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State/Territory Name: Delaware

State Plan Amendment (SPA) #: DE-20-0003

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1) Approval Letter
2) State Plan Pages
June 24, 2020

Stephen M. Groff, Director
Division of Medicaid and Medical Assistance
Designee for Kara Odom Walker, Secretary
Delaware Health and Social Services
P.O. Box 906
New Castle, DE  19720-0906

Dear Mr. Groff:

Your title XXI Children’s Health Insurance Program (CHIP) state plan amendment (SPA) DE-20-0003-CHIP submitted on May 13, 2020, has been approved. This amendment provides temporary adjustments to the state’s policies related to processing applications and renewals, acting on certain changes in circumstances, and cost sharing requirements in response to disaster events. This amendment has an effective date of March 1, 2020.

This amendment, as it applies to the COVID-19 public health emergency (PHE), makes the following changes effective March 1, 2020 through the duration of the state or federally-declared PHE, or at state discretion, a shorter period of time:

- Waive requirements related to timely processing of applications and renewals;
- Extend the reasonable opportunity period for non-citizens declaring to be in a satisfactory immigration status as long as the non-citizen is making a good faith effort to resolve any inconsistencies or obtain any necessary documentation, or the agency is unable to complete the verification process within the 90-day reasonable opportunity period;
- Delay acting on changes in circumstances for CHIP beneficiaries, other than the required changes in circumstance described in 42 CFR 457.342(a) cross-referencing 42 CFR 435.926(d);
- Provide non-emergency transportation; and
- Waive all monthly premiums and premium balances.

In the event of a future disaster, this SPA provides Delaware with the authority to implement the aforementioned temporary policy adjustments by simply notifying CMS of its intent, the effective date and duration of the provision, and a list of applicable Governor or federally-declared disaster or emergency areas. While the state must provide notice to CMS, this option provides an administratively streamlined pathway for the state to effectively respond to an evolving disaster event.
Your title XXI project officer is Ms. Ticia Jones. She is available to answer questions concerning this amendment and other CHIP-related issues. Her 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) 786-8145  
E-mail: Ticia.Jones@cms.hhs.gov

If you have any questions, please contact Meg Barry, Acting Director, Division of State Coverage Programs, at (410) 786-1536. We look forward to continuing to work with you and your staff.

Sincerely,

/Signed Amy Lutzky/

Amy Lutzky  
Acting Deputy Director
CHIP Disaster Relief State Plan Amendment

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: October 1, 1998
Implementation Date: February 1, 1999

Subsequent Plan Amendments

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<td>SPA #1</td>
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<td>July 1, 2018</td>
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Summary of Approved CHIP MAGI SPAs:

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<tr>
<th>Transmittal Number</th>
<th>SPA Group</th>
<th>PDF #</th>
<th>Description</th>
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<tr>
<td>DE-13-0012</td>
<td>MAGI</td>
<td>CS7</td>
<td>Eligibility – Targeted Low Income Children</td>
<td>Supersedes the current sections Geographic Area 4.1.1; Age 4.1.2; and Income 4.1.3</td>
</tr>
<tr>
<td></td>
<td>Eligibility &amp; Methods</td>
<td>CS15</td>
<td>MAGI-Based Income Methodologies</td>
<td>Incorporate within a separate subsection under section 4.3</td>
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Approval Date: Effective Date: March 1, 2020
| DE-13-0013 | XXI Medicaid Expansion | CS3 | Eligibility for Medicaid Expansion Program | Supersedes the current Medicaid expansion section 4.0 |
| DE-13-0016 | Establish 2101(f) Group | CS14 | Children Ineligible for Medicaid as a Result of the Elimination of Income Disregards | Incorporate within a separate subsection under section 4.1 |
| DE-13-0015 | Non-Financial Eligibility | CS17 | Non-Financial Eligibility – Residency | Supersedes the current section 4.1.5 |
| | | CS18 | Non-Financial Eligibility – Citizenship | Supersedes the current sections 4.1.0; 4.1.1-LR; 4.1.1-LR |
| | | CS19 | Non-Financial Eligibility – Social Security Number | Supersedes the current section 4.1.9.1 |
| | | CS20 | Non-Payment of Premiums | Supersedes the current section 4.4.4 |
| | | | Continuous Eligibility | |

Approval Date: Effective Date: March 1, 2020
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<th>CS21</th>
<th>CS27</th>
<th>Supersedes the current section 8.7</th>
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<th>DE-13-0014</th>
<th>Eligibility Processing</th>
<th>CS24</th>
<th>Eligibility Process</th>
<th>Supersedes the current sections 4.3 and 4.4</th>
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**SPA #: DE-20-0003-CHIP**  
Purpose of SPA: Disaster Relief - To implement provision for temporary adjustments to enrollment policies and cost sharing requirements for children in families living and/or working in Governor or Federally declared disaster areas. In the event of a disaster, the State will notify CMS that it intends to provide temporary adjustments to its enrollment and redetermination policies and cost sharing requirements, the effective and duration date of such adjustments, and the applicable Governor or Federally declared disaster areas.  

Proposed effective date: **March 1, 2020**  
Delaware is seeking to implement the plan outlined within Sections 4.1.9.2, 6.2.30, 8.2.1, and 8.7 until the State or Federal emergency has been lifted, whichever is later.  

