July 28, 2020

Jami Snyder, Director
Arizona Health Care Cost Containment System
801 East Jefferson Street
Phoenix, AZ 85034

Re: Arizona State Plan Amendment (SPA) 20-0009

Dear Ms. Snyder:

We have reviewed the proposed amendment to add section 7.4.A. Rescissions to the State’s Disaster Relief Policies for the COVID-19 National Emergency to your state plan, as submitted under transmittal number (TN) 20-0009. This amendment proposes to rescind the temporary election, in section 7.4. Medicaid Disaster Relief for the COVID-19 National Emergency, of the COVID-19 testing group described at 1902(a)(10)(A)(ii)(XXIII) of the Social Security Act (the Act).

We conducted our review of your submittal according to the statutory requirements at section 1902(a) of the Act and implementing regulations. Section 7.4 of the Medicaid state plan provides temporary authority and is intended to be in effect only for the duration of the COVID-19 public health emergency. Due to the temporary nature of this provision, and because the state has not yet implemented the COVID-19 testing group and no individuals have been enrolled for coverage, TN 20-0009 is approved effective April 1, 2020 pursuant to 42 CFR 430.20(b)(3).

Please note that if Arizona wishes to cover the COVID-19 testing group after it is removed from the state plan, you may submit a new Medicaid Disaster Relief for the COVID-19 National Emergency SPA at any time during the public health emergency.

Enclosed is a copy of the CMS-179 summary form and the approved state plan page.

Please contact Brian Zolynas at (415) 744-3601 or by email at brian.zolynas@cms.hhs.gov if you have any questions about this approval.

Sincerely,
Anne Marie Costello
Deputy Director
Center for Medicaid & CHIP Services
**Transmittal and Notice of Approval of State Plan Material**

**For: Centers for Medicare & Medicaid Services**

**1. Transmittal Number**

2020-009

**2. State**

Arizona

**3. Program Identification: Title XIX of the Social Security Act (Medicaid)**

**4. Proposed Effective Date**

March 1, 2020

**5. Type of Plan Material (Check One)**

- [ ] New State Plan
- [ ] Amendment to be Considered as New Plan
- [x] Amendment

**6. Federal Statute/Regulation Citation**

42 CFR Part 447

**7. Federal Budget Impact**

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**8. Page Number of the Plan Section or Attachment**

Page 90, 91, 99

**9. Page Number of the Superseded Plan Section or Attachment (If Applicable)**

Page 90, 91

**10. Subject of Amendment**

This SPA removes the indication that the State covers the optional COVID testing group.

**11. Governor’s Review (Check One)**

- [x] Governor’s Office Reported No Comment
- [ ] Other, as Specified

**12. Signature of State Agency Official**

Dana Flannery

**13. Typed Name**

Dana Flannery

**14. Title**

Assistant Director

**15. Date Submitted**

6/30/20

**16. Return To**

FOR REGIONAL OFFICE USE ONLY

**17. Date Received**

June 30, 2020

**18. Date Approved**

July 28, 2020

**19. Effective Date of Approved Material**

April 1, 2020

**20. Signature of Regional Official**

Anne Marie Costello - S

**21. Typed Name**

Anne Marie Costello

**22. Title**

Deputy Director, Center for Medicaid & CHIP Services

**23. Remarks**

Pen-and-ink changes made to Boxes 4, 8, and 9 by CMS with state concurrence on 7/7/2020.

Pen-and-ink change made to Box 6 by CMS with state concurrence on 7/27/2020.
7.4.A. Rescissions to the State’s Disaster Relief Policies for the COVID-19 National Emergency

Effective April 1, 2020, the agency rescinds the election at A.1. of section 7.4 (approved on 4/1/2020 in SPA Number AZ-SPA-20-0001 and approved on 5/22/2020 in SPA Number AZ-SPA-20-0005) of the state plan to furnish medical assistance to the optional eligibility group described at section 1902(a)(10)(A)(ii)(XXIII) of the Social Security Act.