State/Territory	DELAWARE	
	(Name of State/Territory)	
As a condition 457.40(b))	for receipt of Federal funds under Title XXI of the Social Security Act, (42 CFR,	
	Thomas R. Carper, Governor June 30, 1998	
(	Signature of Governor, or designee, of State/Territory, Date Signed)	
agrees to adm Health Plan, th	owing Child Health Plan for the Children's Health Insurance Program and hereb nister the program in accordance with the provisions of the approved Child e requirements of Title XXI and XIX of the Act (as appropriate) and all applicable ions and other official issuances of the Department.	•
The following 3 (42 CFR 457.4	State officials are responsible for program administration and financial oversight O(c)):	
Name: Stephe	n Groff Position/Title: <u>Director</u>	
Name: Lisa Z	mmerman Position/Title: Deputy Director	
Name: Alexis	Bryan-Dorsey Unkyong Goldie Position/Title: Chief of Administration	

\*Disclosure. 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 0938-0707. The time required to complete this information collection is estimated to average 80 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 any comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, write to: CMS, 7500 Security Blvd., Attn: PRA Reports Clearance Officer, Mail Stop C4-26-05, Baltimore, Maryland 21244-1850.

**1.4.** Provide the effective (date costs begin to be incurred) and implementation (date

services begin to be provided) dates for this SPA (42 CFR 457.65). A SPA may only have one effective date, but provisions within the SPA may have different implementation dates that must be after the effective date.

## Original Plan

Effective Date: October 1, 1998
Implementation Date: February 1, 1999

## Subsequent Plan Amendments

State Plan Amendment	Effective Date	Implementation Date
SPA #1	July 1, 1999	
SPA #2	October 1, 2001	August 1, 2001
SPA #3	June 12, 2003	Withdrawn – June 12, 2003
SPA #4	January 1, 2007	October 1, 2009
SPA #5	April 1, 2009	April 1, 2009
SPA #6	July 1, 2010	July 1, 2010
SPA #7	July 1, 2014	July 1, 2014
SPA # DE-CHIP-16-001	January 1, 2017	January 1, 2017
SPA # DE-CHIP-17-003	October 2, 2017	October 2, 2017
SPA # DE-CHIP-18-003	October 12, 2018	October 12, 2018
SPA # DE-CHIP-19-004	July 1, 2018	July 1, 2018
SPA # DE-CHIP-20-0003	March 1, 2020	March 1, 2020
SPA # DE-CHIP-20-0003	March 1, 2020	March 1, 2020
SPA # DE-CHIP-20-0007	October 1, 2020	October 1, 2020

## **Summary of Approved CHIP MAGI SPAs:**

Transmittal Number	SPA Group	PDF #	Description	Superseded Plan Section(s)
DE-13-0012  Effective/ Implementation Date: January 1, 2014	MAGI Eligibility & Methods	CS7	Eligibility – Targeted Low Income Children	Supersedes the current sections Geographic Area 4.1.1; Age 4.1.2; and Income 4.1.3
		CS15	MAGI-Based Income Methodologies	Incorporate within a separate subsection under section 4.3
DE-13-0013 Effective/ Implementation Date: January 1, 2014	XXI Medicaid Expansion	CS3	Eligibility for Medicaid Expansion Program	Supersedes the current Medicaid expansion section 4.0
DE-13-0016  Effective/ Implementation Date: January 1, 2014	Establish 2101(f) Group	CS14	Children Ineligible for Medicaid as a Result of the Elimination of Income Disregards	Incorporate within a separate subsection under section 4.1

