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State/Territory Name: Kentucky

State Plan Amendment (SPA) #: KY-20-0001

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Children and Adults Health Programs Group

June 10, 2020

Lisa D. Lee, Commissioner
Department for Medicaid Services
Cabinet for Health and Family Services
275 East Main Street, 6W-A
Frankfort, KY 40621

Dear Ms. Lee:

Your title XXI Children's Health Insurance Program (CHIP) state plan amendment (SPA) KY-20-0001-CHIP, submitted on May 15, 2020, has been approved. This amendment provides temporary adjustments to the state's policies related to processing applications and renewals, extending the reasonable opportunity period, and acting on certain changes in circumstances 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;
- Provide an extension of 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; and
- 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).

In the event of a future disaster, this SPA provides Kentucky with the authority to implement the approved, 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 Jack Mirabella. They are available to answer questions concerning this amendment and other CHIP-related issues. Their contact information is as follows:

Page 2 – Ms. Lisa D. Lee

Centers for Medicare & Medicaid Services
Center for Medicaid & CHIP Services
7500 Security Boulevard, Mail Stop: S2-01-16
Baltimore, MD 21244-1850
Telephone: (410) 786-0435
E-mail: holly.mirabella@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

1.4 Please provide the effective (date costs begin to be incurred) and implementation (date services begin to be provided) dates for this plan or plan amendment (42 CFR 457.65):

Original Plan

Effective Date: July 1, 1998
Implementation Date: July 1, 1998

SPA #1

Medicaid Expansion to 150% FPL

Proposed effective date: July 1, 1999
Proposed implementation date: July 1, 1999

SPA #2

Separate Insurance Program

Effective Date: November 1, 1999
Implementation Date: November 1, 1999

SPA #3

Application and Recertification Process Change

Effective Date: June 1, 2001
Implementation Date: June 1, 2001

SPA #4

Application Process Change and Compliance

Effective Date: July 1, 2002
Implementation Date: July 1, 2002

SPA 5

Cost Sharing

Effective Date: July 1, 2002
Implementation Date: July 1, 2002

SPA #6

Cost Sharing

Effective Date: July 1, 2003
Implementation Date: July 1, 2003

SPA #7

Cost Sharing

Effective Date: November 1, 2003
Implementation Date: November 1, 2003

SPA # 8

Benefit Cost Sharing, Delivery System

Effective Date: May 15, 2006
Implementation Date: May 15, 2006

SPA #9

Eligibility Determination

Effective Date: November 1, 2008
Implementation Date: Withdrawn

SPA #10

Eligibility Determination

Effective Date: November 1, 2008

Implementation Date: November 1, 2008

SPA #11 **Premium Payment**
Effective Date: July 1, 2010
Implementation Date: July 1, 2010

SPA #12 **Children of State Employees**
Effective Date: October 1, 2010
Implementation Date: October 1, 2010

SPA #13 **Update portions impacted by the Affordable Care Act Provisions**
Effective Date: January 1, 2014
Implementation Date: January 1, 2014

SPA #13-0013 **MAGI Eligibility & Methods**
CS7 (Eligibility-Targeted Low Income Children)
CS10 (Children with Access to Public Employee coverage)
CS15 (MAGI-Based Income Methodologies)
Effective Date: January 1, 2014
Implementation Date: January 1, 2014

SPA #13-0014 **XXI Medicaid Expansion**
CS3 (Eligibility for Medicaid Expansion Program)
Effective Date: January 1, 2014
Implementation Date: January 1, 2014

SPA #13-0015 **Establish 2101(f) Group**
CS14 (Children ineligible for Medicaid as a result of the Elimination of Income Disregards)
Effective Date: January 1, 2014
Implementation Date: January 1, 2014

SPA #13-0016 **Eligibility Process**
CS24 (Single, Streamlined application Screen and enroll process)
Effective Date: October 1, 2013
Implementation Date: October 1, 2013

SPA #14-0017

CS17 (Non-Financial Eligibility-Residency)

CS18 (Non-Financial-Citizenship)

CS19 (Non-Financial-Social Security)

CS20 (Substitution of Coverage)

