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State/Territory Name: Pennsylvania

State Plan Amendment (SPA) #: PA-26-0002-CHIP

This file contains the following documents in the order listed:

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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

September 4, 2026

Nicole M. Harris
Executive Director
Children's Health Insurance Program
303 Walnut Street 6th Floor
Harrisburg, PA 17105-2675

Dear Director Harris:

Your title XXI Children's Health Insurance Program (CHIP) State Plan Amendment (SPA) PA-26-0002-CHIP, submitted June 30, 2026, has been approved. The effective date for this SPA is July 1, 2025.

Through PA-26-0002-CHIP, Pennsylvania demonstrates compliance with section 5121 of the Consolidated Appropriations Act, 2023 (CAA, 2023) by transitioning eligible children who are enrolled in CHIP to Medicaid when they become incarcerated. The state will provide pre-release services to eligible juveniles under the Medicaid state plan.

Your Project Officer is Ticia Jones. She is available to answer your questions concerning this amendment and other CHIP-related matters and can be reached at Ticia.Jones@cms.hhs.gov.

If you have additional questions, please contact Mary Beth Hance, Director, Division of State Coverage Programs, at (410) 786-4299. We look forward to continuing to work with you and your staff.

Sincerely,
/Signed by Jessica Stephens/

Jessica Stephens
Acting Director

TEMPLATE FOR CHILD HEALTH PLAN UNDER TITLE XXI OF THE SOCIAL SECURITY
ACT CHILDREN'S HEALTH INSURANCE PROGRAM

(Required under section 4901 of the Balanced Budget Act of 1997 (New section 2101(b)))

State/Territory: Pennsylvania

As a condition for receipt of Federal funds under Title XXI of the Social Security Act, (42 CFR 457.40(b))

(Signature of Governor, or designee, of State/Territory, Date Signed)

submits the following Child Health Plan for the Children's Health Insurance Program and hereby agrees to administer the program in accordance with the provisions of the approved Child Health Plan, the requirements of Titles XXI and XIX of the Act (as appropriate) and all applicable Federal regulations and other official issuances of the Department.

The following State officials are responsible for program administration and financial oversight (42 CFR 457.40(c)):

Name: Valerie Arkoosh

Position/Title: Secretary, Human Services

Name: Sally Kozak

Position/Title: State Medicaid Director/Deputy Secretary,
Human Service

Name: Nicole Harris

Position/Title: Executive Director, CHIP

Disclosure Statement This information is being collected pursuant to 42 U.S.C. 1397aa, which requires states to submit a State Child Health Plan in order to receive federal funding. This mandatory information collection will be used to demonstrate compliance with all requirements of title XXI of the Act and implementing regulations at 42 CFR part 457. According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid Office of Management and Budget (OMB) control number. The valid OMB control number for this information collection is 0938-1148 (CMS-10398 #34). Public burden for all of the collection of information requirements under this control number is estimated to average 80 hours per response, including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to CMS, 7500 Security Boulevard, Attn: Paperwork Reduction Act Reports Clearance Officer, Mail Stop C4-26- 05, Baltimore, Maryland 21244-1850.

Section 1. General Description and Purpose of the Children’s Health Insurance Plans and the Requirements

- 1.1.** The state will use funds provided under Title XXI primarily for (Check appropriate box) (Section 2101(a)(1)); (42 CFR 457.70):
- 1.1.1.** ☒ Obtaining coverage that meets the requirements for a separate child health program (Sections 2101(a)(1) and 2103); OR
- 1.1.2.** ☐ Providing expanded benefits under the State’s Medicaid plan (Title XIX) (Section 2101(a)(2)); OR
- 1.1.3.** ☐ A combination of both of the above. (Section 2101(a)(2))
- 1.1-DS** ☐ The State will provide dental-only supplemental coverage. Only States operating a separate CHIP program are eligible for this option. States choosing this option must also complete sections 4.1-DS, 4.2-DS, 6.2-DS, 8.2-DS, and 9.10 of this SPA template. (Section 2110(b)(5))
- 1.2.** ☒ Check to provide an assurance that expenditures for child health assistance will not be claimed prior to the time that the State has legislative authority to operate the State plan or plan amendment as approved by CMS. (42 CFR 457.40(d))
- 1.3.** ☒ Check to provide an assurance that the State complies with all applicable civil rights requirements, including title VI of the Civil Rights Act of 1964, title II of the Americans with Disabilities Act of 1990, section 504 of the Rehabilitation Act of 1973, the Age Discrimination Act of 1975, 45 CFR part 80, part 84, and part 91, and 28 CFR part 35. (42 CFR 457.130)
- 1.4.** Provide the effective (date costs begin to be incurred) and implementation (date services begin to be provided) dates for this SPA (42 CFR 457.65). A SPA may only have one effective date, but provisions within the SPA may have different implementation dates that must be after the effective date.

