OMB No: 0938-0193



# U.S. Territory of American Samoa Medicaid State Agency

# State Plan Amendment Section I

September, 2011

TN N. 11-002 Supersedes TN No. 83-001

OMB No: 0938-0193

### LIST OF AMENDMENTS

No:	Title of Attachments
1.1 -A	Attorney General's Certification (Executive Order)
1.1-B	Waivers under the Intergovernmental Cooperation Act
1.2- A	Organization and Function of State Agency
1.2-B	Organization and Function of Medical Assistance Unit
1.2-C	Professional Medical and Supporting Staff
1.2-D	Eligibility determinations (Not Applicable)

TN N. 11-002 **Supersedes** TN No. 83-001

NOV 0 2 2011 Approval Date \_\_ Effective Date: October 1, 2011

OMB No: 0938-0193

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT MEDICAL ASSISTANCE PROGRAM

State/Territory: American Samoa

Citation

As a condition for receipt of Federal funds under Title XIX

45 CFR

of the Social Security Act, the

part 201

Office of the Governor

(Single State Agency)

Submits the following State Plan amendment 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.

**HCFA ID: 7982E** 

Revision

State:

American Samoa

TN N. 11-002

Supersedes

Approval Date 0 2 201 Effective Date: October 1, 2011

TN No. 83-001

Revision: HCFA-PM-87-4 (BERC) OMB No: 0938-0193

Citation

SECTION I: SINGLE STATE AGENCY ORGANIZATION

**12 CFR** 

431.10

1.1 Designation and Authority

AT-79-29

(a) The Office of the Governor 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 in this paragraph)

ATTACHMENT 1.1-A is a 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.

TN N. 11-002 Supersedes TN No. 83-001

OMB No: 0938-0193

**Revision:** 

**HCFA-AT-80-38 (BPP)** 

May 22, 1980

State:

American Samoa

Citation Sec. 1902 (a) of the Act

1.1(b) The State Agency that administered or supervised the administration of the Sec. 1902(a) of the Act plan approved under title X of the Act as of January 1, 1965, has been separately designated to administer or supervise the administration of that part of this plan which relates to blind individuals.

/ / Yes. The State agency so designated is

This agency has a separate plan covering that portion of the State Plan under title XIX for which it is responsible.

/ X/ Not applicable. The entire plan under title XIX is administered or supervised by the State agency named in paragraph 1.1(a).

TN N. 11-002 Supersedes TN No. 83-001

Revision: HCFA-PM-87-4 (BERC) OMB No: 0938-0193

**Revision:** 

**HCFA-AT-80-38(BPP)** 

May 22, 1980

State:

American Samoa

Citation Intergovernmental Cooperation Act Of 1968 1.1 Waivers of the single State agency requirement which are currently operative have been granted under authority of the Intergovernmental Cooperation Act of 1968.

- --- Yes. ATTACHMENT 1.1-B describes these waivers and the approved alternative organizational arrangements.
- ---- Not applicable. Waivers are no longer in effect.
- X\_\_\_\_ Not applicable. No waivers have Ever been granted.

TN N. 11-002 Supersedes TN No. 83-001

OMB No: 0938-0193

**Revision:** 

**HCFA-AT-80-38 (BPP)** 

May 22, 1980

State:

American Samoa

Citation

1.2 Organization for Administration

42 CFR

The organizational charts on pages 4 & 5 of Section I are updated to

431.11

reflect the change in Medicaid's Single State Agency.

- (a) ATTACHMENT 1.2-A contains a description of the organization and functions of the Medicaid agency and an organization chart of the agency.
- (b) Within the State agency, the Medicaid Office has been designated as the Medical Assistance Unit. ATTACHMENT 1.2-B contains the functions and an organizational chart of the unit.
- (c) ATTACHMENT 1.2-C contains a description of the kinds and numbers of professional medical personnel and supporting staff used in the administration of the plan and their responsibilities.
- (d) Eligibility determinations are made by State or local staff of an agency other than the agency named in paragraph 1.1(a). ATTACHMENT 1.2-D contains a description of the staff designated to functions they will perform.

/X/ Not applicable. Only staff of the agency named in paragraph 1.1(a) makes such determinations.

TN N. 11-002

Supersedes TN No. 88-001

Revision: HCFA-PM-87-4 (BERC) OMB No: 0938-0193

**Revision:** 

**HCFA-AT-80-38 (BPP)** 

May 22, 1980

State American Samoa

Citation

**42 CFR** 

1.3

**Statewide Operation** 

431.50(b)

AT-79-29

The plan is in operation on a Statewide

Basis in accordance with all requirements

of 42 CFR 431.50.