Proposed implementation date: **March 1, 2020**  

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.  

Delaware does not have any state or federally recognized Indian tribes. Any Delaware resident, including those who are American Indians or Alaska Natives, may participate in the review of amendments to state law or regulation and may offer comments on all program policies, including those relating to provision of child health assistance to American Indian or Alaskan Native children.
Section 4. Eligibility Standards and Methodology

4.1.9.2 Continuous eligibility.

The initial month of the continuous period of eligibility is the first month of eligibility. A new period of continuous eligibility will be established beginning with the month following the last month of the previous period of continuous eligibility, when a scheduled renewal is completed and the child is determined to be eligible. A new 12-month period of continuous eligibility will also begin after any break in DHCP eligibility.

Refer to attached MAGI page CS27

CHIP Disaster Relief:

At State discretion, temporarily provide continuous eligibility to CHIP enrollees who might otherwise have coverage terminated after a change in circumstances by waiving the following exceptions of the continuous eligibility period to align with Medicaid requirements for beneficiaries who reside and/or work in a State or Federally declared disaster area, to the end of the emergency period:

- There is a failure to pay required premiums or enrollment fees on behalf of a child, as provided for in the state plan.

4.3 Methodology. Describe the methods of establishing and continuing eligibility and enrollment. The description should address the procedures for applying the eligibility standards, the organization and infrastructure responsible for making and reviewing eligibility determinations, and the process for enrollment of individuals receiving covered services, and whether the State uses the same application form for Medicaid and/or other public benefit programs. (Section 2102)(b)(2)) (42CFR, 457.350).

Refer to attached MAGI page CS15 and CS24.

CHIP Disaster Relief:

- At State discretion, requirements related to timely processing of applications may be temporarily waived for CHIP applicants who reside and/or work in a State or Federally declared disaster area.

- At State discretion, requirements related to timely processing of renewals and/or deadlines for families to respond to renewal requests may be temporarily waived for CHIP beneficiaries who reside and/or work in a State or Federally declared disaster area.
• At State discretion, the State may provide for an extension of the reasonable opportunity period for non-citizens declaring to be in a satisfactory immigration status, if the non-citizen is making a good faith effort to resolve any inconsistencies or obtain any necessary documentation, or the agency is unable to complete the verification process within the 90-day reasonable opportunity period due to the State or Federally declared disaster or public health emergency.

• At State discretion, the State may temporarily delay acting on certain changes in circumstances for CHIP beneficiaries whom the state determines are impacted by a State or Federally declared disaster area such that processing the change in a timely manner is not feasible. The state will continue to act on the required changes in circumstance described in 42 CFR 457.342(a) cross-referencing 42 CFR 435.926(d).

Section 6. Coverage Requirements for Children’s Health Insurance

6.2.30. Enabling services (such as transportation, translation, and outreach services) (Section 2110(a)(27)) –

CHIP Disaster Relief:

At the State’s discretion, it may temporarily provide nonemergency transportation to CHIP enrollees who reside and/or work in a State or Federally declared disaster area.

Section 8. Cost-Sharing and Payment

8.2.1. Premiums:

• $10 PFPM for families with children ages one (1) through five (5) with family incomes ranging from 143% FPL through 159% of FPL,

• $10 PFPM for families with children ages six (6) through eighteen (18) with family incomes ranging from 134% FPL through 159% of FPL,

• $15 PFPM for families with children ages one (1) through eighteen (18) with family incomes ranging from 143% to 160% through 176% of the FPL, and

• $25 PFPM for families with children ages one (1) through eighteen (18) with family incomes ranging from 177% to 212% of the FPL.

(refer to CHIP MAGI State Plan Page CS21 for information on the effect of non-payment of premiums).

Incentives for pre-payment of premiums include the following: Pay three (3) months get one (1) premium free month; pay six (6) months get two (2) premium free months; pay nine (9) months get three (3) premium free months.
CHIP Disaster Relief:

At State discretion, premiums may be waived for CHIP applicants and/or beneficiaries who meet income and other eligibility requirements and who reside and/or work in a State or Federally declared disaster area for a specified period of time.

8.7 Provide a description of the consequences for an enrollee or applicant who does not pay a charge (42CFR 457.570 and 457.505(c)).

Coverage will be cancelled when the family is in arrears for two premium payments. The coverage will end the last day of the month when the second payment is due. A notice of cancellation will be sent to the family advising the family to report any change in circumstances, such as a decrease in income that may result in eligibility for Medicaid. If one premium payment is received by the last day of the cancellation month, coverage will be reinstated. Refer to attached MAGI page CS21.

CHIP Disaster Relief:

Exception to Disenrollment for Failure to Pay Premiums—At State discretion, premiums may be waived for CHIP applicants and/or enrollees who meet income and other eligibility requirements and who reside and/or work in a State or Federally declared disaster area. The premium balance will be waived if the family is determined to have been residing and/or working in a State or Federally declared disaster area on self-declared application information or other documentation provided by the family.

Section 9. **Strategic Objectives and Performance Goals and Plan Administration**

9.10 Provide a 1-year projected budget (Section 2107(d)) (42CFR 457.140).

DMMA has not had sufficient time to analyze and develop the fiscal impact due to the current COVID-19 disaster.