

Medicaid State Plan Eligibility: Summary Page (CMS 179)

State/Territory name: **Pennsylvania**

Transmittal Number:

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.

PA-14-0027

Proposed Effective Date

04/01/2014 (mm/dd/yyyy)

Federal Statute/Regulation Citation

A1 - 42 CFR 431.10, A2 - 42 CFR 431.10 & 435.11, A3 - 42 CFR 435.10, 435.12, & 435.50

Federal Budget Impact

	Federal Fiscal Year	Amount
First Year	2014	\$ 0.00
Second Year	2015	\$ 0.00

Subject of Amendment

The single state agency SPA TN #PA-14-0027 supersedes TN #PA-13-0044.

A1 - State Plan Designation and Authority

A2 - State Plan Administration, Organization and Administration

A3 - State Plan Administration, Assurances

Governor's Office Review

Governor's office reported no comment

Comments of Governor's office received

Describe:

No reply received within 45 days of submittal

Other, as specified

Describe:

Secretary of Public Welfare

Signature of State Agency Official

Submitted By: Daniel Sorge

Last Revision Date: Sep 17, 2014

Submit Date: Jul 1, 2014

[Handwritten Signature] 9/18/2014
Associate Regional Administrator
[Handwritten Signature]



Medicaid Administration

OMB Control Number 0938-1148

OMB Expiration date: 10/31/2014

State Plan Administration Designation and Authority	A1
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42 CFR 431.10

Designation and Authority

State Name:

As a condition for receipt of Federal funds under title XIX of the Social Security Act, the single state agency named below submits the following state plan for the medical assistance program, and hereby agrees to administer the program in accordance with the provisions of this state plan, the requirements of titles XI and XIX of the Act, and all applicable Federal regulations and other official issuances of the Department.

Name of single state agency:

Type of Agency:

- Title IV-A Agency
- Health
- Human Resources
- Other

Type of Agency

The above named agency is the single state agency designated to administer or supervise the administration of the Medicaid program under title XIX of the Social Security Act. (All references in this plan to "the Medicaid agency" mean the agency named as the single state agency.)

The state statutory citation for the legal authority under which the single state agency administers the state plan is:

The single state agency supervises the administration of the state plan by local political subdivisions.

Yes No

The certification signed by the state Attorney General identifying the single state agency and citing the legal authority under which it administers or supervises administration of the program has been provided.

An attachment is submitted.

The state plan may be administered solely by the single state agency, or some portions may be administered by other agencies.

The single state agency administers the entire state plan under title XIX (i.e., no other agency or organization administers any portion of it).

Yes No



Medicaid Administration

The entity or entities that have responsibility for determinations of eligibility for families, adults, and for individuals under 21 are:

- The Medicaid agency
- Single state agency under Title IV-A (in the 50 states or the District of Columbia) or under Title I or XVI (AABD) in Guam, Puerto Rico, or the Virgin Islands
- An Exchange that is a government agency established under sections 1311(b)(1) or 1321(c)(1) of the Affordable Care Act

The entity that has responsibility for determinations of eligibility for the aged, blind, and disabled are:

- The Medicaid agency
- Single state agency under Title IV-A (in the 50 states or the District of Columbia) or under Title I or XVI (AABD) in Guam, Puerto Rico, or the Virgin Islands
- An Exchange that is a government agency established under sections 1311(b)(1) or 1321(c)(1) of the Affordable Care Act
- The Federal agency administering the SSI program

Indicate which agency determines eligibility for any groups whose eligibility is not determined by the Federal agency:

- Medicaid agency
- Title IV-A agency
- An Exchange

The entity or entities that have responsibility for conducting fair hearings with respect to denials of eligibility based on the applicable modified adjusted gross income standard are:

- Medicaid agency
- An Exchange that is a government agency established under sections 1311(b)(1) or 1321(c)(1) of the Affordable Care Act
- An Exchange appeals entity, including an entity established under section 1411(f) of the Affordable Care Act

The agency has established a review process whereby the agency reviews appeals decisions made by the Exchange or Exchange appeals entity or other state agency, but only with respect to conclusions of law, including interpretations of state or federal policies.

Yes No

State Plan Administration Organization and Administration

A2

42 CFR 431.10
42 CFR 431.11

Organization and Administration

Provide a description of the organization and functions of the Medicaid agency.

