Children's Health Insurance Program Eligibility

Children's Health Insurance Program Eligibility: General Information

State/Territory name: Virginia
Transmittal Number: VA-21-0021

General Information: Submission Title:

short (under 100 characters) label used to identify this submission in the web application

FAMIS Prenatal Coverage/Unborn Child Option

Children's Health Insurance Program Eligibility: File Management Summary

State/Territory name: Virginia
Transmittal Number: VA-21-0021

	Form		
Type of SPA	Code	Form Name	Uploaded?
MAGI Eligibility & Methods	CS7	Eligibility - Targeted Low-Income Children	no
MAGI Eligibility & Methods	CS8	Eligibility - Targeted Low-Income Pregnant Women	no
MAGI Eligibility & Methods	CS9	Eligibility - Coverage From Conception to Birth	yes
MAGI Eligibility & Methods	CS10	Eligibility - Children Who Have Access to Public Employee Coverage	no
MAGI Eligibility & Methods	CS11	Eligibility - Pregnant Women Who Have Access to Public Employee Coverage	no
MAGI Eligibility & Methods	CS12	Eligibility - Dental Only Supplemental Coverage	no
MAGI Eligibility & Methods	CS13	Eligibility - Deemed Newborns	no
MAGI Eligibility & Methods	CS15	MAGI-Based Income Methodologies	no
MAGI Eligibility & Methods	CS16	Other Eligibility Criteria - Spenddowns	no
XXI Medicaid Expansion	CS3	Eligibility for Medicaid Expansion Program	no
Establish 2101(f) Group	CS14	Eligibility - Children Ineligible for Medicaid as a Result of the Elimination of Income Disregards	no
Eligibility Processing	CS24	General Eligibility - Eligibility Processing	no
Non-Financial Eligibility	CS17	Non-Financial Eligibility - Residency	no
Non-Financial Eligibility	CS18	Non-Financial Eligibility - Citizenship	no
Non-Financial Eligibility	CS19	Non-Financial Eligibility - Social Security Number	no
Non-Financial Eligibility	CS20	Non-Financial Eligibility - Substitution of Coverage	no
Non-Financial Eligibility	CS21	Non-Financial Eligibility - Non-Payment of Premiums	no
Non-Financial Eligibility	CS23	Non-Financial Requirements - Other Eligibility Standards	no

Type of SPA	Form Code	Form Name	Uploaded?
Non-Financial Eligibility	CS27	General Eligibility - Continuous Eligibility	yes
Non-Financial Eligibility	CS28	General Eligibility - Presumptive Eligibility for Children	no
Non-Financial Eligibility	CS29	General Eligibility - Presumptive Eligibility for Pregnant Women	no
Marriage Policy	CS15a	CHIP Eligibility Marriage Policy	no

Children's Health Insurance Program Eligibility: File Management Detail

	eted Low-Income Children
Form Description:	
Uploaded Form:	Date Uploaded:
Support Documents	
Document	
CS8: Eligibility - Targe	eted Low-Income Pregnant Women
Form Description:	
Uploaded Form:	Date Uploaded:
Support Documents	
Document	
CS9: Eligibility - Cove	erage From Conception to Birth
Form Description:	CS9: Eligibility - Coverage From Conception to Birth
Form Description: Uploaded Form:	Date Uploaded:
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Uploaded Form:	Date Uploaded:
Uploaded Form: Support Documents Document	Date Uploaded:
Uploaded Form: Support Documents Document	Date Uploaded: CS9_VA-21-0021_Unborn Child Option_July 2021.pdf

Support Documents			
Document			
Form CS11: Eligibility - Pregnant	orm CS11: Eligibility - Pregnant Women Who Have Access to Public Employee Coverage		
Form Description:			
Uploaded Form:	Date Uploaded:		
Support Documents			
Document			
Form CS12: Eligibility - Dental O	nly Supplemental Coverage		
Form Description:			
Uploaded Form:	Date Uploaded:		
Support Documents			
Document			
Document			
Form CS13: Eligibility - Deemed I	Newborns		
Form Description:			
Uploaded Form:	Date Uploaded:		
Support Documents			
Document			
Form CS15: MAGI-Based Income	e Methodologies		
Form Description:			
Uploaded Form:	Date Uploaded:		
Support Documents			
Document			
Form CS16: Other Eligibility Crit	teria - Spenddowns		
Form Description:			

Uploaded Form:	Date Uploaded:
Support Documents	
Document	
Form CS2. Eligibility for Medicaid	Evnancian Duaguam
Form CS3: Eligibility for Medicaid	Expansion Frogram
Form Description:	
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Support Documents	
Document	
Form CS14: Eligibility - Children In Income Disregards	neligible for Medicaid as a Result of the Elimination of
Form Description:	
Uploaded Form:	Date Uploaded:
Support Documents	
Document	
Form CS24: General Eligibility - Eli	gibility Processing
Form Description:	
Uploaded Form:	Date Uploaded:
Support Documents	
Document	
Form CS17: Non-Financial Eligibility	ty - Residency
Form Description:	
Uploaded Form:	Date Uploaded:
Support Documents	
Document	
Form CS18: Non-Financial Eligibility	ty - Citizenship

