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**State/Territory Name: Oklahoma**

**State Plan Amendment (SPA) #: OK-14-0003**

This file contains the following documents in the order listed:

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

The complete title XXI state plan for Oklahoma 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: S2-26-12  
Baltimore, Maryland 21244-1850



**Children and Adults Health Programs Group**

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**JUN 17 2014**

Mr. Nico Gomez, CEO  
Oklahoma Health Care Authority  
2401 NW., 23<sup>rd</sup> Street Suite 1-A  
Oklahoma City, OK 73107

Dear Mr. Gomez:

I am pleased to inform you that the Centers for Medicare & Medicaid Services has approved your title XXI Children's Health Insurance Program (CHIP) state plan amendment (SPA) number OK-14-0003 submitted on March 31, 2014. This SPA relates to Modified Adjusted Gross Income (MAGI) Eligibility and has an effective date of January 1, 2014.

The SPA number OK-14-0003 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. Victoria Collins. She is available to answer questions concerning this amendment and other CHIP-related issues. Ms. Collins' 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) 786-2167  
Facsimile: (410) 786-5882  
E-mail: [Victoria.Collins@cms.hhs.gov](mailto:Victoria.Collins@cms.hhs.gov)

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

Centers for Medicare and Medicaid Services  
Office of the Regional Administrator  
1301 Young Street, Suite 714  
Dallas, TX 75202

Congratulations on the approval. We look forward to continuing to work with you and your staff toward the approval of your remaining MAGI Eligibility SPAs. If you have additional questions, please contact Ms. Barbara K. Richards, Acting Director, Division of State Coverage Programs at (410) 786-5920.

Sincerely,



Eliot Fishman  
Director

Enclosure

cc:  
Bill Brooks, ARA, CMS Region VI, Dallas



# 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)	
<b>+</b>	0	1	169	205	<b>X</b>
<b>+</b>	1	6	151	205	<b>X</b>
<b>+</b>	6	14	115	205	<b>X</b>
<b>+</b>	14	19	65	205	<b>X</b>

### 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.

**JUN 17 2014**

Children's Health Insurance Program Eligibility

OK.0893.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 Oklahoma 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.

OK-14-0003

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: \$

Federal Funds: \$

Subject of Amendment

Please provide a brief summary of SPA changes.

Character Count: 60 out of 2000

Set MAGI-based income standards for CHIP Medicaid Expansions

**Signature of State Agency Official**

Submitted By: Tywanda Cox

Last Revision Date: Apr 24, 2014

Date:

Submit Date: Mar 31, 2014

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