The Pennsylvania Department of Public Welfare (DPW) is the single state agency designated to administer the Medicaid Program. The organization is broken down into different offices that have specific functions of the Medicaid agency. The various offices as listed in the attached organizational chart, plan, direct, administer and control the Statewide Medicaid program. The Secretary of Public Welfare heads the Department and is responsible to the Governor of Pennsylvania. The Executive Deputy Secretary shares in the responsibility of overall management of the Department. The Secretary oversees the Executive Office and Program Offices which are headed by a Deputy Secretary. The Executive Medicaid Director is responsible for the management of the Medicaid

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Pennsylvania



Medicaid Administration

Agency. Program Offices are divided into Bureaus which are headed by Bureau Directors. Executive Offices, Program Offices and Bureaus administer, coordinate, develop and implement health and human services and public assistance benefits.

Medicaid eligibility policy and Medicaid eligibility determinations fall under the Office of Income Maintenance (OIM). County Assistance offices under OIM make eligibility determinations for MAGI and Non-MAGI populations that include children, pregnant women, parents and caretakers, aged, blind and disabled. The Bureau of Hearings and Appeals (BHA) is under the Office of Administration (OA) and is a separate body that sits in a neutral place within the DPW. Consumers send their appeals to OIM and not directly to BHA. OIM records the appeal then forwards the appeal to BHA within 3-7 days. The BHA hears all of the administrative appeals for the DPW. The BHA will schedule, hear, and adjudicate those appeals. The individuals are provided with an opportunity to request Reconsideration of the decision issued by the hearing officer. Those "appeal rights" are attached to every BHA decision, before they are published to the individuals. The Secretary of Public Welfare has the right to reverse BHA decisions without the need for an additional hearing.

Office of Administration (OA) - Supports offices within the Department that provide services to employees, consumers and other state agencies. Services provided are Administrative appeals/hearings, administrative services, equal opportunity in DPW programs, financial audits and contract development, fraud and abuse recoveries in Medicaid and third party recoveries, human services, human services licensing, information services/information technology.

Office of Budget (under Executive Office) - Supports the Departments budgetary needs. Includes assisting and ensuring sufficient budgetary support that includes appropriate state and federal funding for new programs or program changes.

Office of Developmental Programs (ODP) - Administers Home and Community Based Services Waivers associated with intellectual disabilities. Develops and implements policy and provides program support for programs for individuals with intellectual disabilities and autism. Supports Pennsylvanians with developmental disabilities to achieve greater independence, choice and opportunity in their lives.

Office of General Counsel (OGC)- Assists program offices in new initiatives, litigation, contracts, legislation, regulations, bulletins, licensing matters, state plan amendments and waiver applications or amendments.

Office of Income Maintenance (OIM) - Administers Pennsylvania's Public Assistance Program. Develops and implements Medicaid eligibility policy and determines Medicaid eligibility for all groups under the state plan. Medicaid eligibility determinations for Supplemental Security Income (SSI) recipients are made by the Social Security Administration.

Office of Long-Term Living (OLTL) - Responsible for program and fiscal policy related to nursing homes. Provides services and supports to individuals who need assistance with daily activities. Provides support and information to providers and caregivers. Administers Home and Community Based Services Waivers for the aged and disabled and helps to ensure health and safety of program participants. Assists Pennsylvanians in finding services and supports available to them, how to pay for services and where to find providers or caregivers. Assists providers with information on becoming an LTL provider.

Office of Medical Assistance Programs (OMAP) - Administers the joint state/federal Medical Assistance (Medicaid) program that purchases health care for its Medicaid population. Responsible for enrolling providers, processing provider claims, establishing rates and fees, contracting and monitoring of managed care organizations (MCOs) for physical health and detecting and deterring provider and recipient fraud and abuse.

Office of Mental Health and Substance Abuse Services (OMHSAS) - Provides mental health and substance abuse services and supports to all age populations. Responsible for contracting and monitoring of the behavioral health managed care program. Implements services and policies that support individuals and help facilitate recovery for adults and resiliency for children. Develops, monitors and evaluates in partnerships with consumers, families and community.

Upload an organizational chart of the Medicaid agency.

An attachment is submitted.

Provide a description of the structure of the state's executive branch which includes how the Medicaid agency fits in with other health, human service and public assistance agencies.



Medicaid Administration

The Executive branch consists of various state agencies. The Governor's Cabinet comprises the directors of various state agencies. An equally important responsibility of all Cabinet members is advising the Governor on subjects related to their respective agencies.

While all Medicaid functions occur within the Department of Public Welfare, some other agencies, such as the Department of Health, the Department of Aging, the Insurance Department, and the Department of Drug and Alcohol Programs, also provide health and human services in the state.

