Table of Contents

State/Territory Name: Delaware

State Plan Amendment (SPA) #: 25-0010

This file contains the following documents in the order listed:

DEPARTMENT OF HEALTH & HUMAN SERVICES
Centers for Medicare & Medicaid Services
601 E. 12th St., Room 355
Kansas City, Missouri 64106

CENTERS FOR MEDICARE & MEDICAID SERVICES
CENTER FOR MEDICAID & CHIP SERVICES

Medicaid and CHIP Operations Group

November 25, 2025

Andrew Wilson
Medicaid Director
Division of Medicaid and Medical Assistance
Delaware Health and Social Services
P.O. Box 906
New Castle, DE 19720-0906

Re: Delaware State Plan Amendment (SPA) - 25-0010

Dear Medicaid Director Wilson:

The Centers for Medicare & Medicaid Services (CMS) reviewed your Medicaid State Plan Amendment (SPA) submitted under transmittal number (TN) 25-0010. This amendment proposes to update the Division of Medicaid and Medical Assistance (DMMA) Title XIX Medicaid State Plan regarding Buy-In, specifically, to provide clarity that DMMA accretes clients to the Buy-In for Part A, as needed, and Part B for all Medicaid programs where a client is dually eligible for Medicare and Medicaid.

We conducted our review of your submittal according to statutory requirements in Title XIX of the Social Security Act. This letter informs you that Delaware's Medicaid SPA TN 25-0010 was approved on November 25, 2025, effective September 2, 2025.

Enclosed are copies of Form CMS-179 and the approved SPA pages to be incorporated into the Delaware State Plan.

If you have any questions, please contact Taneka Rivera at (410) 786-9502, or via email at Taneka.Rivera@cms.hhs.gov.

Sincerely,

Wendy E. Hill Petras, Acting Director
Division of Program Operations

Enclosures

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

FORM APPROVED
OMB No. 0938-0193

TRANSMITTAL AND NOTICE OF APPROVAL OF STATE PLAN MATERIAL

FOR: CENTERS FOR MEDICARE & MEDICAID SERVICES

1. TRANSMITTAL NUMBER: 25-0010

2. STATE: DE

3. PROGRAM IDENTIFICATION: TITLE OF THE SOCIAL SECURITY ACT: (●) XIX ( ) XXI

TO: CENTER DIRECTOR
CENTERS FOR MEDICAID & CHIP SERVICES
DEPARTMENT OF HEALTH AND HUMAN SERVICES

4. PROPOSED EFFECTIVE DATE
09/02/2025

5. FEDERAL STATUTE/REGULATION CITATION
42 CFR 407.40, 1843 & 1818(g) of the SSA

6. FEDERAL BUDGET IMPACT (Amounts in WHOLE dollars)
a. FFY 2025 $ 0
b. FFY 2026 $ 0

7. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT
General Program Administration and Table of Contents pages ~~29-29b~~ 29a-29b

8. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT *(If Applicable)*
General Program Administration and Table of Contents pages ~~29-29b~~ 29a-29b

9. SUBJECT OF AMENDMENT
Buy-In

10. GOVERNOR'S REVIEW *(Check One)*
(●) GOVERNOR'S OFFICE REPORTED NO COMMENT
( ) COMMENTS OF GOVERNOR'S OFFICE ENCLOSED
( ) NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL
( ) OTHER, AS SPECIFIED:

11. AGENCY OFFICIAL
[redacted]

12. Andrew Wilson

13. TITLE
Director

14. DATE SUBMITTED
9/2/2025 | 10:01 AM EDT

15. RETURN TO
Andrew Wilson, Director, DMMA, P.O. Box 906 New Castle, DE19720

FOR CMS USE ONLY

16. DATE RECEIVED
09/02/2025

17. DATE APPROVED
November 25, 2025

PLAN APPROVED - ONE COPY ATTACHED

18. EFFECTIVE DATE OF APPROVED MATERIAL
09/02/2025

19. [redacted]

20. TYPED NAME OF APPROVING OFFICIAL
Wendy E. Hill Petras

21. TITLE OF APPROVING OFFICIAL
Acting Director, Division of Program Operations

22. REMARKS

Box 7 and Box 8 Delaware authorized a pen and ink change on 11/25/2025.

