
Table of Contents

State/Territory Name: Iowa

State Plan Amendment (SPA) #: IA-24-0016

This file contains the following documents in the order listed:

- 1) Approval Letter
- 2) State Plan Pages

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

January 6, 2025

Rebecca Curtiss
Interim Medicaid Director
Iowa Department of Human Services
Iowa Medicaid Enterprise
611 5th Avenue
Des Moines, IA 50309

Dear Director Curtiss:

Your title XXI Children's Health Insurance Program (CHIP) State Plan Amendment (SPA) IA-24-0016, submitted on November 26, 2024, has been approved. This SPA has an effective date of January 1, 2025. This SPA approval is a companion to the Medicaid SPA, IA-25-0003.

Through this SPA, Iowa modifies its income levels in both its separate CHIP and title XXI funded Medicaid expansion program for children from ages 0 to 1. Prior to IA-24-0016, Iowa received title XXI funds in Medicaid for this age range from 240 to 375 percent of the federal poverty level (FPL), and there was no separate CHIP for this age range.

Under IA-24-0016, the state reduces the income level from 375 to 300 percent FPL in its Medicaid expansion program for children ages 0 to 1. This amendment also permits the state to provide coverage for children in its separate CHIP from ages 0 to 1 from 300 to 302 percent FPL. The Medicaid companion SPA, IA-25-0003, effectuates corresponding changes in the Medicaid state plan by revising the income standard in the same age group from 375 to 300 percent FPL. The state also made changes to the income level for children that receive dental only supplemental coverage to align the income levels for supplemental dental coverage with the income levels for the state's comprehensive separate CHIP.

A copy of the approved CS3, CS7, and CS12 state plan pages are attached to be incorporated into the state's approved CHIP state plan.

Your Project Officer is Carrie Grubert. Carrie is available to answer your questions concerning these amendments 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

Page 2 – Director Curtiss

If you have additional questions, please contact Liz Clark, Deputy Director, Children and Adult Health Programs Group, at (443) 729-6362. We look forward to continuing to work with you and your staff.

Sincerely,
/Signed by Sarah deLone/

Sarah deLone
Director



CHIP Eligibility

State Name:

OMB Control Number: 0938-1148

Transmittal Number: IA - 24 - 0016

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
Add	<input type="text" value="0"/>	<input type="text" value="1"/>	240	300	Remove
Add	<input type="text" value="6"/>	<input type="text" value="18"/>	122	167	Remove

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.

V.20181119



CHIP Eligibility

State Name:

OMB Control Number: 0938-1148

Transmittal Number: IA - 24 - 0016

Separate Child Health Insurance Program Eligibility - Targeted Low-Income Children

CS7

2102(b)(1)(B)(v) of the SSA and 42 CFR 457.310, 315 and 320

☒ **Targeted Low-Income Children** - Uninsured children under age 19 whose household income is within standards established by the state.

☒ The CHIP Agency operates this covered group in accordance with the following provisions:

Age

Must be under age 19.

Income Standards

Income standards are applied statewide.

Are there any exceptions, e.g. populations in a county which may qualify under either a statewide income standard or a county income standard?

Statewide Income Standards

Begin with lowest age range first.

Please note that the lower bound for CHIP eligibility should be the highest standard used for Medicaid poverty-level children for the same age group or groups entered here.

Add	From Age	To Age	Above (% FPL)	Up to & including (% FPL)	Remove
Add	<input type="text" value="0"/>	<input type="text" value="19"/>	167	302	Remove

Age ranges may overlap. If there is an overlap, provide an explanation. Include the age ranges for each income standard that has overlapping ages and the reason for having different income standards.

Special Program for Children with Disabilities

Does the state have a special program for children with disabilities?

PRA Disclosure Statement



CHIP Eligibility

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.

V.20181119



CHIP Eligibility

State Name: Iowa

OMB Control Number: 0938-1148

Transmittal Number: IA - 24 - 0016

Separate Child Health Insurance Program Eligibility - Dental Only Supplemental Coverage

CS12

Section 2110(b)(5) of the SSA

☐ **Dental Only Supplemental Coverage** - Coverage to targeted low-income children who are otherwise eligible for CHIP but for the fact that they are enrolled in a group health plan or health insurance offered through an employer.

☒ The CHIP Agency operates this covered group in accordance with the following provisions:

Income Standards

The state uses the same income standards for Dental only supplemental coverage as are used for other targeted low income children.

Yes

☒ The state provides assurance that the state has the highest income eligibility standard permitted under Title XXI (or a waiver) as of January 1, 2009, in order to be able to provide Dental only supplemental coverage.

☒ The state provides assurance that the state does not limit the acceptance of applications for children or impose any numerical limitation, waiting list, or similar limitation on the eligibility of such children for child health assistance under the state plan.

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.

V.20181119