The Department of Health is responsible for planning and coordinating health resources throughout the state. It licenses and regulates a variety of health facilities, such as hospitals, nursing homes, ambulatory surgical facilities and other in-patient and out-patient facilities. In addition, the Department supports outreach, education, prevention and treatment services across a variety of program areas. Grants and subsidies to community-based groups are used to provide essential services to the Commonwealth's citizens including programs for women and children, nutrition, immunization, diagnosis and treatment of certain blood and communicable diseases, cancer control and prevention, and the prevention and treatment of substance abuse.

The Department of Aging offers many benefits and services available to Pennsylvania's 2.7 million people over the age of 60. The Department's focus is on providing nutrition services, health and wellness programs, and services that help older Pennsylvanians to remain in their homes and communities. Also, the Department of Aging provides services to protect older citizens from abuse, neglect, abandonment and exploitation through the older adults protective services program. Among the largest programs the department administers are PACE and PACENET, which assist qualified, older state residents in paying for their prescription medications.

Pennsylvania Insurance Department (PID) monitors the financial solvency of insurance companies, licenses insurance companies and producers/agents, reviews and approves insurance policy language and rates, coordinates the rehabilitation and liquidation of insolvent insurance companies, and administers health insurance programs for eligible children in a separate CHIP program. PID does not make eligibility determinations for Medicaid.

Department of Drug and Alcohol Programs develops and implements programs designed to reduce substance abuse and dependency through quality prevention, intervention, rehabilitation and treatment programs; educates all Pennsylvanians on the effects and dangers of drugs and alcohol abuse and dependency, and the threat they pose to public health; and mitigates the economic impact of substance abuse for the citizens of Pennsylvania.

Entities that determine eligibility other than the Medicaid Agency (if entities are described under Designation and Authority)

Remove

Type of entity that determines eligibility:

- Single state agency under Title IV-A (in the 50 states or the District of Columbia) or under Title I or XVI (AABD) in Guam, Puerto Rico, or the Virgin Islands
- An Exchange that is a government agency established under sections 1311(b)(1) or 1321(c)(1) of the Affordable Care Act
- The Federal agency administering the SSI program

Provide a description of the staff designated by the entity and the functions they perform in carrying out their responsibility.

Pursuant to a 1634 agreement, the Social Security Administration determines Medicaid eligibility for Supplemental Security Income recipients.

Add

Entities that conduct fair hearings other than the Medicaid Agency (if are described under Designation and Authority)

Remove

Type of entity that conducts fair hearings:

- An Exchange that is a government agency established under sections 1311(b)(1) or 1321(c)(1) of the Affordable Care Act

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Medicaid Administration

An Exchange appeals entity, including an entity established under section 1411(f) of the Affordable Care Act

Provide a description of the staff designated by the entity and the functions they perform in carrying out their responsibility.

Add

Supervision of state plan administration by local political subdivisions (if described under Designation and Authority)

Is the supervision of the administration done through a state-wide agency which uses local political subdivisions?

Yes No

State Plan Administration Assurances

A3

42 CFR 431.10
42 CFR 431.12
42 CFR 431.50

Assurances

- The state plan is in operation on a statewide basis, in accordance with all the requirements of 42 CFR 431.50.
- All requirements of 42 CFR 431.10 are met.
- There is a Medical Care Advisory Committee to the agency director on health and medical services established in accordance with meeting all the requirements of 42 CFR 431.12.
- The Medicaid agency does not delegate, to other than its own officials, the authority to supervise the plan or to develop or issue policies, rules, and regulations on program matters.

Assurance for states that have delegated authority to determine eligibility:

- There is a written agreement between the Medicaid agency and the Exchange or any other state or local agency that has been delegated authority to determine eligibility for Medicaid eligibility in compliance with 42 CFR 431.10(d).

Assurances for states that have delegated authority to conduct fair hearings:

- There is a written agreement between the Medicaid agency and the Exchange or Exchange appeals entity that has been delegated authority to conduct Medicaid fair hearings in compliance with 42 CFR 431.10(d).
- When authority is delegated to the Exchange or an Exchange appeals entity, individuals who have requested a fair hearing are given the option to have their fair hearing conducted instead by the Medicaid agency.

Assurance for states that have delegated authority to determine eligibility and/or to conduct fair hearings:

- The Medicaid agency does not delegate authority to make eligibility determinations or to conduct fair hearings to entities other than government agencies which maintain personnel standards on a merit basis.

PRA Disclosure Statement



Medicaid Administration

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 40 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.