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State/Territory Name: Maryland

State Plan Amendment (SPA) #: 18-0006

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
801 Market Street
Suite 9400
Philadelphia, Pennsylvania 19107-3134



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

SWIFT #071120184023

July 30, 2018

Dennis Schrader
Medicaid Director
State of Maryland Health Care Financing
Department of Health and Mental Hygiene
201 W. Preston Street
Baltimore, MD 21201

Dear Mr. Schrader:

Enclosed is a copy of the approved State Plan Amendment (SPA), Transmittal Number 18-0006. The purpose of this SPA is to update the reimbursement rate for Targeted Case Management providers by three and a half percent based on a legislative approved Cost of Living Adjustment. Due to the three and a half percent (\$.65) increase, the new rate is \$19.26 per unit.

The effective date for this amendment is July 1, 2018. 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.

/s/ Sincerely,

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: 18-0006	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 st , 2018	

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 2018: \$ 39,943 b. FFY 2019: \$ 1,594,772
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8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT: Attachment 4.19B pages 42, 43, and 44 (AMEND)	9. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable): Attachment 4.19B pgs: 42, 43, 44 (17-0007)
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10. SUBJECT OF AMENDMENT: To update DDA TCM rates for FY19.

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 - MDH 201 W. Preston St., 1 st floor Baltimore, MD 21201
13. TYPED NAME: Dennis Schrader	
14. TITLE: Medicaid Director, Maryland Department of Health	
15. DATE SUBMITTED: July 10, 2018	

FOR REGIONAL OFFICE USE ONLY

17. DATE RECEIVED: July 10, 2018	18. DATE APPROVED: July 30, 2018
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PLAN APPROVED - ONE COPY ATTACHED

19. EFFECTIVE DATE OF APPROVED MATERIAL: July 1, 2018	20. SIGNATURE OF REGIONAL OFFICIAL: /s/
21. TYPED NAME: Francis T. McCullough	22. TITLE: Associate Regional Administrator
23. REMARKS:	

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State of Maryland

**Reimbursement Methodology for Targeted Case Management Services – On DDA
Waiting List**

1. Effective July 1, 2018, payments for Targeted Case Management services to the Community as defined per Section 3.1A, Supplement 7 shall be paid based on a fee-for-service schedule. The rate can be found below and is the same for both governmental and private individual practitioners:

<http://dda.health.maryland.gov/SitePages/Home.aspx>

2. Initial Eligibility and Access Comprehensive Assessment is reimbursed at a flat rate of \$450.
3. Effective July 1, 2018, the rate will be \$19.26 per unit to reflect a planned FY 19 Cost of Living Adjustment (COLA). A COLA, authorized by Maryland State Legislature, effectively increases the rate for the State Fiscal Year 2019. A unit of service means a 15 minute increment.
4. The State assures that billed time does not exceed available productive time by practitioner.
5. Services can be provided by qualified professionals that meet the qualifications outlined in Section 3.1A, Supplement 7, §F. DDA Case Management Staff Qualifications.
6. Effective January 1, 2016, each provider will receive a pre-authorization for a specified number of units to be used for all of their clients. This creates flexibility based on individual need and better responsiveness to emergency and crisis situations. Providers will be responsible for meeting the minimum service requirements for all individuals and a process for requesting and authorizing additional units will be put in place to address extenuating circumstances.

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State of Maryland

**Reimbursement Methodology for Targeted Case Management Services –
Transitioning to the Community**

1. Effective July 1, 2018, payments for Targeted Case Management services to the Community as defined per Section 3.1A, Supplement 7 shall be paid based on a fee-for-service schedule. The rate can be found below and is the same for both governmental and private individual practitioners:

<http://dda.health.maryland.gov/SitePages/Home.aspx>

2. Initial Eligibility and Access Comprehensive Assessment is reimbursed at a flat rate of \$450.
3. Effective July 1, 2018, the rate will be \$19.26 per unit to reflect a planned FY 19 Cost of Living Adjustment (COLA). A COLA, authorized by Maryland State Legislature, effectively increases the rate for the State Fiscal Year 2019. A unit of service means a 15 minute increment.
4. The State assures that billed time does not exceed available productive time by practitioner.
5. Services can be provided by qualified professionals that meet the qualifications outlined in Section 3.1A, Supplement 7, §F. DDA Case Management Staff Qualifications.
6. Effective January 1, 2016, each provider will receive a pre-authorization for a specified number of units to be used for all of their clients. This creates flexibility based on individual need and better responsiveness to emergency and crisis situations. Providers will be responsible for meeting the minimum service requirements for all individuals and a process for requesting and authorizing additional units will be put in place to address extenuating circumstances.

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State of Maryland

**Reimbursement Methodology for Targeted Case Management Services –
Community Coordination Services**

1. Effective July 1, 2018, payments for Targeted Case Management services to the Community as defined per Section 3.1A, Supplement 7 shall be paid based on a fee-for-service schedule. The rate can be found below and is the same for both governmental and private individual practitioners:

<http://dda.health.maryland.gov/SitePages/Home.aspx>

2. Initial Eligibility and Access Comprehensive Assessment is reimbursed at a flat rate of \$450.
3. Effective July 1, 2018, the rate will be \$19.26 per unit to reflect a planned FY 19 Cost of Living Adjustment (COLA). A COLA, authorized by Maryland State Legislature, effectively increases the rate for the State Fiscal Year 2019. A unit of service means a 15 minute increment.
4. The State assures that billed time does not exceed available productive time by practitioner.
5. Services can be provided by qualified professionals that meet the qualifications outlined in Section 3.1A, Supplement 7, §F. DDA Case Management Staff Qualifications.
6. Effective January 1, 2016, each provider will receive a pre-authorization for a specified number of units to be used for all of their clients. This creates flexibility based on individual need and better responsiveness to emergency and crisis situations. Providers will be responsible for meeting the minimum service requirements for all individuals and a process for requesting and authorizing additional units will be put in place to address extenuating circumstances.