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**State/Territory Name:** Kansas

State Plan Amendment (SPA) #: KS-24-0005

This file contains the following documents in the order listed:

- 1) Approval Letter
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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**

July 17, 2024

Christine Osterlund Medicaid Director Kansas Department of Health and Environment Division of Health Care Finance 900 SW Jackson St., Suite 900-N Topeka, KS 66612-1220

Dear Director Osterlund:

Your title XXI Children's Health Insurance Program (CHIP) State Plan Amendment (SPA), KS-24-0005, submitted on May 7, 2024, has been approved. This SPA has an effective date of January 1, 2024.

Through this SPA, Kansas provides 12 months of continuous eligibility (CE) coverage to individuals enrolled in its separate CHIP, pursuant to section 5112 of the Consolidated Appropriations Act, 2023 (CAA, 2023). Section 5112 of the CAA amended titles XIX and XXI of the Social Security Act to require that states provide 12 months of CE for children under the age of 19 in Medicaid and CHIP. In Kansas, this provision applies to the targeted low-income children population. In addition, Kansas updated its premium lock-out policy to clarify that children are not disenrolled during the 12-month CE period. A copy of the approved CS21 and CS27 state plan pages are attached to be incorporated into the state's approved CHIP state plan.

The Centers for Medicare & Medicaid Services Final Rule (CMS-2421-F2) published on April 2, 2024, amended 42 C.F.R. §457.570 to prohibit states from implementing premium lock-out policies in CHIP. Kansas has until June 3, 2025 to implement the necessary changes to discontinue this policy and until June 30, 2025 to submit a SPA indicating the change.

Your Project Officer is Carrie Grubert. Carrie is available to answer your questions concerning this amendment and other CHIP-related matters. Carrie's 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) 786-8319

E-mail: Carrie.Grubert@cms.hhs.gov

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

Sincerely, /Signed by Sarah deLone/

Sarah deLone Director



# **CHIP Eligibility**

State Name: Kansas	0	MB Control Number: 0938114
Transmittal Number: KS - 24 - 0005		
Separate Child Health Insurance Program Non-Financial Eligibility - Non-Payment of Premiums		CS2
42 CFR 457.570		
Non-Payment of Premiums		
Does the state impose premiums or enrollment fees?		
Can non-payment of premiums or enrollment fees result in loss of CHIP eligibility?		
Does the state have a premium lock out period?		Yes
Please describe the lock-out period:		
Children are not disenrolled during the 12-mont (consecutive or non-consecutive) during the CE month review for continued CHIP coverage through	period are considered delinquent and shall be	
What is the length of the time premium lock-out	period?	
Select a length of time:		
One month		
C Two months		
<ul><li>90 days</li></ul>		
Other (not to exceed 90 days)		
Are there exceptions to the required lock-out period?		Yes
☐ Individual's income decreased to a level who	ere no premium is required or within Medica	id standards
Other financial hardship		
⊠ Other		
Add	Describe	Remove
Add The child or children are in a 12-n	nonth continuous eligibility period.	Remove
Add Family income decreased to within	n Medicaid standards.	Remove
✓ The state assures that:		<del></del>
It does not require the collection of past due prer	miums or enrollment fees as a condition of el	ligibility for enrollment once th
lock-out period has expired; and	and the second second to the second s	

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



## **CHIP Eligibility**

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.

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CHIP state plan.

## **CHIP Eligibility**

State Name: Kansas	OMB Control Number: 0938-1148
Transmittal Number: KS - 24 - 0005	
Separate Child Health Insurance Program	CS27
General Eligibility - Continuous Eligibility	C521
2107(e)(1)(K) of the SSA and 42 CFR 457.342 and 435.926; 2107	(e)(1)(J) and 1902(e)(16) of the SSA
Mandatory 12-Month Postpartum Continuous Eligibility in CHIP f	for States Electing This Option in Medicaid
At state option in Medicaid, states may elect to provide continuous with section 1902(e)(16) of the SSA. If elected under Medicaid, states extended postpartum period for pregnant individuals in its separate elected under the Medicaid state plan.	
State elected the Medicaid option to provide continuous eligibility	through the 12- month postpartum period Yes
The state assures the extended postpartum period available to princome pregnant women under section 2107(e)(1)(J) of the SS.	oregnant targeted low-income children or targeted low-A is provided consistent with the following provisions:
remain eligible throughout the duration of the pregnancy	ved services under the state child health plan or waiver shall v (including any period of retroactive eligibility) and the 12-nancy ends and ending on the last day of the 12th month e) of the SSA
Continuous eligibility is provided to targeted low-income child women (if applicable) who are eligible for and enrolled under to postpartum period who would otherwise lose eligibility because	the state child health plan through the end of the 12-month
■ The individual or representative requests voluntary diser	nrollment.
■ The individual is no longer a resident of the state.	
The Agency determines that eligibility was erroneously renewal of eligibility because of Agency error or fraud, a	granted at the most recent determination or abuse, or perjury attributed to the individual.
■ The individual dies.	
Unlike continuous eligibility for children, states providing the 12-religibility due to becoming eligible for Medicaid.	month postpartum period may not end an individual's continuous
Consistent with section 2107(e)(1)(J) of the SSA, the state individual's pregnancy and 12-month postpartum period	ate assures that continuous eligibility is provided through an regardless of an individual becoming eligible for Medicaid.
Benefits provided during the 12-month postpartum period must with the benefit package elected by the state under section 210 children and/or targeted low-income pregnant women and may	3(a) of the SSA that is available to targeted low-income



### **CHIP Eligibility**

Mandatory Continuous Eligibility for Children

The CHIP Agency must provide that children who have been determined eligible under the state plan shall remain eligible, regardless of any changes in the family's circumstances, for a 12-month continuous eligibility period.

- Consistent with section 2107(e)(1)(K) of the SSA, the state assures that continuous eligibility is provided to its targeted low-income children for a duration of 12 months, regardless of any changes in circumstances, unless:
  - The child attains age 19.
  - The child or child's representative requests voluntary disenrollment.
  - The child is no longer a resident of the state.
  - The Agency determines that eligibility was erroneously granted at the most recent determination or renewal of eligibility because of Agency error or fraud, abuse, or perjury attributed to child or child's representative.
  - The child dies.
  - The child becomes eligible for Medicaid.

The state elects to provide coverage to the from-conception-to-end-of-pregnancy (FCEP) population (otherwise known as the "unborn").

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#### PRA Disclosure Statement

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