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## **Table of Contents**

**State/Territory Name: West Virginia**

**State Plan Amendment (SPA) #: WV-13-0001**

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 West Virginia 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>



**Children and Adults Health Programs Group**

**FEB 06 2014**

Sharon L. Carte, Executive Director  
West Virginia Children's Health Insurance Program  
1018 Kanawha Boulevard East, Suite 209  
Charleston, WV 25301

Dear Ms. Carte:

I am pleased to inform you that your Children's Health Insurance Program (CHIP) state plan amendment (SPA) number WV-13-0001 submitted on November 12, 2013, and related to Modified Adjusted Gross Income (MAGI) Eligibility, has been approved with an effective date of January 1, 2014.

**MAGI Eligibility & Methods:**

In SPA number WV-13-0001, page CS15 provides assurance that the state will apply methodologies based on MAGI for all separate CHIP covered groups. Page CS7 indicates that, using the approved MAGI conversion plan income thresholds, the state will cover targeted low-income children. Page CS10 allows the state to cover children who have access to public employee coverage and includes the supporting documentation. And on page CS13 the state elects to cover as deemed newborns children born to mothers enrolled as targeted low-income children in CHIP. The SPA includes a revised one-year budget which is attached to this letter and should replace the budget in section 9.10 of the current CHIP state plan. The other SPA pages are also attached to this letter and should be incorporated into the current CHIP state plan according to the table below. Where the current CHIP state plan contains relevant information, the new pages should replace and supersede the corresponding information throughout the current state plan.

New State Plan Page	Impact on Current State Plan Section
CS15: MAGI-Based Income Methodologies	Section 4.3: Add new subsection and supersede information on income eligibility and methods
CS7: Targeted Low-Income Children	Sections 4.1.1, 4.1.2, 4.1.3: Supersede all
CS10: Children Who Have Access to Public Employee Coverage	Section 4.1.7: Add new to section in addition to information on public employees
CS10: Maintenance of Agency Contribution	Appendix: Add new for this documentation
CS13: Deemed Newborns	Section 4.3: Add new to section

Page 2 – Ms. Sharon L. Carte

**Title XXI Medicaid Expansion**

SPA number WV-13-0002 MC2 converts the state's existing income eligibility standards to modified adjusted gross income (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. Ticia Jones. She is available to answer questions concerning this amendment and other CHIP-related issues. Ms. Jones' contact information is as follows:

Centers for Medicare & Medicaid Services  
Center for Medicaid & CHIP Services  
Mail Stop S2-01-16  
7500 Security Blvd.  
Baltimore, MD 21244-1850  
Telephone: (410) 786-8145  
Facsimile: (410) 786-5943  
E-mail: [Ticia.Jones@cms.hhs.gov](mailto:Ticia.Jones@cms.hhs.gov)

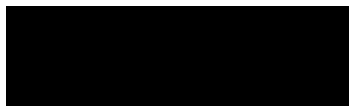
Official communications regarding program matters should be sent simultaneously to Ms. Jones and Francis McCullough, Associate Regional Administrator in our Philadelphia Regional Office. Mr. McCullough's address is:

Centers for Medicare & Medicaid Services  
Division of Medicaid and Children's Health Operations  
The Public Ledger Building, Suite 216  
150 South Independence Mall West  
Philadelphia, PA 19106

If you have additional questions, please contact Ms. Linda Nablo, Director, Division of State Coverage Programs, at (410) 786-5143.

We look forward to continuing to work with you and your staff.

Sincerely,



Eliot Fishman  
Director

cc: Francis McCullough, ARA, CMS Region III, Philadelphia

logged in as TONIABROWN(CMS CO Staff)

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application rev p01

## Children's Health Insurance Program Eligibility

WV.0495.R00.00 - Jan 01, 2014

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### Children's Health Insurance Program Eligibility: Summary Page

State/Territory name: West Virginia

**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.

WV-13-0002

**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 457320(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: 217 out of 2000

State option to create Medicaid expansion for children 6 - 18 up to 133% FPL

Instructions with August 15, 2013 budget submissions required budgeted amounts for this change be reflected on Medicaid budget

**Signature of State Agency Official**

Submitted By: Stacey Shamblin

Last Revision Date: Jan 9, 2014

Submit Date: Nov 12, 2013

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# CHIP Eligibility

OMB Control Number: 0938-1148

Expiration date: 10/31/2014

## Separate Child Health Insurance Program Eligibility - Targeted Low-Income Children

CS7

2102(b)(1)(B)(v) of the SSA and 42 CFR 457.310, 315 and 320

**Targeted Low-Income Children** - Uninsured children under age 19 whose household income is within standards established by the state.

