

Table of Contents

State/Territory Name: Maryland

State Plan Amendment (SPA) #: 17-0006

This file contains the following documents in the order listed:

- 1) Approval Letter
- 2) CMS 179 Form
- 3) Approved SPA Pages

DEPARTMENT OF HEALTH & HUMAN SERVICES
Centers for Medicare & Medicaid Services
150 S. Independence Mall West
Suite 216, The Public Ledger Building
Philadelphia, Pennsylvania 19106-3499



Region III/Division of Medicaid and Children's Health Operations

SWIFT #073120174008

September 7, 2017

Dennis Schrader, Secretary
Maryland Department of Health
201 West Preston Street
Baltimore, Maryland 21201

Dear Mr. Schrader:

Enclosed is a copy of the approved State Plan Amendment (SPA), Transmittal Number 17-0006. The purpose of this SPA is to combine nurse anesthetist, nurse midwife and nurse practitioner pages under advanced practice nursing services. aligning with regulations.

The effective date for this amendment is July 1, 2017. The CMS 179 form and the Approved State Plan pages are attached.

If you have questions about this SPA, please contact Ms. Talbatha Myatt of my staff at 215-861-4259.

Sincerely,

/s/

Francis T. McCullough
Associate Regional Administrator

Enclosures

TRANSMITTAL AND NOTICE OF APPROVAL OF STATE PLAN MATERIAL FOR: CENTERS FOR MEDICARE & MEDICAID SERVICES	1. TRANSMITTAL NUMBER: 17-0006	2. STATE Maryland
	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 July 1, 2017	

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: N/A	7. FEDERAL BUDGET IMPACT: a. FFY 2017: \$ 0 b. FFY 2018: \$ 0
8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT: Att. 3.1A pg 19-2 & 19-3 (AMEND) Att. 4.19B page 7 (AMEND) Att. 3.1A pgs 19-4, 19-5, 29I & 29J (DELETE) Att. 4.19B pg 9 (DELETE)	9. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable): Att. 3.1A pg 19-2 & 19-3 Att. 4.19B page 7 Att. 3.1A pgs 19-4, 19-5, 29I & 29J Att. 4.19B pg 9

10. SUBJECT OF AMENDMENT: To combine nurse anesthetist, nurse midwife, and nurse practitioner pages under advanced practice nursing services, aligning with regulations.

11. GOVERNOR'S REVIEW (Check One):

- GOVERNOR'S OFFICE REPORTED NO COMMENT OTHER, AS SPECIFIED:
 COMMENTS OF GOVERNOR'S OFFICE ENCLOSED Susan J. Tucker, Executive Director
 NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL Office of Health Services

12. SIGNATURE OF STATE AGENCY OFFICIAL: /s/	16. RETURN TO: Susan J. Tucker, Executive Director OHS – DHMH 201 W. Preston St., 1 st floor Baltimore, MD 21201
13. TYPED NAME: Shannon McMahon	
14. TITLE: Deputy Secretary, Office of Health Care Financing	
15. DATE SUBMITTED: 7/25/17	

FOR REGIONAL OFFICE USE ONLY

17. DATE RECEIVED: July 28, 2017	18. DATE APPROVED: September 7, 2017
PLAN APPROVED – ONE COPY ATTACHED	
19. EFFECTIVE DATE OF APPROVED MATERIAL: July 1, 2017	20. SIGNATURE OF REGIONAL OFFICIAL: /s/
21. TYPED NAME: Francis T. McCullough	22. TITLE: Associate Regional Administrator

23. REMARKS:

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

6. Medical care and any other type of remedial care recognized under State Law, furnished by licensed practitioners within the scope of their practice as defined by State Law.

6e. Advanced Practice Nurse Services

Advanced Practice Nurse Services

This section includes certified nurse practitioners, certified nurse midwives and certified registered nurse anesthetists.

