

Table of Contents

State/Territory Name: Kansas

State Plan Amendment (SPA) #: 22-0030

This file contains the following documents in the order listed:

- 1) Approval Letter
- 2) CMS Form 179
- 3) Approved SPA Page

DEPARTMENT OF HEALTH & HUMAN SERVICES
Centers for Medicare & Medicaid Services
7500 Security Boulevard, Mail Stop S2-26-12
Baltimore, Maryland 21244-1850



October 14, 2022

Sarah Fertig, State Medicaid Director
Kansas Department of Health and Environment
Division of Health Care Finance
Landon State Office Building
900 SW Jackson, Suite 900 N
Topeka, KS 66612-1220

Re: Kansas State Plan Amendment (SPA) 22-0030

Dear Ms. Fertig:

We have reviewed the proposed amendment to add section 7.4.A. Rescissions to the State's Disaster Relief Policies for the COVID-19 National Emergency to Kansas' Medicaid state plan, as submitted under transmittal number (TN) 22-0030. This amendment proposes to rescind temporary policies, in section 7.4. Medicaid Disaster Relief for the National Emergency.

We conducted our review of your submittal according to the statutory requirements at section 1902(a) of the Social Security Act and implementing regulations. Section 7.4 of the Medicaid state plan provides temporary authority for these provisions and is intended to be in effect only for the duration of the COVID-19 public health emergency. Due to the temporary nature of this provision, Medicaid SPA Transmittal Number 22-0030 is approved effective July 1, 2022.

Enclosed is a copy of the CMS-179 summary form and the approved state plan page.

Please contact Michala Walker at 816-426-6503 or by email at michala.walker@cms.hhs.gov if you have any questions about this approval.

Sincerely,

Alissa M.
Deboy -S

Digitally signed by Alissa
M. Deboy -S
Date: 2022.10.14
08:18:34 -04'00'

Alissa Mooney DeBoy
On Behalf of Anne Marie Costello, Deputy Director
Center for Medicaid and CHIP Services