The CHIP Agency operates this covered group in accordance with the following provisions:

### Age

Must be under age 19.

### Income Standards

Income standards are applied statewide.  Yes

Are there any exceptions, e.g. populations in a county which may qualify under either a statewide income standard or a county income standard?  No

### Statewide Income Standards

Begin with lowest age range first.

Please note that the lower bound for CHIP eligibility should be the highest standard used for Medicaid poverty-level children for the same age group or groups entered here.

	From Age	To Age	Above (% FPL)	Up to & including (% FPL)	
+	0	1	158	300	X
+	1	6	141	300	X
+	6	19	133	300	X

Age ranges may overlap. If there is an overlap, provide an explanation. Include the age ranges for each income standard that has overlapping ages and the reason for having different income standards.

### Special Program for Children with Disabilities

Does the state have a special program for children with disabilities?  No



# 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.

V.20130917



# CHIP Eligibility

OMB Control Number: 0938-1148  
Expiration date: 10/31/2014

**Separate Child Health Insurance Program** **CS10**  
**Eligibility - Children Who Have Access to Public Employee Coverage**

Sec. 2110(b)(2)(B) and (b)(6) of the SSA

**Children Who Have Access to Public Employee Coverage** - Otherwise eligible targeted low-income children who have access to public employee coverage on the basis of a family member's employment.

The CHIP Agency operates this covered group in accordance with the following provisions:

Select one of the following conditions as described in Section 2110(b)(6) of the Social Security Act:

- Maintenance of agency contribution as provided in 2110(b)(6)(B) of the SSA.
- Hardship criteria as provided in section 2110(b)(6)(C) of the Social Security Act.

Coverage under this option is extended to children whose household income is:

Select one of the options for the income standard when compared to Targeted Low Income Children

- The same as the standards for Targeted Low-Income Children
- Lower than the income standards for Targeted Low-Income Children

Indicate whether coverage under this option is extended to all children who have access to public employee coverage, or only certain children:

- All children who have access to public employee coverage
- Certain children who have access to public employee coverage:

Attach methodology the state has used to calculate maintenance of agency contribution.

**An attachment is submitted.**

The state provides assurance that the state will, on an annual basis, recalculate expenditures for each participating public agency to determine if the maintenance effort condition continues to be met.

Children who are eligible for public employee health benefits coverage who are not described above are excluded from eligibility under the plan.

Children considered to have access to public employee coverage, and therefore not excluded from CHIP through this option, otherwise meet the definition of targeted low-income child provided at 42 CFR 457.310.

### PRA Disclosure Statement

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V.20131007



## West Virginia CHIP

### CHIP CS10 Analysis - Children Who Have Access To Public Employee Coverage

#### Maintenance of Public Agency Contributions to Employee Dependent Coverage 1997 – 2013

<u>State Fiscal Year</u>	<u>Annual Employee and Dependent Costs</u>	<u>Annual Employee and Dependent Premiums</u>	<u>Agency Expenditures</u>	<u>CPI-U (Medical)</u>	<u>1997 State Expenditure Increased by CPI</u>
1997	\$3,214.71	\$770.09	\$2,444.62		\$2,444.62
1998	3,414.02	741.61	2,672.41	3.22%	2,523.34
1999	4,130.97	741.61	3,389.36	3.49%	2,611.40
2000	4,081.40	741.61	3,339.78	4.06%	2,717.42
2001	4,909.92	869.10	4,040.83	4.61%	2,842.70
2002	5,221.71	1,106.91	4,114.80	4.71%	2,976.59
2003	5,400.62	1,432.47	3,968.15	4.02%	3,096.25
2004	5,925.99	1,794.84	4,131.15	4.40%	3,232.48
2005	6,669.91	1,792.08	4,877.83	4.22%	3,368.89
2006	6,915.44	1,947.00	4,968.44	4.01%	3,503.98
2007	7,159.42	2,200.95	4,958.47	4.42%	3,658.86
2008	7,644.34	2,191.84	5,452.50	3.71%	3,794.60
2009	7,977.54	2,186.32	5,791.22	3.17%	3,914.89
2010	8,143.65	2,383.09	5,760.56	3.49%	4,051.52
2011	8,850.79	2,477.01	6,373.78	2.92%	4,169.83
2012	9,434.85	2,635.55	6,799.30	3.95%	4,334.54
2013	9,207.23	2,629.97	6,577.26	2.15%	4,427.73