DE-13-0015  Effective/	Non- Financial Eligibility	CS17	Non-Financial Eligibility – Residency	Supersedes the current section 4.1.5
Implementation Date: January 1, 2014		CS18	Non-Financial Eligibility – Citizenship	Supersedes the current sections 4.1.0; 4.1.1-LR; 4.1.1-LR
		CS19	Non-Financial Eligibility – Social Security Number	Supersedes the current section 4.1.9.1
		CS21	Non-Financial Eligibility – Substitution of Coverage	Supersedes the current section 4.4.4
		CS27	Non-Payment of Premiums	Supersedes the current section 8.7
			Continuous Eligibility	Supersedes the current section 4.1.8
DE-13-0014  Effective/Implementation Date: October 1, 2013	Eligibility Processing	CS24	Eligibility Process	Supersedes the current sections 4.3 and 4.4

## SPA #: DE-20-0007-CHIP DE-CHIP-20-0014

Purpose of SPA: Health Services Initiatives - Vision Services - School-Based Initiative - to revise language for Delaware's CHIP State Plan Health Service Initiative to align with the Delaware Department of Education's (DDOE's) definition of low-income in its Vision Services - School-Based Initiative, and to revise the data collection process to aid in identification of uninsured children.

Purpose of SPA: The purpose of this proposed SPA DE-CHIP-22-0014 is to align services provided to children under Delaware's Title XXI CHIP State Plan with services provided to children under Delaware's Title XIX Medicaid State Plan.

Proposed effective date: July 1, 2023

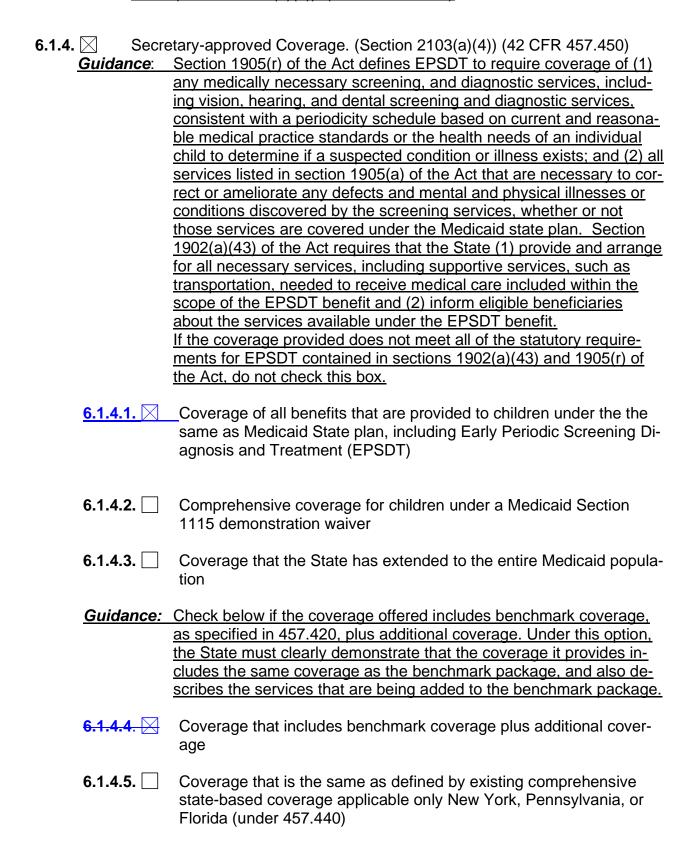
Proposed implementation date: July 1, 2023