-X--- The plan is State administered.

---- The plan is administered by the political subdivisions of the State and is mandatory on them,

TN N. 11-002

Supersedes TN No. 88-001

OMB No: 0938-0193

**Revision:** 

**HCFA-AT-80-38(BPP)** 

May 22, 1980

State:

American Samoa

1.4 State Medical Care Advisory Committee

Citation

42 CFR 431.12(b) There is an advisory committee to the Medicaid Agency Director on health and medical care

AT-78-90

services established in accordance with and meeting all the requirements of

42 CFR 431.12.

TN N. 11-002 Supersedes TN No. 88-001

#### ATTACHMENT 1.1-A

#### **ATTORNEY GENERAL CERTIFICATION:**

I certify that:

The Office of the Governor, American Samoa Government, is the single State Agency designated to administer and supervise the administration of the State Plan under Title XIX of the Social Security Act.

The legal authority under which the agency administers and supervises the administration of, the plan on a Territory-wide basis is:

The Executive Order No: 006-2011; Approved and Effective August 23, 2011 (Attached)

Signature

Deph 12, 20m

FEPULEA'I ARTHUR RIPLEY
ATTORNEY GENERAL OF AMERICAN SAMOA

Title

TN No 11-002 Supersedes TN No: 83-001

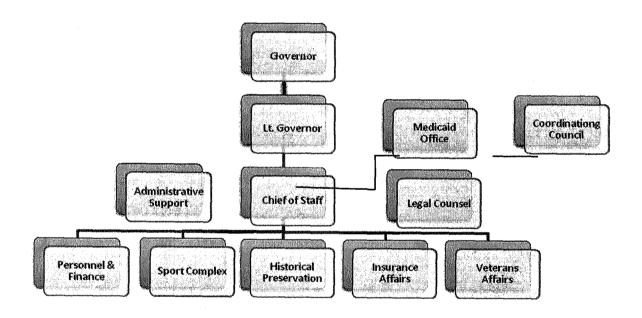
OMB No: 0938-0193

State:

**American Samoa** 

Description of Functions of the State Medicaid Agency and Updated Organizational Chart

(Organizational Chart)



TN N. 11-002 Supersedes TN No. 88-001

NOV 0 2 2011 Effective Date: October 1, 2011 Approval Date

OMB No: 0938-0193

#### State: American Samoa

# Description of Functions of the State Medicaid Agency and Organization Chart

The key functions are:

- Administers Medicaid Program and determines what services are offered.
- Establishes Organization of the Medicaid Agency and Medical Assistance Unit Medicaid Office)
- Assures availability of patient services mandated by the State Plan through arrangement with service providers.
- Performs utilization review and assesses quality of care and identifies program abusers
- Makes policy decisions and provides program oversight.
- Medicaid agency maintains an agreement with each on-island and off-island provider furnishing services under the plan, in which the provider agrees to:
  - (a) To keep any record necessary to disclose the extent of service of the provider
  - (b) On request, furnish to the Medicaid Agency or the Secretary, any information regarding payments claimed by the provider for furnishing services under this plan.
  - (c) Maintain the confidentiality of patient information for other than medical or program administrative purposes.
  - (d) Not discriminate against any individual seeking services under this plan, on the basis of race, sex, religion, color, national origin or handicap.
- Medicaid Agency assures that it has procedures for identifying providers of service by Social Security number and that it reports information required by Section 6041 of the Internal Revenue Code (26 U.S.C. 6041) regarding the filing of annual information returns showing amounts paid to providers.
- Medicaid Agency assures that it employs methods of administration, acceptable to the Secretary of U.S DHHS, and described in this plan, that are necessary for the proper and efficient operation of the program.
- Medicaid Agency assures that appropriate and accurate collection of patient payments and expenditures of program funds is achieved through a program of budgetary/expenditures and audit controls in place in the agency and its affiliates. In addition, independent financial audits will be conducted on a periodic basis.

