

BILL GRAVES, GOVERNOR OF THE STATE OF KANSAS



**KANSAS DEPARTMENT OF SOCIAL
AND REHABILITATION SERVICES**

915 SW HARRISON STREET, TOPEKA, KANSAS 66612

ROCHELLE CHRONISTER, SECRETARY

March 30, 1999

Ed Tregoe
Project Officer
Health Care Financing Administration
Center for Medicaid and State Operations
Mail Stop S2-01-16
7500 Security Blvd
Baltimore, MD 21244-1850

RE: Kansas State Child Health Plan (HealthWave) under Title **XXI** of the Social Security Act.

Dear Mr. Tregoe:

Enclosed for your review are two proposed amendments to page 10 of our HealthWave plan. Section 4.3 paragraph 3 has been revised to state that newborn infants who are born to HealthWave enrolled mothers or born into a family with a HealthWave enrolled child(ren) are HealthWave eligible at least through the end of the current continuous 12 month period of eligibility. Medical coverage for infants from birth is consistent with the philosophy of the Medicaid program and promotes preventive health care. Keeping the family together in one health plan provides for continuity of medical care and supports the concept of a medical home. Having one health plan for all family members helps eliminate provider confusion in terms of billing and eligible services.

In Section 4.3, paragraph 4, sentence 3 has been revised to state that the Clearinghouse contractor, rather than the Medicaid fiscal agent, will handle enrollment in the health plans.

We request that these amendments to the HealthWave State Plan become effective January 1, 1999.

If you or your staff have any questions regarding these proposed changes, please call Keith Braman, Adult and Medical Services, at (785) 296-8906. Thank-you!

Sincerely,

Janet Schalansky
Deputy Secretary

cc: Jackie Glaze
Ann Koci
SRS File
enclosure

KANSAS STATE CHILD HEALTH PLAN

will be mailed in along with supporting documentation such as wage information to a central clearinghouse. The clearinghouse will be responsible for initial processing and eligibility determination for both Medicaid and SCHIP and will involve privately contracted staff. The Medicaid state agency will administer the portion of the clearinghouse responsible for Medicaid determination and case maintenance. Contracted staff will be responsible for all SCHIP processing and determinations as well as ongoing case management. Both Medicaid and SCHIP cases will be maintained by the clearinghouse unless the family accesses other benefits such as food stamps or child care assistance. In these instances, the appropriate local **SRS** field office will manage the case, whether Medicaid or SCHIP related.

The Income Eligibility Verification System (IEVS) will be used to confirm income information on an ongoing basis and the Systematic Alien Verification for Entitlements (SAVE) program or an appropriate alternative will be used to verify immigration status.

Eligibility will be continuous for 12 months and re-established annually. The family must meet all eligibility criteria and have paid **any** applicable premiums from the prior year to be re-enrolled for a new 12 month period. An infant born to a HealthWave enrolled mother or into a family with a HealthWave enrolled child will be HealthWave eligible at least through the end of the current continuous 12 month eligibility period of the family member. At the end of that 12 month continuous eligibility period the newborn infant would be subject to the Medicaid screening and enrollment requirements.

Families will select their children's health plans after the eligibility determination is finalized. Where feasible the State plans to offer at least two health plans depending on geographic area. The Clearinghouse contractor will handle enrollment in the health plans.

4.4 Describe the procedures that assure:

4.4.1 Through intake and follow-up screening, that only targeted low-income children who are ineligible for either Medicaid or other creditable coverage are furnished child health assistance under the state child health plan. (Section 2102 (b)(3)(A))

Most current Medicaid financial and non-financial requirements as specified in the Title XIX State Plan will be applicable to both the Medicaid and SCHIP populations. The central clearinghouse described in section **4.3** will determine initial eligibility for either Medicaid or SCHIP by reviewing income and other