

DEPARTMENT OF HEALTH & HUMAN SERVICES
Centers for Medicare & Medicaid Services
JFK Federal Building, Government Center
Room 2275
Boston, Massachusetts 02203



CENTERS for MEDICARE & MEDICAID SERVICES

Division of Medicaid and Children's Health Operations / Boston Regional Office

December 16, 2011

JudyAnn Bigby, M.D., Secretary
Executive Office of Health and Human Services
One Ashburton Place, Room 1109
Boston, Massachusetts 02108

Dear Dr. Bigby:

We have reviewed Massachusetts' State Plan Amendment (SPA) No. 11-010, received in the Boston Regional Office on September 29, 2011. This amendment implements Section 2301 of the Affordable Care Act (ACA), which adds coverage and reimbursement of Freestanding Birth Centers to the Massachusetts State Plan.

Based on the information provided, we are pleased to inform you that Massachusetts SPA 11-010 is approved, effective October 5, 2011. Enclosed is a copy of the CMS-179 form which identifies changes to the amendment mutually agreed to by CMS and the Commonwealth, as well as the approved page for incorporation in the Massachusetts Medicaid State Plan.

If you have any questions, please contact Aaron Wesolowski of my staff. Aaron Wesolowski can be reached at (617) 565-1325 or by email at aaron.wesolowski@cms.hhs.gov.

Sincerely,

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Richard R. McGreal
Associate Regional Administrator

cc: Julian Harris, M.D., Medicaid Director
Michael Coleman, State Plan Coordinator

TRANSMITTAL AND NOTICE OF APPROVAL OF STATE PLAN MATERIAL FOR: CENTERS FOR MEDICARE & MEDICAID SERVICES	1. TRANSMITTAL NUMBER: <p style="text-align: center;">011-010</p>	2. STATE <p style="text-align: center;">MA</p>
	3. PROGRAM IDENTIFICATION: TITLE XIX OF THE SOCIAL SECURITY ACT (MEDICAID)	
TO: REGIONAL ADMINISTRATOR CENTERS FOR MEDICARE AND MEDICAID SERVICES DEPARTMENT OF HEALTH AND HUMAN SERVICES	4. PROPOSED EFFECTIVE DATE <p style="text-align: center;">07/01/11</p>	

5. TYPE OF PLAN MATERIAL (Check One):

- NEW STATE PLAN
 AMENDMENT TO BE CONSIDERED AS NEW PLAN
 AMENDMENT

COMPLETE BLOCKS 6 THRU 10 IF THIS IS AN AMENDMENT (Separate Transmittal for each amendment)

6. FEDERAL STATUTE/REGULATION CITATION: Patient Protection and Affordable Care Act § 2301; 42 U.S.C. §§1396d(a)(28) and 1396d(l)(3); 42 CFR Part 447	7. FEDERAL BUDGET IMPACT: a. FFY11 \$ 00.00 b. FFY12 \$ 00.00
8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT: Attachment 3.1-A, page 12 (new) Attachment 3.1-B, page 11 (new) Attachment 4.19-B, page 3.3 (new)	9. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable): <p style="text-align: center;">N/A</p>

10. SUBJECT OF AMENDMENT:

Freestanding Birth Centers

11. GOVERNOR'S REVIEW (Check One):

- GOVERNOR'S OFFICE REPORTED NO COMMENT
 OTHER, AS SPECIFIED:
 COMMENTS OF GOVERNOR'S OFFICE ENCLOSED
 Not required under
 NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL
 42 CFR 430.12(b)(2)(ii)

12. SIGNATURE OF STATE AGENCY OFFICIAL: 13. <u>JudyAnn Bigby, M. D.</u> 14. TITLE: Secretary 15. DATE SUBMITTED: 09/30/11	16. RETURN TO: Michael P. Coleman State Plan Coordinator Office of Medicaid Executive Office of Health and Human Services One Ashburton Place, 11 th Floor Boston, MA 02108
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FOR REGIONAL OFFICE USE ONLY

17. DATE RECEIVED: September 29, 2011	18. DATE APPROVED: December 16, 2011
PLAN APPROVED - ONE COPY ATTACHED	
19. EFFECTIVE DATE OF APPROVED MATERIAL: October 5, 2011	20. SIGNATURE OF REGIONAL OFFICIAL: 22. TITLE: Associate Regional Administrator, Boston Division of Medicaid & Children's Health Operations
21. TYPED NAME: Richard R. McGreal	

23. REMARKS:

The Centers for Medicare & Medicaid Services and the Massachusetts Executive Office of Health & Human Services mutually agreed to amend Box 4 so that the effective date is "October 5, 2011."

