DEPARTMENT OF HEALTH & HUMAN SERVICES
Health Care Financing Administration

Center for Medicaid and State Operations
Family and Children's Health Programs Group
7500 Security Boulevard
Baltimore, MD 21244-1850

JUN 22 2000

Mr. David Parrella, Director
Medical Care Administration
Department of Social Services
25 Sigourney Street
Hartford, Connecticut 06106-5033

Dear Mr. Parrella:

Thank you for your response, dated May 30,2000, to our questions concerning your State Children's Health Insurance Program (SCHIP) amendment. As you are aware, your proposal has been undergoing review by the Department of Health and Human Services. In order to proceed with our review, we find it necessary to seek further information.

- Section 4---Eligibility of Children of Municipal Employees. We understand from your previous response that children of some municipal employees may be eligible to enroll in a State sponsored insurance program. Under section 2110(b)(2)(B), a child who is a member of a family eligible for coverage under a State health benefit plan may not be eligible for SCHIP. We currently consider a "Statehealth benefit plan" to be one offered or organized by the State government. (See Question 98 in "TheAdministration's Responses to Questions about the State Children's Health Insurance Program, dated July 29,1998, and the Notice of Proposed Rulemaking dated November 8,1999.) Please describe how you believe your amendment complies with this requirement.

Under Section 2106(c) of the Social Security Act, HCFA must either approve, disapprove, or request additional information on a proposed Title XXI State plan amendment within ninety days. This letter constitutes our notification that specified additional information is needed in order to fully assess your plan. The 90-day review period has been stopped by this request and will resume as soon as a substantive response to all of the enclosed questions is received. The members of the review team would be happy to answer any questions you may have in regard to this letter and to assist your staff in formulating a response.

Please send your response, either on disk or electronically, as well as in hard copy to Michelle Browne, Project Officer for Connecticut's Title XXI proposal, with a copy to Ronald Preston, Ph.D., Associate Regional Administrator for the HCFA Region I Division of Medicaid and State Operations. Ms. Browne's Internet address is: MBrowne@hcfa.gov. Her mailing address is:

Division of Integrated Health Systems
Family and Children's Health Programs Group
Center for Medicaid and State Operations
Health Care Financing Administration
Mail Stop S2-01-16
7500 Security Boulevard
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We appreciate the efforts of your staff and share your goal of providing health care to low income, uninsured children through Title XXI. If you have questions or concerns regarding the matters raised in this letter, your staff may contact either Ms. Browne at (410) 786-3233 or Mr. Preston, at (617) 565-1223. They will provide or arrange for any technical assistance you may require in preparing your response. Your cooperation is greatly appreciated.

Sincerely,

Cindy Mann
Director

Enclosure

cc: Linda Mead, Husky B Program Manager
HCFA Region I, Boston