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State/Territory Name: Arkansas

State Plan Amendment (SPA) #: AR-18-0003

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 Arkansas 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: <http://medicaid.gov/Medicaid-CHIP-Program-Information/By-Topics/Childrens-Health-Insurance-Program-CHIP/CHIP-State-Program-Information.html>

.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

MAR 01 2018

Dawn Stehle
Medicaid Director
Department of Health and Human Services
P.O. Box 1437 (Slot S401)
700 Main Street
Little Rock, AR 72203

Dear Ms. Stehle:

Your title XXI Children's Health Insurance Program (CHIP) state plan amendment (SPA) AR-18-0003, submitted on February 21, 2018, has been approved. This SPA has an effective date of January 1, 2018.

Through this SPA, Arkansas amends provisions governing the eligibility determinations of the Federally Facilitated Exchange (FFE). Arkansas is now approved to accept assessments of CHIP eligibility from the FFE, rather than eligibility determinations made by the FFE. A copy of the approved CS24 state plan page is attached to be incorporated into the state's approved CHIP state plan. This page supersedes the previous CS24 that was approved on February 25, 2014.

Your title XXI project officer is Ms. Jasmine Aplin. 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) 786-8102
E-mail: Jasmine.Aplin@cms.hhs.gov

Official communications regarding program matters should be sent simultaneously to Ms. Aplin and Mr. Bill Brooks, Associate Regional Administrator (ARA) in our Dallas Regional Office. Mr. Brooks' address is:

Centers for Medicare & Medicaid Services
1301 Young St. Suite 714
Dallas, TX 75202

If you have questions additional questions, please contact Amy Lutzky, Director, Division of State Coverage Programs (410)786-0721.

Sincerely,

/ Anne Marie Costello /

Anne Marie Costello
Director

cc:

Mr. Bill Brooks, ARA, CMS Region VI, Dallas

Control Panel

General Information

File Management

Tribal Input

Summary

Children's Health Insurance Program Eligibility: Summary Page

State/Territory Arkansas

name: **Transmittal Number:**

Please enter the Transmittal Number (TN) in the format ST-YY-0000 where ST= the state abbreviation, YY = the last two digits of the submission year, and 0000 = a four digit number with leading zeros. The dashes must also be entered.

AR-18-0003

Type of SPA:

- MAGI Eligibility & Methods
- XXI Medicaid Expansion
- Establish 2101(f) Group
- Eligibility Processing
- Non-Financial Eligibility

Proposed Effective Date

01/01/2018 (mm/dd/yyyy)

Federal Statute/Regulation Citation

2102(b)(3) & 2107(c)(1)(O) of the SSA and 42 CFR 457, subpart C

Federal Budget Impact

- This SPA has a budget impact.

Total budget impact:

State Funds: \$ 0.00

Federal Funds: \$ 0.00

Please attach a revised CHIP budget.

Document

Subject of Amendment

Please provide a brief summary of SPA changes.

Character Count: 194 out of 2000

To transition the Arkansas Medicaid eligibility criteria from being a "determination" State to an "assessment" State by removing the authority to delegate eligibility to the Health Care Exchange

Signature of State Agency Official

Submitted By: Becky Murphy

Last Revision Date: Feb 21, 2018

Date:

Submit Date: Feb 21, 2018

BACK

CONTINUE



CHIP Eligibility

State Name:

OMB Control Number: 0938-1148

Transmittal Number: AR - 18 - 0003

Separate Child Health Insurance Program General Eligibility - Eligibility Processing

CS24

2102(b)(3) & 2107(e)(1)(O) of the SSA and 42 CFR 457, subpart C

- The CHIP Agency meets all of the requirements of 42 CFR 457, subpart C for application processing, eligibility screening and enrollment.

Application Processing

Indicate which application the agency uses for individuals applying for coverage who may be eligible based on the applicable modified adjusted gross income standard:

- The single, streamlined application developed by the Secretary in accordance with section 1413(b)(1)(A) of the Affordable Care Act.
- An alternative single, streamlined application developed by the state and approved by the Secretary in accordance with section 1413(b)(1)(B) of the Affordable Care Act.

An attachment is submitted.

- An alternative application used to apply for multiple human service programs approved by the Secretary, provided that the agency makes readily available the single or alternative application used only for insurance affordability programs to individuals seeking assistance only through such programs.

An attachment is submitted.

- The agency's procedures permit an individual, or authorized person acting on behalf of the individual, to submit an application via the internet website described in CFR 457.340(a), by telephone, via mail, in person and other commonly available electronic means.

The agency accepts applications in the following other electronic means.

- Other electronic means:

Screen and Enroll Process

- The CHIP Agency has coordinated eligibility and enrollment screening procedures in place that are applied at time of initial application, periodic redeterminations, and follow-up eligibility determinations. The procedures ensure that only targeted low-income children are provided CHIP coverage and that enrollment is facilitated for applicants found to be potentially eligible for other insurance affordability programs.

Procedures include:

- Screening of application to identify all individuals eligible or potentially eligible for CHIP or other insurance affordability programs; and



CHIP Eligibility

- Income eligibility test, with calculation of household income consistent with 42 CFR 457.315 for individuals identified as potentially eligible for Medicaid or other insurance affordability programs based on household income; and
- Screening process for individuals who may qualify for Medicaid on a basis other than having household income at or below the applicable MAGI standard, based on information in the single streamlined application.

The CHIP agency has entered into an arrangement with the Exchange to make eligibility determinations for advanced premium tax credits in accordance with section 1943(b)(2) of the SSA.

Redetermination Processing

- Redeterminations of eligibility for individuals whose financial eligibility is based on the applicable modified adjusted gross income standard are performed as follows, consistent with 42 CFR 457.343:
 - Once every 12 months.
 - Without requiring information from the individual if able to do so based on reliable information contained in the individual's account or other more current information available to the agency.

If the agency cannot determine eligibility solely on the basis of the information available to it, or otherwise needs additional information to complete the redetermination, it provides the individual with a pre-populated renewal form containing the information already available.

Screening by Other Insurance Affordability Programs

- The CHIP Agency provides assurance that it has adopted procedures to accept and process electronic accounts of individuals screened as potentially eligible for CHIP by other insurance affordability programs in accordance with the requirements of 42 CFR 457.348(b) and to determine eligibility in accordance with 42 CFR 457.340 in the same manner as if the application had been submitted directly to, and processed by the state.
-

The CHIP Agency elects the option to accept CHIP eligibility decisions made by the Exchange or other agencies administering insurance affordability programs as provided in 42 CFR 457.348 and to furnish CHIP in accordance with requirements of 42 CFR 457.340 to the same extent and in the same manner as if the applicant had been determined by the state to be eligible for CHIP.

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Check all Insurance Affordability Programs that apply:

- The Exchange
- Medicaid
- Other Insurance Affordability Program

- The CHIP Agency has entered into an agreement with agencies administering other insurance affordability programs to fulfill the requirements of 457.348(b) and will provide this agreement to the Secretary upon request.



CHIP Eligibility

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.

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