## West Virginia CHIP

### CHIP CS10 Analysis - Children Who Have Access To Public Employee Coverage

#### Maintenance of Public Agency Contributions to Employee Dependent Coverage 1997 – 2013

<u>State Fiscal Year</u>	<u>Annual Employee and Dependent Costs</u>	<u>Annual Employee and Dependent Premiums</u>	<u>Agency Expenditures</u>	<u>CPI-U (Medical)</u>	<u>1997 State Expenditure Increased by CPI</u>
1997	\$3,214.71	\$770.09	\$2,444.62		\$2,444.62
1998	3,414.02	741.61	2,672.41	3.22%	2,523.34
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2003	5,400.62	1,432.47	3,968.15	4.02%	3,096.25
2004	5,925.99	1,794.84	4,131.15	4.40%	3,232.48
2005	6,669.91	1,792.08	4,877.83	4.22%	3,368.89
2006	6,915.44	1,947.00	4,968.44	4.01%	3,503.98
2007	7,159.42	2,200.95	4,958.47	4.42%	3,658.86
2008	7,644.34	2,191.84	5,452.50	3.71%	3,794.60
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2013	9,207.23	2,629.97	6,577.26	2.15%	4,427.73



# CHIP Eligibility

OMB Control Number: 0938-1148

Expiration date: 10/31/2014

## Separate Child Health Insurance Program Eligibility - Deemed Newborns

CS13

Section 2112(e) of the SSA and 42 CFR 457.360

**Deemed Newborns** - Children born to targeted low-income pregnant women are deemed to have applied for and be eligible for CHIP or Medicaid until the child turns one.

The state operates this covered group in accordance with the following provisions:

The child was born to an eligible targeted low-income pregnant woman under section 2112 of the SSA.

The child is deemed to have applied for and been found eligible for CHIP or Medicaid, as appropriate, as of the date of the child's birth, and remains eligible without regard to changes in circumstances until the child's first birthday.

The state elects the following option(s):

The state elects to cover as a deemed newborn a child born to a mother who is covered as a targeted low-income child under the state's separate CHIP on the date of the newborn's birth.

The state elects to recognize a child's deemed newborn status from another state and provides benefits in accordance with the requirements of section 2112(e) of the SSA.

The state elects to cover as a deemed newborn a child born to a mother who is covered under Medicaid or CHIP through the authority of the state's section 1115 demonstration on the date of the newborn's birth.

### PRA Disclosure Statement

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V.20130917



# CHIP Eligibility

OMB Control Number: 0938-1148

Expiration date: 10/31/2014

## Separate Child Health Insurance Program MAGI-Based Income Methodologies

CS15

2102(b)(1)(B)(v) of the SSA and 42 CFR 457.315

- The CHIP Agency will apply Modified Adjusted Gross Income methodologies for all separate CHIP covered groups, as described below, and consistent with 42 CFR 457.315 and 435.603(b) through (i).

In the case of determining ongoing eligibility for enrollees determined eligible for CHIP on or before December 31, 2013, MAGI-based income methodologies will not be applied until March 31, 2014 or the next regularly-scheduled renewal of eligibility, whichever is later.

If the state covers pregnant women, in determining family size for the eligibility determination of a pregnant woman, she is counted as herself plus each of the children she is expected to deliver.

In determining family size for the eligibility determination of the other individuals in a household that includes a pregnant woman:

- The pregnant woman is counted just as herself.
- The pregnant woman is counted just as herself, plus one.
- The pregnant woman is counted as herself, plus the number of children she is expected to deliver.

Financial eligibility is determined consistent with the following provisions:

When determining eligibility for new applicants, financial eligibility is based on current monthly income and family size.

When determining eligibility for current beneficiaries, financial eligibility is based on:

- Current monthly household income and family size.
- Projected annual household income for the remaining months of the current calendar year and family size.

In determining current monthly or projected annual household income, the state will use reasonable methods to:

- Include a prorated portion of the reasonably predictable increase in future income and/or family size.
- Account for a reasonably predictable decrease in future income and/or family size.

Except as provided at 42 CFR 457.315 and 435.603(d)(2) through (d)(4), household income is the sum of the MAGI-based income of every individual included in the individual's household.

Household income includes actually available cash support, exceeding nominal amounts, provided by the person claiming an individual described at §435.603(f)(2)(i) as a tax dependent.

- The CHIP Agency certifies that it has submitted and received approval for the conversion for all separate CHIP covered group income standards to MAGI-equivalent standards.

An attachment is submitted.

### PRA Disclosure Statement



# CHIP Eligibility

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.

V.20130917



# 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>	6	19	108	133	<b>X</b>

### PRA Disclosure Statement

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