TN N. 11-002 Supersedes TN No. 88-001

OMB No: 0938-0193

ATTACHMENT 1.2-B (1)

Functions and Organizational Chart of Medical Assistance Unit (Medicaid Office)

**Functional Chart:** 

MEDICAL ASSISTANCE UNIT (MEDICAID OFFICE)

**Administers Medicaid Program & Special Projects** 

- Administrative Support
- Personnel
- Work Request & Purchase Requisitions

- Program Management
  Program planning, developing,
  monitoring/evaluating policies/programs,
  coverage and conduction
- Eligibility criteria, plan amendments, statistical reporting, special projects (CHIP, EAP, PAPD, MFP, etc), relations with other agencies, program manuals, data collection and analysis, plan amendments, and other functions required by State Agency.

Financial Management

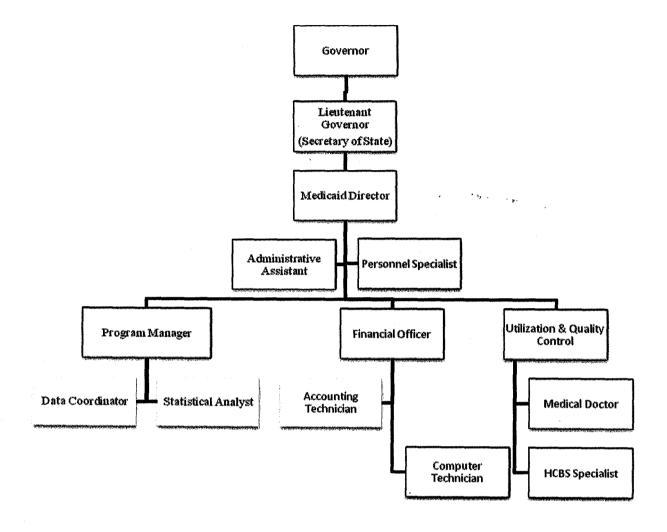
 Fiscal administration, reporting, budgeting, auditing & special studies on ways to control cost and increase revenues, fraud detections & investigation, fiscal policies & procedures, provider agreement, planning monitoring & other functions required by State agency.

Utilization & Quality Control

- Utilization reviews, assess quality of care received by Medicaid patients, determines availability of written plan of care of hospital inpatient.
- · Conduct special studies
- · Identify program abusers
- Other functions as required by the State agency.

TN N. 11-002 Supersedes TN No. 88-001

OMB No: 0938-0193



TN N. 11-002 **Supersedes** TN No. 88-001

OMB No: 0938-0193

#### ATTACHMENT 1.2-B (3)

# Description of Functions of each position of Medical Assistance Unit (Medicaid Office\_)

#### **Medicaid Director**

- 1. Is responsible for the administration of programs and services provided under this plan.
- 2. Is responsible for policy development, planning, monitoring and evaluation of the programs.
- 3. Ensures that the Medicaid program in the Territory is administered consistently with the applicable federal and local laws and regulations.
- 4. Establishes the American Samoa Office of the Governor as the Single State Agency.
- 5. Outlines the organizational structure of the Medicaid Office within the Office of the Governor with the Medicaid Director reporting to the Governor through the Secretary of American Samoa establishes the duties and responsibilities of the Medicaid Office.
- 6. Establishes the duties and responsibilities of the Medicaid Office
- 7. Identifies a full list of proposed services to be eligible under the Medicaid waiver, including the addition of approved Home and Community-Based Services.
- 8. Determines the annual eligibility population of Medicaid program for expenditure reimbursement.
- 9. Prepares and submits to CMS for approval any state plan amendments.
- 10. Reviews and approves program budget.
- 11. Coordinates Medicaid activities with other agencies including Title V, State Vocational Rehabilitation Agency, Federally Qualified Health Center, Behavior health, the Territorial Administration on Aging, and the Territory's Health Information Technology program.
- 12. Reviews and makes recommendations to the State Agency regarding addition or deletion of provider types.
- 13. Provides oversight of federal and state compliance for all Medicaid programs (CHIP & EAP).
- 14. Performs other functions as required by State Agency Administration.

