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State/Territory Name: Florida

State Plan Amendment (SPA) #:16-0009

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- 1) Approval Letter
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DEPARTMENT OF HEALTH & HUMAN SERVICES
Centers for Medicare & Medicaid Services
Atlanta Regional Office
61 Forsyth Street, Suite 4T20
Atlanta, Georgia 30303



DIVISION OF MEDICAID & CHILDREN'S HEALTH OPERATIONS

September 28, 2016

Justin M. Senior
Deputy Secretary for Medicaid
Agency for Health Care Administration
2727 Mahan Drive, Mailstop #20
Tallahassee, FL 32308

ATTN: April Cook

RE: Title XIX State Plan Amendment 16-0009

Dear Mr. Senior:

We have reviewed the proposed amendment to the Florida State Plan, submitted under transmittal number FL 16-0009. This amendment makes technical and editorial changes and differentiate the reimbursement methodologies of hemodialysis and peritoneal dialysis treatments.

Based on the information provided, this amendment was approved on September 28, 2016. The effective date is January 1, 2016. We are enclosing the approved form HCFA 179 and plan pages. If you have any questions, please contact Sid Staton at 850-878-3486 or by email at sidney.staton@cms.hhs.gov.

Sincerely,

//s//

Jackie Glaze
Associate Regional Administrator
Division of Medicaid & Children's Health Operations

Enclosure

METHODS USED IN ESTABLISHING PAYMENT RATES

CLINIC SERVICES: Freestanding Dialysis Center Services

Freestanding Dialysis Centers are reimbursed for in-center hemodialysis dialysis treatments using a single composite rate established by the Florida Legislature. The rate is less than Medicare's composite rates for the same service.

Freestanding Dialysis Centers are reimbursed for peritoneal dialysis treatments using a single composite rate based on State- established fee schedule rates.

Please refer to Attachment 3.1A and 3.1B for Freestanding Dialysis Center covered treatment services.

The Agency's dialysis rates were set as of January 1, 2016, effective for services on or after this date. The rates are the same for both governmental and private providers. The fee schedules are published at: http://ahca.myflorida.com/medicaid/review/fee_schedules.shtml

The Agency's rate is calculated at 54.25% of the Medicare rate.

Medicaid Rate	Medicare
\$125 (Hemodialysis)	\$230.39 (End Stage Renal Dialysis)
\$53.57 (Peritoneal)	

*The percent of the State's End Stage Renal Dialysis rate is 54.25% (\$125 / \$230.39) of Medicare's rate.

Amendment 2016-009
Effective 1/01/16
Supersedes 98-19
Approval: 09/28/16