

- An individual is considered to be lawfully residing in the United States if he or she is lawfully present and meets state residency requirements.
- An individual is considered to be lawfully present in the United States if he or she is:
  1. A qualified non-citizen as defined in 8 U.S.C. 1641(b) and (c);
  2. A non-citizen in a valid nonimmigrant status, as defined in 8 U.S.C. 1101(a)(15) or otherwise under the immigration laws (as defined in 8 U.S.C. 1101(a)(17));
  3. A non-citizen who has been paroled into the United States in accordance with 8 U.S.C.1182(d)(5) for less than 1 year, except for an individual paroled for prosecution, for deferred inspection or pending removal proceedings;
  4. A non-citizen who belongs to one of the following classes:
    - (i) Granted temporary resident status in accordance with 8 U.S.C.1160 or 1255a, respectively;
    - (ii) Granted Temporary Protected Status (TPS) in accordance with 8 U.S.C. §1254a, and individuals with pending applications for TPS who have been granted employment authorization;
    - (iii) Granted employment authorization under 8 CFR 274a.12(c);
    - (iv) Family Unity beneficiaries in accordance with section 301 of Pub. L. 101-649, as amended;
    - (v) Under Deferred Enforced Departure (DED) in accordance with a decision made by the President;
    - (vi) Granted Deferred Action status;
    - (vii) Granted an administrative stay of removal under 8 CFR 241;
    - (viii) Beneficiary of approved visa petition who has a pending application for adjustment of status;
  5. Is an individual with a pending application for asylum under 8 U.S.C. 1158, or for withholding of removal under 8 U.S.C.1231, or under the Convention Against Torture, who:
    - (i) Has been granted employment authorization; or
    - (ii) Is under the age of 14 and has had an application pending for at least 180 days;
  6. Has been granted withholding of removal under the Convention Against Torture;
  7. Is a child who has a pending application for Special Immigrant Juvenile status as described in 8 U.S.C.1101(a)(27)(J);
  8. Is lawfully present in American Samoa under the immigration laws of American Samoa; or
  9. Is a victim of severe trafficking in persons, in accordance with the Victims of Trafficking and Violence Protection Act of 2000, Pub. L. 106-386, as amended (22 U.S.C. 7105(b)).

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# CHIP Eligibility

10. Exception: An individual with deferred action under the Department of Homeland Security's deferred action for the childhood arrivals process, as described in the Secretary of Homeland Security's June 15, 2012 memorandum, shall not be considered to be lawfully present with respect to any of the above categories in paragraphs (1) through (9) of this definition.

## 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.

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# CHIP Eligibility

OMB Control Number: 0938-1148

Expiration date: 10/31/2014

## Separate Child Health Insurance Program Non-Financial Eligibility - Social Security Number CS19

42 CFR 457.340(b)

### Social Security Number

As a condition of eligibility, the CHIP Agency must require individuals who have a social security number or are eligible for one as determined by the Social Security Administration, to furnish their social security number, or numbers if they have more than one number.

- The CHIP Agency requires individuals, as a condition of eligibility, to furnish their social security number(s), with the following exceptions:

Individuals refusing to obtain a social security number (SSN) because of well established religious objections, or

Individuals who are not eligible for an SSN, or

Individuals who are issued an SSN only for a valid non-work purpose.

- The CHIP Agency assists individuals, who are required to provide their SSN, to apply for or obtain an SSN from the Social Security Administration if the individual does not have or forgot their SSN.

- The CHIP Agency informs individuals required to provide their SSN:

By what statutory authority the number is solicited; and

How the state will use the SSN.

- The CHIP Agency provides assurance that it will verify each SSN furnished by an applicant or beneficiary with the Social Security Administration, not deny or delay services to an otherwise eligible applicant pending issuance or verification of the individual's SSN by the Social Security Administration and that the state's utilization of the SSNs is consistent with sections 205 and 1137 of the Social Security Act and the Privacy Act of 1974.

The state may request non-applicant household members to voluntarily provide their SSN, if the state meets the requirements below.

The state requests non-applicant household members to voluntarily provide their SSN.

Yes

- When requesting an SSN for non-applicant household members, the state assures that:
- At the time such SSN is requested, the state informs the non-applicant that this information is voluntary and provides information regarding how the SSN will be used; and
  - The state only uses the SSN for determination of eligibility for CHIP or other insurance affordability programs, or for a purpose directly connected with the administration of the state plan.

