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State/Territory Name: Iowa

State Plan Amendment (SPA) #: IA-13-0022

This file contains the following documents in the order listed:

- 1) Approval Letter
- 2) SPA Summary Form
- 3) Approved SPA Pages

The complete title XXI state plan for Iowa consists of the most recent state plan posted on Medicaid.gov under CHIP and State Plan Amendments. The link is provided below. The following approved templates are in addition to, or replace sections of the state's posted current state plan. The attached approval letter(s) explain how these templates fit into that state plan.

Link to state title XXI state plans and amendments: XXI state plans and amendments: http://medicaid.gov/chip/state-program-information/chipstate-program-information.html

DEPARTMENT OF HEALTH & HUMAN SERVICES Centers for Medicare & Medicaid Services 7500 Security Boulevard, Mail Stop: S2-01-16 Baltimore, Maryland 21244-1850



Children and Adults Health Programs Group

JUL 0 7 2014

Charles M. Palmer Director Iowa Department of Human Services Hoover State Office Building 1305 East Walnut, 5th Floor Des Moines, IA 50319

Dear Mr. Palmer:

I am pleased to inform you that the Centers for Medicare & Medicaid Services has approved your Children's Health Insurance Program (CHIP) state plan amendment (SPA) number IA-13-0022, submitted on December 31, 2013, with additional information provided on July 3, 2014. This SPA relates to Modified Adjusted Gross Income (MAGI) Eligibility and has an effective date of January 1, 2014.

The SPA number IA-13-0022 is approved to clarify the state's non-financial eligibility policies on residency, citizenship, social security numbers, substitution of coverage, non-payment of premiums, continuous eligibility and presumptive eligibility. Copies of the approved state plan pages are attached, and these approved pages supersede sections of Iowa's current state plan as detailed below:

New State Plan Page	Impact on Current State Plan Section
CS17: Non-Financial Eligibility – Residency	Section 4.1.5
CS18: Non-Financial Eligibility – Citizenship	Section 4.1.0; 4.1-LR; 4.1.1-LR
CS19: Non-Financial Eligibility – Social Security	Section 4.1.9.1
Number	
CS20: Non-Financial Eligibility – Substitution of	Section 4.4.4
Coverage	
CS21: Non-Financial Eligibility – Non-Payment of	Section 8.7
Premiums	
CS27: General Eligibility – Continuous Eligibility	Section 4.1.8
CS28: General Eligibility - Presumptive Eligibility	Section 4.3.2
for Children	

Your title XXI project officer is Mr. Martin Burian. He is available to answer questions concerning this amendment. Mr. Burian's contact information is as follows:

Centers for Medicaid & Medicaid Services Center for Medicaid and CHIP Services

Page 2 – Mr. Charles M. Palmer

7500 Security Boulevard, Mail Stop S2-01-16

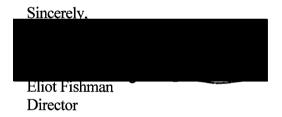
Baltimore, MD 21244-1850 Telephone: (410) 786-3246 Facsimile: (410) 786-5882

E-mail: Martin.Burian@cms.hhs.gov

Official communications regarding program matters should be sent simultaneously to Mr. Burian and to Mr. James G. Scott, Associate Regional Administrator in our Kansas City Regional Office. Mr. Scott's address is:

Centers for Medicare & Medicaid Services Division of Medicaid and Children's Health Operations Richard Bolling Federal Building 601 East 12th St, Room 355 Kansas City, MO 64103-2808

If you have additional questions, please contact Ms. Kelly Whitener, Director, Division of State Coverage Programs, at (410) 786-0719. We look forward to continuing to work with you and your staff.



