DEPARTMENT OF HEALTH & HUMAN SERVICES Centers for Medicare & Medicaid Services San Francisco Regional Office 90 Seventh Street, Suite 5-300 (5W) San Francisco, CA 94103-6706



DIVISION OF MEDICAID & CHILDREN'S HEALTH OPERATIONS

Tom Betlach, Director Arizona Health Care Cost Containment System 801 East Jefferson Street Phoenix, AZ 85034

OCT 2 5 2013

Dear Mr. Betlach:

Enclosed is an approved copy of Arizona's State Plan Amendment (SPA) 13-0010-MM, which was submitted to CMS on August 30, 2013. SPA 13-0010-MM incorporates citizen and non-citizen eligibility requirements into Arizona's Medicaid State Plan in accordance with the Medicaid regulations. The effective date of the SPA is January 1, 2014.

Enclosed is a copy of the new State Plan pages to be incorporated within a separate section at the back of Arizona's approved State plan:

• S89, Pages 1-3

In addition, enclosed is a summary of State Plan pages which are superseded by SPA-13-0010-MM, which should also be incorporated into a separate section in the front of the State Plan:

Superseding Pages of State Plan Material, 13-0010-MM

If you have any questions, please contact Rebecca Bruno at (415)744-3677, or rebecca.bruno@cms.hhs.gov.

Sincerely,

Gloria Nagle, Ph.D., MPA

Associate Regional Administrator

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Division of Medicaid & Children's Health Operations

cc: Wakina Scott HeeYoung Ansell

Medicaid State Plan Eligibility: Summary Page (CMS 179)

State/Territory name: Transmittal Number	Ariz	zona	
Please enter the YY = the last tw	Transmittal Number (T o digits of the submission	N) in the format ST-YY-0000 where Son year, and 0000 = a four digit number	ST= the state abbreviation, or with leading zeros. The
dashes must also	o be entered.		4
AZ-13-0010			
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Proposed Effective I	Date		
10/01/2013	(mm/dd/yyyy)		
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Federal Statute/Regi	ulation Citation	· ,	b
1902(a)(46)(B);	8 U.S.C. 1611, 1612, 161	3, and 1641; 1903(v)(2),(3) and (4); 42	CFR 435.4; 42 CFR 435.406; 4
and a standard and a	The same of the sa		
77 - 3 1 D 3 4 T	4		
Federal Budget Imp	act Federal Fiscal Year	Amount	
	ş	şş	
First Year	2014	\$ 0.00	
Second Year	2015	\$ 0.00	
	Constitutional control control control and a control of the 20°C.		
	#6: Citizenship and Immi	gration Status S89; affirms citizenship reptions related to immigrant eligibility	egulations, specifies reasonable
Governor's Office R	eview		
we.	r's office reported no co	mment	
· ·	nts of Governor's office		
Describe	•		
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· · · · · · · · · · · · · · · · · · ·			
No reply	received within 45 days	of submittal	
•	s specified		
Describe	: r's Office is aware		
Governo	1 5 Office is aware		
Signature of State A	gency Official		
Submitted By:		Theresa Gonzales	
Last Revision	Date:	Sep 30, 2013	
Submit Date:		Aug 30, 2013	

SUPERSEDING PAGES OF STATE PLAN MATERIAL			
TRANSMITTAL NUMBER:	STATE:		
13-0010 MM	Arizona		
PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT:	PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable):		
S89 Non-Financial Eligibility- Citizenship and Non-citizen Eligibility	Attachment 2.6-A: Page 2, Item 3, Subparagraphs (a), (b) and (c), TN 92-1, effective January 1, 1992, approved August 25, 1992 Attachment 2.6-A: Page 3, Item 3, Subparagraphs (d) and (e), TN 02-004, effective October 1, 2002, approved September 20, 2002		



