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State/Territory Name: Texas

State Plan Amendment (SPA) #: TX-14-0033

This file contains the following documents in the order listed:

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

The complete title XXI state plan for Texas 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: XXI state plans and amendments:
<http://medicaid.gov/chip/state-program-information/chipstate-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

NOV 05 2014

Ms. Kay Ghahremani
Texas State Medicaid and CHIP Director
11209 Metric Blvd
P.O. Box 85200 H-100
Austin, Texas 78708-5200

Dear Ms. Ghahremani:

I am pleased to inform you that your Children's Health Insurance Program (CHIP) state plan amendment (SPA) number TX-14-0033, submitted on March 31, 2014, and related to Modified Adjusted Gross Income (MAGI) Eligibility, and has been approved with an effective date of January 1, 2014.

The SPA number TX-14-0033 converts the state's existing income eligibility standards to 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 Medicaid expansion Section (4.0) of the current CHIP state plan.

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:

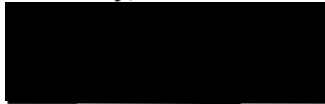
Centers for Medicare & Medicaid Services
Center for Medicaid and CHIP Services
Mail Stop: S2-01-16
7500 Security Blvd.
Baltimore, MD 21244-1850
Telephone: (410) 786-2176
Facsimile: (410) 786-5882
E-mail: Victoria.Collins@cms.hhs.gov

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

Mr. Bill Brooks
Centers for Medicare & Medicaid Services
Dallas Regional Office
1301 Young Street Room #714
Dallas, TX 75202

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,



Eliot Fishman
Director

Enclosures

cc:
Mr. Bill Brooks, ARA, CMS Dallas Region



CHIP Eligibility

State Name:

OMB Control Number: 0938-1148

Transmittal Number: TX - 14 - 0033

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)	
+	6	19	109	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.

V.20140415

NOV 05 2014

Children's Health Insurance Program Eligibility

TX.0888.R00.00 - Jan 01, 2014

Home Logout Finder Save Validate Print Help

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General Information

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Tribal Input

Summary

Children's Health Insurance Program Eligibility: Summary Page

State/Territory Texas 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.

TX-14-0033

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

42 CFR 457.320(a)(2) and (3)

Federal Budget Impact

This SPA has a budget impact.

Total budget impact:

State Funds: \$

Federal Funds: \$

Please attach a revised CHIP budget.

Document

Please provide a short description of this support document:

Document	
Character Count:0	out of 2000
<div style="border: 1px solid black; height: 40px;"></div>	
Uploaded Document Name:	Date Uploaded:
<div style="border: 1px solid black; height: 20px;"></div>	

Subject of Amendment

Please provide a brief summary of SPA changes.

Character Count:463 out of 2000

Federal law requires that children ages 6 through 18 with household income at or below 133 percent of the Federal Poverty Level (FPL) are eligible for Medicaid. The proposed amendments provide that children whose household income is above 100 percent, up to and including 133 percent of the FPL, will be

Signature of State Agency Official

Submitted By: Meghan Young

Last Revision Date: Apr 9, 2015

Date:

Submit Date: Mar 31, 2014

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CONTINUE