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**State/Territory Name:** Wyoming

**State Plan Amendment (SPA) #:** WY-21-0018

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

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May 25, 2021

Heather Gifford  
Kid Care CHIP Manager  
Wyoming Department of Health  
Division of Healthcare Financing  
122 West 25<sup>th</sup> Street, 4 West  
Cheyenne, WY 82002

Dear Ms. Gifford:

Your title XXI Children's Health Insurance Program (CHIP) state plan amendment (SPA), WY-21-0017, submitted on January 5, 2021 and WY-21-0018, submitted on March 15, 2021, with additional information submitted on May 25, 2021, has been approved. These SPAs allow the state to transition its separate CHIP program, Kid Care CHIP, to a Medicaid expansion program effective as of October 1, 2020.

Through SPA WY-21-0017, the state removes references to its separate CHIP program throughout the state plan. This population transitioned to Wyoming's Medicaid state plan through Medicaid SPA WY-20-0008. SPA WY-21-0018 updates the income standards for the state's Medicaid expansion CHIP.

Your title XXI project officer is Ms. Joyce Jordan. She is available to answer questions concerning this amendment and other CHIP-related issues. Ms. Jordan's contact information is as follows:

Centers for Medicare & Medicaid Services  
Center for Medicaid and CHIP Services  
Mail Stop: S2-01-16  
7500 Security Boulevard  
Baltimore, MD 21244-1850  
Telephone: (410) 786-3413  
E-mail: [Joyce.Jordan@cms.hhs.gov](mailto:Joyce.Jordan@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 Amy  
Lutzky/

Amy Lutzky  
Deputy Director



# CHIP Eligibility

State Name:

OMB Control Number: 0938-1148

Transmittal Number: WY - 21 - 0018

## Eligibility for Medicaid Expansion Program CS3

42 CFR 457.320(a)(2) and (3)

Income eligibility for children under the Medicaid Expansion is determined in accordance with the following income standards:

There should be no overlaps or gaps for the ages entered.

### Age and Household Income Ranges

| Add        | From Age                       | To Age                          | Above (% FPL) | Up to & including (% FPL) | Remove        |
|------------|--------------------------------|---------------------------------|---------------|---------------------------|---------------|
| <b>Add</b> | <input type="text" value="0"/> | <input type="text" value="6"/>  | 154           | 200                       | <b>Remove</b> |
| <b>Add</b> | <input type="text" value="6"/> | <input type="text" value="19"/> | 119           | 200                       | <b>Remove</b> |

### PRA Disclosure Statement

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