Enclosures

Cc: James G. Scott, ARA, CMS Region VII



SPA# IA-13-0022

CHIP Eligibility

OMB Control Number: 0938-1148

Expiration date: 10/31/2014

Separate Child Health Insurance Program Non-Financial Eligibility - Residency CS17
42 CFR 457.320
Residency
The CHIP Agency provides CHIP to otherwise eligible residents of the state, including residents who are absent from the state under certain conditions.
A child is considered to be a resident of the state under the following conditions:
A non-institutionalized child, if capable of indicating intent and who is emancipated or married, if the child is living in the state and:
1. Intends to reside in the state, including without a fixed address, or
2. Has entered the state with a job commitment or seeking employment, whether or not currently employed.
■ A non-institutionalized child not described above and a child who is not a ward of the state:
1. Residing in the state, with or without a fixed address, or
2. The state of residency of the parent or caretaker, in accordance with 42 CFR.435.403(h)(1), with whom the individual resides.
An institutionalized child, who is not a ward of the state, if the state is the state of residence of the child's custodial parent or caretaker at the time of placement, or
■ A child who is a ward of the state regardless of where the child lives, or
A child physically located in the state when there is a dispute with one or more states as to the child's actual state of residence.
If the state covers pregnant women, a pregnant woman is considered to be a resident under the following conditions:
A non-institutionalized pregnant woman who is living in the state and:
1. Intends to reside in the state, including without a fixed address, or if incapable of indicating intent, is living in the state, or
2. Entered with a job commitment or seeking employment, whether or not currently employed.
An institutionalized pregnant woman placed in an out-of-state-institution, as defined in 42 CFR 435.1010, including foster care homes, by an agency of the state, or
An institutionalized pregnant woman residing in an in-state-institution, as defined in 42 CFR 435.1010, whether or not the individual established residency in the state prior to entering the institution, or
A pregnant woman physically located in the state when there is a dispute with one or more states as to the pregnant woman's actual state of residence.
The state has in place related to the residency of children and pregnant women (if covered by the state):

Approval Date: JUL 0 7 2014 Effective Date: January 1, 2014



One or more interstate agreement(s).	No
A policy related to individuals in	the state only for educational purposes. No

PRA Disclosure Statement

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SPA# IA-13-0022

CHIP Eligibility

OMB Control Number: 0938-1148

Separate Child Health Insurance Program Non-Financial Eligibility - Citizenship CS18	jê i
Sections 2105(c)(9) and 2107(e)(1)(J) of the SSA and 42 CFR 457.320(b)(6), (c) and (d)	iak.i.u.
Citizenship	
The CHIP Agency provides CHIP eligibility to otherwise eligible citizens and nationals of the United States and certain non-citizens. including the time period during which they are provided with reasonable opportunity to submit verification of their citizenship, national status or satisfactory immigration status.	
The CHIP Agency provides eligibility under the Plan to otherwise eligible individuals:	
Who are citizens or nationals of the United States; or	
Who are qualified non-citizens as defined in section 431 of the Personal Responsibility and Work Opportunity Reconciliation Act (PRWORA) (8 U.S.C. §1641), or whose eligibility is required by section 402(b) of PRWORA (8 U.S.C. §1612(b)) and is not prohibited by section 403 of PRWORA (8 U.S.C. §1613); or	
Who have declared themselves to be citizens or nationals of the United States, or an individual having satisfactory immigration status, during a reasonable opportunity period pending verification of their citizenship, nationality, or satisfactory immigration status consistent with requirements of 1903(x), 1137(d), and 1902(ee) of the Act, and 42 CFR 435.406, 407, 956 and 457.380.	
The reasonable opportunity period begins on and extends 90 days from the date the notice of reasonable opportunity is received by the individual.	
The agency provides for an extension of the reasonable opportunity period if the individual is making a good faith effort to resolve any inconsistencies or obtain any necessary documentation, or the agency needs more time to complete the verification process.	
The agency begins to furnish benefits to otherwise eligible individuals during the reasonable opportunity period on a date earlier than the date the notice is received by the individual.	
The CHIP Agency elects the option to provide CHIP coverage to otherwise eligible children up to age 19, lawfully residing in the United States, as provided in Section 2107(e)(1)(J) of the SSA (Section 214 of CHIPRA 2009, P.L. 111-3).	
Otherwise eligible children means children meeting the eligibility requirements of targeted low-income children with the exception of non-citizen status.	
✓ The CHIP Agency provides assurance that lawfully residing children are also covered under the state's Medicaid program.	
The CHIP Agency elects the option to provide CHIP coverage to otherwise eligible pregnant women, lawfully residing in the United States, as provided in Section 214 of CHIPRA 2009, P.L. 111-3. The state may not select this option unless the state also elects to cover lawfully residing children. A state may not select this option unless the state also covers Targeted Low-Income Pregnant Women.	
An individual is considered to be lawfully residing in the United States if he or she is lawfully present and meets state residency requirements.	
An individual is considered to be lawfully present in the United States if he or she is:	



