

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



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

October 23, 2014

Mary C. Mayhew, Commissioner
Department of Health and Human Services
221 State Street
11 State House Station
Augusta, ME 04333-0011

RE: MAINE 14-009 APPROVAL

Dear Commissioner Mayhew:

We are now ready to approve State Plan Amendment (SPA) No. 14-009; attached you will find an approved copy of the SPA. As requested, this SPA is effective April 1, 2014.

The purpose of this SPA is to amend the Attachment 4.19B of the State's approved Title XIX State Plan to update new codes and to update the MaineCare rate reimbursement methodology for Physician Services, Federally Qualified Health Centers, Rural Health Centers, and Durable Medical Equipment.

If you have any questions regarding this SPA, please contact Aimee Campbell-O'Connor, Maine State Lead, at 617/565-1642, or at aimee.campbell-oconnor@cms.hhs.gov.

Sincerely,

/s/

Richard R. McGreal
Associate Regional Administrator

cc: Stefanie Nadeau, Director, Office of Maine Care Services

TRANSMITTAL AND NOTICE OF APPROVAL OF STATE PLAN MATERIAL		1. TRANSMITTAL NUMBER: 14-009	2. STATE Maine
FOR: HEALTH CARE FINANCING ADMINISTRATION		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 April 1, 2014	
5. TYPE OF PLAN MATERIAL (Check One): <input type="checkbox"/> NEW STATE PLAN <input type="checkbox"/> AMENDMENT TO BE CONSIDERED AS NEW PLAN <input checked="" type="checkbox"/> AMENDMENT			
COMPLETE BLOCKS 6 THRU 10 IF THIS IS AN AMENDMENT (Separate Transmittal for each amendment)			
6. FEDERAL STATUTE/REGULATION CITATION: 42 CFR 430.12 (e) (ii); 42 CFR 47.200; 42 CFR 447.201; 1902 (a) (30)		7. FEDERAL BUDGET IMPACT: a. FFY 2015 is a cost of \$73,525.33 b. FFY 2016 is a cost of \$73,525.33	
8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT: Supplemental 1 to Attachment 4.19-B page 1, page 1(a), and page 2(b)		9. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable): Supplemental 1 to Attachment 4.19-B page 1, page 1(a), and page 2(b)	
10. SUBJECT OF AMENDMENT: Updating Codes in Family Planning Services, Physicians Services, and Durable Medical Equipment and Adding Reimbursement Methodology			
11. GOVERNOR'S REVIEW (Check One): <input type="checkbox"/> GOVERNOR'S OFFICE REPORTED NO COMMENT <input checked="" type="checkbox"/> OTHER, AS SPECIFIED: <input type="checkbox"/> COMMENTS OF GOVERNOR'S OFFICE ENCLOSED Commissioner, Dept. of Health and Human Services <input type="checkbox"/> NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL			
12. SIGNATURE: <i>Mary C. Mayhew</i>		16. RETURN TO: Stefanie Nadeau Director, MaineCare Services #11 State House Station 242 State Street Augusta, Maine 04333-0011	
13. TYPED NAME: Mary C. Mayhew			
14. TITLE: Commissioner, Department of Health and Human Services			
15. DATE SUBMITTED: 06-25-2014			
FOR REGIONAL OFFICE USE ONLY			
17. DATE RECEIVED: 06/25/2014		18. DATE APPROVED: 10/21/2014	
PLAN APPROVED - ONE COPY ATTACHED			
19. EFFECTIVE DATE OF APPROVED MATERIAL: 04/01/2014		20. SIGNATURE OF REGIONAL ADMINISTRATOR:	
21. TYPED NAME: RICHARD R. MCGREAL		22. TITLE: Associate Regional Administrator	
23. REMARKS:			

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

STATE: Maine

Supplement 1 to Attachment 4.19-B
Page 1METHODS AND STANDARDS FOR ESTABLISHING PAYMENT RATES –
OTHER TYPES OF CARE