Medicaid Eligibility

OMB Control Number 0938-1148
OMB Expiration date: 10/31/2014

		OIVIB Expiration date: 10/31/2014		
	eial Eligibility and Non-Citizen Eligibility	\$89		
902(a)(46)(B) 3 U.S.C. 1611, 1612, 1613, and 1641 903(v)(2),(3) and (4) 12 CFR 435.4 12 CFR 435.406				
The state p		United States and certain non-citizens consistent with requirements of 42 eriod pending verification of their citizenship, national status or		
■ The sta	tate provides Medicaid eligibility to otherwise eli	gible individuals:		
■ W	/ho are citizens or nationals of the United States;	and		
Re	· ·	on 431 of the Personal Responsibility and Work Opportunity or whose eligibility is required by section 402(b) of PRWORA (8 U.S.C. PRWORA (8 U.S.C. §1613); and		
sat	nmigration status, during a reasonable opportunit	tionals of the United States, or an individual having satisfactory y period pending verification of their citizenship, nationality or uirements of 1903(x), 1137(d), 1902(ee) of the SSA and 42 CFR 435.406,		
	The reasonable opportunity period begins on and eceived by the individual.	extends 90 days from the date the notice of reasonable opportunity is		
re		nable opportunity period if the individual is making a good faith effort to y documentation, or the agency needs more time to complete the		
C	Yes • No			
	The agency begins to furnish benefits to otherwise earlier than the date the notice is received by the i	e eligible individuals during the reasonable opportunity period on a date ndividual.		
(● Yes ○ No			
	The date benefits are furnished is:			
	O The date of application containing the	declaration of citizenship or immigration status.		
	The date the reasonable opportunity r	otice is sent.		
	, , , , , , , , , , , , , , , , , , , ,	of the month of application containing the declaration of citizenship or tion status.		

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Medicaid Eligibility

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	The state provides Medicaid coverage to all Qualified Non-Citizens whose eligibility is not prohibited by section 403 of PRWOR (8 U.S.C. §1613).		
	• Yes O No		
	The state elects the option to provide Medicaid coverage to otherwise eligible individuals under 21 and pregnant women, lawfully residing in the United States, as provided in section 1903(v)(4) of the Act.		
	○ Yes		
	An individual is considered to be lawfully residing in the United States if he or she is lawfully present and otherwise meets the eligibility requirements in the state plan.		
	An individual is considered to be lawfully present in the United States if he or she:		
	1. Is a qualified non-citizen as defined in 8 U.S.C. 1641(b) and (c);		
2. Is a non-citizen in a valid nonimmigrant status, as defined in 8 U.S.C. 1101(a)(15) or otherwise under the immigration defined in 8 U.S.C. 1101(a)(17));			
	3. Is a non-citizen who has been paroled into the United States in accordance with 8 U.S.C. 1182(d)(5) for less than 1 year, except for an individual paroled for prosecution, for deferred inspection or pending removal proceedings;		
	4. Is a non-citizen who belongs to one of the following classes:		
	Granted temporary resident status in accordance with 8 U.S.C. 1160 or 1255a, respectively;		
	Granted Temporary Protected Status (TPS) in accordance with 8 U.S.C. §1254a, and individuals with pending applications for TPS who have been granted employment authorization;		
	■ Granted employment authorization under 8 CFR 274a.12(c);		
	Family Unity beneficiaries in accordance with section 301 of Pub. L. 101-649, as amended;		
	■ Under Deferred Enforced Departure (DED) in accordance with a decision made by the President;		
	■ Granted Deferred Action status;		
	Granted an administrative stay of removal under 8 CFR 241;		
	Beneficiary of approved visa petition who has a pending application for adjustment of status;		
	5. Is an individual with a pending application for asylum under 8 U.S.C. 1158, or for withholding of removal under 8 U.S.C.1231, or under the Convention Against Torture who -		
	Has been granted employment authorization; or		
	Is under the age of 14 and has had an application pending for at least 180 days;		
	6. Has been granted withholding of removal under the Convention Against Torture;		
	7. Is a child who has a pending application for Special Immigrant Juvenile status as described in 8 U.S.C. 1101(a)(27)(J);		
	8. Is lawfully present in American Samoa under the immigration laws of American Samoa; or		
	9. Is a victim of severe trafficking in persons, in accordance with the Victims of Trafficking and Violence Protection Act of 2000, Pub. L. 106-386, as amended (22 U.S.C. 7105(b));		

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Medicaid Eligibility

0. Exception: An individual with deferred action under the Department of Homeland Security's deferred action for the childhood arrivals process, as described in the Secretary of Homeland Security's June 15, 2012 memorandum, shall not be considered to be lawfully present with respect to any of the above categories in paragraphs (1) through (9) of this definition.	
_ Other	
The state assures that it provides limited Medicaid services for treatment of an emergency medical condition, not related organ transplant procedure, as defined in 1903(v)(3) of the SSA and implemented at 42 CFR 440.255, to the following individuals who meet all Medicaid eligibility requirements, except documentation of citizenship or satisfactory immigratures and/or present an SSN:	
Qualified non-citizens subject to the 5 year waiting period described in 8 U.S.C. 1613;	
Non-qualified non-citizens, unless covered as a lawfully residing child or pregnant woman by the state under the option in accordance with 1903(v)(4) and implemented at 435.406(b).	

PRA Disclosure Statement

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0938-1148. The time required to complete this information collection is estimated to average 40 hours per response, including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection. If you have comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: CMS, 7500 Security Boulevard, Attn: PRA Reports Clearance Officer, Mail Stop C4-26-05, Baltimore, Maryland 21244-1850.

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