- 1. A qualified non-citizen as defined in 8 U.S.C. 1641(b) and (c);
- 2. A non-citizen in a valid nonimmigrant status, as defined in 8 U.S.C. 1101(a)(15) or otherwise under the immigration laws (as defined in 8 U.S.C. 1101(a)(17));
- 3. A non-citizen who has been paroled into the United States in accordance with 8 U.S.C.1182(d)(5) for less than 1 year, except for an individual paroled for prosecution, for deferred inspection or pending removal proceedings;
- 4. A non-citizen who belongs to one of the following classes:
 - (i) Granted temporary resident status in accordance with 8 U.S.C.1160 or 1255a, respectively;
 - (ii) Granted Temporary Protected Status (TPS) in accordance with 8 U.S.C. §1254a, and individuals with pending applications for TPS who have been granted employment authorization;
 - (iii) Granted employment authorization under 8 CFR 274a.12(c);
 - (iv) Family Unity beneficiaries in accordance with section 301 of Pub. L. 101-649, as amended;
 - (v) Under Deferred Enforced Departure (DED) in accordance with a decision made by the President;
 - (vi) Granted Deferred Action status;
 - (vii) Granted an administrative stay of removal under 8 CFR 241;
 - (viii) Beneficiary of approved visa petition who has a pending application for adjustment of status;
- 5. Is an individual with a pending application for asylum under 8 U.S.C. 1158, or for withholding of removal under 8 U.S.C.1231, or under the Convention Against Torture, who:
 - (i) Has been granted employment authorization; or
 - (ii) Is under the age of 14 and has had an application pending for at least 180 days;
- 6. Has been granted withholding of removal under the Convention Against Torture;
- 7. Is a child who has a pending application for Special Immigrant Juvenile status as described in 8 U.S.C.1101(a)(27)(J);
- 8. Is lawfully present in American Samoa under the immigration laws of American Samoa; or
- 9. Is a victim of severe trafficking in persons, in accordance with the Victims of Trafficking and Violence Protection Act of 2000, Pub. L. 106-386, as amended (22 U.S.C. 7105(b)).
- 10. Exception: An individual with deferred action under the Department of Homeland Security's deferred action for the childhood arrivals process, as described in the Secretary of Homeland Security's June 15, 2012 memorandum, shall not be considered to be lawfully present with respect to any of the above categories in paragraphs (1) through (9) of this definition.

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OMB Control Number: 0938-1148

