STATE OF RHODE ISLAND EXECUTIVE OFFICE OF HEALTH AND HUMAN SERVICES

02/26/2024 PUBLIC NOTICE OF PROPOSED AMENDMENT TO RHODE ISLAND MEDICAID STATE PLAN

In accordance Rhode Island General Laws 42-35, notice is hereby given that the Executive Office of Health and Human Services (EOHHS) proposes to make the following amendment to the Rhode Island State Plan under Title XIX of the Social Security Act:

Continuous Eligibility for Children

EOHHS is seeking approval from the Centers for Medicare and Medicaid Services (CMS) to update Rhode Island's Medicaid State Plan and the CHIP State Plan to ensure that children determined eligible at application or during an annual renewal remain eligible for a 12-month period regardless of most changes in circumstances as required by Section 5112 of the Consolidated Appropriations Act, 2023.

These changes are proposed to take effect on January 1, 2024 and has an estimated fiscal impact of \$1.4 million in SFY24 and \$2.7 million in SFY25 (state funds).

This proposed amendment is accessible on the EOHHS website (www.eohhs.ri.gov) or available in hard copy upon request (401-462-2407 or RI Relay, dial 711). Interested persons should submit data, views, or written comments by March 27, 2024 to Brittany Church, Executive Office of Health and Human Services, 3 West Rd, Cranston, RI, 02920, or Brittany.Church@ohhs.ri.gov or via phone at (401) 462-2407.

In accordance with the Rhode Island General Laws 42-35-2.8, an oral hearing will be granted on the proposed State Plan Amendment if requested by twenty-five (25) persons, an agency, or by an association having at least twenty-five (25) members. A request for an oral hearing must be made within ten (10) days of this notice.

The Executive Office of Health and Human Services does not discriminate against individuals based on race, color, national origin, sex, gender identity or expression, sexual orientation, religious belief, political belief, or handicap in acceptance for or provision of services or employment in its programs or activities.

Original signed by Richard Charest, Secretary, Rhode Island Executive Office of Health and Human Services

Signed this 26th day of February, 2024



CHIP state plan.

CHIP Eligibility

State Name: Rhode Island	OMB Control Number: 0938-1148
Transmittal Number: RI - 24 - 0000	
Separate Child Health Insurance Program	CS27
General Eligibility - Continuous Eligibility	CS27
2107(e)(1)(K) of the SSA and 42 CFR 457.342 and 435.926; 21076	(e)(1)(J) and 1902(e)(16) of the SSA
Mandatory 12-Month Postpartum Continuous Eligibility in CHIP f	or States Electing This Option in Medicaid
At state option in Medicaid, states may elect to provide continuous with section 1902(e)(16) of the SSA. If elected under Medicaid, states extended postpartum period for pregnant individuals in its separate elected under the Medicaid state plan.	
State elected the Medicaid option to provide continuous eligibility	through the 12- month postpartum period Yes
	A is provided consistent with the following provisions: ved services under the state child health plan or waiver shall (including any period of retroactive eligibility) and the 12-nancy ends and ending on the last day of the 12th month
Continuous eligibility is provided to targeted low-income child women (if applicable) who are eligible for and enrolled under t postpartum period who would otherwise lose eligibility becaus	the state child health plan through the end of the 12-month
■ The individual or representative requests voluntary diser	nrollment.
■ The individual is no longer a resident of the state.	
The Agency determines that eligibility was erroneously renewal of eligibility because of Agency error or fraud, a	granted at the most recent determination or abuse, or perjury attributed to the individual.
■ The individual dies.	
Unlike continuous eligibility for children, states providing the 12-religibility due to becoming eligible for Medicaid.	nonth postpartum period may not end an individual's continuous
Consistent with section 2107(e)(1)(J) of the SSA, the state individual's pregnancy and 12-month postpartum period	te assures that continuous eligibility is provided through an regardless of an individual becoming eligible for Medicaid.
Benefits provided during the 12-month postpartum period mus with the benefit package elected by the state under section 210 children and/or targeted low-income pregnant women and may	3(a) of the SSA that is available to targeted low-income



CHIP Eligibility

Mandatory Continuous Eligibility for Children

The CHIP Agency must provide that children who have been determined eligible under the state plan shall remain eligible, regardless of any changes in the family's circumstances, for a 12-month continuous eligibility period.