State Plan under Title XIX of the Social Security Act
State: Massachusetts
Amount, Duration, and Scope of Medical
and Remedial Care and Services Provided to the Categorically Needy

28. Freestanding Birth Center Services

i. Licensed or Otherwise State-Approved Freestanding Birth Centers

- Provided: No limitations With limitations
 None licensed or approved

Please describe any limitations:

Freestanding birth center services are covered for women with low risk pregnancies. Freestanding birth center services include care during pregnancy, labor, delivery, and recovery following delivery, including newborn nursery and post-partum care.

ii. Licensed or Otherwise State-Recognized covered professionals providing services in the Freestanding Birth Center

- Provided: No limitations With limitations
 Not applicable (There are no licensed or State approved Freestanding Birth Centers)

Please describe any limitations:

The limitations to the practitioners' services are the same limitations as noted in their respective section of the State Plan.

Please check all that apply:

(a) Practitioners furnishing mandatory services described in another benefit category and otherwise covered under the State plan: Physicians, and certified nurse midwives.

(b) Other licensed practitioners furnishing prenatal, labor and delivery, or postpartum care in a freestanding birth center within the scope of practice under State law whose services are otherwise covered under 42 CFR 440.60 (e.g., lay midwives, certified professional midwives (CPMs), and any other type of licensed midwife). *

(c) Other health care professionals licensed or otherwise recognized by the State to provide these birth attendant services (e.g., doulas, lactation consultant, etc.).*

*For (b) and (c) above, please list and identify below each type of professional who will be providing birth center services:

State Plan under Title XIX of the Social Security Act
State: Massachusetts
Amount, Duration, and Scope of Medical
and Remedial Care and Services Provided to the Medically Needy

28. Freestanding Birth Center Services

i. Licensed or Otherwise State-Approved Freestanding Birth Centers

- Provided: No limitations With limitations
 None licensed or approved

Please describe any limitations:

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ii. Licensed or Otherwise State-Recognized covered professionals providing services in the Freestanding Birth Center

- Provided: No limitations With limitations
 Not applicable (There are no licensed or State approved Freestanding Birth Centers)

Please describe any limitations:

The limitations to the practitioners' services are the same limitations as noted in their respective section of the State Plan.

Please check all that apply:

- (a) Practitioners furnishing mandatory services described in another benefit category and otherwise covered under the State plan: Physicians and certified nurse midwives.
- (b) Other licensed practitioners furnishing prenatal, labor and delivery, or postpartum care in a freestanding birth center within the scope of practice under State law whose services are otherwise covered under 42 CFR 440.60 (e.g., lay midwives, certified professional midwives (CPMs), and any other type of licensed midwife). *
- (c) Other health care professionals licensed or otherwise recognized by the State to provide these birth attendant services (e.g., doulas, lactation consultant, etc.).*

*For (b) and (c) above, please list and identify below each type of professional who will be providing birth center services:

**State Plan under Title XIX of the Social Security Act
State: Massachusetts
Methods and Standards for Establishing Payment Rates – Other Types of Care**

v. **Licensed Freestanding Birth Centers**

Freestanding Birth Center (FBC) Facility Rate: Fee schedules established by DHCFP and published at <http://www.mass.gov/dhcfp/regs>. The link to the FBC fee schedule as of October 5, 2011, is http://www.mass.gov/Eeohhs2/docs/dhcfp/g/regs/114_3_55.pdf. Except as otherwise noted in the plan, state developed fee schedule rates are the same for both governmental and private providers.

For physician, certified nurse midwife, and nurse practitioner services provided by FBC employees or contractors paid by the FBC, the FBC will be paid for the professional component of such services in accordance with Section 8.d. of Attachment 4.19-B of the State Plan. Other clinician services are included in the FBC Facility Rate.