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State/Territory Name: Idaho

State Plan Amendment (SPA) #: 10-002

This file contains the following documents in the order listed:

- 1) Approval Letter
- 2) CMS 179 Form/Summary Form (with 179-like data)
- 3) Approved SPA Pages



Region 10 2201 Sixth Avenue, MS/RX 43 Seattle, Washington 98121

MAY 1 3 2010

Richard Armstrong, Director Department of Health and Welfare Towers Building – Tenth Floor Post Office Box 83720 Boise, Idaho 83720-0036

RE: Idaho State Plan Amendment (SPA) Transmittal Number (TN) #10-002

Dear Mr. Armstrong:

The Centers for Medicare & Medicaid Services (CMS) Seattle Regional Office has completed its review of State Plan Amendment (SPA) Transmittal Number #10-002. This amendment implements Section 112 of MIPPA, which increases the resource standards for QMBs, SLMBs and QIs to conform to the resources limits for individuals who qualify for Medicare Part D Low-Income Subsidy (LIS).

The changes are reflected in Attachment 2.2-A, pages 9b, 9b.1, 9b.2 and Attachment 2.6-A, page 22.

This SPA is approved effective January 1, 2010.

If you have any additional questions or require any further assistance, please contact me, or have your staff contact Maria Garza at (206) 615-2542 or maria.garza@cms.hhs.gov.

Sincerely,

Carol J.C. Peverly
Acting Associate Regional Administrator
Division of Medicaid and Children's Health
Operations

cc:

Leslie Clement, Administrator, Idaho Department of Health and Welfare Rachel Strutton, State Plan Coordinator, Idaho Department of Health and Welfare

TRANSMITTAL AND NOTICE OF APPROVAL OF STATE PLAN MATERIAL	1. TRANSMITTAL NUMBER: 10-002	2. STATE IDAHO
FOR: HEALTH CARE FINANCING ADMINISTRATION	: HEALTH CARE FINANCING ADMINISTRATION 3. PROGRAM IDENTIFICATION: TITLE XIX OF THE SOCIAL SECURITY ACT (MEDICAID)	
TO: REGIONAL ADMINISTRATOR HEALTH CARE FINANCING ADMINISTRATION DEPARTMENT OF HEALTH AND HUMAN SERVICES	4. PROPOSED EFFECTIVE DATE 1/1/2010	
5. TYPE OF PLAN MATERIAL (Check One):		
☐ NEW STATE PLAN ☐ AMENDMENT TO BE O	CONSIDERED AS NEW PLAN	
COMPLETE BLOCKS 6 THRU 10 IF THIS IS AN AME	NDMENT (Separate Transmittal for each	amendment)
6. FEDERAL STATUTE/REGULATION CITATION:	7. FEDERAL BUDGET IMPACT:	
1905(p)(1)(C) of the Social Security Act	a. FFY 2010 - \$12,738 (based on 4 appr b. FFY 2011 - \$77,908 (based on 4 appr	
8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT:	9. PAGE NUMBER OF THE SUPERS	
	OR ATTACHMENT (If Applicable):	
Attachment 2.6-A, Page 22	Attachment 2.6 A Page 22	,
Attachment 2.6-A, Page 22 Attachment 2.2-A, pgs. 9b, 9b1, 9b2 (pti)	Attachment 2.2-Ag pgs. 9	6,961,962(pti)
11. GOVERNOR'S REVIEW (Check One): ☐ GOVERNOR'S OFFICE REPORTED NO COMMENT ☐ COMMENTS OF GOVERNOR'S OFFICE ENCLOSED ☐ NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL	OTHER, AS SPEC	IFIED:
12. SIGNATURE OF STATE AGENCY OFFICIAL:	16. RETURN TO:	• · ·
	Table M. Classest Administrator	
13 TYPED NAME:	Leslie M. Clement, Administrator Idaho Department of Health and Welfar	a
LESLIE M. CLEMENT	Division of Medicaid	5
14. TITLE:	PO Box 83720	
Administrator	Boise ID 83720-0036	
15. DATE SUBMITTED: 3/11/10		
FOR REGIONAL OF	The state of the s	
17, DATE RECEIVED: MAR 1 2 2010	18. DATE APPROVED: MAY 13	2010
PLAN APPROVED - ON	E COPY ATTACHED	
19. EFFECTIVE DATE OF APPROVED MATERIAL: JAN 0 1 2010	20. SIGNATURE OF REGIONAL OFF	ICIAL:
21. TYPED NAME: Caro J. C. PENER IY 23. REMARKS:	22. TITLE: Associate Regional Division of Me	Administrator
	Children's I	
4.28.10 State authorized pen tin	k changes.	