Expiration date: 10/31/2014

	ate Child Health Insurance Program CS19 CS19
	457.340(b) .
Social S	Security Number
det	a condition of eligibility, the CHIP Agency must require individuals who have a social security number or are eligible for one as ermined by the Social Security Administration, to furnish their social security number, or numbers if they have more than one other.
	The CHIP Agency requires individuals, as a condition of eligibility, to furnish their social security number(s), with the following exceptions:
	Individuals refusing to obtain a social security number (SSN) because of well established religious objections, or
	Individuals who are not eligible for an SSN, or
	Individuals who are issued an SSN only for a valid non-work purpose.
	The CHIP Agency assists individuals, who are required to provide their SSN, to apply for or obtain an SSN from the Social Security Administration if the individual does not have or forgot their SSN.
	The CHIP Agency informs individuals required to provide their SSN:
	By what statutory authority the number is solicited; and
	How the state will use the SSN.
✓	The CHIP Agency provides assurance that it will verify each SSN furnished by an applicant or beneficiary with the Social Security Administration, not deny or delay services to an otherwise eligible applicant pending issuance or verification of the individual's SSN by the Social Security Administration and that the state's utilization of the SSNs is consistent with sections 205 and 1137 of the Social Security Act and the Privacy Act of 1974.
The	e state may request non-applicant household members to voluntarily provide their SSN, if the state meets the requirements below.
	The state requests non-applicant household members to voluntarily provide their SSN.

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OMB Control Number: 0938-1148

Expiration date: 10/31/2014

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CS20

Section 2102(b)(3)(C) of the SSA and 42 CFR 457.340(d)(3), 457.350(i), and 457.805

Substitution of Coverage

The CHIP Agency provides assurance that it has methods and policies in place to prevent the substitution of group health coverage or other commercial health insurance with public funded coverage. These policies include:

■ Substitution of coverage prevention strategy:

	Name of policy	Description	
+		A one-month waiting period shall be imposed for a child who is subject to a monthly premium.	x

A waiting period during which an individual is ineligible due to having dropped group health coverage. Yes

How long is the waiting period?

- One month
- C Two months
- C 90 days
- C Other
- The state allows exemptions from the waiting period for the following reasons:
 - The premium paid by the family for coverage of the child under the group health plan exceeded 5 percent of household income.
 - The child's parent is determined eligible for advance payment of the premium tax credit for enrollment in a QHP through the Marketplace because the ESI in which the family was enrolled is determined unaffordable in accordance with 26 CFR 1.36B–2(c)(3)(v).
 - The cost of family coverage that includes the child exceeded 9.5 percent of the household income.
 - The employer stopped offering coverage of dependents (or any coverage) under an employer-sponsored health insurance plan.
 - A change in employment, including involuntary separation, resulted in the child's loss of employer-sponsored insurance (other than through full payment of the premium by the parent under COBRA).
 - The child has special health care needs.
 - The child lost coverage due to the death or divorce of a parent.

Does the state allow other exemptions in addition to those listed above? Yes



	Describe	
•	Health insurance was provided through an individual plan.	X
+	The child's health insurance coverage was lost due to domestic violence.	x
•	The child's health insurance coverage was lost due to an involuntary loss of employment that qualified the parent for dependent coverage, including, but not limited to layoff, business closure, reduction in hours, or termination.	x
•	The child's health insurance coverage was lost due to utilization of the maximum lifetime coverage amount.	X
+	The child's health insurance coverage was lost due to expiration of coverage under COBRA.	X
	The child's health insurance coverage was lost due to a reason beyond the control of the parent, such as a serious illness of the parent, fire, flood, or natural disaster.	x
1	The child is moving from Medicaid to CHIP.	x
Notice of Acti	state determining that a child is not subject to any of the exceptions to the won informing that their child is eligible for CHIP coverage effective one monumediately enrolled in coverage one month from the date of application, and	nth from the date of application.
insurance a	ne processes the state employs to coordinate coverage of children subject to a affordability programs, including safeguards to prevent gaps in coverage for urance affordability program to CHIP after satisfying the waiting period.	a waiting period with other children transitioning from
transfer to be of is being evaluated	received by the state and subject to the one month waiting period are sent to be evaluated for other Insurance Affordability Programs. The notice to the familiated for other programs as well as the first eligible date of coverage under the enrolled in hawk-i once the waiting period ends without any further action re	ly indicates that the application e hawk-i program. The child is
The state provi	des assurance that:	
	not require a new application or the submission of information already proving the waiting period for the purpose of enrolling CHIP-eligible children w.	
	ildren subject to the waiting period, it will promptly transfer each individual able insurance affordability program and notify such program of the date on adividual.	
☐ If the state covers pregna	ant women, the waiting period does not apply to pregnant women.	
If the state elects to offer der	ntal only supplemental coverage, the following assurances apply:	
The other coverage exclusion provided in section 2110	usion does not apply to children who are otherwise eligible for dental only su 0(b)(5) of the SSA.	upplemental coverage as

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✓ The waiting period does not apply to children eligible for dental only supplemental coverage.

