Tom Betlach, Director  
Arizona Health Care Cost Containment System  
801 East Jefferson Street  
Phoenix, AZ 85034

Dear Mr. Betlach:

Enclosed is an approved copy of Arizona State Plan Amendment (SPA) 13-006, which was submitted to CMS on August 20, 2013. This amendment updates the State Plan to indicate that prior quarter coverage will be covered for all Title XIX populations effective on January 1, 2014.

Enclosed is the following approved State Plan page to be incorporated within your approved State Plan:

- Attachment 2.6-A, page 24, items 11.a. (1) and 11.a.(2)

If you have any questions, please have your staff contact Peter Banks at (415) 744-3782 or at Peter.Banks@cms.hhs.gov.

Sincerely,

Gloria Nagle, Ph.D., MPA  
Associate Regional Administrator  
Division of Medicaid & Children’s Health Operations

cc: Wakina Scott  
HeeYoung Ansell
TRANSMITTAL AND NOTICE OF APPROVAL OF
STATE PLAN MATERIAL

FOR: Centers for Medicare and Medicaid Services

TO: REGIONAL ADMINISTRATOR
CENTERS FOR MEDICARE AND MEDICAID SERVICES
DEPARTMENT OF HEALTH AND HUMAN SERVICES

5. TYPE OF PLAN MATERIAL (Check One):
   □ NEW STATE PLAN       □ AMENDMENT TO BE CONSIDERED AS NEW PLAN       ☒ AMENDMENT

COMPLETE BLOCKS 6 THRU 10 IF THIS IS AN AMENDMENT (Separate Transmittal for each amendment)

6. FEDERAL STATUTE/REGULATION CITATION:
   42 CFR 435.944 .915
   1902(a)(34) of the Social Security Act

7. FEDERAL BUDGET IMPACT:
   FFY 2014: $9 million
   FFY 2015: $12 million

8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT:
   Attachment 2.6-A, page 24

9. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION
   OR ATTACHMENT (If Applicable):
   Attachment 2.6-A, page 24

10. SUBJECT OF AMENDMENT:
    Updates the State Plan to reflect that prior quarter coverage will begin January 1, 2014.

11. GOVERNOR’S REVIEW (Check One):
    □ GOVERNOR’S OFFICE REPORTED NO COMMENT
    □ COMMENTS OF GOVERNOR’S OFFICE ENCLOSED
    □ NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL
    ☒ OTHER, AS SPECIFIED:

12. SIGNATURE OF STATE AGENCY OFFICIAL:

13. TYPED NAME:
    Monica Coury

14. TITLE:
    Assistant Director

15. DATE SUBMITTED:
    August 20, 2013

16. RETURN TO:
    Monica Coury
    801 E. Jefferson, MD#4200
    Phoenix, Arizona 85034

FOR REGIONAL OFFICE USE ONLY

17. DATE RECEIVED: August 20, 2013

18. DATE APPROVED: MAR 2-6 2014

PLAN APPROVED – ONE COPY ATTACHED

19. EFFECTIVE DATE OF APPROVED MATERIAL:
    January 1, 2014

20. SIGNATURE OF REGIONAL OFFICIAL:
    _______________________________________

21. TYPED NAME:
    Gloria Nagle

22. TITLE: Associate Regional Administrator
    Division of Medicaid & Children’s Health Operations

23. REMARKS:
    Box 6 – Statutory citation and updated regulatory citation added by CMS on 11/14/13
    Box 9 – Superseded plan section added by CMS on 11/14/13
11. Effective Date of Eligibility

a. Groups Other Than Qualified Medicare Beneficiaries

(1) For the prospective period.
Coverage is available for the full month if the following individuals are eligible at any time during the month except that residency requirements must be met for the full month. Coverage for individuals moving to Arizona begins on the day the individual moves to Arizona.

- [X] Aged, blind, disabled.
- [X] AFDC-related.
- [X] All other Title XIX populations

Coverage is available only for the period during the month for which the following individuals meet the eligibility requirements.

- [ ] Aged, blind, disabled.
- [ ] AFDC-related.
- [ ] All other Title XIX populations

(2) For the retroactive period.
Coverage is available for three months before the date of application if the following individuals would have been eligible had they applied.

- [ ] Aged, blind, disabled.
- [ ] AFDC-related.
- [ ] All other Title XIX populations

Coverage is available during any of the three months before the date of application if the following individuals would have been eligible for the month, had they applied. Coverage for individuals moving to Arizona begins on the day the individual moves to Arizona.

- [X] Aged, blind, disabled.
- [X] AFDC-related.
- [X] All other Title XIX populations