ATTACHMENT 2.2—A

Effective Date: 1-1-2010

Page 9b

Revision: HCFA—PM—93 -2

March 1993

State: IDAHO

(MB)

Agency* Citation(s)	Groups Covered
4.	A. <u>Mandatory Coverage</u> — <u>Categorically Needy and Other Required Special</u> <u>Groups</u> (Continued)
1902 (a) (10) (E) (i), 1905 (p) and 1860D-14(a)(3)(D) of the Act 1902 (a) (10) (E) (ii), 1905 (s), 1905 (p) (3) (A) (i), and 1860D-14(a)(3)(D) of the Act	25. Qualified Medicare beneficiaries
	a. Who are entitled to hospital insurance benefits under Medicare Part A, (but not pursuant to an enrollment under section 1818A of the Act);
	 b. Whose income does not exceed 100 percent of the Federal Poverty Level; and
	c. Whose resources do not exceed three times the SSI resource limit, adjusted annually by the increase in the consumer price index.
	(Medical assistance for this group is limited to Medicare cost-sharing as defined in item 3.2 of this plan.)
	26. Qualified disabled and working individuals
	a. Who are entitled to hospital insurance benefits under Medicare Part A under section 1818A of the Act;
	b. Whose income does not exceed 200 percent of the Federal Poverty Level; and
	c. Whose resources do not exceed twice the maximum standard under SSI.
	d. Who are not otherwise eligible for medical assistance under Title XIX of the Act.
	(Medical assistance for this group is limited to Medicare Part A premiums under section 1818A of the Act.)
	* Agency that determines eligibility for coverage

TN No. 10-003 Supersedes TN No: 93-003 Approval Date:

MAY 1 3 2010

Revision: HCFA—PM—93 -2

March 1993

Page 9b1

State: IDAHO

(MB)

Agency* Citation(s)	Groups Covered	
1902 (a) (10) (E) (iii),	A. Mandatory Coverage — Categorically Needy and Other Required Special Groups (Continued) 27. Specified low-income Medicare beneficiaries	
1905 (p) (3) (A) (ii) and 1860D-14(a)(3)(D) of the Act	a. Who are entitled to hospital insurance benefits under Medicare Part A, (but not pursuant to an enrollment under section 1818A of the Act);	
	b. Whose income is greater than 100 percent but less than 120 percent of the Federal poverty level; and	
	c. Whose resources do not exceed three times the SSI resource limit, adjusted annually by the increase in the consumer price index.	
	(Medical assistance for this group is limited to Medicare Part B premiums under section 1839 of the Act.)	
1902(a)(10)(E)(iv),	28. Qualified Individuals –	
1905(p)(3)(A)(ii) and 1860D-14(a)(3)(D) of the Act	a. Who are entitled to hospital insurance benefits under Medicare Part A (but not pursuant to an enrollment under 1818A of the Act);	
	b. Whose income is at least 120 percent but less than 135 percent of the Federal poverty level;	
	c. Whose resources do not exceed three times the SSI resource limit, adjusted annually by the increase in the consumer price index.	
	* Agency that determines eligibility for coverage	

TN No. 10-002 Supersedes TN No: 93-003 Approval Date: MAY 13 2010

Effective Date: 1-1-2010

April 1995

(MB)

ATTACHMENT 2.2—A Page 9b2

State: IDAHO

Agency* Citation(s)	Groups Covered	
1634 (e) of the Act	A. Mandatory Coverage — Categorically Needy and Other Required Special Groups (Continued) 29.	
	 a. Each person to whom SSI benefits by reason of disability are not payable for any month solely by reason of clause (i) or (v) of Section 1611 (e) (3) (A) shall be treated, for purposes of title XIX, as receiving SSI benefits for the month. b. The State applies more restrictive eligibility standards than those under SSI. Individuals whose eligibility for SSI benefits are based solely on disability who are not payable for any months solely by reason of clause (i) or (v) of Section 1611 (e) (3) (A), and who continue to meet the more restrictive requirements for Medicaid eligibility under the State plan, are eligible for Medicaid as categorically needy. 	
	* Agency that determines eligibility for coverage	

TN No. 10-003 Supersedes TN No: 95-011 Approval Date: MAY 1 3 2010

Effective Date: 1-1-2010

MAY 1993

ATTACHMENT 2.6-A Page 22

State: IDAHO

Citation	Condition or Requirement	
1902(a)(10)(C)(i)	7. Resource Standard — Medically Needy	
of the Act	a. Resource standards are based on family size.	
	 A single standard is employed in determining resource eligibility for all groups. 	
	/ / c. In 1902(f) States, the resource standards are more restrictive than in 7.b. above for: / / Aged	
	/ / Blind	
	/ / Disabled Supplement 2 to ATTACHMENT 2.6—A specifies the resource standards for all covered medically needy groups. If the agency chooses more restrictive levels under 7.c., Supplement 2 so indicates.	
1905(p)(1)(C) and (p)(2)(B) of the Act	8. Resource Standard — Qualified Medicare Beneficiaries, Specified Low-Income Medicare Beneficiaries, and Qualified Individuals	
of the Act	For qualified Medicare beneficiaries covered under Section 1902(a)(10)(E)(i) of the Act, specified low-income Medicare beneficiaries covered under Section 1902(a)(10)(E)(iii) of the Act, and Qualifying Individuals covered under Section 1902(a)(10)(E)(iv) of the Act, the resource standard is equal to the amount defined under Section 1905(p)(1)(C) of the Act.	
1905(s)of the Act	9. Resource Standard — Qualified Disabled and Working Individuals	
	For qualified disabled and working individuals covered under section 1902(a)(10)(E)(ii) of the Act, the resource standard for an individual or a couple (in the case of an individual with a spouse) is twice the SSI resource standard.	

TN No. 10-002 Supersedes TN No. 93-011 Approval Date:

MAY 1 3 2010

Effective Date: 1/1/2010