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## Table of Contents

**State/Territory Name: Oklahoma**

**State Plan Amendment (SPA) #: OK-14-0005**

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 Oklahoma 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: S2-26-12  
Baltimore, Maryland 21244-1850



**Children and Adults Health Programs Group**

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**APR 15 2014**

Nico Gomez, CEO  
Oklahoma Health Care Authority  
2401 NW 23<sup>rd</sup> Street, Suite 1-A  
Oklahoma City, OK 73107

Dear Mr. Gomez:

I am pleased to inform you that the Centers for Medicare & Medicaid Services (CMS) has approved Oklahoma's Children's Health Insurance Program (CHIP) State Plan Amendment (SPA), OK-14-0005 submitted on March 31, 2014. This SPA incorporates the MAGI-based eligibility process requirements in accordance with the Affordable Care Act. The effective date of this SPA is October 1, 2013.

The state is using an interim alternative single streamlined online application and by December 31, 2014, will implement a revised alternative single streamlined online application that addresses CMS concerns outlined in the companion letter issued with this SPA approval.

Enclosed is a copy of the following CS24 state plan pages and attachments to be incorporated within a separate section at the end of Oklahoma's approved state plan:

- CS24
- Attachment 1 – Statement of use with respect to the alternative single streamlined online application

This approval and the attachments supercede the following sections of the current CHIP State Plan:

- Section 4.3: Single Streamlined Application Screen and Enroll Process
- Section 4.4: Renewals, Screening by Other Insurance Affordability Programs

Page 2 – Mr. Nico Gomez

The CMS appreciates the significant amount of work your staff dedicated to preparing this State Plan Amendment. Your title XXI project officer is Ms. Victoria Collins. She is available to answer questions concerning this amendment and other CHIP-related issues. Ms. Collins' contact information is as follows:

Centers for Medicare & Medicaid Services  
Center for Medicaid and CHIP Services  
Mail Stop: S2-01-16  
7500 Security Blvd.  
Baltimore, MD 21244-1850  
Telephone: (410) 786-2176  
Facsimile: (410) 786-5882  
E-mail: Victoria.Collins@cms.hhs.gov

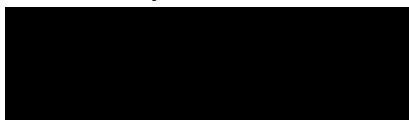
Official communications regarding program matters should be sent simultaneously to Ms. Collins and to Mr. Bill Brooks, Associate Regional Administrator (ARA) in our Dallas Regional Office. Mr. Brook's address is:

Mr. Bill Brooks  
Centers for Medicare and Medicaid Services  
Office of the Regional Administrator  
1301 Young St. Suite 714  
Dallas, TX 75202

If you have additional questions, please contact Barbara K. Richards, Acting Director, Division of State Coverage Programs at 410-786-5920.

We look forward to continuing to work with you and your staff.

Sincerely,



Eliot Fishman  
Director

Enclosure

cc:

Mr. Bill Brooks, Associate Regional Administrator, CMS Region VI, Dallas

DEPARTMENT OF HEALTH & HUMAN SERVICES  
Centers for Medicare & Medicaid Services  
7500 Security Boulevard, Mail Stop: S2-26-12  
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**Children and Adults Health Programs Group**

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**APR 15 2014**

Nico Gomez, CEO  
Oklahoma Health Care Authority  
2401 NW 23<sup>rd</sup> Street, Suite 1-A  
Oklahoma City, OK 73107

RE: CS24 – Eligibility Process State Plan Amendment (SPA), OK-14-0005

Dear Mr. Gomez:

This letter is being sent as a companion to Centers for Medicare & Medicaid Services (CMS) approval of Oklahoma’s state plan amendment (SPA) transmittal OK-14-0005. Our review of this submission included a review of the online alternative single streamlined application developed by the state.

Until December 31, 2014, the state is using an interim alternative single streamlined online application. This interim application needs to be revised to reflect the following three changes.

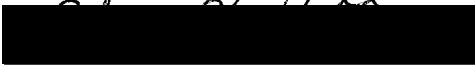
<b>Necessary changes:</b>	<b>Date by which changes will be completed:</b>
The state will disable pre-ACA income determination rules and remove non-MAGI income types and childcare expenses from the online application.	April 30, 2014
The state will provide an opportunity for household members to indicate whether or not they are applying for coverage. Household members not seeking coverage for themselves will not be asked for citizenship and immigration status information. The request for a non-applicant’s Social Security Number will include notice that its provision is optional.	December 31, 2014

Necessary changes:	Date by which changes will be completed:
The state will remove all Absent Parent questions from the application, beyond identifying whether any child has an absent parent, and a question about agreement to cooperate with the state to obtain medical support information post-eligibility.	December 31, 2014

Please submit the revised alternative single streamline online application to CMS for review no later than December 1, 2014, to ensure approval by December 31, 2014. We continue to be available to provide technical assistance. If you have any questions about your application, please contact Victoria Collins at [Victoria.Collins@cms.hhs.gov](mailto:Victoria.Collins@cms.hhs.gov) or (410) 786-2167.

We look forward to continuing to work with you and your staff.

