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State/Territory Name: Utah

State Plan Amendment (SPA) #: UT-17-0001-MC

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 Utah 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.

 $\label{link-to-state} \begin{tabular}{ll} Link to state title XXI state plans and amendments: $$ \underline{http://medicaid.gov/Medicaid-CHIP-Program-Information/By-Topics/Childrens-Health-Insurance-Program-CHIP/CHIP-State-Program-Information.html $$ \underline{http://medicaid.gov/Medicaid-CHIP-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

APR 2 7 2017

Jeff Nelson CHIP Director Division of Medicaid and Health Financing P.O. Box 143101 Salt Lake City, UT 84114-3101

Dear Mr. Nelson:

I am pleased to inform you that your title XXI Children's Health Insurance Program (CHIP) state plan amendment (SPA), UT-17-0001-MC, submitted on February 6, 2017, with additional information submitted on April 25, 2017, has been approved. This SPA has an effective date of January 1, 2017.

This SPA clarifies the state's policy on household composition under 42 CFR 457.315. Married couples who are living separately will be treated as individual households, even when filing a joint tax return. The state has an approved Medicaid SPA, UT-17-0003-MM, that also implements this policy. That SPA was approved on April 21, 2017, with an effective date of January 1, 2017.

Your title XXI project officer is Ms. Joyce Jordan. She is available to answer questions concerning this amendment and other CHIP-related issues. Ms. Jordan'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) 786-3413 Facsimile: (410) 786-5882

E-mail: Joyce.Jordan@cms.hhs.gov

Official communications regarding program matters should be sent simultaneously to Ms. Jordan and to Mr. Richard Allen, Associate Regional Administrator (ARA) in our Denver Regional Office. Mr. Allen's address is:

Page 2 – Mr. Jeff Nelson

Centers for Medicare & Medicaid Services 1961 Stout Street Room 08-148 Denver, Colorado 80294

If you have additional questions, 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 Director

cc:

Richard Allen, ARA, CMS Region VIII, Denver

Program Eligibility Logout Print Help Home Finder Save Validate UT.3318.R00.00 - Jan 01, 2017 **Control Panel** Children's Health Insurance Program Eligibility: Summary Page General Information Utah State/Territory Transmittal Number: File Management name: Please enter the Transmittal Number (TN) in the format ST-YY-0000 where ST= the state abbreviation, YY = the last two Tribal Input digits of the submission year, and 0000 = a four digit number with leading zeros. The dashes must also be entered. Summary UT-17-0001 Type of SPA: MAGI Eligibility & Methods XXI Medicaid Expansion Establish 2101(f) Group Eligibility Processing Non-Financial Eligibility **Proposed Effective Date** 01/01/2017 (mm/dd/yyyy) Federal Statute/Regulation Citation Pub L. No. 111-148 **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: 126 This amendment clarifies that the State will treat separated spouses as separate households when determining CHIP eligibility. Signature of State Agency Official Submitted By: Craig Devashrayee Last Revision Apr 25, 2017 Date: Submit Date: Feb 6, 2017

BACK

CONTINUE



SPA# UT-17-0001-MC

CHIP Eligibility

State Name: Utah	OMB Control Number: 0938-114
Transmittal Number: UT - 17 - 0001	
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 below, and consistent with 42 CFR 457.315 and 435.603(b) the	e methodologies for all separate CHIP covered groups, as described cough (i).
In the case of determining ongoing eligibility for enrollees det based income methodologies will not be applied until March 3 whichever is later.	ermined eligible for CHIP on or before December 31, 2013, MAGI-1, 2014 or the next regularly-scheduled renewal of eligibility,
If the state covers pregnant women, in determining family size as herself plus each of the children she is expected to deliver.	for the eligibility determination of a pregnant woman, she is counted
In determining family size for the eligibility determination of t	he 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 on	e.
• The pregnant woman is counted as herself, plus the nur	mber of children she is expected to deliver.
Financial eligibility is determined consistent with the following	g provisions:
When determining eligibility for new applicants, financial elig	ibility is based on current monthly income and family size.
When determining eligibility for current beneficiaries, financia	al eligibility is based on:
Current monthly household income and family size.	
Projected annual household income for the remaining r	nonths 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	e increase in future income and/or family size.
Account for a reasonably predictable decrease in future	e income and/or family size.
every individual included in the individual's household.	ugh (d)(4), household income is the sum of the MAGI-based income of
Household income includes actually available cash support, exby the person claiming an individual described at §435.603(f)(ceeding nominal amounts, provided No
The CHIP Agency certifies that it has submitted and receiv income standards to MAGI-equivalent standards.	ed approval for the conversion for all separate CHIP covered group
An attachmen	ls submitted?
	····

APR 2 7 2017
Approval Date: ______ Effective Date: January 1, 2017



CHIP Eligibility

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.20160722

Approval Date: APR 2 7 2017

MAGI-Based Income Methodologies (Attachment to CS15)	
TRANSMITTAL NUMBER:	STATE:
UT-17-0001	Utah
each other's households only when they	on under 42 CFR 457.315, the state will include married couples in are physically living together (with the exception of temporary turn. The state shall apply this policy consistently for all such joint fMAGI-based methodologies.