
Table of Contents

State/Territory Name: Washington

State Plan Amendment (SPA) #: WA-14-0003

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 Washington 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: S2-26-12

Baltimore, Maryland 21244-1850



Children and Adults Health Programs Group

MAR 1 8 2015

Ms. Mary Wood CHIP Director Eligibility Policy & Service Delivery Washington State Health Care Authority 626 8th Avenue SE Olympia, WA 98504-5534

Dear Ms. Wood:

I am pleased to inform you that the Centers for Medicare & Medicaid Services has approved your title XXI Children's Health Insurance Program (CHIP) state plan amendment (SPA) number WA-14-0003 submitted on May 21, 2014. This SPA relates to Modified Adjusted Gross Income (MAGI) Eligibility and has an effective date of January 1, 2014.

The SPA number WA-14-0003 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 continuous eligibility. Copies of the approved state plan pages are attached and these approved pages supersede sections of Washington's 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
CS23: Non-Financial Eligibility – Other Eligibility Standards	Section 4.1.9

Your title XXI project officer, Ms. Victoria Collins, 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 Ms. Carol Peverly, Associate Regional Administrator (ARA), in our Seattle Office. Ms. Peverly's address is:

Office of the Regional Administrator 701 Fifth Avenue, Suite 1600 Seattle, WA 98104

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:

Ms. Carol Peverly, ARA, CMS Seattle Region

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

MAR 1 8 2015

Mary Wood
CHIP Director
Eligibility Policy & Service Delivery
Washington State Health Care Authority
626 8th Avenue SE
Olympia, WA 98504-5534

Dear Ms. Wood:

The Centers for Medicare & Medicaid Services (CMS) has recently completed the review and approval of Washington CHIP state plan amendment (SPA) WA-14-0003 related to non-financial eligibility matters, including the state's policies related to non-payment of premiums. In the course of our review of SPA WA-14-0003, however, we determined that state systems are not yet in compliance with one aspect of the federal CHIP rules regarding premium lock-out periods. This letter documents the agreed upon timing and mitigation strategies associated with the state coming into full compliance with our regulations regarding premium lock-out periods.

Consistent with final rulemaking published in the Federal Register on July 15, 2013, states may not require the collection of past due premiums as a condition of eligibility for enrollment once the lock-out period has ended, and may not have a premium lock-out period that exceeds 90 days as specified at 42 CFR 457.570. Washington informed us during the SPA review process that current system functionality is incapable of reinstating coverage to children at the end of the state's 90 day lock-out period regardless of premium payment status. The state will implement a system change to correct this lack of functionality no later than July 1, 2015. After the system change is implemented, the state will be able to enroll children still eligible for CHIP, once the 90 day lock-out period has elapsed.

In the interim, the state has been approved to implement a mitigation strategy to enroll eligible children whose 90 day premium lock-out period has already elapsed. Washington will identify children who were dis-enrolled from CHIP due to non-payment of premiums and have been without CHIP coverage for at least 90 days. Children in families earning above 210 percent up to and including 312 percent of the Federal poverty level terminated for non-payment of premiums that have exceeded the 90 day lock-out period will be sent a letter with a paper application and return envelope. The letter will instruct parents who would like reconsideration for CHIP to complete and return the enclosed application. Applications will be directed to a

Page 2 – Ms. Mary Wood

specialty unit for processing to determine if the family continues to meet all of the eligibility requirements for CHIP. Families who return the application and continue to have CHIP-eligible children will have CHIP restored back to the first month following the 90 day lock-out period. Before the state requests additional information, Washington has assured us that eligibility staff will make every effort to reconcile inconsistencies using available electronic data sources, and attempt to call the applicant to resolve any inconsistencies. A reasonable opportunity will be provided to reconcile any discrepancies.

We are available to provide technical assistance during this time. If you have any questions or wish to discuss this issue further, your staff may contact Vickie Collins at (410) 786-2176. She will provide or arrange for any technical assistance that you may require. Thank you for your cooperation.

Sincerely,

Kelly Whitener Director, Division of State Coverage Programs

cc:

Kevin Cornell, CHIP Program Manager Ms. Carol Peverly, ARA, CMS Seattle Region WA.1019.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 Washington

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.

WA 14-0003

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 457.310, 320, 342, 570 and 42 CFR 435.926

Federal Budget Impact

This SPA has a budget impact.

Total budget impact:

State Funds: \$ 6208255.00

Federal Funds: \$ 11529616.00

Please attach a revised CHIP budget.

Please provide a short description of this support document: Character Count: 25 out of 2000 WA State CHIP Budget Plan Uploaded Document Name: Date Uploaded: WA State CHIP Budget Plan FFY14-FFY15 6-30-14.xlsx Download

Subject of Amendment

Please provide a brief summary of SPA changes.

Character	Count:25	out	of	2000
eligibility				
				^
		Character Count: 25 eligibility		

Signature of State Agency Official

Submitted By: Ann Myers

Last Revision Jan 7, 2015

Date:

Submit Date: May 21, 2014



OMB Control Number: 0938-1148

Expiration date: 10/31/2014

Separate Child Health Insurance Program Non-Financial Eligibility - Residency

CS17

42 CFR 457.320

SPA# WA 14-0003

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):

Approval Date: MAR 1 8 2015 Effective Date: January 1, 2014



One or r	more interstate agreement(s). No
A p	policy related to individuals in the state only for educational purposes. Yes
	Provide a description of the policy:
	Individuals who are living in the state solely for the purposes of attending an educational institution are not considered residents of the state.

