

<b>TRANSMITTAL AND NOTICE OF APPROVAL OF STATE PLAN MATERIAL</b> <b>FOR: CENTERS FOR MEDICARE &amp; MEDICAID SERVICES</b>		1. TRANSMITTAL NUMBER: <b>10-013</b>	2. STATE: <b>COLORADO</b>
		3. PROGRAM IDENTIFICATION: TITLE XIX OF THE SOCIAL SECURITY ACT (MEDICAID)	
TO: REGIONAL ADMINISTRATOR CENTERS FOR MEDICARE & MEDICAID SERVICES DEPARTMENT OF HEALTH AND HUMAN SERVICES		4. PROPOSED EFFECTIVE DATE <b>8/11/10</b>	
5. TYPE OF PLAN MATERIAL (Check One):			
NEW STATE PLAN		AMENDMENT TO BE CONSIDERED AS A NEW PLAN	
<b>X AMENDMENT</b>			
COMPLETE BLOCKS 6 THRU 10 IF THIS IS AN AMENDMENT (Separate transmittal for each amendment)			
6. FEDERAL STATUTE/REGULATION CITATION <b>Section 1911 of the Social Security Act [42 USC 1396j]</b>		7. FEDERAL BUDGET IMPACT a. FFY2010 \$131,000 b. FFY2011 \$262,000	
8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT <b>Attachment 4.19-B – Methods and Standards for Establishing Payment Rates – Indian Health Services</b>		9. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable) <b>Attachment 4.19-B, Page 1-D – Methods and Standards for Establishing Payment Rates – Indian Health Services</b>	
10. SUBJECT OF AMENDMENT <b>Revising Indian Health Services reimbursement page to allow for the submission of and payments for multiple visit/encounter claims for different types of service provided to a client on the same date of service by the same Indian health facility only if the services provided are different or are for different diagnosis codes.</b>			
11. GOVERNOR'S REVIEW (Check One)			
GOVERNOR'S OFFICE REPORTED NO COMMENT		<b>X OTHER, AS SPECIFIED</b>	
COMMENTS OF GOVERNOR'S OFFICE ENCLOSED NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL		<b>Governor's letter dated 29 July 2009</b>	
12. SIGNATURE OF STATE AGENCY OFFICIAL		16. RETURN TO	
13. TYPED NAME <b>Robert C. Douglas</b>		Colorado Department of Health Care Policy and Financing 1570 Grant Street Denver, CO 80203-1818	
14. TITLE <b>Legal Division Director</b>		Attn: David Smith	
15. DATE SUBMITTED <i>9/10/10 - revision 6/30/10 original</i>			
<b>FOR REGIONAL OFFICE USE ONLY</b>			
17. DATE RECEIVED <i>6/30/10</i>		18. DATE APPROVED <i>9/15/10</i>	
<b>PLAN APPROVED – ONE COPY ATTACHED</b>			
19. EFFECTIVE DATE OF APPROVED MATERIAL <i>8/11/10</i>		20. SIGNATURE OF REGIONAL OFFICIAL <i>[Signature]</i>	
21. TYPED NAME <i>Diane Livesey</i>		22. TITLE <i>Acting Associate Regional Administrator</i>	
23. REMARKS			

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

STATE OF COLORADO

Attachment 4.19-B

METHODS AND STANDARDS FOR ESTABLISHING PAYMENT RATES –  
INDIAN HEALTH SERVICES

Payments to Indian health facilities that are federally recognized and either tribally-operated or operated by the Indian Health Service shall be made according to the following categories of service:

- A. Outpatient Hospital, Clinic, Independent Laboratory, and EPSDT Categories of Service – Payments to Indian health facilities under these categories of service shall be per visit/encounter and based upon the approved rates published each year in the *Federal Register* by the U.S. Department of Health and Human Services' Indian Health Service, under the authority of Sections 321(a) and 322(b) of the Public Health Service Act (42 U.S.C. 248 and 249(b)), Public Law 83-568 (42 U.S.C. 2001(a)), and the Indian Health Care Improvement Act (25 U.S.C. 1601 et seq.). The Department shall accept submission of and make payments for multiple visit/encounter claims for different types of service provided to a client on the same date of service by the same Indian health facility only if the services provided are different or are for different diagnosis codes. Different types of service shall include but not be limited to general practitioner services, mental health services, podiatry services, optometry services, radiology services, laboratory services, and dental services.
- B. Inpatient Hospital Category of Service – Payments to Indian health facilities under this category of service shall be per date of inpatient stay and based upon the approved rates published each year in the *Federal Register* by the U.S. Department of Health and Human Services' Indian Health Service, under the authority of Sections 321(a) and 322(b) of the Public Health Service Act (42 U.S.C. 248 and 249(b)), Public Law 83-568 (42 U.S.C. 2001(a)), and the Indian Health Care Improvement Act (25 U.S.C. 1601 et seq.). The Department shall make only one payment per date of service per client.

IN No. 10-013  
Supersedes IN No. 00-005

Approval Date 9/15/10  
Effective Date 8/11/10