Effective Date:

January 1, 2014

Implementation Date:

January 1, 2014

Non-Financial Eligibility**SPA #17-000**

CS24 (Single, Streamlined application screen and enroll process renewals) supersedes previous CS24)

Effective Date:

July 1, 2017

Implementation Date:

July 1, 2017

Eligibility Process**SPA #18-0001**

Effective Date:

October 2, 2017

Implementation Date:

October 2, 2017

Parity**SPA #18-0002**

Effective Date:

January 1, 2019

Implementation Date:

January 1, 2019

Eliminated Cost Sharing**SPA # KY-19-0001**

Effective Date:

January 1, 2018

Implementation Date:

January 1, 2018

MCO Compliance**SPA # KY-20-0001**

Effective Date:

March 1, 2020

Implementation Date:

March 1, 2020

Covid-19 Disaster

Superseding Pages of MAGI CHIP State Plan Material

State: Kentucky

Transmittal Number	SPA Group	PDF #	Description	Superseded Plan Section(s)
KY-13-0013 Effective/ Implementation Date: January 1, 2014	MAGI Eligibility & Methods	CS7	Eligibility – Targeted Low Income Children	Supersedes the current sections – Geographic Area 4.1.1; Age 4.1.2; and Income 4.1.3
		CS10	Children with access to Public Employee Coverage	Supersedes only the information on dependents of public employees in Section 4.4.1; supporting documentation should be incorporated as an appendix to the current state plan
		CS15	MAGI-Based Income Methodologies	
KY-13-0014 Effective/ Implementation Date: January 1, 2014	XXI Medicaid Expansion	CS3	Eligibility for Medicaid Expansion Program	Supersedes the current Medicaid expansion section 4.0
KY-13-0015 Effective/ Implementation Date: January 1, 2014	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
KY-13-0016 Effective/ Implementation Date: October 1, 2013	Eligibility Process	CS24	Single, Streamlined Application Screen and Enroll Process Renewals	Supersedes the current section 4.3; 4.4
KY-13-0017 Effective/ Implementation Date: January 1, 2014	Non-Financial Eligibility	CS17	Non-Financial Eligibility – Residency	Supersedes the current section 4.1.5
		CS18	Non-Financial – Citizenship	Supersedes the current sections 4.1.0; 4.1-LR;
		CS19	Non-Financial – Social Security Number	Supersedes the current section 4.1.9.1

Transmittal Number	SPA Group	PDF #	Description	Superseded Plan Section(s)
KY-13-0017 Effective/Implementation Date: January 1, 2014	Non-Financial Eligibility	CS20	Substitution of Coverage	Supersedes the current section 4.4.4
KY-17-0000 Effective/Implementation Date: July 1, 2017		CS24	Single, Streamlined Application	Supersedes the previously approved CS24
KY-18-0001 Effective/Implementation Date: July 1, 2017			Parity/MHPEAH	Mental Health Parity Compliance
KY-18-0002 Effective/Implementation Date: January 1, 2019	Financial		Copayments eliminated	Section 8.2.3, 8.3, 8.4.5, 8.6 & 8.7 cost sharing and copayment language eliminated.
KY-19-0001 CHIP Effective/Implementation Date: July 1, 2018			MCO Compliance	Ensure MCO Compliance
KY-20-0001 CHIP Effective/Implementation Date: March 1, 2020	Eligibility		COVID-19	Section 1.4: allows temporary requirements and adjustments for eligibility policies; Section 4.3: Methodology

1.4-TC Tribal Consultation (Section 2107€(1)(C))

Not applicable. There are no federally recognized American Indian Tribes in Kentucky

4.3.0 Methodology (Section 2102)(b)(2)) (42CFR, 457.350)

In the event of a State or Federally declared disaster, the State will notify CMS of its intent to provide temporary adjustments to its policies as described below:

- **State delay in processing applications.**
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.
- **State delay in processing renewals and extension of renewals deadlines for families.**
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.
- **Extend the reasonable opportunity period.**
At State discretion, the agency 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.
- **Delay processing changes in circumstance**
The State will 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).”