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State/Territory Name: Arkansas

State Plan Amendment (SPA) #: AR-13-0022

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 Arkansas 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: S2-01-16

Baltimore, Maryland 21244-1850



Children and Adults Health Programs Group

DEC 1 9 2013

Andrew Allison, Ph.D.
Director, Division of Medical Services
Arkansas Department of Human Services
P.O. Box 1437, Slot S-401
700 Main Street
Little Rock, AR 72203

Dear Dr. Allison:

I am pleased to inform you that your Title XXI Children's Health Insurance Program (CHIP) state plan amendment (SPA) number AR-13-0022, submitted on September 23, 2013, and related to Modified Adjusted Gross Income (MAGI) Eligibility has been approved with an effective date of January 1, 2014.

MAGI Eligibility & Methods:

SPA number AR-13-0022 provides assurance on page CS15 that the state will apply methodologies based on MAGI for all separate CHIP covered groups; and, using the approved MAGI conversion plan income thresholds, the state indicates on page CS9 that it will cover children from conception to birth when the mother is not eligible for Medicaid. A copy of the approved CS15 is attached and should be incorporated within a separate subsection under Section 4.3 of the state's approved CHIP state plan. A copy of the approved CS9 is attached and supersedes the current Geographic Area, Age and Income Sections 4.1.1, 4.1.2 and 4.1.3 of the current CHIP state plan.

Your Title XXI project officer is Ms. Victoria Collins. She is available to answer questions concerning this amendment. Ms. Collins's contact information is as follows:

Centers for Medicare & Medicaid Services Center for Medicaid & CHIP Services 7500 Security Boulevard, Mail Stop S2-01-16 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 Mr. Bill Brooks, Associate Regional Administrator, Division of Medicaid and Children's Health Operations, in our Dallas Regional Office. Mr. Brooks's address is:

Centers for Medicare & Medicaid Services Division of Medicaid and Children's Health Operations 1301 Young Street, Room 714 Dallas, TX 75202

If you have additional questions, please contact Ms. Linda Nablo, Director, Division of State Coverage Programs, at (410) 786-5143. 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: Bill Brooks, ARA, CMS Region VI, Dallas

logged in as TONIABROWN(CMS CO Staff) read only mode application rev p01 Children's Health Insurance **Program Eligibility** Home Finder Save Print Help AR.0342.R00.00 - Jan 01, 2014 Logout **Control Panel** Children's Health Insurance Program Eligibility: Summary **General Information** Page **File Management** State/Territory name: Arkansas **Transmittal Number: Tribal Input** 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 Summary digit number with leading zeros. The dashes must also be entered. AR-13-0022 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 **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:71 CHIP State Plan is being amended to add MAGI-Based Income Methodologies **Signature of State Agency Official** Submitted By: Glenda Higgs Last Revision Date: Dec 17, 2013 Sep 23, 2013 Submit Date:



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CHIP Eligibility

OMB Control Number: 0938-1148

	Expiration date: 10/31/2014
man,	eparate Child Health Insurance Program (AGI-Based Income Methodologies)
21	02(b)(1)(B)(v) of the SSA and 42 CFR 457.315
¥	The CHIP Agency will apply Modified Adjusted Gross Income methodologies for all separate CHIP covered groups, as described below, and consistent with 42 CFR 457.315 and 435.603(b) through (i).
	In the case of determining ongoing eligibility for enrollees determined eligible for CHIP on or before December 31, 2013, MAGI-based income methodologies will not be applied until March 31, 2014 or the next regularly-scheduled renewal of eligibility, whichever is later.
	If the state covers pregnant women, in determining family size for the eligibility determination of a pregnant woman, she is counted as herself plus each of the children she is expected to deliver.
	In determining family size for the eligibility determination of the 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 one.
	The pregnant woman is counted as herself, plus the number of children she is expected to deliver.
	Financial eligibility is determined consistent with the following provisions:
	When determining eligibility for new applicants, financial eligibility is based on current monthly income and family size.
	When determining eligibility for current beneficiaries, financial eligibility is based on:
	© Current monthly household income and family size.
	Projected annual household income for the remaining months 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 increase in future income and/or family size.
	Account for a reasonably predictable decrease in future income and/or family size.
	Except as provided at 42 CFR 457.315 and 435.603(d)(2) through (d)(4), household income is the sum of the MAGI-based income of every individual included in the individual's household.
	Household income includes actually available cash support, exceeding nominal amounts, provided by the person claiming an individual described at §435.603(f)(2)(i) as a tax dependent.
	The CHIP Agency certifies that it has submitted and received approval for the conversion for all separate CHIP covered group income standards to MAGI-equivalent standards.

PRA Disclosure Statement

An attachment is submitted.

DEC 1 9 2013 Approval Date:



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.20130917



CHIP Eligibility

OMB Control Number: 0938-1148 Expiration date: 10/31/2014

2.552 (5.87)	parate Child Health Insurance Program gibility - Coverage From Conception to Birth	CS9	
42 CFR 457.10			
	Coverage From Conception to Birth - Coverage from conception to birth when the mother is not eligible for Medicaid.	· · · · · · · · · · · · · · · · · · ·	
	☑ The CHIP Agency operates this covered group in accordance with the following provisions:		
Age	Standard		
	From conception through birth.		
	Does the state have an additional age definition or other age-related conditions? No		
Inco	ome Standards		
	Income standards are applied statewide. Yes		
	Are there any exceptions, e.g. populations in a county which may qualify under either a statewide income standard or a county income standard?	No	
:	Statewide Income Standard		
	The statewide income standard is: From zero up to 209 % FPL		
	Exempted from requirement of providing or applying for a Social Security Number.		
	Exempted from requirement of verifying citizenship status.		

PRA Disclosure Statement

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