



KANSAS DEPARTMENT OF SOCIAL  
AND REHABILITATION SERVICES

915 SW HARRISON STREET, TOPEKA, KANSAS 66612

JANET SCHALANSKY, SECRETARY

**Division of Health Care Policy**

**Medical Policy/Medicaid**

**Sixth Floor, South**

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**March 21, 2001**

Ed Tregoe  
Project Officer  
HCFA Center for Medicaid and State Operations  
Mail Stop S2-01-16  
7500 Security Blvd  
Baltimore, MD 21244-1855

re: Kansas Children's Health Insurance Program under Title XXI of the  
Social Security Act

Dear Mr. Tregoe:

Enclosed for your review and approval is proposed SPA #0 1-01 which would eliminate the waiting period for health care coverage for previously insured children under SCHIP. The State of Kansas legislature is amending the state statute to eliminate the six month waiting period.

We have included two versions of SPA #0 1-01. One version shows the changes to be made by striking out language which is to be deleted and underlining language which is to be added. The other version is the clean version which will be added to our State Plan manual and is the version that we ask that you stamp with the approval date.

We appreciate your cooperation in working with us in amending the HealthWave State Plan to best serve the needs of children in Kansas. If you have any questions or comments regarding this amendment please contact Rita Haverkamp at (785) 296-3774. Your prompt response to this request is appreciated.

Sincerely,

Janet Schalansky  
Secretary

JS:RH:rh

cc: Jackie Glaze  
Bobbie Graff-Hendrixson  
SRS File Copy

## KANSAS STATE CHILD HEALTH PLAN

Through the use of a combined simplified application enrollment form and the central clearinghouse, eligibility will be determined for either Medicaid or SCHIP coverage based on income and age level.

### **4.4.3 That the insurance provided under the state child health plan does not substitute for coverage under group health plans. (Section 2102 (b)(3)(C))**

The application enrollment form will be used to ascertain current health insurance coverage as well as access to state employee coverage. Children found to have current health coverage will be denied eligibility for SCHIP coverage.

In addition, access to state employee coverage will result in denial of benefits under the SCHIP program.

~~Children who had health coverage within six months prior to application for the SCHIP program will be denied benefits unless such coverage was ended based on good cause. Good cause reasons would include such things as loss of employment due to factors other than voluntary termination, discontinuation of health benefits to all employees of the individual's employer, and termination of a health insurance plan the child was covered under by the insurer. Premiums will be charged to families above 150% of FPL in the SCHIP program. Children who had health coverage within six months prior to application for the SCHIP program will not be denied benefits. Premiums will be charged to families above 150% of FPL in the SCHIP program.~~

The agency will undertake a review of the "crowd out" issue and monitor any conditions that may contribute to crowd out on at least an annual basis.

### **4.4.4 The provision of child health assistance to targeted low-income children in the state who are Indians (as defined in section 4(c) of the Indian Health Care Improvement Act, 25 U.S.C. 1603(c)). (Section 2102 (b)(3)(D))**

The State will undertake the following actions:

1. Include ethnic information on the application for tracking Indian numbers.

Proposed Effective Date:

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Children who had health coverage within six months prior to application for the SCHIP program will not be denied benefits. Premiums will be charged to families above 150% of FPL in the SCHIP program.

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Proposed Effective Date: 7/01/01