Consistent with section 2107(e)(1)(K) of the SSA, the state assures that continuous eligibility is provided to its targeted low-income children for a duration of 12 months, regardless of any changes in circumstances, unless:

- The child attains age 19.
- The child or child's representative requests voluntary disenrollment.
- The child is no longer a resident of the state.
- The Agency determines that eligibility was erroneously granted at the most recent determination or renewal of eligibility because of Agency error or fraud, abuse, or perjury attributed to child or child's representative.
- The child dies.
- The child becomes eligible for Medicaid.

The state elects to provide coverage to the from-conception-to-end-of-pregnancy (FCEP) population (otherwise known as the "unborn").

The state assures continuous eligibility for the FCEP population is provided in the same manner as continuous eligibility for other targeted low-income children, except for the duration of the continuous eligibility period.

The duration of continuous eligibility for the FCEP population depends on whether a state enrolls the birthing parent into Medicaid for coverage of labor and delivery or pays for the delivery under CHIP. The state conducts at least one of the following actions upon birth of the child:

CHIP pays for labor and delivery and the state screens the child for potential eligibility for Medicaid.

Yes

Emergency Medicaid pays for labor and delivery and the state deems the newborn eligible for Medicaid and ends the continuous eligibility period in CHIP.

No

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 50 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.

V.20240112

Medicaid State Plan Eligibility

Eligibility and Enrollment Processes

Continuous Eligibility for Children

MEDICAID | Medicaid State Plan | Eligibility | RI2024MS00020 | RI-24-0009

♣ Spell Check Instructions | ② Request System Help

CMS-10434 OMB 0938-1188

Not Started In Progress Complete

Package Header

 Package ID
 RI2024MS00020
 SPA ID
 RI-24-0009

 Submission Type
 Official
 Initial Submission Date
 N/A

 Approval Date
 N/A
 Effective Date
 N/A

Superseded SPA ID N/A

View Implementation Guide

VIEW ALL RESPONSES

The state provides continuous eligibility for children in accordance with the following provisions:

A. Mandatory Continuous Eligibility for Hospitalized Children

Collapse

The state provides Medicaid to a child eligible for and enrolled under the Infants and Children under Age 19 (42 CFR 435.118) eligibility group until the end of an inpatient stay for which inpatient services are covered, if the child:

- 1. Was receiving inpatient services covered by Medicaid on the date the child becomes ineligible under the eligibility group based on the child's age; and
- 2. Would remain eligible but for attaining such age.

B. Mandatory Continuous Eligibility for Children

Collapse

The state provides continuous eligibility to all children under age 19 and that:

- 1. The continuous eligibility period begins on the effective date of the child's most recent determination or redetermination of eligibility, and ends the last day of the earlier of the following periods:
 - a. The month that the child turns 19 years old;
 - b. 12 months.
- 2. Continuous eligibility is provided to children eligible under all mandatory and optional eligibility groups (excluding Medically Needy) who would otherwise lose eligibility because of any change in circumstances, unless:
 - a. The child dies;
 - b. The child or the child's representative voluntarily requests a termination of the child's eligibility;
 - c. The child ceases to be a resident of the state;
 - d. The Medicaid agency determines that eligibility was determined incorrectly at the most recent determination or redetermination of eligibility because of agency error or fraud, abuse, or perjury attributed to the child or the child's representative; or
 - e. The child attains the maximum age specified in B.

C. Additional Information (optional)

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Would you like to validate the reviewable unit data?

• Yes No

Note: If validation fails, errors will appear in red above.

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-- Select Reviewable Unit --

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PRA Disclosure Statement: Centers for Medicare & Medicaid Services (CMS) collects this mandatory information in accordance with (42 U.S.C. 1396a) and (42 CFR 430.12); which sets forth the authority for the submittal and collection of state plans and plan amendment information in a format defined by CMS for the purpose of improving the state application and federal review processes, improve federal program management of Medicaid programs and Children's Health Insurance Program, and to standardize Medicaid program data which covers basic requirements, and individualized content that reflects the characteristics of the particular state's program. The information will be used to monitor and analyze performance metrics related to the Medicaid and Children's Health Insurance Program in efforts to boost program integrity efforts, improve performance and accountability across the programs. Under the Privacy Act of 1974 any personally identifying information obtained will be kept private to the extent of the law. 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 0938-1188. The time required to complete this information collection is estimated to range from 1 hour to 80 hours per response (see below), 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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