Sincerely,

  
Barbara K. Richards  
Acting Director  
Division of State Coverage Programs

cc:  
Mr. Bill Brooks, Associate Regional Administrator, CMS Region VI, Dallas

logged in as TONIABROWN(CMS CO Staff)

read only mode

application rev p01

## Children's Health Insurance Program Eligibility

OK.0894.R00.00 - Jan 01, 2014

Home

Logout

Finder

Save

Validate

Print

Help

**Control Panel****General Information****File Management****Tribal Input****Summary**

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

State/Territory name: Oklahoma

**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.*

OK-14-0005

**Type of SPA:**

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

**Proposed Effective Date**

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

**Federal Statute/Regulation Citation**

2102(b)(3) &amp; 2107(e)(1)(O) of the SSA and 42 CFR 457, subpart C

**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: 94 out of 2000

Single Streamlined Application, Screen and Enroll Process,  
Renewals, Screenings by other IAPs.

**Signature of State Agency Official**

Submitted By: Tywanda Cox

Last Revision Date: Oct 2, 2014

Submit Date: Mar 31, 2014

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[FAQs](#) | [Site Map](#) | [Contact](#) | [Medicaid.gov](#) | [CMS.gov](#)

**USE OF THE ALTERNATIVE SINGLE STREAMLINED APPLICATION**

Paper Application

Online Application

**TRANSMITTAL NUMBER:**

OK-14-0005

**STATE:**

Oklahoma

Through December 31, 2014, the state is using an interim alternative single streamlined application. After December 31, 2014, the state will use a revised alternative single streamlined application. The revised application will address the issues outlined in the CMS letter, which was issued with the approval of this state plan amendment, concerning the state's application. The revised application will be incorporated by reference into the state plan.





# CHIP Eligibility

OMB Control Number: 0938-1148

Expiration date: 10/31/2014

## Separate Child Health Insurance Program General Eligibility - Eligibility Processing

CS24

2102(b)(3) & 2107(e)(1)(O) of the SSA and 42 CFR 457, subpart C

- The CHIP Agency meets all of the requirements of 42 CFR 457, subpart C for application processing, eligibility screening and enrollment.

### Application Processing

Indicate which application the agency uses for individuals applying for coverage who may be eligible based on the applicable modified adjusted gross income standard:

- The single, streamlined application developed by the Secretary in accordance with section 1413(b)(1)(A) of the Affordable Care Act.
- An alternative single, stream lined application developed by the state and approved by the Secretary in accordance with section 1413(b)(1)(B) of the Affordable Care Act.

An attachment is submitted.

- An alternative application used to apply for multiple human service programs approved by the Secretary, provided that the agency makes readily available the single or alternative application used only for insurance affordability programs to individuals seeking assistance only through such programs.

An attachment is submitted.

- The agency's procedures permit an individual, or authorized person acting on behalf of the individual, to submit an application via the internet website described in CFR 457.340(a), by telephone, via mail, in person and other commonly available electronic means.

The agency accepts applications in the following other electronic means.

- Other electronic means:

### Screen and Enroll Process

- The CHIP Agency has coordinated eligibility and enrollment screening procedures in place that are applied at time of initial application, periodic redeterminations, and follow-up eligibility determinations. The procedures ensure that only targeted low-income children are provided CHIP coverage and that enrollment is facilitated for applicants found to be potentially eligible for other insurance affordability programs.

Procedures include:

- Screening of application to identify all individuals eligible or potentially eligible for CHIP or other insurance affordability programs; and
- Income eligibility test, with calculation of household income consistent with 42 CFR 457.315 for individuals identified as potentially eligible for Medicaid or other insurance affordability programs based on household income; and



# CHIP Eligibility

- Screening process for individuals who may qualify for Medicaid on a basis other than having household income at or below the applicable MAGI standard, based on information in the single stream lined application.

The CHIP agency has entered into an arrangement with the Exchange to make eligibility determinations for advanced premium tax credits in accordance with section 1943(b)(2) of the SSA.

No

## Redetermination Processing

- Redeterminations of eligibility for individuals whose financial eligibility is based on the applicable modified adjusted gross income standard are performed as follows, consistent with 42 CFR 457.343:
  - Once every 12 months.
  - Without requiring information from the individual if able to do so based on reliable information contained in the individual's account or other more current information available to the agency.
- If the agency cannot determine eligibility solely on the basis of the information available to it, or otherwise needs additional information to complete the redetermination, it provides the individual with a pre-populated renewal form containing the information already available.

## Screening by Other Insurance Affordability Programs

- The CHIP Agency provides assurance that it has adopted procedures to accept and process electronic accounts of individuals screened as potentially eligible for CHIP by other insurance affordability programs in accordance with the requirements of 42 CFR 457.348(b) and to determine eligibility in accordance with 42 CFR 457.340 in the same manner as if the application had been submitted directly to, and processed by the state.

The CHIP Agency elects the option to accept CHIP eligibility decisions made by the Exchange or other agencies administering insurance affordability programs as provided in 42 CFR 457.348 and to furnish CHIP in accordance with requirements of 42 CFR 457.340 to the same extent and in the same manner as if the applicant had been determined by the state to be eligible for CHIP.

- The CHIP Agency has entered into an agreement with agencies administering other insurance affordability programs to fulfill the requirements of 457.348(b) and will provide this agreement to the Secretary upon request.

## 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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