Covered Services

A. The Program covers medically necessary advanced practice nurse services rendered to participants as follows:

1. Certified nurse practitioner services provided within the provider's scope of practice as described in State Law and authorized in the state in which the services are rendered;
2. Certified nurse midwife services provided within the provider's scope of practice as described in State Law and authorized in the state in which the services are rendered;
3. Certified registered nurse anesthetist services provided within the provider's scope of practice and in collaboration with an authorized provider as described in State Law and authorized in the state in which the services are rendered;
4. Laboratory services when the advanced practice nurse provider is not registered as a medical laboratory; and
5. Drugs and supplies within the provider's scope of practice.

B. The rendered advanced practice nurse services shall be medically necessary as described in the participant's medical record in sufficient detail to support the request for payment.

Limitations

Under advanced practice nurse services, the Program does not cover the following:

1. Services not medically necessary;
2. Services prohibited by the Maryland Nurse Practice Act or by the Maryland State Board of Nursing;
3. Advanced practice nursing services included as part of the cost of:
 - a. An inpatient facility;
 - b. A hospital outpatient department; or
 - c. A freestanding clinic;
4. Visits by or to the provider solely for the purpose of the following:
 - a. Prescription, drug, or food supplement pick-up;
 - b. Recording of an electrocardiogram;
 - c. Ascertaining the patient's weight;
 - d. Interpretation of laboratory tests or panels; or
 - e. Prescribing or administering medications;
5. Drugs and supplies which are acquired at no cost;

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

6. Medical care and any other type of remedial care recognized under State Law, furnished by licensed practitioners within the scope of their practice as defined by State Law.

6e. Advanced Practice Nurse Services

6. Injections and visits solely for the administration of injections, unless medical necessity and the participant's inability to take oral medications are documented in the participant's medical record;
7. Services paid under the free-standing dialysis program as described in State Law;
8. Immunizations required for travel outside the United States;
9. Prescriptions and injections for central nervous system stimulants and anorectic agents when used for weight control;
10. Acupuncture;
11. Hypnosis;
12. Travel expenses;
13. Investigational or experimental drugs and procedures;
14. Specimen collection, except by venipuncture and capillary or arterial puncture, as a separate service;
15. Laboratory or X-ray services performed by another facility, which shall be billed to the Program directly by the facility; and
16. For certified nurse midwives, a separate visit charge on date of delivery.

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

MARYLAND

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

MARYLAND

DELETE PAGE

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

MARYLAND

DELETE PAGE

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

MARYLAND

DELETE PAGE

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UNDER TITLE XIX OF THE SOCIAL SECURITY ACT
STATE OF MARYLAND

Advanced Practice Nursing Reimbursement

- 6.a Both government and non-government practitioners are reimbursed pursuant to the same fee schedule. All practitioners are paid by CPT codes which are based on a percentage of Medicare reimbursement.
- 6.b The Agency's rates for professional services rendered by nurse practitioners, nurse midwives, and nurse anesthetists were set as of 7/1/2017 and are effective for services on or after that date. All practitioners must be licensed in the jurisdiction in which they provide services. Services are limited to those allowed under their scope of practice in Maryland. The practitioner will be paid the lower of the provider's customary fee schedule to the general public or the published fee schedule. The average Maryland Medicaid payment rate is approximately 88 percent of Medicare 2015 fees. All rates are published on the Department's link below:

<https://health.maryland.gov/providerinfo>

- 6.c Payment limitations:
- The Department will not pay for practitioner administered drugs obtained from manufacturers which do not participate in the federal Drug Rebate Program.
 - The Department will not pay for disposable medical supplies usually included with the office visit.
 - The Department will not pay a provider for those laboratory or x-ray services performed by another facility, but will instead pay the facility performing the procedure directly.
 - In addition, for nurse anesthetists preoperative evaluations for anesthesia are included in the fee for administration of anesthesia and the nurse anesthetist may not bill them as consultants.
 - The provider may not bill the Program for:
 - Completion of forms and reports;
 - Broken or missed appointments;
 - Professional services rendered by mail or telephone; or
 - Providing a copy of a recipient's medical record when requested by another licensed provider on behalf of recipient.

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

MARYLAND

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