Instructions on Back

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

STATE/TERRITORY: **DELAWARE**

Citation	**3.2 Coordination of Medicaid with Medicare and Other Insurance**
Sections 1843 and1818(g), of the Act; 42 CFR 407.40(b)	X__ The Medicaid agency has a buy-in agreement with CMS under which it agrees to cover Medicare premiums for Medicare-eligible individuals enrolled in certain Medicaid eligibility groups selected by the Medicaid agency below. The SPA pages that follow represent the entirety of the buy-in agreement and bind the state to follow federal regulations and guidance promulgated under these provisions.
	(a) Medicare premiums
	(1) Medicare Part A premiums
Sections 1902(a)(10)(E)(i) and 1905(p)(1) of the Act; 42 CFR 435.123 and 400.200	(i) Qualified Medicare Beneficiary (QMB) Group: The Medicaid agency pays the Medicare Part A premiums (if applicable) for individuals in the QMB eligibility group as defined in the QMB pages of this plan using the following:
Section 1818(g) of the Act; 42 CFR 406.26	__X__ Buy-in agreement that pays the Part A premiums for individuals entitled to Medicare Part A and/or enrolled in Part B.
42 CFR 406.32(g)	____Group payer arrangement
Section 1902(a)(10)(E)(ii) of the Act; 42 CFR 435.126	(ii) Qualified Disabled and Working Individuals (QDWI) Group __X__ The Medicaid agency pays Part A premiums under a group payer arrangement, subject to any contribution required as described in the QDWI pages of this plan.
Section 1843 of the Act; 42 CFR 407.42	(2) Medicare Part B Premiums The Medicaid agency includes the following Medicaid eligibility groups in its buy-in group: __X__ Mandatory cash assistance and deemed recipients of cash assistance groups:
42 CFR 435.120, 435.121; 435.130, 435.232; and 435.234	(i) Individuals who receive SSI or SSP or both and are covered under this plan as categorically needy.

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

STATE/TERRITORY: **DELAWARE**

Citation

Sections 1619(b) and 1634(c) of the Act; 42 CFR 435.134, 435.135, 435.137, and 435.138

(ii) Individuals who under the Act or any other provision of federal Law are treated, for Medicaid eligibility purposes, as though they were receiving SSI or SSP and are covered under this plan as categorically needy.

Section 1931(b) of the Act; 42 CFR 435.145

__X__ Optional deemed recipients of cash assistance groups:

Individuals whom the State must consider to be recipients of AFDC, including those who receive adoption assistance, foster care or guardianship care under part E of title IV of the Act.

42 CFR 435.4

__X__ Medicare Savings Programs groups:

1902(a)(10)(E)(i) and 1905(p)(1) of the Act; 42 CFR 435.123 and 400.200

(i) Individuals in the QMB eligibility group as defined in the QMB pages in this plan.

Sections 1902(a)(10)(E)(iii) and 1905(p)(3)(A)(ii) of the Act;42 CFR 435.124

(ii) Individuals in the Specified Low-Income Medicare Beneficiary (SLMB) eligibility group as defined in the SLMB pages in this plan.

Sections 1902(a)(10)(E)(iv) and 1905(p)(3)(A)(i) of the Act, 42 CFR § 435.125

(i) Individuals in the Qualifying Individual (QI) eligibility group as defined in the QI pages in this plan.

__X__ All other Medicaid eligibility groups. All other individuals eligible for Medicaid under Title 19 of the Act.

(a) Other Health Insurance

Section 1905(a) of the Act

The Medicaid agency pays insurance premiums for medical or any other type of remedial care to maintain a third-party resource for Medicaid covered services provided to eligible individuals (except individuals 65 years of age or older and disabled individuals, entitled to Medicare Part A but not enrolled in Medicare Part B). (See attachment 4.22-C for methods of determining cost-effectiveness.).