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State/Territory Name: Pennsylvania

State Plan Amendment (SPA) #: PA-18-0001

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 Page

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 # 032020184007

April 27, 2018

Teresa Miller
Secretary
Pennsylvania Department of Human Services
625 Forster Street
Room 333, Health & Welfare Building
Harrisburg, Pennsylvania 17120

Dear Secretary Miller:

The Centers for Medicare & Medicaid Services (CMS) has completed its review of Pennsylvania's State Plan Amendment (SPA) Transmittal Number 18-0001, "Continuous eligibility allowing children under the age of 4 to maintain Medicaid coverage for a full year, even if families experience a change in income or household size." SPA PA-18-0001 implements 12 months of continuous eligibility for children under age four, in accordance with section 1902(e)(12) of the Social Security Act.

This SPA was approved on April 24, 2018 with an effective date of March 26, 2018. Enclosed are:

1. The CMS Summary Page (CMS-179 form); and
2. The approved State Plan pages for PA-18-0001.

If you have any questions concerning this SPA, please contact Mary McKeon at 215-861-4181.

Sincerely,

Francis T.

Mccullough -S

Francis T. McCullough

Associate Regional Administrator

Digitally signed by
Francis T. Mccullough -S
Date: 2018.04.27 07:35:58
-04'00'

**TRANSMITTAL AND NOTICE OF APPROVAL OF
STATE PLAN MATERIAL**

1. TRANSMITTAL NUMBER:
PA-18-0001

2. STATE
Pennsylvania

FOR: 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
March 26, 2018

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:
1902(e)(12); 42 CFR 435.926 (*)

7. FEDERAL BUDGET IMPACT:
a. FFY 2018 \$1,600,364
b. FFY 2019 \$4,279,374

8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT:

Attachment 2.2-A, page 23e

9. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION
OR ATTACHMENT (If Applicable):

n/a

10. SUBJECT OF AMENDMENT:

Continuous eligibility allows children under the age of 4 to maintain Medicaid coverage for a full year, even if families experience a change in income or household size.

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 SPECIFIED: Review and approval authority has been delegated to the Department of Human Services

12. SIGNATURE OF STATE AGENCY OFFICIAL:

/s/

13. TYPED NAME:

Teresa D. Miller

14. TITLE:

Acting Secretary of Department of Human Services

15. DATE SUBMITTED:

JAN 29 2018

16. RETURN TO:

Commonwealth of Pennsylvania
Department of Human Services
Office of Medical Assistance Programs
Bureau of Policy, Analysis and Planning
P.O. Box 8046
Harrisburg, Pa. 17105

FOR REGIONAL OFFICE USE ONLY

17. DATE RECEIVED:

18. DATE APPROVED:

April 24, 2018

PLAN APPROVED - ONE COPY ATTACHED

19. EFFECTIVE DATE OF APPROVED MATERIAL:

March 26, 2018

20. SIGNATURE OF REGIONAL OFFICIAL:

/s/

21. TYPED NAME:

Francis McCullough

22. TITLE:

Associate Regional Administrator

23. REMARKS:

(*) Pen and ink changes made by the State 4-18-18.

State: Pennsylvania

Citation

Groups Covered

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

1902(e)(12) of the Act
42 CFR 435.926

x

26.

Continuous Eligibility for Children.
A child under age four (not to exceed age 19) who has been determined eligible under §1902(a)(10)(A) of the Act is deemed to be eligible for a total of 12 months (not to exceed 12 months) regardless of changes in circumstances, other than moving out of the State or attainment of the maximum age stated above, until the earlier of:

- a. The end of a period (not to exceed 12 months) of continuous eligibility; or
- b. The time that the individual exceeds that age.