Form Description:	
Uploaded Form:	Date Uploaded:
Support Documents	
Document	
Form CS19: Non-Financial Eligibility	- Social Security Number
Form Description:	
Uploaded Form:	Date Uploaded:
Support Documents	
Document	
Form CS20: Non-Financial Eligibility	- Substitution of Coverage
Form Description:	
Uploaded Form:	Date Uploaded:
Support Documents	
Document	
Form CS21: Non-Financial Eligibility	- Non-Payment of Premiums
Form Description:	
Uploaded Form:	Date Uploaded:
Support Documents	
Document	
Form CS23: Non-Financial Requireme	ents - Other Eligibility Standards
Form Description:	
Uploaded Form:	Date Uploaded:
Support Documents	
Document	

Form Description:	CS27: General Eligibility - Continuous Eligibility
Uploaded Form:	Date Uploaded
opionuou i oriii.	CS27_VA_21-0021_Unborn Child Option_July 2021_XML.pdf
Support Documents	
Document	
Please provide a short descri	ription of this support document:
	support document our CS27 with the added text we were instructed age for CE is as follows: Virginia provides continuous eligibility for
Uploaded Document Nam	ne: Date Uploaded:
CS27_VA-21-0021_Unbor	rn Child Option_July 2021_Addtext.pdf
CS28: General Eligibili	ity - Presumptive Eligibility for Children
Cozor General Engloss	ty Tresumptive Enginemy for Children
Form Description:	
Uploaded Form:	Date Uploaded
Support Documents	
Document	
CS29: General Eligibili	ity - Presumptive Eligibility for Pregnant Women
Form Description:	
Form Description:	
Form Description: Uploaded Form:	Date Uploaded
	Date Uploaded
	Date Uploaded
Uploaded Form:	Date Uploaded
Uploaded Form: Support Documents Document	
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Uploaded Form: Support Documents Document CS15a: CHIP Eligibilit	
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Uploaded Form: Support Documents Document CS15a: CHIP Eligibilit Form Description:	Date Uploaded Ty Marriage Policy Date Uploaded
Uploaded Form: Support Documents Document CS15a: CHIP Eligibilit Form Description:	y Marriage Policy

State/Territory na	nme: Virginia	
Transmittal Numl	ber: VA-21-0021	
One or more	Indian Health Programs or Urban Indian Organizations furnish health care services in this	State.
	tate Plan Amendment is likely to have a direct effect on Indians, Indian health programs or	
_	izations.	
	rate has solicited advice from Indian Health Programs, Urban Indian Organizations, and/or	Tribal governments
-	to submission of this State Plan Amendment. The following information regarding any tribal consultation conducted with respect to this submit	ssion:
Tribal cons	ultation was conducted in the following manner. States are not required to consult with India	
•	consultation was conducted voluntarily, provide information about such consultation below: Indian Tribes	
V	Indian Tribes	_
	Indian Health Programs	
V	Indian Health Programs	
	Urban Indian Organization	
	state must upload copies of documents that support the solicitation of advice in accordance	with statutory
	nirements, including any notices sent to Indian Health Programs and/or Urban Indian Organ	•
	ndee lists if face-to-face meetings were held. Also upload documents with comments received	
	grams or Urban Indian Organizations and the state's responses to any issues raised. Alternates and summarize any comments received below and describe how the state incorporated the	
	rogram.	an into the design of
		_
	Document	_
	Please provide a short description of this support document:	
	Tribal Notification Letter for Unborn Child Option CHIP SPA	
	Uploaded Document Name:	
	Date Uploade	:d:
	Tribal_Notice_Signed_FAMIS Prenatal_CHIP SPA_4-29-21.pdf	
Indicate the	e key issues raised in Indian consultative activities:	
	Access	
	Summarize Comments	
	Summarize Response	
	Quality	
	Quality Summarize Comments	
	Summarize Response	
	Cost	
	Summarize Comments	
	Summarize Response	
	Payment methodology	
	Summarize Comments	
	Summarize Response	

