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State/Territory Name: Maryland

State Plan Amendment (SPA) #: 18-0009

This file contains the following documents in the order listed:

- 1) Approval Letter
- 2) CMS 179
- 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 #082320184011

November 6, 2018

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 18-0009. This SPA updates podiatry services to further clarify covered services and limitations of podiatric care, as well as an update of specific terms for dates of service beginning July 1, 2018.

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.

Sincerely,

/s/

for

Francis McCullough
Associate Regional Administrator

Enclosures

TRANSMITTAL AND NOTICE OF APPROVAL OF STATE PLAN MATERIAL FOR: CENTERS FOR MEDICARE & MEDICAID SERVICES	1. TRANSMITTAL NUMBER: 18-0009	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: \$0.00 b. FFY 2019: \$0.00
8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT: Att. 3.1A pg 18, 18A, 18B, 18C, (AMEND)	9. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable): Att. 3.1A pg 18, 18A, 18B, 18C (83-11)

10. SUBJECT OF AMENDMENT: To clarify covered services and limitations of podiatric care, as well as update specific terms.

11. GOVERNOR'S REVIEW (Check One):

GOVERNOR'S OFFICE REPORTED NO COMMENT OTHER, AS SPECIFIED:
 COMMENTS OF GOVERNOR'S OFFICE ENCLOSED Jill Spector, Director
 NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL Health Choice & Acute Care Administration

12. SIGNATURE OF STATE AGENCY OFFICIAL: /s/	16. RETURN TO: Jill Spector, Director OHS – MDH 201 W. Preston St., 2nd floor Baltimore, MD 21201
13. TYPED NAME: Dennis Schrader	
14. TITLE: Medicaid Director, Maryland Department of Health	
15. DATE SUBMITTED: August 23, 2018	

FOR REGIONAL OFFICE USE ONLY	
17. DATE RECEIVED: August 23, 2018	18. DATE APPROVED: October 31, 2018

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 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.
- a. Podiatrists' Services
-

Covered Services

- A. The Podiatrist Program covers medically necessary podiatric services when the services are provided by a licensed and legally authorized podiatrist in the state in which the service is provided.
- B. Routine podiatric care, which refers to the cutting or removing of corns and calluses, and the trimming, cutting, clipping, or debriding of toenails, is limited to one visit every 60 days for participants who have diabetes or peripheral vascular diseases that affect the lower extremities. This limit may be exceeded based on medical necessity.

Limitations

Under the Podiatry Program, the following services are not covered:

1. Physical therapy;
2. Orthotics and inlays of any type, and related services;
3. Disposable medical supplies;
4. Administration of anesthesia as a separate charge;
5. Drugs and supplies which are acquired by the podiatrist at no cost;
6. Personal hygiene care;
7. Routine care, except visits for participants who are diabetic or who have a vascular disease affecting the lower extremities;
8. Non-surgical hospital visits;
9. Laboratory or x-ray services not performed by the provider or under the direct supervision of the provider;
10. Podiatric inpatient hospital services rendered during an admission denied by the utilization control agent or during a period that is in excess of the length of stay authorized by the utilization agent;
11. More than one visit per day for the same service unless adequately documented in the patient's medical record as an emergency;
12. Visits by or to the podiatrist solely for the purpose of the following:
 - a. Prescription or drug pick-up;
 - b. Collection of specimens for laboratory procedures, except by venipuncture, capillary or arterial puncture; and
 - c. Interpretation of laboratory tests or panels;
13. Services not identified by the Department as medically necessary or covered;
14. Injections and visits solely for the administration of injections;
15. Services rendered by mail, telephone, or otherwise not one-to-one, in person;
16. Completion of forms or reports;
17. Broken or missed appointments;
18. Investigational or experimental drugs or procedures; and
19. Services prohibited by the Maryland Podiatry Act or the State Board of Podiatric Medical Examiner.

TN No. 18-0009

Approval Date: October 31, 2018

Effective Date: July 1, 2018

Supersedes TN No. 83-11

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