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| **Separate Child Health Insurance Program CS27**  **General Eligibility - Continuous Eligibility** |
| 2107(e)(1)(K) of the SSA and 42 CFR 457.342 and 435.926; 2107(e)(1)(J) and 1902(e)(16) of the SSA |
| Mandatory 12-Month Postpartum Continuous Eligibility in CHIP for States Electing This Option in Medicaid  At state option in Medicaid, states may elect to provide continuous eligibility for an individual’s 12-month postpartum period consistent with section 1902(e)(16) of the SSA. If elected under Medicaid, states are required to provide the same continuous eligibility and extended postpartum period for pregnant individuals in its separate CHIP. A separate CHIP cannot implement this option if not also elected under the Medicaid state plan.  State elected the Medicaid option to provide continuous eligibility through the 12- month postpartum period Yes/No  *If YES, show rest of the Postpartum Section*  □ The state assures the extended postpartum period available to pregnant targeted low-income children or targeted low-income pregnant women under section 2107(e)(1)(J) of the SSA is provided consistent with the following provisions:  □ Individuals who, while pregnant, were eligible and received services under the state child health plan or waiver shall remain eligible throughout the duration of the pregnancy (including any period of retroactive eligibility) and the 12-month postpartum period, beginning on the last day the pregnancy ends and ending on the last day of the 12th month consistent with paragraphs (5) and (16) of section 1902(e) of the SSA  □ Continuous eligibility is provided to targeted low income children who are pregnant or targeted low-income pregnant women (if applicable) who are eligible for and enrolled under the state child health plan through the end of the 12-month postpartum period who would otherwise lose eligibility because of a change in circumstances, unless:  □ The individual or representative requests voluntary disenrollment.  □ The individual 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 the individual.  □ The individual dies.  Unlike continuous eligibility for children, states providing the 12-month postpartum period may not end an individual’s continuous eligibility due to non-payment of premiums or becoming eligible for Medicaid.  □ Consistent with section 2107(e)(1)(J) of the SSA, the state assures that continuous eligibility is provided through an individual’s pregnancy and 12-month postpartum period regardless of non-payment of premiums, or an individual becoming eligible for Medicaid.  □ Benefits provided during the 12-month postpartum period must be the same scope of comprehensive services consistent with the benefit package elected by the state under section 2103(a) of the SSA that is available to targeted low income children and/or targeted low-income pregnant women and may include additional benefits as described in Section 6 of the CHIP state plan.  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.  ~~□ There is a failure to pay required premiums or enrollment fees on behalf of a child, as provided for in the state plan~~  The state elects to provide coverage to the from-conception-to-end-of-pregnancy (FCEP) population (otherwise known as the “unborn”). Yes/No  *If YES, show rest of the FCEP CE Section*  □ 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 continues 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/No  Emergency Medicaid pays for labor and delivery and the state deems the newborn eligible for Medicaid and ends the continuous eligibility period in CHIP. Yes/No |

PRA Disclosure Statement

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