Enclosures

TRANSMITTAL AND NOTICE OF APPROVAL OF STATE PLAN MATERIAL FOR: CENTERS FOR MEDICARE & MEDICAID SERVICES		1. TRANSMITTAL NUMBER <u>22</u> — <u>0030</u>	2. STATE <u>KS</u>						
TO: CENTER DIRECTOR CENTERS FOR MEDICAID & CHIP SERVICES DEPARTMENT OF HEALTH AND HUMAN SERVICES		3. PROGRAM IDENTIFICATION: TITLE <u>XIX</u> OF THE SOCIAL SECURITY ACT							
5. FEDERAL STATUTE/REGULATION CITATION 42 CFR 447 Subpart L		4. PROPOSED EFFECTIVE DATE July 1, 2022							
7. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT Section 7.4.A. page 2		6. FEDERAL BUDGET IMPACT (Amounts in WHOLE dollars) a. FFY <u>2022</u> \$ <u>0</u> b. FFY <u>2023</u> \$ <u>0</u>							
9. SUBJECT OF AMENDMENT A rescission to a Disaster Recovery SPA, regarding the authority granted to allow for two Presumptive Eligibility (PE) periods during a twelve-month period. The agency rescinds the elections at B.1, B 2, and B 3 of section 7.4 (approved on 05/11/2020 in SPA Number KS-20-0012) of the state plan. This will revert the State back to the practice of one PE period for parents or caretaker relatives, children, former foster care children, and one presumptive eligibility period per pregnancy per a 12 month period; remove the state as a qualified entity; and eliminate the ability for qualified providers to determine eligibility for Parents/Caretaker Relatives and Former Foster Care Children.		8. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION None							
10. GOVERNOR'S REVIEW (Check One) <table style="width:100%; margin-top: 10px;"> <tr> <td style="width: 50%;"><input type="checkbox"/> GOVERNOR'S OFFICE REPORTED NO COMMENT</td> <td style="width: 50%;"><input checked="" type="checkbox"/> OTHER, AS SPECIFIED:</td> </tr> <tr> <td><input type="checkbox"/> COMMENTS OF GOVERNOR'S OFFICE ENCLOSED</td> <td>Sarah Fertig is the</td> </tr> <tr> <td><input type="checkbox"/> NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL</td> <td>Governor's Designee</td> </tr> </table>				<input type="checkbox"/> GOVERNOR'S OFFICE REPORTED NO COMMENT	<input checked="" type="checkbox"/> OTHER, AS SPECIFIED:	<input type="checkbox"/> COMMENTS OF GOVERNOR'S OFFICE ENCLOSED	Sarah Fertig is the	<input type="checkbox"/> NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL	Governor's Designee
<input type="checkbox"/> GOVERNOR'S OFFICE REPORTED NO COMMENT	<input checked="" type="checkbox"/> OTHER, AS SPECIFIED:								
<input type="checkbox"/> COMMENTS OF GOVERNOR'S OFFICE ENCLOSED	Sarah Fertig is the								
<input type="checkbox"/> NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL	Governor's Designee								
11. SIGNATURE OF STATE AGENCY OFFICIAL 		15. RETURN TO Sarah Fertig, State Medicaid Director KDHE, Division of Health Care Finance Landon State Office Building 900 SW Jackson, Room 900-N Topeka, KS 66612-1220							
12. TYPED NAME Sarah Fertig		16. DATE RECEIVED September 7, 2022							
13. TITLE State Medicaid Director									
14. DATE SUBMITTED September 7, 2022									
FOR CMS USE ONLY									
18. EFFECTIVE DATE OF APPROVED MATERIAL July 1, 2022		17. DATE APPROVED October 14, 2022							
PLAN APPROVED - ONE COPY ATTACHED									
20. TYPED NAME OF APPROVING OFFICIAL Alissa Mooney DeBoy		19. SIGNATURE OF APPROVING OFFICIAL Alissa M. DeBoy -S Digitally signed by Alissa M. DeBoy -S Date: 2022.10.14 08:19:11 -04'00'							
22. REMARKS		21. TITLE OF APPROVING OFFICIAL On Behalf of Anne Marie Costello, Deputy Director, CMCS							

Boxes 5 and 7: State authorized pen and ink changes on 10/5/22.

7.4.A. Rescissions to the State's Disaster Relief Policies for the COVID-19 National Emergency

Effective 7/1/2022, the agency rescinds the elections at B.1, B.2 and B.3 of section 7.4 (approved on 05/11/2020 in SPA Number KS-20-0012) of the state plan, including the following provisions:

- B1 - The state will allow two PE periods during a twelve-month period during the Public Health Emergency (PHE) (increase from one during a 12-month period in SPA 14-0008). The PE period begins the first day of the month of the initial PE period. The state will limit the number of PE periods for PW from one per pregnancy (in KS 14-0008) to two per pregnancy.
- B2 - The state will allow two PE periods during a twelve-month period during the Public Health Emergency (PHE). The PE period begins the first day of the month of the initial PE period. The state will limit the number of PE periods for PW to two per pregnancy. The state will limit the number of PE periods individuals may have to no more than two within a 12-month period, starting with the first day of the month of the initial PE period. The populations covered are Parent or Caretaker Relatives and Former Foster Care, Pregnant Women, and Children.
- B3 –
 - The state allows the qualified entities listed in PE SPA KS14-0002 to make PE determinations for Parent or Caretaker Relatives and Former Foster Care in addition to Pregnant Women and Children.
 - The state will increase the reasonable limits on the number of PE periods individuals may have to no more than two (from one in KS14-002) within a 12-month period, starting with the first day of the month of the initial PE period.
 - KS will increase the number of PE periods for PW from one per pregnancy (in KS 14-0002) to two per pregnancy.