### PRA Disclosure Statement

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# CHIP Eligibility

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# CHIP Eligibility

OMB Control Number: 0938-1148

Expiration date: 10/31/2014

**Separate Child Health Insurance Program**  
**Non-Financial Eligibility - Substitution of Coverage** **CS20**

457.310(b)(2) and (b)(3), 457.320(a)(9) and 2110(b)(1)(C) of the SSA

**Substitution of Coverage**

The CHIP Agency provides assurance that it has methods and policies in place to prevent the substitution of group health coverage or other commercial health insurance with public funded coverage. These policies include:

Substitution of coverage prevention strategy:

	Name of policy	Description	
+	Monitoring health insurance status at time of application	For all applicants, the Commonwealth performs a health insurance investigation and matching, accessing a comprehensive database. An investigation and matching is performed with all members of the household and their employers to determine if the member is enrolled in employer-sponsored insurance (ESI) that meets a basic benefit level and cost-effectiveness test ("qualifying insurance"). Targeted, more in-depth, investigations are also performed when individuals report on their application that their employer offers health insurance or if the individuals report that they work more than 138 hours per month (approximately 30+ hours per week) to determine if they have access to qualifying ESI but has not yet enrolled. If so, MassHealth will instruct the individuals and their family to enroll. Massachusetts passed legislation that allows for MassHealth members to enroll outside employers' open-enrollment periods, treating a request by MassHealth for enrollment as a qualifying event.	X
+	Mandatory employer sponsored health insurance enrollment and premium assistance for such ESI	Enrollment in ESI is mandatory for all MassHealth-eligible populations with confirmed access to qualifying insurance. If MassHealth-qualifying ESI is available, applicants may receive premium assistance, but may not receive direct coverage. MassHealth does not allow members to opt out of qualifying ESI in order to obtain direct public coverage.	X

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# CHIP Eligibility

+	<p>Monitoring substitution of coverage</p>	<p>MH's premium assistance (PA) program will prevent families from dropping their private health insurance coverage. MH covers children with family incomes at or below 300% FPL through PA if they have access to insurance that is qualifying or through direct coverage if they do not have access to such insurance. Thus, there will be no financial incentive for families to drop private coverage to enroll in MH.</p> <p>To discourage families from dropping their private coverage prior to applying, MH emphasizes in its marketing and outreach materials the availability of PA benefits for insured families. Additionally, when the family applies for MH benefits, MH uses the information included on the Medical Benefit Request (MBR) to complete an intensive health insurance investigation. Through the health insurance investigation, MH will be able to ensure that all applicants who have qualifying private health insurance and all applicants with access to qualifying ESI participate in private coverage.</p> <p>MH continuously monitors the effectiveness of these policies. MH monitors members to determine: how many of those members are required to enroll in ESI; how many had no access to ESI; and how many had access to ESI but were enrolled in direct coverage because the ESI did not meet the minimum requirements as qualifying insurance.</p> <p>The Commonwealth measures the overall changes in the employer-sponsored insurance market through employer surveys. Through these surveys, MH is able to monitor changes both in the overall ESI market and within the large and small group markets. These employer statistics may be used to determine whether changes in the MH Family Assistance population are due to specific employer benefit changes or larger trends in the Commonwealth.</p> <p>MassHealth regularly examines movement between direct coverage and PA within the caseload to measure substitution and determine if current crowd-out prevention strategies are effective.</p>	X
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A waiting period during which an individual is ineligible due to having dropped group health coverage.  No

If the state covers pregnant women, the waiting period does not apply to pregnant women.

If the state elects to offer dental only supplemental coverage, the following assurances apply:

The other coverage exclusion does not apply to children who are otherwise eligible for dental only supplemental coverage as provided in section 2110(b)(5) of the SSA.



# CHIP Eligibility

The waiting period does not apply to children eligible for dental only supplemental coverage.

### PRA Disclosure Statement

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# CHIP Eligibility

OMB Control Number: 0938-1148

Expiration date: 10/31/2014

## Separate Child Health Insurance Program Non-Financial Eligibility - Non-Payment of Premiums CS21

42 CFR 457.570

### Non-Payment of Premiums

Does the state impose premiums or enrollment fees?

Yes

Can non-payment of premiums or enrollment fees result in loss of CHIP eligibility?

Yes

Does the state have a premium lock out period?

Yes

Please describe the lock-out period:

The lockout period begins on the date a member is terminated for non-payment of premiums (which is sixty days after the date on the bill) and ends on the date when the member's coverage can next begin as described below.

What is the length of the time premium lock-out period?

Select a length of time:

- One month
- Two months
- 90 days
- Other (not to exceed 90 days)

Are there exceptions to the required lock-out period?

Yes

- Individual's income decreased to a level where no premium is required or within Medicaid standards
- Other financial hardship

Describe:

The individual has shown to the satisfaction of the Medicaid agency that at the time the premium was incurred or when the individual is seeking to reactivate benefits that the individual had an undue financial hardship or if the Medicaid agency determines that the requirement to pay a premium results in an undue financial hardship for an individual the agency may waive or reduce premium balances.