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V.20131122



OMB Control Number: 0938-1148

Expiration date: 10/31/2014 Separate Child Health Insurance Program **CS21** Non-Financial Eligibility - Non-Payment of Premiums 42 CFR 457.570 Non-Payment of Premiums Does the state impose premiums or enrollment fees? Yes Can non-payment of premiums or enrollment fees result in loss of CHIP eligibility? Yes Does the state have a premium lock out period? Yes Please describe the lock-out period: hawk-i members who have outstanding premium payments at the time of application or renewal, must make payment of the premiums if they are applying within 90 days from the date of cancelation. What is the length of the time premium lock-out period? Select a length of time: C One month C Two months € 90 days C Other (not to exceed 90 days) Are there exceptions to the required lock-out period? Yes Individual's income decreased to a level where no premium is required or within Medicaid standards Other financial hardship Other ✓ The state assures that: It does not require the collection of past due premiums or enrollment fees as a condition of eligibility for enrollment once the lock-out period has expired; and It provides enrollees with an opportunity for an impartial review to address disenrollment from the program in accordance with section 457.1130(a)(3); and The child will be reenrolled in CHIP during the lock-out period upon payment of past due premiums or enrollment fees.

PRA Disclosure Statement



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V.20130709



OMB Control Number: 0938-1148

Expiration date: 10/31/2014 Separate Child Health Insurance Program **CS27** General Eligibility - Continuous Eligibility 2105(a)(4)(A) of the SSA and 42 CFR 457.342 and 435.926 The CHIP Agency may provide that children who have been determined eligible under the state plan shall remain eligible, regardless of any changes in the family's circumstances, during a continuous eligibility period up to 12 months, or until the time the child reaches an age specified by the state (not to exceed age 19), whichever is earlier. The CHIP Agency elects to provide continuous eligibility to children under this provision. Yes For children up to age 19 C For children up to age The continuous eligibility period begins on the effective date of the child's most recent determination or redetermination of eligibility, and ends: At the end of the months continuous eligibility period. Exceptions to the continuous eligibility period: The child attains the age specified by the state Agency or age 19. The child or child's representative requests voluntary disensollment. The child is no longer a resident of the state. The Agency determines that eligibility was erroneously granted at the most recent determination or renewal of eligibility because of Agency error or fraud, abuse, or perjury attributed to child or child's representative. The child dies. There is a failure to pay required premiums or enrollment fees on behalf of a child, as provided for in the state plan. Other

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Approval Date:



OMB Control Number: 0938-1148

Expiration date: 10/31/20
Separate Child Health Insurance Program General Eligibility - Presumptive Eligibility for Children CS:
42 CFR 457.355 and 435.1102, 2107(e)(1)(L) and 1920A of the SSA
The CHIP Agency covers children when determined presumptively eligible by a qualified entity. Yes
Describe the population of children to whom presumptive eligibility applies:
The population of children to whom presumptive eligibility applies is all children under 302% of the federal poverty level.
Describe the duration of the presumptive eligibility period and any limitations:
Presumptive eligibility begins on the day the qualified entity determines that the child appears eligible and ends when one of the following occurs: - the last day of the next calendar month after the month of application, OR - the day ongoing Medicaid is established, OR - the day the hawk-i eligibility decision is made, OR - the last day of the next calendar month, after the month of application, the Medicaid application is withdrawn.
Describe the application process and eligibility determination factors used:
A person requesting presumptive eligibility for a child must complete a Presumptive Health Care Coverage for Children Application and submit it to a qualified entity. The qualified entity enters the information into the online application exactly as documented. The information is self-declared and is not yet verified.
Eligibility determination factors include the child must be under age 19, must be an Iowa resident, must be a citizen or qualificalien, live in a household with MAGI income less than 302% of the FPL, and not have received presumptive eligibility in the past 12 months from the month application is received by the qualified entity.
■ The CHIP Agency uses qualified entities, as defined in section 1920A, to determine eligibility presumptively for children.
Separate Child Health Insurance Program General Eligibility - List of Qualified Entities A qualified entity is an entity that is determined by the agency to be capable of making presumptive eligibility
determinations based on an individual's household income and other requirements, and that meets at least one of the following requirements. Select the types of entities used to determine presumptive eligibility:
Furnishes health care items and services covered under the approved plan and is eligible to receive payments under the approved plan Is authorized to determine a child's eligibility to participate in a Head Start program under the Head Start
Act
Is authorized to determine a child's eligibility to receive child care services for which financial assistance is provided under the Child Care and Development Block Grant Act of 1990

Effective Date: January 1, 2014



Is authorized to determine a child's eligibility to receive assistance under the Special Supplemental Food Program for Women, Infants, and Children (WIC) under section 17 of the Child Nutrition Act of 1966	
Is authorized to determine a child's eligibility under the Medicaid state plan or for child health assistance under the Children's Health Insurance Program (CHIP)	
Is an elementary or secondary school, as defined in section 14101 of the Elementary and Secondary Education Act of 1965 (20 U.S.C. 8801)	
Is an elementary or secondary school operated or supported by the Bureau of Indian Affairs	
☑ Is a state or Tribal child support enforcement agency under title IV-D of the Act	
Is an organization that provides emergency food and shelter under a grant under the Stewart B. McKinney Homeless Assistance Act	
Is a state or Tribal office or entity involved in enrollment in the program under Medicaid, CHIP, or title IV-A of the Act	
Is an organization that determines eligibility for any assistance or benefits provided under any program of public or assisted housing that receives Federal funds, including the program under section 8 or any other section of the United States Housing Act of 1937 (42 U.S.C. 1437) or under the Native American Housing Assistance and Self Determination Act of 1996 (25 U.S.C. 4101 et seq.)	
Any other entity the state so deems, as approved by the Secretary	
The CHIP Agency assures that it has communicated the requirements for qualified entities, at 1920A(b)(3) of the Act, and provided adequate training to the entities and organizations involved. A copy of the training materials has been included.	
An attachment is submitted.	

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Approval Date:

logged in as TONIABROWN(CMS CO Staff) read only mode application rev p01 Children's Health Insurance **Program Eligibility** Home Finder Validate Print Help IA.0721.R00.00 - Jan 01, 2014 **Control Panel** Children's Health Insurance Program Eligibility: Summary Page General Information State/Territory Iowa **Transmittal Number:** File Management name: Please enter the Transmittal Number (TN) in the format ST-YY-0000 where ST= the state abbreviation, YY = the last two Tribal Input digits of the submission year, and 0000 = a four digit number with leading zeros. The dashes must also be entered. Summary IA-13-0022 Type of SPA: ☐ MAGI Eligibility & Methods □ XXI Medicaid Expansion ☐ Establish 2101(f) Group □ Eligibility Processing ☑ Non-Financial Eligibility Proposed Effective Date 01/01/2014 (mm/dd/yyyy) Federal Statute/Regulation Citation 42 CFR 457.320, Sections 2105(c)(9) and 2107(e)(1)(J) of the SSA and 42 CFR 457.320(b) Federal Budget Impact ☐ This SPA has a budget impact. Total budget impact: State Funds: Federal Funds: \$ [Subject of Amendment Please provide a brief summary of SPA changes.



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