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.

MAR 1 8 2015

Approval Date:



Separate Child Health Insurance Program

CHIP Eligibility

OMB Control Number: 0938-1148

Expiration date: 10/31/2014

Non-Financial Eligibility - Citizenship
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.
The agency begins to furnish benefits to otherwise eligible individuals during the reasonable opportunity period on a date yes earlier than the date the notice is received by the individual.
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).
Otherwise eligible children means children meeting the eligibility requirements of targeted low-income children with the

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

Effective Date: January 1, 2014 Page 1 of 3 Approval Date: MAR 1 8 2015



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 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 a coordance 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)).

MAR 1 8 2015

Approval Date:_____

Effective Date: January 1, 2014

SPA# WA 14-0003

Page 2 of 3



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.

MAR 1 8 2015

Approval Date:_____

Effective Date: January 1, 2014

Page 3 of 3

SPA# WA 14-0003



CHIP Eligibility

OMB Control Number: 0938-1148

Expiration date: 10/31/2014

	rate Child Health Insurance Program Financial Eligibility - Social Security Number	CS19
12 CFI	R 457.340(b)	
Social	Security Number	
de	s a condition of eligibility, the CHIP Agency must require individuals who have a social security number or are eligible for one etermined by the Social Security Administration, to furnish their social security number, or numbers if they have more than one number.	
V	The CHIP Agency requires individuals, as a condition of eligibility, to furnish their social security number(s), with the follo exceptions:	wing
	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.	
V	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 and 1137 of the Social Security Act and the Privacy Act of 1974.	
Th	he state may request non-applicant household members to voluntarily provide their SSN, if the state meets the requirements be	low.
	The state requests non-applicant household members to voluntarily provide their SSN.	
	✓ 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 for a purpose directly connected with the administration of the state plan.	s, or
	PRA Disclosure Statement	

TRA Disclosure Statement

MAR 1 8 2015

Approval Date: _____ Effective Date: January 1, 2014



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.

MAR 1 8 2015

Approval Date: Effective Date: January 1, 2014



OMB Control Number: 0938-1148

Expiration date: 10/31/2014

Separate Child Health Insuran	
Non-Financial Eligibility – Sub	

CS20

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

Substitution of Coverage

SPA# WA 14-0003

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	
1.	Tracking of the number of applicants who drop group health insurance	Each applicant will be asked if they have dropped group health insurance coverage in the 4 months preceding their application. If the incidence of dropped coverage exceeds 5% of approved applications, the Agency will conduct a survey to see if one of nine "good cause" reasons apply. The outcome of the survey will determine if substitution of coverage is a substantial enough issue to require implementation of a waiting period not to exceed the statutory maximum.	×

A waiting period during which an individual is ineligible due to having dropped group health coverage.

	•
kт.	
ENO.	
F	

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

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.20130718

MAR 1 8 2015

Approval Date:_ Effective Date: January 1, 2014



CHIP Eligibility

State Name:	Washington	OMB Control Number: 09	938-1148
Transmittal N	Number: WA - 14 - 0005	Expiration date: 10)/31/2014
	Child Health Insurance Program ncial Eligibility - Non-Payment of Premium	S	CS21
42 CFR 457.	570		
Non-Paymei	nt of Premiums		
Does the stat	te impose premiums or enrollment fees?		Yes
Can non	n-payment of premiums or enrollment fees result in loss	of CHIP eligibility?	Yes
Doe	es the state have a premium lock out period?		Yes
	Please describe the lock-out period:		
	period not to exceed 90 days. The family may resolve reporting a change in their circumstances resulting in premium at any time during the initial certification pe	3 consecutive months, coverage is suspended for CHIP for a this suspension at any time by paying the delinquent premiur eligibility for Medicaid. If the family pays the delinquent criod, eligibility will be restored to the first day of the lock-our efamily does not pay the delinquent premium, they will need eligibility for CHIP redetermined.	t
	What is the length of the time premium lock-out perio	d?	
	Select a length of time:	•	
	One month		·
	C Two months		
	• 90 days		
	Other (not to exceed 90 days)		
Are	e 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		
	Other		
		Describe	
	The debt is written off after twelve mon	ths	
	The family pays the delinquent premium	during the lock-out period	
V	The state assures that:		
	to the section of the constant and	s or enrollment fees as a condition of eligibility for enrollment	t once the
<u> </u>		MAR 1 8 2015	

Approval Date: Effective Date: January 1, 2014



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

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

MAR 1 8 2015

Effective Date: January 1, 2014 Approval Date:

SPA# WA 14-0003 Page 2 of 2



CHIP Eligibility

OMB Control Number: 0938-1148

Expiration date: 10/31/2014

PRA Disclosure Statement

MAR 1 8 2015

Approval Date: _____ Effective Date: January 1, 2014



CHIP Eligibility

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.20130717

MAR 1 8 2015

Approval Date: Effective Date: January 1, 2014

Page 2 of 2