- Other

	Describe	
<b>+</b>	The individual pays all delinquent amounts that have been billed	<b>X</b>
<b>+</b>	The individual establishes a payment plan and agrees to pay the current premium being assessed and the payment-plan-arrangement amount	<b>X</b>

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# CHIP Eligibility

+

The individual is currently eligible for a MassHealth coverage type that requires a premium payment but they have a delinquent balance from their previous Children's Medical Security Plan coverage.

X

The state assures that:

It does not require the collection of past due premiums or enrollment fees as a condition of eligibility for enrollment once the lock-out period has expired; and

It provides enrollees with an opportunity for an impartial review to address disenrollment from the program in accordance with section 457.1130(a)(3); and

The child will be reenrolled in CHIP during the lock-out period upon payment of past due premiums or enrollment fees.

### PRA Disclosure Statement

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# CHIP Eligibility

OMB Control Number: 0938-1148

Expiration date: 10/31/2014

## Separate Child Health Insurance Program General Eligibility - Presumptive Eligibility for Children CS28

42 CFR 457.355 and 435.1102, 2107(e)(1)(L) and 1920A of the SSA

The CHIP Agency covers children when determined presumptively eligible by a qualified entity.  Yes

Describe the population of children to whom presumptive eligibility applies:

Unborn children of pregnant women with incomes at or below 200% FPL who are not otherwise eligible for MassHealth Standard.

Describe the duration of the presumptive eligibility period and any limitations:

Presumptive eligibility will be determined by qualified hospitals eligible to make hospital presumptive eligibility (HPE) determinations under the state Medicaid program. The HPE period lasts from the time of the presumptive eligibility determination until the end of the following month, or if an individual submits a full application within that time period, until the state Medicaid agency can make a final determination. An individual is eligible for one presumptive eligibility period within a twelve-month period, starting with the effective date of the initial presumptive eligibility period.

Describe the application process and eligibility determination factors used:

Certified Application Councilors (CACs) at hospitals qualified to make presumptive eligibility determinations will assist individuals with the HPE determination.

The presumptive eligibility determination is based on self-attested information of the following factors: the individual's categorical or non-financial eligibility for the group for which the individual's presumptive eligibility is being determined; household size and income; state residency; and citizenship or immigration status.

The CHIP Agency uses qualified entities, as defined in section 1920A, to determine eligibility presumptively for children.

## Separate Child Health Insurance Program CS30 General Eligibility - List of Qualified Entities

A qualified entity is an entity that is determined by the agency to be capable of making presumptive eligibility determinations based on an individual's household income and other requirements, and that meets at least one of the following requirements. Select the types of entities used to determine presumptive eligibility:

- Furnishes health care items and services covered under the approved plan and is eligible to receive payments under the approved plan
- Is authorized to determine a child's eligibility to participate in a Head Start program under the Head Start Act
- Is authorized to determine a child's eligibility to receive child care services for which financial assistance is provided under the Child Care and Development Block Grant Act of 1990
- Is authorized to determine a child's eligibility to receive assistance under the Special Supplemental Food Program for Women, Infants, and Children (WIC) under section 17 of the Child Nutrition Act of 1966

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# CHIP Eligibility

Is authorized to determine a child's eligibility under the Medicaid state plan or for child health assistance under the Children's Health Insurance Program (CHIP)

Is an elementary or secondary school, as defined in section 14101 of the Elementary and Secondary Education Act of 1965 (20 U.S.C. 8801)

Is an elementary or secondary school operated or supported by the Bureau of Indian Affairs

Is a state or Tribal child support enforcement agency under title IV-D of the Act

Is an organization that provides emergency food and shelter under a grant under the Stewart B. McKinney Homeless Assistance Act

Is a state or Tribal office or entity involved in enrollment in the program under Medicaid, CHIP, or title IV-A of the Act

Is an organization that determines eligibility for any assistance or benefits provided under any program of public or assisted housing that receives Federal funds, including the program under section 8 or any other section of the United States Housing Act of 1937 (42 U.S.C. 1437) or under the Native American Housing Assistance and Self Determination Act of 1996 (25 U.S.C. 4101 *et seq.*)

Any other entity the state so deems, as approved by the Secretary

	Name of entity	Description	
<b>+</b>	Qualified Hospitals	A qualified hospital that has elected to make hospital presumptive eligibility determinations under 42 CFR 435.1110	<b>X</b>

The CHIP Agency assures that it has communicated the requirements for qualified entities, at 1920A(b)(3) of the Act, and provided adequate training to the entities and organizations involved. A copy of the training materials has been included.

**An attachment is submitted.**

### PRA Disclosure Statement

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