#### **Medical Doctor**

- 1. Is responsible for medical direction and medical oversight of all programs under this plan.
- 2. Works with Medicaid Director in developing and maintaining agreement with each onisland and off-island provider furnishing services under the plan (Reference to #8 of Section 4 of this plan).
- 3. Ensures that Medicaid State Agency establish and maintain a formal utilization review and quality assurance program to ensure the attainment and maintenance of high standards of professional and ethical practices. This program shall be consistent with

TN N. 11-002 Supersedes TN No. 88-001

OMB No: 0938-0193

#### Revision: HCFA-PM-87-4 (BERC)

Medicare/Medicaid quality assurance certification standards for hospitals (Reference to Part B of the Section 4 of this plan).E

- 4. Exercises medical interpretation; and assesses new technology.
- 5. Provides oversight of federal and state compliance related to quality management and review of annual quality management plans.
- 6. Monitors health service programs under this plan including Maternal Child Health, Family Planning, EPSDT, dental, immunization, behavior health, public health clinics, and dental service.
- 7. Provides problem resolution, including individual quality of care issues for members, access to care, level of coverage, and quality of coverage provided.
- 8. Is responsible for quality management development and analysis (e.g., utilization reports and performance indicators).
- 9. Coordinates and conducts focused medical audits.
- 10. Performs other functions as required by the State Agency administration.

#### **Financial Officer**

- 1. Is responsible for fiscal administration including financial reports (CMS-37 budget and CMS 64-Expenditures).
- 2. Works with the Medicaid Director in program budget development and control.
- 3. Oversees third party liability program
- 4. Is responsible for financial audit.
- 5. Implements fraud detection/investigation program.
- 6. Performs other functions as required by State Agency administration.

#### **Program Manager**

- 1. Assists in the administration and implementation of the program activities.
- 2. Supervises the implementation of the special programs such as CHIP and EAP.
- 3. Coordinates review of proposed legislation, determines impact upon organizational operations, estimates effects, and monitors progress.
- 4. Performs studies, analysis, and evaluations of programs.
- 5. Identifies policy issues of areas where additional guidance from CMS is required.
- 6. Prepares the annual eligibility determination report.
- 7. Performs other functions as required by the State Agency administration.

#### **Computer Technician**

- 1. Handles computerized system development and maintenance.
- 2. Provides technical assistance in computer hardware and software, etc.
- 3. Performs other functions as required by State Agency Administration.

TN N. 11-002
Supersedes
Approval Date NOV 0 2 2011
TN No. 88-001

Effective Date: October 1, 2011

OMB No: 0938-0193

Revision: HCFA-PM-87-4 (BERC)

#### **Data Coordinator**

- 1. Assists in the implementation of the Medicaid programs.
- 2. Is responsible for Data system development, planning, management, maintenance.
- 3. Coordinates data collection, analysis, interpretation with other relevant agencies such as Department of Commence (demographic data), Office of Immigration (illegal aliens data), LBJ (service utilization data and provider data), Department of Health (service utilization data and provider data), FQHC (service & provider data), behavior health (service and provider data), dental (CHIP data), etc.
- 4. Coordinates data activities with the Territory's Health Information Technology program (HIT).
- 5. Coordinates data handling and analysis for program reporting, performance measures, and related projects.
- 6. Performs other functions as required by State Agency Administration.

#### **Statistical Analyst**

- 1. Assists in the performance of Data system Management activities.
- 2. Prepares and distributes statistical reports as required.
- 3. Maintain program manuals.
- 4. Analyzes relevant data and prepares interpretations as required.
- 5. Performs other functions as required by State Agency Administration.

#### **Administrative Assistant**

- 1. Develops and implements procedures for expediting the flow of clerical work for the office.
- 2. Coordinates the processing of personnel action for recruitment, promotions, step increments and other personnel requests.
- 3. Prepares work requests and purchase requisitions for the programs.
- 4. Maintains office records and important documents.
- 5. Types reports and correspondence.
- 6. Receives and records requests for information and publications.
- 7. Receives visitors and explains Medicaid policies and procedures to the public.
- 8. Performs other functions as required by State Agency Administration.

#### **Accounting Technician**

- 1. Coordinates with accounting and data processing on fiscal matters.
- 2. Assists in executing of the functions and duties of the financial section.
- 3. Other functions as required by state agency administration.

TN N. 11-002 Supersedes TN No. 88-001

OMB No: 0938-0193

#### **ATTACHMENT 1.2-C**

Description of the kinds and numbers of professional medical personnel and supporting staff used in the administration of the Plan

POSITION TITLE	NO. OF STAFF
Secretary of State (Lt. Governor)	1
Medicaid Director	1
*Medical Doctor	2
*Financial Officer	1
Program Manager	1
Data Coordinator	1
Statistical Analyst	1
*Administrative Assistant	1
*Accounting technician	2
Quality Assurance Program Coordinator (LBJ)	1
*HCBS Specialist	1
Total	13

<sup>\*</sup>new positions to be hired.

TN N. 11-002 Supersedes TN No. 88-001