1. Inpatient hospital services see Attachment 4.19-A
2. a. Outpatient hospital services - Same as Attachment 4.19-A.
- b. Certified Rural Health Clinics. The payment methodology for Certified Rural Health Clinics will conform to section 702 of the BIPA 2000 legislation, specifically to the BIPA 2000 requirements for Prospective Payment System (PPS). Certified Rural Health Clinics will be reimbursed on the basis of 100% of the average of their reasonable costs of providing Medicaid-covered services during FY 1999 and FY 2000; adjusted to take into account any increase or decrease in the scope of services furnished during FY 2001 (calculating the amount of payment on a per visit basis). Beginning in FY 2002, and for each fiscal year thereafter, each Certified Rural Health Clinic is entitled to the payment amount (on a per visit basis) to which the clinic was entitled under the Act in the previous fiscal year, increased by the percentage increase in the Medicare Economic Index (MEI) for primary care services, and adjusted to take into account any increase or decrease in the scope of services furnished during that fiscal year. Until the new payment rate is calculated according to this methodology, Certified Rural Health Clinics will be paid at their current plan rate, which will be retroactively adjusted once the new payment rate is calculated. Newly qualified Certified Rural Health Clinics after fiscal year 2000 will have initial payments established either by reference to payments to other clinics in the same or adjacent area, or in the absence of such other clinics, through cost reporting methods. After the initial year, payment shall be set using the MEI methods used for other clinics. Certified Rural Health Clinics may be reimburse for services on the basis of a fixed fee schedule: http://www.maine.gov/dhhs/audit/rate-setting/documents/S90DrugFeeSchedule_004.pdf
- c. Federally Qualified Health Centers - The payment methodology for Federally Qualified Rural Health Centers will conform to section 702 of the BIPA 2000 legislation, specifically to the BIPA 2000 requirements for Prospective Payment System (PPS). Federally Qualified Health Centers will be reimbursed on the basis of 100% of the average of their reasonable costs of providing Medicaid-covered services during FY 1999 and FY 2000, adjusted to take into account any increase or decrease in the scope of services furnished during FY 2001 (calculating the amount of payment on per visit basis). Beginning in FY 2002; and for each fiscal year thereafter, each Federally Qualified Health Center is entitled to the payment amount (on a per visit basis) to which the center was entitled under the Act in the previous fiscal year, increased by the percentage increase in the Medicare Economic Index (MEI) for primary care services, and adjusted to take into account any increase or decrease in the scope of services furnished during that fiscal year. Until the new payment rate is calculated according to this methodology, Federally Qualified Health Centers will be paid at their current plan rate, which will be retroactively adjusted once the new payment rate is calculated. Newly qualified Federally Qualified Health Centers after fiscal year 2000 will have initial payments established either by reference to payments to other centers in the same or adjacent areas, or in the absence of such other centers, through cost reporting methods. After the initial year, payment shall be set using the MEI methods used for other centers. Federally Qualified Health Centers may be reimburse for services on the basis of a fixed fee schedule: http://www.maine.gov/dhhs/audit/rate-setting/documents/S90DrugFeeSchedule_004.pdf
3. Other laboratory and X-ray services 'the same as under Physicians' services, Item 5.
4. a. Skilled Nursing Facility services (other than services in an institution for tuberculosis or mental diseases) for individuals 21 years of age or older. See Attachment 4.19 D.
- b. Early and Periodic Screening, Diagnosis and Treatment Services -- The State-agency will apply the rates currently in effect for the item of service provided, except the rates of payment for agencies participating in the EPSDT program under special agreements Is made on the basis of a negotiated fee schedule.
- c. Family Planning Services and Supplies -- The State agency will apply the payment rate as described in Attachment 4.19 A when provided by a hospital, and as described in Item 5 below when provided as physician's services. Family The agency's fee schooled was set as of April 30, 2014 and is effective for services provided on or after that date. Planning Agencies are reimbursed on the basis of a fixed fee schedule: http://www.maine.gov/dhhs/audit/rate-setting/documents/S30FamilyPlanning_003.pdf