Children's Health Insurance Program Eligibility: Summary Page

State/Territory name: Arizona

Transmittal Number: AZ-22-0010

Please enter the Transmittal Number (TN) in the format ST-YY-0000 where ST= the state abbreviation, YY = the last two digits of the submission year, and 0000 = a four digit number with leading zeros. The dashes must also be entered.

Type of SPA:
- [ ] MAGI Eligibility & Methods
- [ ] XXI Medicaid Expansion
- [ ] Establish 2101(f) Group
- [ ] Eligibility Processing
- [ ] Non-Financial Eligibility

Proposed Effective Date: 01/01/2023

Federal Statute/Regulation Citation
Section 9812 of the American Rescue Plan Act of 2021 (PL 117-2)

Federal Budget Impact
- [ ] This SPA has a budget impact.

Total budget impact:
- State Funds: $-504400.00
- Federal Funds: $-136600.00

Please attach a revised CHIP budget.

Subject of Amendment
Please provide a brief summary of SPA changes.
This SPA establishes 12-months of postpartum continuous eligibility.

Signature of State Agency Official
Submitted By: Ruben Soliz
Last Revision Date: Sep 12, 2022
Submit Date: Sep 12, 2022