Original Plan

Effective Date: May 28, 1998

Implementation Date: June 1, 1998

SPA number PA-26-0002-CHIP:

Purpose of SPA: To demonstrate compliance with section 5121 of the Consolidated Appropriations Act 2023 (CAA, 2023), ensuring that children who are incarcerated do not lose coverage as an inmate of a public institution.

Effective date: July 1, 2026.

Implementation date: July 1, 2026.

SPA number PA-26-0003-CHIP

Purpose of SPA: To implement a CHIP Health Services Initiative (HSI) that serves children in Pennsylvania who have complex medical needs through the use of Pediatric Complex Care Resource Center services (PCCRCs).

Proposed Effective date: July 1, 2025

Proposed Implementation date: July 1, 2025

Effective date: October 1, 2023

Implementation date: October 1, 2023

SPA number PA-22-0004-CHIP

Purpose of SPA: To implement a provision whereby the State will waive premium payments for applicants and existing beneficiaries who reside and/or work in a State or Federally declared disaster area and who have not made their premium payments. To address the Federal COVID-19 public health emergency, the State seeks a waiver under section 1135 of the Act to submit a State Plan amendment that takes effect in a prior state fiscal year. The amendment also corrects a formatting error under section 2.1.

Effective date: March 1, 2020

Implementation date: March 1, 2020.

SPA number PA-22-0003-CHIP

Purpose of SPA: Allows the State of Pennsylvania to use administrative funds available under Section 2105(a)(1)(D)(ii) of the Social Security Act and 42 CFR 457.10 to improve the health of low-income children by increasing their access to needed vision services and glasses through a targeted, school-based initiative.

Effective date: August 1, 2022

Implementation date: August 1, 2022.

SPA number: PA-22-0002-CHIP

Purpose of SPA: The purpose of this SPA is to demonstrate compliance with the American Rescue Plan Act provisions that require states to provide coverage under CHIP for treatment (including treatment of a condition that may seriously complicate COVID-19 treatment), testing, and vaccinations for COVID-19 without cost sharing.

Effective date: March 11, 2021

Implementation date: March 11, 2021

SPA number PA-20-0002-CHIP:

Purpose of SPA: To demonstrate compliance with section 5022 of Substance Use-Disorder Prevention that Promotes Opioid Recovery and Treatment for Patients and Communities (SUPPORT) Act. The provisions provided within this SPA describe the methods DHS are utilizing to ensure enrollees within CHIP are receiving the appropriate treatment, screenings, assessments and services for behavioral health conditions. The behavioral health benefits are not new benefits with the exception of adding tobacco cessation.

Medication Assisted Therapy (MAT) are also part of CHIP's existing pharmacy benefit. Tobacco cessation services are now a mandatory benefit effective as of October 24, 2019.

Effective date: October 24, 2019.

Implementation date: October 24, 2019.

SPA Number: PA-20-0001-CHIP

Purpose of SPA: To implement provisions for temporary adjustments to enrollment and redetermination policies and cost sharing requirements for children in families living and/or working in state or federally declared disaster areas. Due to COVID-19, the state is notifying CMS that it intends to provide temporary adjustments to its enrollment and/or redetermination policies and cost sharing requirements, the effective and duration date of such adjustments, and the applicable state and federally declared disaster area.

Effective date: March 1, 2020

Implementation date: March 1, 2020.

On March 6, 2020, Governor Wolf issued a disaster declaration in response to the presence of COVID-19 in Pennsylvania. Because CHIP is designed to provide benefits for whole months, CHIP is requesting an implementation date of March 1, 2020. In this SPA, the state requests the following flexibilities with an effective date of March 1, 2020 and an extension of them throughout the duration of the disaster:

- Temporarily waive requirements related to timely processing of renewals and/or deadlines for families to respond to renewal requests;
- Temporarily delay acting on certain changes in circumstances;
- Temporarily extend the processing of renewals;
- Temporarily suspend application of co-payments related to COVID-19 testing, screening and treatment services; and,
- Temporarily delay payment of premiums (and/or delay payment of premium balance). Pennsylvania will be temporarily suspending the commonwealth's premium lock out policy.

