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State/Territory Name: Oklahoma

State Plan Amendment (SPA) #: OK-14-0006

This file contains the following documents in the order listed:

- 1) Approval Letter
- 3) Approved SPA Pages
- 4) SPA Summary Form

The complete title XXI state plan for Oklahoma 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: XXI state plans and amendments: http://medicaid.gov/chip/state-program-information/chipstate-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

JAN 2 9 2015

Nico Gomez, CEO Oklahoma Health Care Authority 2401 NW 23rd Street, Suite 1-A Oklahoma City, OK 73107

Dear Mr. Gomez:

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 OK-14-0006 submitted on March 31, 2014. This SPA relates to Modified Adjusted Gross Income (MAGI) Eligibility and has an effective date of January 1, 2014.

The SPA number OK-14-0006 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 other eligibility standards. Copies of the approved state plan pages are attached and these approved pages supersede sections of Oklahoma'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.

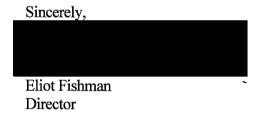
Baltimore, MD 21244-1850 Telephone: (410) 786-2176 Facsimile: (410) 786-5882

E-mail: Victoria.Collins@cms.hhs.gov

Official communications regarding program matters should be sent simultaneously to Ms. Collins and to Mr. Bill Brooks, Associate Regional Administrator (ARA), in our Dallas Office. Mr. Brooks address is:

Mr. Bill Brooks Centers for Medicare & Medicaid Services Dallas Regional Office 1301 Young Street Room #714 Dallas, TX 75202

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.



Enclosures

cc: Mr. Bill Brooks, ARA, CMS Dallas Region



OMB Control Number: 0938-1148

Expiration date: 10/31/2014

Separate Child Health Insurance Program Non-Financial Eligibility - Residency

CS17

42 CFR 457.320

OK-14-0006

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):

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One or more	interstate agreement(s).	Yes		
■ The	state has interstate agreen	nents with the following other	r states:	
	Alabama		Montana	
\boxtimes	Alaska		Nebraska	South Carolina
	Arizona		Nevada	South Dakota
	Arkansas		New Hampshire	▼ Tennessee
	California		New Jersey	∑ Texas
	Colorado	□ Louisiana	New Mexico	⊠ Utah
	Connecticut	Maine	New York	∇ermont
	Delaware	Maryland	North Carolina	∇irginia
	District of Columbia	Massachusetts	North Dakota	⊠ Washington
	Florida	Michigan	Ohio	West Virginia
	Georgia	Minnesota	Oklahoma	
	Hawaii		○ Oregon	
	Idaho		Pennsylvania	
The interstate agreement contains a procedure for providing CHIP to individuals pending resolution of their residency status and criteria for resolving disputed residency of individuals who: (Select all that apply)				
	Are in the state only for t	he purpose of attending school	ol.	
	Are out of the state only:	for the purpose of attending so	chool.	
	Retain addresses in both	states.		
	Other type of individual:			
A policy related to individuals in the state only for educational purposes. No				

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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Income Pregnant Women.

OK-14-0006

CHIP Eligibility

OMB Control Number: 0938-1148

Expiration date: 10/31/2014

No

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 requirem ents 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 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).
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 elects to cover lawfully residing children. A state may not select this option unless the state also covers Targeted Low-

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OK-14-0006

CHIP Eligibility

OMB Control Number: 0938-1148

Expiration date: 10/31/2014

Separate Child Health Insurance Program CS19
Non-Financial Eligibility - Social Security Number
42 CFR 457.340(b)
Social Security Number
As a condition of eligibility, the CHIP Agency must require individuals who have a social security number or are eligible for one as determined by the Social Security Administration, to furnish their social security number, or numbers if they have more than one number.
The CHIP Agency requires individuals, as a condition of eligibility, to furnish their social security number(s), with the following exceptions:
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.
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 205 and 1137 of the Social Security Act and the Privacy Act of 1974.
The state may request non-applicant household members to voluntarily provide their SSN, if the state meets the requirements below.
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, or for a purpose directly connected with the administration of the state plan.

PRA Disclosure Statement

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OMB Control Number: 0938-1148

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Separate Child Health Insurance Program Non-Financial Eligibility - Substitution of Coverage

CS20

Section 2102(b)(3)(C) of the SSA and 42 CFR 457.340(d)(3), 457.350(i), and 457.805

Substitution of Coverage

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	
+	Oklahoma Administrative Code on Creditable Coverage and Pregnant Women	To receive pregnancy related benefits under Title XXI, a pregnant woman must not be covered by creditable insurance, either through a group health plan or other commercial health insurance plan.	X
+	Use of the Third Party Liability Unit	All members are screened for other third part liability (TPL) coverage through a systematic data match with a state contracted vendor. Member identifying information is shared with the vendor, the vendor searches its databases of past and present effective dates for other sources of creditable coverage, and returns results to the state. The state uses the results to determine the eligibility status of the client based on the "other coverage" eligibility requirements.	X

A waiting period during which an individual is ineligible due to having dropped group health coverage. No

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.

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OMB Control Number: 0938-1148

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Separate Child Health Insurance Program Non-Financial Eligibility - Non-Payment of Premiums	C821
42 CFR 457.570	
Non-Payment of Premiums	
Does the state impose premiums or enrollment fees?	No

PRA Disclosure Statement

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

	oarate Child Health Insurance Program n-Financial Requirements - Other Eligibility Standards	CS23
\boxtimes	Other eligibility standards:	
	Name of eligibility standard: Insure Oklahoma Coverage of Dependent Children in ESI	Remove
	To which covered group(s) does this standard apply?	
	☐ Targeted Low-Income Children	
	☐ Targeted Low-Income Pregnant Women	
	Coverage from Conception to Birth	
	Children with Access to Public Employee Coverage	
	☐ Pregnant Women with Access to Public Employee Coverage	
	Children Eligible for Dental Only Supplemental Coverage	
	☐ Deemed Newborns	
	Describe how this standard affects eligibility:	
	Targeted low-income children are eligible for premium assistance only, with no direct state plan option, based on whether a child that meets the age and income standard specified on the CS7 page also meets additional criteria associated with their parents access to premium assistance for group coverage under section 1115 demonstration authority.	
	Add	

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V.20130917

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	Children's Health Insurance Program Eligibility
OK.0896.R00.00 - Jan 01, 2	Home Logout Finder Save Validate Print Help
Control Panel General Information File Management	Children's Health Insurance Program Eligibility: Summary Page State/Territory Oklahoma name: Transmittal Number: Please enter the Transmittal Number (TN) in the format ST-
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Summary with leading zeros. The dashes must also be entere OK-14-0006	
	Type of SPA: ☐ MAGI Eligibility & Methods ☐ XXI Medicaid Expansion ☐ Establish 2101(f) Group ☐ Eligibility Processing ☑ Non-Financial Eligibility Proposed Effective Date ☐ (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.



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