

DEPARTMENT OF HEALTH & HUMAN SERVICES
Centers for Medicare & Medicaid Services
601 E. 12th St., Room 355
Kansas City, Missouri 64106



Medicaid and CHIP Operations Group

February 8, 2022

Jacey Cooper
Chief Deputy Director, Health Care Programs
California Department of Health Care Services
P.O. Box 997413, MS 0000
Sacramento, CA 95899-7413

Dear Ms. Cooper:

Enclosed is an approved copy of California State Plan Amendment (SPA) 21-0069, which was submitted to the Centers for Medicare & Medicaid Services (CMS) on December 30, 2021. This SPA will exempt from estate recovery any payment made to qualified recipients of the Forced or Involuntary Victim Compensation Program following the death of a qualified Medicaid member.

The effective date of this SPA is March 31, 2022. Enclosed is the following approved SPA page that should be incorporated into your approved State Plan:

- Section 4.17, page 53c.1

If you have any questions, please contact Cheryl Young at 415-744-3598 or via email at Cheryl.Young@cms.hhs.gov.

Sincerely,

A black rectangular redaction box covers the signature of James G. Scott.

Digitally signed by James
G. Scott -S
Date: 2022.02.08 17:42:42
-06'00'

James G. Scott, Director
Division of Program Operations

Enclosure

cc: Erika Sperbeck, Department of Health Care Services (DHCS)
Saralyn Ang-Olson, DHCS
Bill Otterbeck, DHCS
Aaron Toyama, DHCS
Oksana Hill, DHCS
Angeli Lee, DHCS
Amanda Font, DHCS

**TRANSMITTAL AND NOTICE OF APPROVAL OF
STATE PLAN MATERIAL
FOR: CENTERS FOR MEDICARE & MEDICAID SERVICES**

1. TRANSMITTAL NUMBER

2 1 — 0 0 6 9

2. STATE

CA

3. PROGRAM IDENTIFICATION: TITLE OF THE SOCIAL SECURITY ACT

XIX XXI

TO: CENTER DIRECTOR
CENTERS FOR MEDICAID & CHIP SERVICES
DEPARTMENT OF HEALTH AND HUMAN SERVICES

4. PROPOSED EFFECTIVE DATE

March 31, 2022

5. FEDERAL STATUTE/REGULATION CITATION

1917(b)(2) of the Social Security Act and at 42 CFR 433.36(h)-(i)

6. FEDERAL BUDGET IMPACT (Amounts in WHOLE dollars)

a. FFY ~~10/1/21-9/30/21~~ ^{3/31/22} 10/1/21-9/30/21 \$ 0
b. FFY ~~10/1/22-9/30/22~~ 10/1/22-9/30/21 \$ 0

7. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT

Section 4.17, page 53c.1

8. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable)

Section 4.17, page 53c.1

9. SUBJECT OF AMENDMENT

Forced or involuntary sterilization reparation payments made to survivors shall be exempt from estate recovery following the death of the qualified recipient.

10. 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:

Please note: The Governor's Office does not wish to review the State Plan Amendment.

11. SIGNATURE OF STATE AGENCY OFFICIAL

[Redacted Signature]

12. TYPED NAME

Jacey Cooper

13. TITLE

State Medicaid Director

14. DATE SUBMITTED

December 30, 2021

15. RETURN TO

Department of Health Care Services
Attn: Director's Office
P.O. Box 997413, MS 0000
Sacramento, CA 95899-7413

FOR CMS USE ONLY

16. DATE RECEIVED

December 30, 2021

17. DATE APPROVED

February 8, 2022

PLAN APPROVED - ONE COPY ATTACHED

18. EFFECTIVE DATE OF APPROVED MATERIAL

March 31, 2022

19. SIGNATURE OF APPROVING OFFICIAL

[Redacted Signature]

20. TYPED NAME OF APPROVING OFFICIAL

James G. Scott

21. TITLE OF APPROVING OFFICIAL

Director, Division of Program Operations

22. REMARKS

Box 6: For item a, CMS made a pen and ink change to delete "10/1/21" and insert "3/31/22" since 3/31/22 is the SPA effective date. DHCS concurred with this revision via call and email dated 2/3/22.

53c.1

Revision: HCFA-PM-95-3 (MB)
April, 2000

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State/Territory: California

(4) Japanese Reparation payments, or where the reparation payments described above have been converted to another form, amounts of resources equal to the amount of these reparation payments, received by the deceased Medi-Cal beneficiary or inherited by the deceased spouse of that beneficiary, or both, shall be exempt from estate recovery

(5) Forced or Involuntary Sterilization Reparation Payments, received by the deceased Medi-Cal beneficiary or inherited by any recipient through distribution or survival, shall be exempt from estate recovery.

TN No. 21-0069
Supersedes
TN. No. 00-001

Approval Date: February 8, 2022

Effective Date: March 31, 2022