<u>Transmittal Number</u>	<u>SPA Group</u>	<u>PDF</u>	<u>Description</u>	<u>Superseded Plan Section(s)</u>
<u>PA-14-0001</u> <u>Effective/Implementation Date: July 1, 2014</u>	<u>MAGI Eligibility & Methods</u>	<u>CS7</u>	<u>Eligibility – Targeted Low Income Children</u>	<u>Sections 4.1.1, 4.1.2, 4.1.3: Supersede all</u>
		<u>CS10</u>	<u>Children Who Have Access to Public Employee Coverage</u>	<u>Section 4.4.1: Supersede information on dependents of employees of a public agency</u>
		<u>CS10</u>	<u>Hardship Exemption</u>	<u>Appendix: Supersede current documentation</u>
		<u>CS13</u>	<u>Deemed Newborns</u>	<u>Section 4.3: Add new subsection; supersedes information in section 4.1.9 on CHIP deeming</u>
		<u>CS15</u>	<u>MAGI-Based Income Methodologies</u>	<u>Section 4.3: Add new subsection; supersedes information in section 4.1.3 on income counting</u>
<u>PA-14-0002</u> <u>Effective/Implementation Date: July 1, 2014</u>	<u>XXI Medicaid Expansion</u>	<u>CS3</u>	<u>Eligibility for Medicaid Expansion Program</u>	<u>Supersedes the current Medicaid expansion section 4.0</u>

PA-14-0003 <u>Effective/Implementation Date: July 1, 2014</u>	<u>Establish 2101(f) Group</u>	CS14	<u>Children Ineligible for Medicaid as a Result of the Elimination of Income Disregards</u>	<u>Incorporate within a separate subsection under section 4.1</u>
PA-14-0005 <u>Effective/Implementation Date: July 1, 2014</u>	<u>Non-Financial Eligibility</u>	CS17	<u>Non-Financial Eligibility – Residency</u>	<u>Supersedes the current section 4.1.5</u>
		CS18	<u>Non-Financial – Citizenship</u>	<u>Supersedes the current sections 4.1.0; 4.1.1-LR; 4.1.1-LR</u>
		CS19	<u>Non-Financial – Social Security Number</u>	<u>Supersedes the current section 4.1.9.1</u>
		CS20	<u>Substitution of Coverage</u>	<u>Supersedes the current section 4.4.4</u>
		CS21	<u>Non-Payment of Premiums</u>	<u>Supersedes the current section 8.7</u>
		CS27	<u>Continuous Eligibility</u>	<u>Supersedes the current section 4.1.8</u>
PA-22-0001-CHIP <u>Effective/Implementation Date: April 1, 2022</u>	<u>Continuous Eligibility</u>	CS27	<u>Continuous Eligibility</u>	<u>Supersedes the current section 4.1.8</u>
PA-24-0003-CHIP <u>Effective/Implementation Date: July 1, 2024</u>	<u>Continuous Eligibility</u>	CS27	<u>Continuous Eligibility</u>	<u>Supersedes the current section 4.1.8</u>
		CS21	<u>Non-Payment of Premiums</u>	<u>Supersedes the current section 8.7</u>
PA-26-0002-CHIP <u>Effective/Implementation Date: July 1, 2026</u>	<u>CHIP Eligibility</u>	CS31	<u>Incarcerated CHIP Beneficiaries</u>	<u>Supersedes the current section 3.4.2.4</u>

- 1.4- TC Tribal Consultation** (Section 2107(e)(1)(C)) Describe the consultation process that occurred specifically for the development and submission of this State Plan Amendment, when it occurred and who was involved.

TN No: Approval Date Effective Date

Currently there are no recognized tribes, Indian Health Programs or Urban Indian Organizations in Pennsylvania.

3.4.2.4 MCO, PIHP, PAHP, PCCM and PCCM Entity Requests for Disenrollment.

☒ The State assures that contracts with MCOs, PIHPs, PAHPs, PCCMs and PCCM entities describe the reasons for which an MCO, PIHP, PAHP, PCCM and PCCM entity may request disenrollment of an enrollee, if any. (42 CFR 457.1212, cross referencing to 42 CFR 438.56(b)).

The current contract between CHIP MCOs and the Department stipulates that CHIP MCOs meet the requirements of 42 CFR 457.1212. Furthermore, the CHIP Procedures Handbook lists the reasons for disenrollment.

