



CHIP Eligibility

State Name:

OMB Control Number: 0938-1148

Transmittal Number: AZ - 25 - 0006

Separate Child Health Insurance Program Non-Financial Eligibility - Substitution of Coverage

CS20

Section 2102(b)(3)(C) of the SSA and 42 CFR 457.340(d)(3), 457.350(i), and 457.805

Substitution of Coverage

- ☒ The CHIP Agency provides assurance that it has methods and policies in place to prevent the substitution of group health coverage or other commercial health insurance with public funded coverage. These policies include:

- ☒ Substitution of coverage prevention strategy:

Add	Name of policy	Description	Remove
Add	MA 515 Insurance Coverage (No Creditable Coverage) and MA 1502.T Medical Insurance and Premiums	MA 515 Insurance Coverage (No Creditable Coverage) states that those who have creditable health insurance coverage do not qualify for Arizona's KidsCare program (CHIP). Creditable coverage is defined in the policy as health insurance coverage as defined under the Health Insurance Portability and Accountability Act (HIPAA) and gives examples including Medicare, group health plans, health insurance through a hospital or medical service policy, certificate or plan contract, or armed forces insurance. MA 1502.T Medical Insurance and Premiums states that a customer must provide information about any medical insurance coverage and is no longer eligible for KidsCare when he or she has creditable health insurance coverage. Please note that a child under age 19 obtaining new group health coverage or commercial health insurance during a 12-month period of continuous enrollment will not be disenrolled until renewal.	Remove

A waiting period during which an individual is ineligible due to having dropped group health coverage.

If the state elects to offer dental only supplemental coverage, the following assurances apply:

- ☐ The other coverage exclusion does not apply to children who are otherwise eligible for dental only supplemental coverage as provided in section 2110(b)(5) of the SSA.
- ☐ The waiting period does not apply to children eligible for dental only supplemental coverage.

PRA Disclosure Statement

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 0938-1148. The time required to complete this information collection is estimated to average 50 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 comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: CMS, 7500 Security Boulevard, Attn: PRA Reports Clearance Officer, Mail Stop C4-26-05, Baltimore, Maryland 21244-1850.

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