	igibility ımmarize Comments	
Sur	immarize Response	
□ Bei	enefits	
	immarize Comments	
Sui	immarize Response	
Ser	rvice delivery	
Sur	immarize Comments	
Su	ımmarize Response	
Sui	inimarize response	
Otl	ther Issue	
State/Territory name: Transmittal Numbe	S Company of the comp	
State/Territory name: Transmittal Number Please enter the Trand 0000 = a four VA-21-0021 Type of SPA: MAGI I XXI Meter Establis Eligibili Non-Fire	er: Transmittal Number (TN) in the format ST-YY-0000 where ST= the state abbreviation, YY = the last two digits of the submission year digit number with leading zeros. The dashes must also be entered. Eligibility & Methods edicaid Expansion sh 2101(f) Group lity Processing nancial Eligibility	T,
State/Territory name: Transmittal Number Please enter the Trans 0000 = a four VA-21-0021 Type of SPA: MAGII XXI Mean Establis Eligibili	er: Transmittal Number (TN) in the format ST-YY-0000 where ST= the state abbreviation, YY = the last two digits of the submission year digit number with leading zeros. The dashes must also be entered. Eligibility & Methods edicaid Expansion sh 2101(f) Group lity Processing nancial Eligibility	T,
State/Territory name: Transmittal Number Please enter the Trand 0000 = a four VA-21-0021 Type of SPA: MAGI I XXI Meter Stablis Eligibili Non-Fire Proposed Effective 07/01/2021 Federal Statute/Reg	er: Transmittal Number (TN) in the format ST-YY-0000 where ST= the state abbreviation, YY = the last two digits of the submission year digit number with leading zeros. The dashes must also be entered. Eligibility & Methods edicaid Expansion sh 2101(f) Group lity Processing nancial Eligibility Date (mm/dd/yyyy)	<i>T</i> ,
State/Territory name: Transmittal Number Please enter the Trans and 0000 = a four VA-21-0021 Type of SPA: MAGII XXI Metation Establis Eligibili Non-Fire Proposed Effective 07/01/2021 Federal Statute/Reg 42 CFR 457.10	er: Transmittal Number (TN) in the format ST-YY-0000 where ST= the state abbreviation, YY = the last two digits of the submission year digit number with leading zeros. The dashes must also be entered. Eligibility & Methods (edicaid Expansion sh 2101(f) Group (htty Processing nancial Eligibility Date (mm/cdd/yyyy) gulation Citation 0; 457.342; 435.926	ur,
State/Territory name: Transmittal Number Please enter the Trand 0000 = a four VA-21-0021 Type of SPA: MAGI II XXI Metar Establis Eligibili Non-Fir Proposed Effective 07/01/2021 Federal Statute/Regregate 42 CFR 457.10 Federal Budget Improved This SPA has a	er: Transmittal Number (TN) in the format ST-YY-0000 where ST= the state abbreviation, YY = the last two digits of the submission year digit number with leading zeros. The dashes must also be entered. Eligibility & Methods (edicaid Expansion sh 2101(f) Group (htty Processing nancial Eligibility Date (mm/cdd/yyyy) gulation Citation 0; 457.342; 435.926	er,
State/Territory name: Transmittal Number Please enter the Transd 0000 = a four VA-21-0021 Type of SPA: MAGII XXI Metatablis Eligibilit Non-Fire Proposed Effective 07/01/2021 Federal Statute/Reg 42 CFR 457.10 Federal Budget Imp This SPA has a Total budget in	virginia er: Transmittal Number (TN) in the format ST-YY-0000 where ST= the state abbreviation, YY = the last two digits of the submission year digit number with leading zeros. The dashes must also be entered. Eligibility & Methods edicaid Expansion sh 2101(f) Group lity Processing nancial Eligibility Date (mm/cd/yyyy) gulation Citation 0; 457.342; 435.926 pact a budget impact. mpact: \$ 166197.00	ur,
State/Territory name: Transmittal Number Please enter the Trand 0000 = a four VA-21-0021 Type of SPA: MAGI I XXI Meter Establis Eligibilit Non-Fire Proposed Effective 07/01/2021 Federal Statute/Reger 42 CFR 457.10 Federal Budget Improved This SPA has a Total budget in State Funds: Federal Funds:	:: Virginia er: Transmittal Number (TN) in the format ST-YY-0000 where ST= the state abbreviation, YY = the last two digits of the submission year digit number with leading zeros. The dashes must also be entered. Eligibility & Methods edicaid Expansion sh 2101(f) Group lity Processing nancial Eligibility Date (mm/dd/yyyy) gulation Citation 0; 457.342; 435.926 pact a budget impact. mpact: \$ 166197.00	ar,

Document	
Please provide a short description of this support document:	
Budget - CHIP SPA FAMIS Prenatal	
Uploaded Document Name:	
	Date Uploaded:
BUDGET CHIP SPA FAMIS Prenatal VA-21-0021 6-24-21.pdf	

Subject of Amendment

Please provide a brief summary of SPA changes.

Purpose of SPA: Extend coverage for unborn children whose mothers are uninsured pregnant women up to 200% FPL not otherwise eligible for Medicaid, FAMIS MOMS, or FAMIS, regardless of immigration status requirements; Fund a Health

*

Signature of State Agency Official

Submitted By:

Last Revision Date:

Submit Date: