

DEPARTMENT OF HEALTH & HUMAN SERVICES
Centers for Medicare & Medicaid Services
601 East 12th Street, Suite 235
Kansas City, Missouri 64106



Division of Medicaid and Children's Health Operations

November 18, 2010

Refer to:
DMCH: BC
KS SPA 10-13

Andrew Allison, PdD,
Executive Director
Kansas Health Policy Authority
Landon State Office Building
900 SW Jackson, Room 900N
Topeka, Kansas 66612

Dear Dr. Allison:

On August 24, 2010, the Centers for Medicare & Medicaid Services (CMS) received Kansas' state plan amendment (SPA), transmittal #10-13, which increases the resource limits for the Medicare Savings Programs as required under the Medicare Improvement and Protection Act of 2008.

Based upon revisions received, CMS is approving SPA 10-13 as of November 12, 2010 with an effective date of July 1, 2010. Enclosed is a copy of the CMS 179 form as well as the approved pages for incorporation into the Kansas State plan. If you have any questions regarding this amendment, please call Barbara Cotterman at (816) 426-5925.

Sincerely,

James G. Scott
Associate Regional Administrator
for Medicaid and Children's Health Operations

Enclosure

cc: Barbara Langner, PhD., RN
Jeanine Schieferecke

TRANSMITTAL AND NOTICE OF APPROVAL OF STATE PLAN MATERIAL FOR: HEALTH CARE FINANCING ADMINISTRATION		1. TRANSMITTAL NUMBER: SPA #10-13	2. STATE Kansas
		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 July 1, 2010	
5. TYPE OF PLAN MATERIAL (Check One): <input type="checkbox"/> NEW STATE PLAN <input type="checkbox"/> AMENDMENT TO BE CONSIDERED AS NEW PLAN <input checked="" type="checkbox"/> AMENDMENT COMPLETE BLOCKS 6 THRU 10 IF THIS IS AN AMENDMENT (Separate Transmittal for each amendment)			
6. FEDERAL STATUTE/REGULATION CITATION: Section 1905(p)(1)(C)		7. FEDERAL BUDGET IMPACT: a. FFY 2010 \$28,467 b. FFY 2011 \$47,239	
8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT: Attachment 2.2-A, Pages 8a, 8b & 8c (New Pages) Attachment 2.6-A, Pages 22 & 22a Attachment 2.2-A, 9b		9. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable): Attachment 2.6-A, Pages 22 & 22a Attachment 2.2-A, 9b & 9b1	
10. SUBJECT OF AMENDMENT: This SPA is to implement the provisions of Section 112 of the Medicare Improvement for Patients and Providers Act (MIPPA) to adjust the resource limit used when determining eligibility for the Medicare Savings Program groups.			
11. GOVERNOR'S REVIEW (Check One): <input type="checkbox"/> GOVERNOR'S OFFICE REPORTED NO COMMENT <input type="checkbox"/> COMMENTS OF GOVERNOR'S OFFICE ENCLOSED <input type="checkbox"/> NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL		X OTHER, AS SPECIFIED: Andy Allison, PhD. is the Governor's Designee	
12. SIGNATURE OF STATE AGENCY OFFICIAL:		16. RETURN TO: Andy Allison, PhD. Kansas Health Policy Authority Landon State Office Building 900 SW Jackson, Room 900-N Topeka, KS 66612-1220	
13. TYPED NAME: for Andy Allison, PhD.			
14. TITLE: Executive Director of the Kansas Health Policy Authority			
15. DATE SUBMITTED: August 24, 2010			
FOR REGIONAL OFFICE USE ONLY			
17. DATE RECEIVED: <i>August 24, 2010</i>		18. DATE APPROVED: <i>November 12, 2010</i>	
PLAN APPROVED - ONE COPY ATTACHED			
19. EFFECTIVE DATE OF APPROVED MATERIAL: <i>July 1, 2010</i>		20. SIGNATURE OF REGIONAL OFFICIAL:	
21. TYPED NAME: <i>James G. Scott</i>		22. (TITLE): <i>Associate Regional Administrator for Medicaid and Children's Health Operations</i>	
23. REMARKS:			

State: Kansas

Agency	Citation(s)	Groups Covered
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A. Mandatory Coverage - Categorically Needy and Other Required Special Groups (Continued)

1902(a)(10)(E)(i),
1905(p) and
1860D-14(a)(3)(D)
of the Act

23.1 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.)

1902(a)(10)(E)(ii),
1905(p)(3)(A)(i) and
1905(s) of the Act

23.2 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

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Supersedes TN No. New

State: Kansas

Agency	Citation(s)	Groups Covered
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A. Mandatory Coverage - Categorically Needy and Other Required Special Groups (Continued)

- c. Whose resources do not exceed two times the SSI resource limit.
- 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.)

1902(a)(10)(E)(iii),
1905(p)(3)(A)(ii), and
1860D-14(a)(3)(D)
of the Act

23.3 Specified Low-Income 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 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.)

State: Kansas

Agency	Citation(s)	Groups Covered
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A. Mandatory Coverage - Categorically Needy and Other Required Special Groups (Continued)

1902(a)(10)(E)(iv)
and 1905(p)(3)(A)(ii)
and 1860D-14(a)(3)(D)
of the Act

23.4 Qualifying Individuals --

- 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 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.

State: Kansas

Citation	Condition or Requirement
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1902(a)(10)(C)(i) of the Act	<p>7. Resource Standard - Medically Needy</p> <p>a. Resource standards are based on family size.</p> <p>b. A single standard is employed in determining resource resource eligibility for all groups.</p> <p>c. In 1902(f) States, the resource standards are more restrictive than in 7.b. above for--</p> <p> ___ Aged</p> <p> ___ Blind</p> <p> ___ Disabled</p>
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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 to ATTACHMENT 2.6-A so indicates.

1902(a)(10)(E),
1905(p)(1)(D), 1905(p)(2)(B)
and 1860D-14(a)(3)(D)
of the Act

8. Resource Standard - Qualified Medicare Beneficiaries, Specified Low-Income Medicare Beneficiaries and Qualifying Individuals

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 1902(a)(10)(E)(iv) of the Act, the resource standard is three times the SSI resource limit, adjusted annually since 1996 by the increase in the consumer price index.

State: Kansas

Citation	Condition or Requirement
1902(a)(10)(E)(ii), 1905(s) and 1860D-14(a)(3)(D) of the Act	<p>9. Resource Standard - Qualified Disabled and Working Individuals</p> <p>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 two times the SSI resource limit.</p>
1902(u) of the Act	<p>10. For COBRA continuation beneficiaries, the resource standard is:</p> <ul style="list-style-type: none"> ___ Twice the SSI resource standard for an individual. ___ More restrictive standard as applied under section 1902(f) of the Act as described in <u>Supplement 8 to Attachment 2.6-A</u>.

Revision:

ATTACHMENT 2.2-A
Page 9b

State: Kansas

Agency	Citation(s)	Groups Covered
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(Reserved for future use).

TN No: #10-13 Approval Date NOV 12 2010 Effective Date July 1, 2010
Supersedes TN No. MS-93-04