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**State/Territory Name: Kansas**

**State Plan Amendments (SPA) #: KS-19-0024**

This file contains the following documents in the order listed:

- 1) Approval Letter
- 2) Companion Letter
- 3) Approved SPA Pages

Children and Adults Health Programs Group

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August 12, 2020

Ms. Sarah Fertig  
Medicaid Director  
State of Kansas, Department of Health and Environment  
900 SW Jackson Avenue Suite 900  
Topeka, KS 66612-1220

Dear Ms. Fertig:

Your title XXI Children's Health Insurance Program (CHIP) state plan amendment (SPA), KS-19-0024, submitted on December 30, 2019, with additional information provided August 10, 2020, has been approved. This SPA updates Kansas' alternative single streamline paper and online applications effective October 1, 2020. The state received approval for the same type of amendment to its Medicaid program under Medicaid SPA KS-19-0023 approved on July 13, 2020.

The paper and online applications will need to be revised to meet the required changes as identified in the companion letter issued with this approval.

Your title XXI project officer is Ms. Kristin Edwards. She is available to answer questions concerning these amendments. Ms. Edwards' contact information is as follows:

Centers for Medicare & Medicaid Services  
Center for Medicaid and CHIP Services  
7500 Security Boulevard, Mail Stop S2-01-16  
Baltimore, MD 21244-1850  
Telephone: (410) 786-5480  
E-mail: kristin.edwards@cms.hhs.gov

If you have additional questions or concerns, please contact Ms. Meg Barry, Acting Director, Division of State Coverage Programs, at (410) 786-1536. We look forward to continuing to work with you and your staff.

Sincerely,

/signed Amy Lutzky/

Amy Lutzky  
Acting Deputy Director

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**

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August 12, 2020

Sarah Fertig  
Medicaid Director  
Department of Health and Environment  
900 SW Jackson Avenue Suite 900  
Topeka, KS 66612-1220

Dear Ms. Fertig:

This letter is being sent as a companion to the Centers for Medicare & Medicaid Services (CMS) approval of state plan amendment (SPA), KS-19-0024, submitted on December 30, 2019. This SPA approval will be effective as of October 1, 2020. Approval of SPA KS-19-0024 includes approval of the alternative single streamlined paper and online applications developed by the state.

Until August 2021, Kansas will use interim alternative single streamlined online and paper applications. By that time, the state will have revised the alternative single streamlined online and paper applications as described in the table below. CMS considers the required changes marked with an asterisk to be particularly urgent, given their potential impact on applicants and the accuracy of eligibility determinations. CMS urges the state to prioritize these changes for completion prior to August 2021. The changes listed in the table are identical to those that were requested in the companion letter to Medicaid SPA KS-19-0023.

<b>Alternative Single Streamlined Online Application</b>	
<b>Necessary changes:</b>	<b>Date by which changes will be completed:</b>
1. The state will revise the application instructions to clearly indicate the program and benefit type for which they are relevant.	August 2021
2. The state will include language on the application to provide applicants an option to designate an authorized representative.	August 2021
3. *The state will make the collection of Social Security Number optional for non-applicants, and update instructional text explaining how the SSN will be used and how applicants may receive assistance from the state in obtaining an SSN.	August 2021
4. The state will update the response options for "Marital status" to collect only "married" and "single." Additional response options will be removed. Instructional text may be added if necessary to indicate which applicants should respond that they are married.	August 2021

5. The state will only ask non-MAGI screening questions of applicants.	August 2021
6. The state will only ask residency questions of applicants.	August 2021
7. The state will not include a “no” response option for the question, “Do you have an eligible immigration status?”	August 2021
8. The state will make immigration status document type detail fields optional, such that applicants can continue the application without providing detailed information such as SEVIS ID number, alien or I-94 number.	August 2021
9. *The state will ask the optional question “Are you, or your spouse or parent, a veteran or an active-duty member of the US military?” for purposes of determining if an applicant is exempt from the 5-year bar. The state will remove all other questions regarding military service.	August 2021
10. The state will make “ethnicity” an optional question and ensure the race and ethnicity response options are compliant with the 1997 OMB race and ethnicity categories.	August 2021
11. *The state will update student status questions to ask, “Are you a full-time student?” and will remove duplicative or detailed questions regarding school enrollment status.	August 2021
12. The state will revise the question, “Is anyone working, planning to work in the next two months, or is self-employed?” to read instead, “Does anyone have income from a job (including self-employment) or training?”	August 2021
13. The state will remove the question “[does this income come from] work or training.”	August 2021
14. *The state will include fields to allow applicants and non-applicants to attest to expenses, deductions, and income types that are necessary to determine MAGI eligibility.	August 2021
15. *The state will add instructional text to “Parental controls” to indicate that this refers to the adult being a primary caretaker for a dependent child. This will be utilized to determine eligibility under the parent/caretaker relative eligibility group.	August 2021
16. The state will remove detailed questions about medical expenses in the past 3 months.	August 2021
17. *The state will remove language requesting that applicants provide verification documentation of any kind at the point of application,	August 2021

even if optional. The state may include language indicating that the state may follow up with the individual to request documentation.	
18. *The state will update the absent parent attestation language to communicate the requirement for applicants to cooperate with the agency that collects medical support from an absent parent, and that if the applicant thinks that cooperating to collect medical support will harm them or their children, they can tell Medicaid and may not have to cooperate.	August 2021
19. The state will revise Managed Care Organization (MCO) selection to be optional and will only be shown to applicants who appear eligible for Medicaid and CHIP. The application must also provide notice to applicants that the MCO selection will not be utilized if the applicant is determined eligible for coverage through the Health Insurance Marketplace, what happens if the applicant does not select an MCO, and how the applicant can get assistance in selecting an MCO.	August 2021

<b>Alternative Single Streamlined Paper Application</b>	
<b>Necessary changes:</b>	<b>Date by which changes will be completed:</b>
1. *The state will remove language requesting that applicants provide verification documentation of any kind at the point of application, even if optional. The state may include language indicating that the state may follow up with the individual to request documentation.	August 2021
2. The state will not include a “no” response option for the question, “If this person is not a US citizen or national, do they have eligible immigration status?”	August 2021

Please submit the revised alternative single streamlined online and paper applications to CMS for review no later than August 2021 to ensure approval. We continue to be available to provide technical assistance. If you have any questions about this letter, please contact Kristin Edwards at (410) 786-5480 or [Kristin.Edwards@cms.hhs.gov](mailto:Kristin.Edwards@cms.hhs.gov).

Sincerely,

/signed Meg Barry/

Meg Barry  
Acting Director  
Division of State Coverage Programs



# CHIP Eligibility

State Name:

OMB Control Number: 0938-1148

Transmittal Number: KS - 19 - 0024

## 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, streamlined 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:

Add	Name of method	Description	Remove
Add	Fax	Through facsimile machine	Remove

### 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:



# CHIP Eligibility

- ☐ 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
- ☐ 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 streamlined 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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