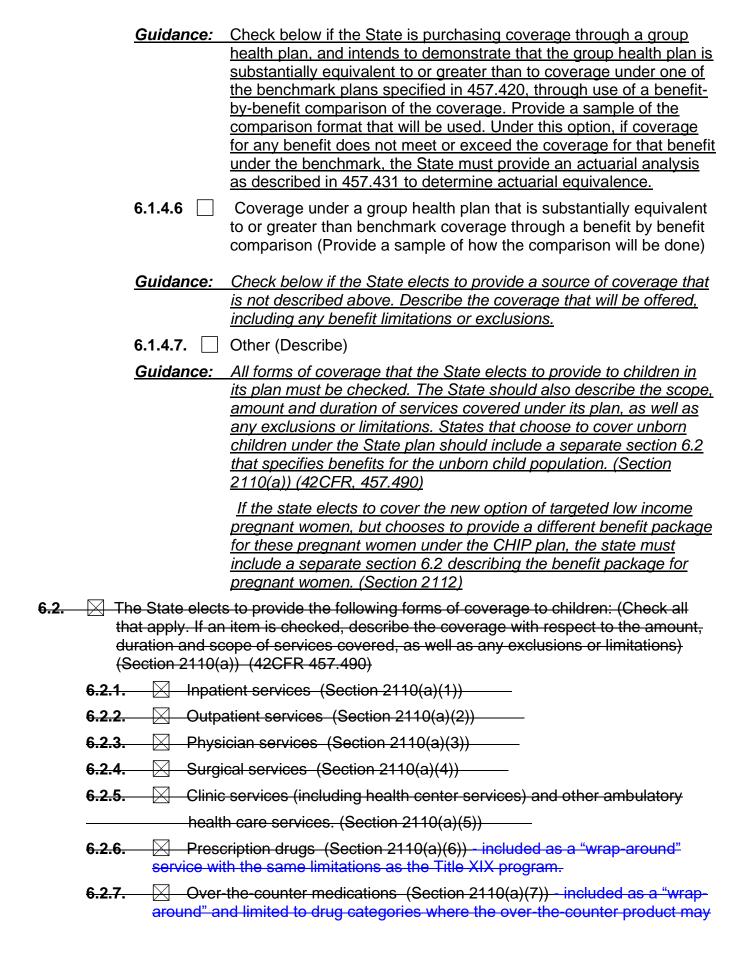
**1.4- TC Tribal Consultation** (Section 2107(e)(1)(C)) Describe the consultation process that occurred specifically for the development and submission of this State Plan Amendment, when it occurred and who was involved.

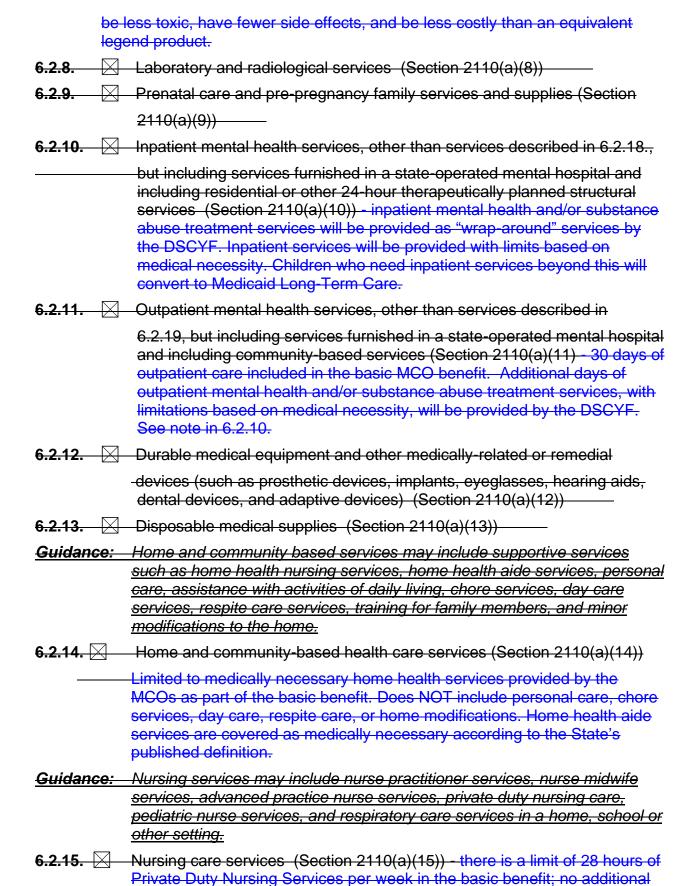
Delaware does not have any federally recognized Indian tribes. Any Delaware resident, including those who are American Indians or Alaska Natives, may participate in the review of amendments to state law or regulation and may offer comments on all program policies, including those relating to provision of child health assistance to American Indian or Alaskan Native children.

