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State/Territory Name: Massachusetts

State Plan Amendment (SPA) #: 19-008

This file contains the following documents in the order listed:

- 1) Approval Letter
- 2) CMS 179 Form/Summary Form (with 179-like data)
- 3) Approved SPA Pages

DEPARTMENT OF HEALTH & HUMAN SERVICES Centers for Medicare & Medicaid Services John F. Kennedy Federal Building Boston, Massachusetts 02203



Boston Regional Operations Group

June 19, 2019

Marylou Sudders, Secretary Executive Office of Health and Human Services One Ashburton Place, Room 1109 Boston, Massachusetts 02108

Dear Secretary Sudders:

We are pleased to enclose a copy of approved Massachusetts State Plan Amendment (SPA) No. 19-008, submitted to CMS on March 29, 2019. This SPA was submitted to revise your approved Title XIX State plan to update the payment methodology for Community Health and Mental Health Center services. This SPA was approved on June 17, 2019, with an effective date of January 26, 2019.

Enclosed is a copy of the following approved State plan page.

• Attachment 4.19-B, page 1a9.

If you have any questions regarding this matter you may contact Julie McCarthy at (781) 961-1070 or by e-mail at <u>Julie.McCarthy@cms.hhs.gov</u>.

Sincerely,

/s/

Francis T. McCullough, Director Division of Medicaid Field Operations East (Boston)

Enclosure/s

cc: Daniel Tsai, Assistant Secretary for MassHealth, Medicaid Director Kaela Konefal, Federal Authority Policy Analyst/State Plan Coordinator

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Attachment 4.19-B Page 1a9

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

(Item h. Clinic Services, continued)

9. Mental Health Centers

The fee-for-service rates are effective for service provided on or after January 26, 2019. All rates are published on https://www.mass.gov/regulations/101-CMR-30600-rates-of-payment-for-mental-health-services-provided-in-community-health. Except as otherwise noted in the plan, state developed fee schedule rates are the same for both governmental and private providers.

TN: 019-008 Approval Date: 06/17/2019 Effective Date: 01/26/19

Supersedes: 016-010