Disenrollment reasons include the following:

1. The child moves out of state;
2. The child becomes 19 years of age (At age 19, the child is screened for potential MA eligibility) (This does not apply to CHIP enrollees age 19 who are either pregnant or in their 12 month postpartum period);
3. Private health insurance is present during the application and renewal. If private health insurance is obtained after the child is enrolled, coverage will be maintained until renewal;
4. The child becomes eligible for or is enrolled in MA;
5. The child becomes an inmate of a juvenile delinquency facility or related public facility; **When a child becomes incarcerated, their eligibility is redetermined based on a household size of one (1) and are moved to MA.**
6. The child is a resident in a public hospital or similar facility for treating behavioral or mental health issues;
7. Notification is received that the child is deceased;
8. A voluntary request for termination is received;
9. The agency determines that eligibility was erroneously granted at the most recent determination, redetermination, or renewal of eligibility because of agency error or fraud, abuse, or perjury attributed to the child or the child's representative;

10. At renewal, if a family does not pay the premium for the first month of the new enrollment period for the child.



CHIP Eligibility

State Name:

OMB Control Number: 0938-1148

Transmittal Number: PA - 26 - 0002

Incarcerated CHIP Beneficiaries

CS31

2102(d) and 2110(b)(7) of the SSA

Targeted Low-Income Children Who Become Incarcerated

- ☐ The state assures that it does not terminate eligibility for children enrolled in a separate CHIP because the child is an inmate of a public institution.

States may either suspend CHIP coverage or continue to provide CHIP state plan (or waiver of such plan) services otherwise not covered by the carceral facility to children who are incarcerated. States that elect to suspend CHIP coverage for the duration of a child's incarceration may implement a benefits or eligibility suspension.

The state elects to suspend CHIP coverage for the duration of a child's incarceration

If yes, then check an option below:

- ☐ Benefits suspension
☐ Eligibility suspension

- ☐ The state assures that it redetermines eligibility for any child prior to their release if it has been longer than 12 months since the child's last redetermination and restores coverage for child health assistance to eligible children upon their release.

- ☐ Within the 30 days prior to release (or within one week of release, or as soon as practicable after release), the state assures that it provides eligible children with any screenings, diagnostic services, or case management services that would otherwise be available to children under the CHIP state plan (or waiver of such plan).

Additional information regarding implementation of mandatory provisions of section 5121 of the Consolidated Appropriations Act, 2023 (CAA, 2023), including providing screenings, diagnostic services, or case management services:

The state assures that it no longer terminates eligibility for any child enrolled in its separate CHIP program because they are an inmate of a public institution. As described in section 3.4.2.4 of the CHIP State plan, children are evaluated as a household of 1 and opened in Medicaid, where they are provided EPSDT services prior to release and evaluated for eligibility as indicated within the provisions of section 5121 and 5122 of the

Under section 5122 of the CAA, 2023, states may consider otherwise eligible children who are inmates pending disposition of charges as eligible for CHIP and provide all services covered under the CHIP state plan.

- ☐ The state elects to provide all CHIP state plan benefits (or waiver of such plan) to eligible children who are inmates pending disposition of charges.

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 Eligibility

Children Determined Eligible for CHIP While Incarcerated

Generally, children who apply for CHIP when they are in a carceral facility are not eligible because of the eligibility exclusion for inmates of a public institution under section 2110(b) of the Act. However, section 2110(b)(7) of the Act provides an exception to this eligibility exclusion for children who are within 30 days prior to their release.

- ☐ The state assures that they will process any application submitted on behalf of a child and make an eligibility determination for child health assistance upon their release from the institution.
- ☐ Children who apply and are found eligible within 30 days prior to their release will be provided screening and diagnostic services, and case management services that are otherwise available under the CHIP state plan (or waiver of such plan).

Targeted Low-Income Pregnant Women Who Become Incarcerated

- ☐ The state assures that it does not terminate eligibility for pregnant women enrolled in a separate CHIP because the pregnant woman is an inmate of a public institution.

States may either suspend CHIP coverage or continue to provide CHIP state plan (or waiver of such plan) services otherwise not covered by the carceral facility to pregnant women who are incarcerated. States that elect to suspend CHIP coverage for the duration of a pregnant woman's incarceration may implement a benefits or eligibility suspension.

The state elects to suspend CHIP coverage for the duration of a pregnant woman's incarceration

If yes, then check an option below:

- ☐ Benefits suspension
- ☐ Eligibility suspension

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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