TN No: Approval Date Effective Date

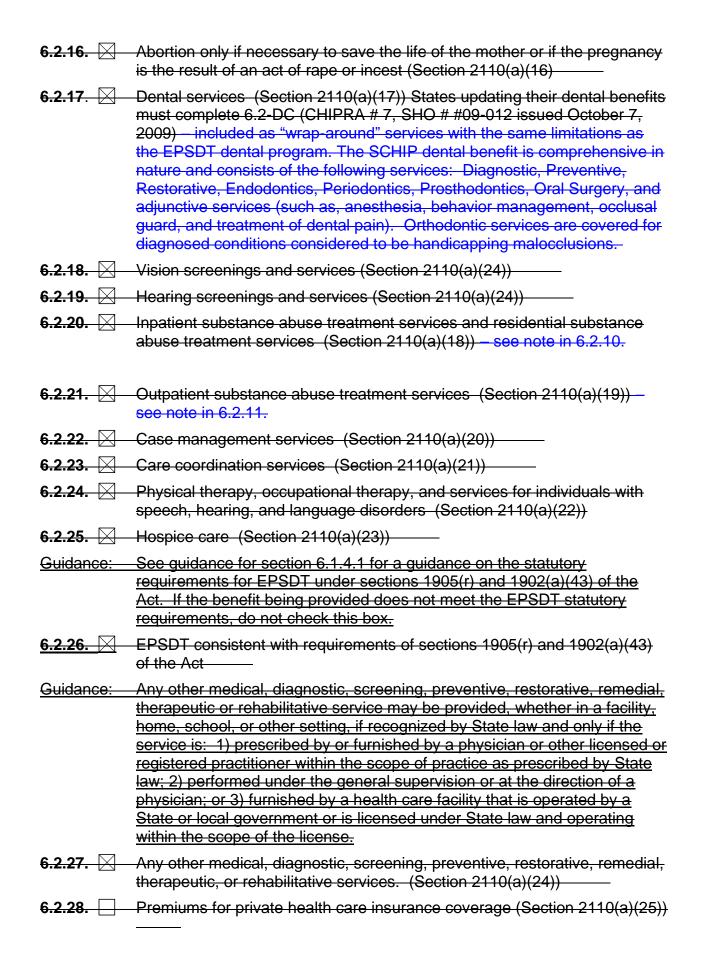
Guidance: Secretary-approved coverage refers to any other health benefits coverage deemed appropriate and acceptable by the Secretary upon application by a state. (Section 2103(a)(4)) (42 CFR 457.250)







hours available.



	<del>6.2.29.</del>	Medical transportation (Section 2110(a)(26)) - Emergency transportation only as provided in the basic benefit package.
		Enabling services, such as transportation, translation, and outreach  av be offered only if designed to increase the accessibility of primary and
		nealth care services for eligible low-income individuals.
		Enabling services (such as transportation, translation, and outreach services) (Section 2110(a)(27))
	CHIP Disas	ter Relief:
		's discretion, it may temporarily provide nonemergency transportation to ees who reside and/or work in a State or Federally declared disaster area.
	6.2.31	Any other health care services or items specified by the Secretary and not included under this Section (Section 2110(a)(28))
<u>6.2.</u>	apply. If an i	ects to provide the following forms of coverage to children: (Check all that tem is checked, describe the coverage with respect to the amount, duration of services covered, as well as any exclusions or limitations) (Section 2CFR 457.490)
	Coverage wany exclusion	ith respect to the amount, duration and scope of services covered, as well as one or limitations, is applied in the same manner as coverage under Title XIX Medicaid State Plan.
	6.2.1.	
	6.2.2.	Outpatient services (Section 2110(a)(2))
	<u>6.2.3.</u>	Physician services (Section 2110(a)(3))
	<u>6.2.4.</u> ⊠	Surgical services (Section 2110(a)(4))
	6.2.5.	Clinic services (including health center services) and other ambulatory health care services. (Section 2110(a)(5))
	<u>6.2.6.</u>	Prescription drugs (Section 2110(a)(6))
	<u>6.2.7.</u>	Over-the-counter medications (Section 2110(a)(7))
	<u>6.2.8.</u>	Laboratory and radiological services (Section 2110(a)(8))
	<u>6.2.9.</u>	Prenatal care and pre-pregnancy family services and supplies (Section 2110(a)(9))
	6.2.10.	Durable medical equipment and other medically-related or remedial devices (such as prosthetic devices, implants, eyeglasses, hearing aids, dental devices, and adaptive devices) (Section 2110(a)(12))
	6.2.11.	Disposable medical supplies (Section 2110(a)(13))
	Guidance:	Home and community based services may include supportive services

