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State Name: Pennsylvania

State Plan Amendment (SPA) #09-020

This file contains the following documents in the order listed:

- 1) Approval Letter
- 2) CMS-179
- 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 # 013120124087

MAR 22 2012

Mr. Gary D. Alexander
Commonwealth of Pennsylvania
Secretary of Public Welfare
P.O. Box 2675
Harrisburg, Pennsylvania 17105-2675

Dear Secretary Alexander:

We are pleased to inform you of the approval of Pennsylvania State Plan Amendment (SPA) 09-020, which extends Medicaid coverage to lawfully residing children under the age of 21 and pregnant women who are otherwise eligible for Medicaid. Furthermore, individuals covered under this SPA are not subject to the 5-year waiting period imposed under the Personal Responsibility and Work Opportunity Reconciliation Act (PRWORA) of 1996.

Enclosed is a copy of the approved SPA pages and the signed CMS-179 form. The effective date of this amendment is July 1, 2009.

If you have any questions, you may contact Mr. Harry Mirach at (215) 861-4284 or Kia Banton at (215) 861-4252.

Sincerely,

Francis McCune
Associate Regional Administrator

Enclosures

cc: Ms. Lourdes Padilla, Deputy Secretary, Office of Income Maintenance
Mr. Edward J. Zogby, Director, Bureau of Policy, Office of Income Maintenance
Mr. Jerome Koerner, Office of Income Maintenance, Bureau of Policy
Mr. Brian Whorl, Office of Income Maintenance, Bureau of Policy

Do you know someone who has been denied medical insurance because of a pre-existing condition? If so, they may be eligible for the new Pre-Existing Condition Insurance Plan. Call toll free 1-866-717-5826 (TTY 1-866-561-1604) or visit www.pcip.gov and click on "Find Your State" to learn more

TRANSMITTAL AND NOTICE OF APPROVAL OF STATE PLAN MATERIAL	1. TRANSMITTAL NUMBER: 09-020	2. STATE Pennsylvania
	3. PROGRAM IDENTIFICATION: TITLE XIX OF THE SOCIAL SECURITY ACT (MEDICAID) Title XIX - Medicaid	
FOR: HEALTH CARE FINANCING ADMINISTRATION	4. PROPOSED EFFECTIVE DATE July 1, 2009	
TO: REGIONAL ADMINISTRATOR HEALTH CARE FINANCING ADMINISTRATION DEPARTMENT OF HEALTH AND HUMAN SERVICES		

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: 42 CFR 435. 406 1902(a), 1903(v)	7. FEDERAL BUDGET IMPACT: a. FFY SEE REMARKS b. FFY
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8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT: Attachment 2.6-A, Page 2 and 3	9. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable): Attachment 2.6-A, Page 2 and 3
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10. SUBJECT OF AMENDMENT:
To provide health care coverage to qualified aliens and notify CMS that Pennsylvania is electing the option to provide health care coverage to pregnant women and individuals under age 21 who are subject to a five-year bar.

11. GOVERNOR'S REVIEW (Check One):

GOVERNOR'S OFFICE REPORTED NO COMMENT OTHER, AS SPECIFIED:
 COMMENTS OF GOVERNOR'S OFFICE ENCLOSED
 NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL Secretary of Public Welfare

12. SIGNATURE OF STATE AGENCY OFFICIAL:	16. RETURN TO:
13. TYPED NAME: Gary D. Alexander	Commonwealth of Pennsylvania Department of Public Welfare P.O. Box 2675 Harrisburg, PA 17105
14. TITLE: Secretary of Public Welfare	
15. DATE SUBMITTED: June 23, 2009	

FOR REGIONAL OFFICE USE ONLY

17. DATE RECEIVED: 6/23/2009	18. DATE APPROVED: MAR 22 2012
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PLAN APPROVED - ONE COPY ATTACHED

19. EFFECTIVE DATE OF APPROVED MATERIAL: JUL 01 2009	20. SIGNATURE OF REGIONAL OFFICIAL:
21. TYPED NAME: Francis McAllough	22. TITLE: Associate Regional Administrator

23. REMARKS:

7. Federal Budget Impact:

a. 2009	\$19,918,359	(Total Individuals: 11103)
b. 2010	\$23,741,706	(Total Individuals: 12004)
c. 2011	\$26,137,493	(Total Individuals: 13113)
d. 2012	\$27,458,097	(Total Individuals: 14499)

