
Table of Contents

State/Territory Name: Arizona

State Plan Amendment (SPA) #: AZ-13-0003

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 Arizona 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>

Children's Health Insurance Program Eligibility

AZ.0569.R00.00 - Jan 01, 2014

Home Logout Finder Save Validate Print Help

Control Panel

General Information

File Management

Tribal Input

Summary

Children's Health Insurance Program Eligibility: Summary Page

State/Territory Arizona 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.

AZ-13-0003

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 (a)(2) and (3)

Federal Budget Impact

This SPA has a budget impact.

Total budget impact:

State Funds: \$ 15745200.00

Federal Funds: \$ 68636700.00

Please attach a revised CHIP budget.

Document

Subject of Amendment

Please provide a brief summary of SPA changes.

Character Count: 94 out of 2000

Establishes new Medicaid eligibility group for 6-19 year olds with income between 104-133% FPL.

Signature of State Agency Official

Submitted By: Theresa Gonzales

Last Revision Date: Dec 9, 2013

Date:

Submit Date: Dec 9, 2013

BACK

CONTINUE

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



Children and Adults Health Programs Group

DEC 18 2013

Melanie Norton, Assistant Director
Arizona Health Care Cost Containment System (AHCCCS)
801 E. Jefferson MD 2600
Phoenix, AZ 85034

Dear Ms. Norton:

I am pleased to inform you that your Title XXI Children's Health Insurance Program (CHIP) state plan amendment (SPA) number AZ-13-0003, submitted on December 9th, and related to Modified Adjusted Gross Income (MAGI) Eligibility has been approved with an effective date of January 1, 2014.

SPA number AZ-13-0003 converts the state's existing income eligibility standards to MAGI-equivalent standards, by age group, for children covered in its title XXI-funded Medicaid program. A copy of the approved state plan page (CS3) is attached, and should be incorporated into the state's approved CHIP state plan. This page supersedes the current Medicaid expansion Section (4.0) of the current CHIP state plan.

Your title XXI project officer is Ms. Tonia Brown. She is available to answer questions concerning this amendment and other CHIP-related issues. Ms. Brown's contact information is as follows:

Centers for Medicare & Medicaid Services
Center for Medicaid & CHIP Services
Mail Stop S2-01-16
7500 Security Boulevard
Baltimore, MD 21244-1850
Telephone: (410) 786-8613
Facsimile: (410) 786-5943
E-mail: Tonia.Brown@cms.hhs.gov

Official communications regarding program matters should be sent simultaneously to Ms. Brown and to Ms. Gloria Nagle, Associate Regional Administrator (ARA) in our San Francisco Regional Office. Ms. Nagle's address is:

Centers for Medicare & Medicaid Services
90 7th Street, Suite 5-300 (5W)
San Francisco, California 94103-6706

If you have additional questions, please contact Ms. Linda Nablo, Director, Division of Children's Health Insurance Programs, at (410) 786-5143. We look forward to continuing to work with you and your staff toward the approval of your remaining MAGI Eligibility SPAs.

Sincerely,



Eliot Fishman
Director

Enclosures

cc: Ms. Gloria Nagle, ARA, CMS Region VIII, San Francisco



CHIP Eligibility

OMB Control Number: 0938-1148

Expiration date: 10/31/2014

Eligibility for Medicaid Expansion Program					CS3
42 CFR 457.320(a)(2) and (3)					
Income eligibility for children under the Medicaid Expansion is determined in accordance with the following income standards: There should be no overlaps or gaps for the ages entered.					
Age and Household Income Ranges					
	From Age	To Age	Above (% FPL)	Up to & including (% FPL)	
+	6	19	104	133	X

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.