such as home health nursing services, home health aide services, personal care, assistance with activities of daily living, chore services, day care services, respite care services, training for family members, and minor modifications to the home.

- 6.2.12. X Home and community-based health care services (Section 2110(a)(14)) Guidance: Nursing services may include nurse practitioner services, nurse midwife services, advanced practice nurse services, private duty nursing care, pediatric nurse services, and respiratory care services in a home, school or other setting. 6.2.13. X Nursing care services (Section 2110(a)(15)) **6.2.14.**  $\boxtimes$ Abortion only if necessary to save the life of the mother or if the pregnancy is the result of an act of rape or incest (Section 2110(a)(16) 6.2.15. X Dental services (Section 2110(a)(17)) States updating their dental benefits must complete 6.2-DC (CHIPRA # 7, SHO # #09-012 issued October 7, 2009) **6.2.16.** 🔀 Vision screenings and services (Section 2110(a)(24)) Hearing screenings and services (Section 2110(a)(24)) **6.2.17.** × 6.2.18. X Case management services (Section 2110(a)(20)) **6.2.19.**  $\boxtimes$ Care coordination services (Section 2110(a)(21)) **6.2.20.** ⊠ Physical therapy, occupational therapy, and services for individuals with speech, hearing, and language disorders (Section 2110(a)(22)) **6.2.21.** X Hospice care (Section 2110(a)(23)) Guidance: See guidance for section 6.1.4.1 for a guidance on the statutory requirements for EPSDT under sections 1905(r) and 1902(a)(43) of the Act. If the benefit being provided does not meet the EPSDT statutory requirements, do not check this box.
  - 6.2.22.1 The state assures that any limitations applied to the amount, duration, and scope of benefits described in Sections 6.2 and 6.3- BH of the CHIP state plan can be exceeded as medically necessary.

EPSDT consistent with requirements of sections 1905(r) and 1902(a)(43)

Guidance: Any other medical, diagnostic, screening, preventive, restorative, remedial, therapeutic or rehabilitative service may be provided, whether in a facility,

**6.2.22**.

of the Act

home, school, or other setting, if recognized by State law and only if the service is: 1) prescribed by or furnished by a physician or other licensed or registered practitioner within the scope of practice as prescribed by State law; 2) performed under the general supervision or at the direction of a physician; or 3) furnished by a health care facility that is operated by a State or local government or is licensed under State law and operating within the scope of the license.

6.2.23.	Any other medical, diagnostic, screening, preventive, restorative, remedial, therapeutic, or rehabilitative services. (Section 2110(a)(24))
6.2.24.	Premiums for private health care insurance coverage (Section 2110(a)(25))
6.2.25.	Medical transportation (Section 2110(a)(26))
Guidance:	Enabling services, such as transportation, translation, and outreach services, may be offered only if designed to increase the accessibility of primary and preventive health care services for eligible low-income individuals.
<u>6.2.26.</u> X	Enabling services (such as transportation, translation, and outreach services) (Section 2110(a)(27))
6.2.27.	Any other health care services or items specified by the Secretary and not included under this Section (Section 2110(a)(28))