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT
 Pennsylvania

ELIGIBILITY CONDITIONS AND REQUIREMENTS

Citation(s)	Condition or Requirement
1905(p) of the Act	b. For the medically needy, meets the non-financial eligibility conditions of 42 CFR Part 435. c. For financially eligible qualified Medicare beneficiaries covered under Section 1902(a)(10)(E)(i) of the Act, meets the non-financial criteria of Section 1905(p) of the Act.
1905(s) of the Act	d. For financially eligible qualified disabled and working individuals covered under Section 1902(a)(10)(E)(ii) of the Act, meets the non-financial criteria of Section 1905(s).
42 CFR 435.406	3. Is residing in the United States (U.S.), and -- a. Is a citizen or national of the United States; b. Is a qualified alien (QA) as defined in section 431 of the Personal Responsibility and Work Opportunity Reconciliation Act of 1996 (PRWORA) as amended, and the QA's eligibility is required by section 402(b) of PRWORA as amended, and is not prohibited by section 403 of PRWORA as amended; c. Is a qualified alien subject to the 5-year bar as described in section 403 of PRWORA, so that eligibility is limited to treatment of an emergency medical condition as defined in section 401 of PRWORA; d. Is a non-qualified alien, so that eligibility is limited to treatment of an emergency medical condition as defined in section 401 of PRWORA; e. Is a QA whose eligibility is authorized under section 402(b) of PRWORA as amended, and is not prohibited by section 403 of PRWORA as amended. <input checked="" type="checkbox"/> State covers all authorized QAs. <input type="checkbox"/> State does not cover authorized QAs.

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT
Pennsylvania

ELIGIBILITY CONDITIONS AND REQUIREMENTS

Citation(s)	Condition or Requirement
42 CFR 435.406	<p>f. State elects CHIPRA option to provide full Medicaid coverage to otherwise eligible pregnant women and children as specified below who are aliens lawfully residing in the United States; including the following:</p> <ul style="list-style-type: none"> (1) A qualified alien as defined in section 431 of PRWORA (8 U.S.C. § 1641); (2) An alien in nonimmigrant status who has not violated the terms of the status under which he or she was admitted or to which he or she has changed after admission; (3) An alien who has been paroled into the United States pursuant to section 212(d)(5) of the Immigration and Nationality Act (INA) (8 U.S.C. § 1182(d)(5)) for less than 1 year, except for an alien paroled for prosecution, for deferred inspection or pending removal proceedings; (4) An alien who belongs to one of the following classes: <ul style="list-style-type: none"> (i) Aliens currently in temporary resident status pursuant to section 210 or 245A of the INA (8 U.S.C. §§ 1160 or 1255a, respectively); (ii) Aliens currently under Temporary Protected Status (TPS) pursuant to section 244 of the INA (8 U.S.C. § 1254a), and pending applicants for TPS who have been granted employment authorization; (iii) Aliens who have been granted employment authorization under 8 CFR 274a.12(c)(9), (10), (16), (18), (20), (22), or (24); (iv) Family Unity beneficiaries pursuant to section 301 of Pub. L. 101-649, as amended;

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT
Pennsylvania

ELIGIBILITY CONDITIONS AND REQUIREMENTS

Citation(s)	Condition or Requirement
	(v) Aliens currently under Deferred Enforced Departure (DED) pursuant to a decision made by the President;
	(vi) Aliens currently in deferred action status; or
	(vii) Aliens whose visa petition has been approved and who have a pending application for adjustment of status;
	(5) A pending applicant for asylum under section 208(a) of the INA (8 U.S.C. § 1158) or for withholding of removal under section 241(b)(3) of the INA (8 U.S.C. § 1231) or under the Convention Against Torture who has been granted employment authorization, and such an applicant under the age of 14 who has had an application pending for at least 180 days;
	(6) An alien who has been granted withholding of removal under the Convention Against Torture;
	(7) A child who has a pending application for Special Immigrant Juvenile status as described in section 101(a)(27)(J) of the INA (8 U.S.C. § 1101(a)(27)(J));
	(8) An alien who is lawfully present in the Commonwealth of the Northern Mariana Islands under 48 U.S.C. § 1806(e); or
	(9) An alien who is lawfully present in American Samoa under the immigration laws of American Samoa.
	<input checked="" type="checkbox"/> Elected for pregnant women.
	<input checked="" type="checkbox"/> Elected for children under age <u>21</u> .
g. <input checked="" type="checkbox"/>	The State provides assurance that for an individual whom it enrolls in Medicaid under the CHIPRA Section 214 option, it has verified, at the time of the individual's initial eligibility determination and at the time of the eligibility redetermination.

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT
Pennsylvania

ELIGIBILITY CONDITIONS AND REQUIREMENTS

Citation(s)	Condition or Requirement
42 CFR 435.403 1902(b) of the Act	<p>that the individual continues to be lawfully residing in the United States. The State must first attempt to verify this status using information provided at the time of initial application. If the State cannot do so from the information readily available, it must require the individual to provide documentation or further evidence to verify satisfactory immigration status in the same manner as it would for anyone else claiming satisfactory immigration status under section 1137(d) of the Act.</p> <p>4. Is a resident of the State, regardless of whether or not the individual maintains the residence permanently or maintains it at a fixed address.</p> <p><input checked="" type="checkbox"/> State has interstate residency agreement with the following States: Alabama, Arkansas, California, Florida, Georgia, Idaho, Iowa, Kansas, Kentucky, Louisiana, Maryland, Minnesota, Mississippi, New Jersey, New Mexico, North Dakota, Ohio, South Dakota, Tennessee, Texas, West Virginia, Wisconsin.</p> <p><input type="checkbox"/> State has open agreement(s).</p> <p><input type="checkbox"/> Not applicable; no residency requirement.</p>

TN No. 09-020
 Supersedes
 TN No. 91-33

Approval Date MAR 22 2012

Effective Date July 1, 2009

CMS ID: