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State/Territory Name: Delaware

State Plan Amendment (SPA) #: 23-0005

This file contains the following documents in the order listed:

- 1) Approval Letter
- 2) Summary Form (with 179-like data)
- 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



August 3, 2023

Theodore G. Mermigos, Jr.
Acting Division Director
Division of Medicaid Medical Assistance
P.O. Box 906
New Castle, DE 19720

Re: Delaware State Plan Amendment (SPA) DE-23-0005

Dear Acting Division Director Mermigos:

The Centers for Medicare & Medicaid Services (CMS) reviewed the proposed Medicaid State Plan Amendment (SPA) originally submitted under transmittal number (TN) DE-23-0005. This amendment proposes to align the resumption of premiums with the end of the unwinding period and to assign dates to the temporarily extended suspension of member copays and premiums originally approved in Disaster Relief SPA 20-0002.

CMS conducted our review of your submittal according to statutory requirements in Title XIX of the Act and implementing regulations. This letter is to inform you that Delaware's Medicaid SPA Transmittal Number 23-0005 is approved effective May 12, 2023.

If you have any questions, please contact Talbatha Myatt at (215) 861-4259 or via email at Talbatha.Myatt@cms.hhs.gov.

Sincerely,

Courtney L.
Miller -S

Digitally signed by
Courtney L. Miller -S
Date: 2023.08.03
06:11 09 -05'00'

Courtney Miller
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

2 3 — 0 0 0 5

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

~~Dec 1, 2023 / Jan 1, 2024~~ **May 12, 2023**

5. FEDERAL STATUTE/REGULATION CITATION
Title XIX of the Social Security Act

6. FEDERAL BUDGET IMPACT (Amounts in WHOLE dollars)

a. FFY 2023 \$ 0
b. FFY 2024 \$ 0

7. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT
Section 7.4-B, Page 2

8. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable)

~~Section 7.4-B~~

9. SUBJECT OF AMENDMENT

Temp Extension to COVID-19 DR Co-pay & Premium Provisions

10. GOVERNOR'S OFFICE COMMENT (Mandatory)

- 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

12. TYPED NAME
Theodore Mermigos

13. TITLE
Acting Director

14. DATE SUBMITTED
June 30, 2023

15. RETURN TO

Theodore Mermigos, Acting Director, DMMA, P.O. Box 906 New Castle, DE19720

FOR CMS USE ONLY

16. DATE RECEIVED
June 30, 2023

17. DATE APPROVED
August 3, 2023

PLAN APPROVED - ONE COPY ATTACHED

18. EFFECTIVE DATE OF APPROVED MATERIAL
May 12, 2023

19. SIGNATURE OF APPROVING OFFICIAL
Courtney L. Miller -S

Digitally signed by
Courtney L. Miller -S
Date: 2023.08.03
06:11:34 -05'00'

20. TYPED NAME OF APPROVING OFFICIAL
Courtney Miller

21. TITLE OF APPROVING OFFICIAL

On Behalf of Anne Marie Costello, Deputy Director, CMCS

22. REMARKS

7-11-23 - State requested the following pen and ink change to Box 4:
• Strike-through Dec 1, 2023 / Jan 1, 2024 and add May 12, 2023

7-21-23 - CMS requested and the state concurred with the following pen and ink changes:

- Box 7: Add missing page number, "page 2", after "Section 7.4-B"
- Box 8: Strike-through Section 7.4-B

Section 7 – General Provisions
7.4.-B Temporary Extension to the Medicaid Disaster Relief Policies
for the COVID-19 National Emergency

Effective the day after the end of the PHE until December 1, 2023, the agency temporarily extends the following election(s) in section 7.4 (approved on 05/27/2020 in SPA Number DE-20-0002) of the state plan.

- Section C.1 - DHSS suspends all copayments for all beneficiaries effective March 26, 2020.

Effective the day after the end of the PHE until July 1, 2024, the agency temporarily extends the following election(s) in section 7.4 (approved on 05/27/2020 in SPA Number DE-20-0002) of the state plan.

- Section C.2 - DHSS suspends all premiums for all beneficiaries effective April 1, 2020.

Section C – Premiums and Cost Sharing

1. The agency suspends deductibles, copayments, coinsurance, and other cost sharing charges as follows:

DHSS suspends all copayments for all beneficiaries effective March 26, 2020.

2. The agency suspends enrollment fees, premiums and similar charges for:
 - a. All beneficiaries
 - b. The following eligibility groups or categorical populations:

DHSS suspends all premiums for all beneficiaries effective April 1, 2020.