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State/Territory Name: District of Columbia

State Plan Amendment (SPA) # 13-08

This file contains the following documents in the order listed:

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

DEPARTMENT OF HEALTH & HUMAN SERVICES
Centers for Medicare & Medicaid Services
150 S. Independence Mall West
Suite 216, The Public Ledger Building
Philadelphia, Pennsylvania 19106-3499



Region III/Division of Medicaid and Children's Health Operations

SWIFT #102220134067

OCT 25 2013

Dr. Linda Elam, Ph.D., MPH
Deputy Director/Medicaid and CHIP
Department of Health Care Finance
899 North Capitol Street, N.E. - Suite 6037
Washington, D.C. 20002

Dear Dr. Elam:

I am writing to inform you that we have reviewed the District of Columbia's State Plan Amendment (SPA) DC 13-08 entitled, Income Disregards For Children With Non-IV-E Adoption Assistance and Independent Foster Care Adolescents. This amendment disregards all income for the optional group for non-IV-E State subsidized adoption children and adds the optional group for independent foster care adolescents without an income test.

We are pleased to inform you that, after extensive review, this amendment is approved; its effective date is October 1, 2013.

A copy of the approved SPA pages and signed CMS-179 form is included under this cover.

If you have any further questions regarding this SPA, please contact Sabrina Tillman-Boyd at 215-861-4721 or by email at Sabrina.Tillman-Boyd@cms.hhs.gov.

~~Sincerely,~~

/S/

~~Francis McCullough~~
Associate Regional Administrator

Enclosures

cc: Claudia Schlosberg, DHCF
M. Diane Fields, DHCF

TRANSMITTAL AND NOTICE OF APPROVAL OF STATE PLAN MATERIAL FOR: CENTERS FOR MEDICARE & MEDICAID SERVICES	1. TRANSMITTAL NUMBER: 13-08	2. STATE District of Columbia
	3. PROGRAM IDENTIFICATION: Medicaid, Title XIX of the Social Security Act	
TO: Regional Administrator Centers for Medicare & Medicaid Services Department of Health and Human Services		4. PROPOSED EFFECTIVE DATE: October 1, 2013

5. TYPE OF PLAN MATERIAL (Check One):

NEW STATE PLAN
 AMENDMENT TO BE CONSIDERED AS NEW PLAN
 AMENDMENT

COMPLETE BLOCKS 6 THRU 10 IF THIS IS AN AMENDMENT (Separate Transmittal for each amendment)

6. FEDERAL STATUTE/REGULATION CITATION Social Security Act § 1902	7. FEDERAL BUDGET IMPACT a. FFY 2014 \$ 0 b. FFY 2015 \$ 0
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8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT Attachment 2.2A, p.14 Attachment 2.2A, p. 23c	9. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable) Attachment 2.2A, p.14
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10. SUBJECT OF AMENDMENT:
Coverage and Income Disregard for Children with Non IV-E Adoption Assistance and Independent Foster Care Adolescents

11. GOVERNOR'S REVIEW (Check One)

GOVERNOR'S OFFICE REPORTED NO COMMENT
 OTHER, AS SPECIFIED:
 COMMENTS OF GOVERNOR'S OFFICE ENCLOSED
 Bill Number: B20-199
 NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL

12. SIGNATURE OF STATE AGENCY OFFICIAL /s/	16. RETURN TO Linda Elam, Ph.D., M.P.H., Senior Deputy Director/Medicaid Director Department of Health Care Finance 899 N. Capitol Street NE, Sixth Fl. Washington, DC 20002
13. TYPED NAME Linda Elam, Ph.D., M.P.H.	
14. TITLE Senior Deputy Director/Medicaid Director	
15. DATE SUBMITTED September 3, 2013	

FOR REGIONAL OFFICE USE ONLY	
17. DATE RECEIVED 9-4-2013	18. DATE APPROVED OCT 25 2013
19. EFFECTIVE DATE OF APPROVED MATERIAL 10-1-2013	20. SIGNATURE /s/ Francis McCullough Associate Regional Administrator
21. TYPED NAME Francis McCullough Associate Regional Administrator	
22. REMARKS	

State: District of Columbia

Agency* Citation(s) Groups Covered

DOH

B. Optional Groups Other Than the Medically Needy
(Continued)

1902(a)(10)(A)(ii)
(VIII) of the Act

x 8. A child for whom there is in effect a State adoption assistance agreement (other than under title IV-E of the Act), who, as determined by the State adoption agency, cannot be placed for adoption without medical assistance because the child has special needs for medical or rehabilitative care, and who before execution of the agreement-

a. Was eligible for Medicaid under the State's approved Medicaid plan; or

b. Would have been eligible for Medicaid if the standards and methodologies of the title IV-E foster care program were applied rather than the AFDC standards and methodologies.

The State covers individuals under the age of--

<u>X</u>	21
<u> </u>	20
<u> </u>	19
<u> </u>	18

1902(r)(2) of the Act

The State will disregard all income for this group.

Citation(s)

Groups Covered

1902(a)(10)(A)(ii) x 22. Independent Foster Care Adolescents,
(XVII) of the Act as specified in
1902(a)(10)(A)(ii)(XVII) of the Act

The State covers individuals under the age of--

<u> x </u>	21
<u> </u>	20
<u> </u>	19
<u> </u>	18

1902(r)(2) of the Act

The State will disregard all income
for this group.

TN No. 13-08

Supersedes
TN No. NONE

Approval Date OCT 25 2013 Effective Date 10/01/13