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State/Territory Name: Maine

State Plan Amendment (SPA) #:15-006

This file contains the following documents in the order listed:

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

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

April 28, 2015

Mary Mayhew, Commissioner
Department of Health and Human Services
11 State House Station
Augusta, Maine 04333-0011

RE: Maine ME 15-006

Dear Commissioner Mayhew:

We are now ready to approve State Plan Amendment (SPA) No. ME 15-006 Attached you will find an approved copy of the SPA. This SPA is effective February 1, 2015.

The purpose of this SPA is to amend the State's approved Title XIX State Plan to revise the reimbursement methodology for orthotic devices when used as part of physical and occupational therapy services. This SPA is estimated to have a Federal budget impact of \$112,718.30 in Federal Fiscal year 2015 and \$169,077.45 in Federal Fiscal year 2016.



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-O'Connor@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: 15-006	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 February 1, 2015	
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 CF §440.110; 42 CFR §447.200		7. FEDERAL BUDGET IMPACT: a. FFY 2015 cost of \$69,750.00 \$112,718.30 b. FFY 2015 cost of \$104,844.93 \$169,077.45	
8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT: Supplement 1 to Attachment 4.19-B page 3		9. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable): Supplement 1 to Attachment 4.19-B page 3	
10. SUBJECT OF AMENDMENT: Addition of reimbursement methodology for orthotic devises when used as part of Physical therapy services or Occupational Therapy Services			
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 OF STATE AGENCY OFFICIAL: /s/ 		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: 03-07-2015			
FOR REGIONAL OFFICE USE ONLY			
17. DATE RECEIVED: 3/9/15		18. DATE APPROVED: 4/28/15	
PLAN APPROVED – ONE COPY ATTACHED			
19. EFFECTIVE DATE OF APPROVED MATERIAL: 2/1/15		20. SIGNATURE OF REGIONAL OFFICIAL: /s/ 	
21. TYPED NAME: Richard McGreal		22. TITLE: Associate Regional Administrator	
23. REMARKS: On 4/24/15, the State authorized CMS to make pen and ink changes to the 179 form to incorporate new calculations of Fiscal Impact. Adjustments submitted by the state were made to Box 7 as requested.			

**METHODS AND STANDARDS FOR ESTABLISHING PAYMENT RATES –
OTHER TYPES OF CARE**

11. Physical Therapy and related services.

- a. Physical Therapy – Payment is made on the basis of a fixed fee schedule. State-developed fee schedule rates are the same for both governmental and private providers. The agency’s fee schedule rates were set as of September 1, 2010 respectively and were effective for services provided on or after that date. All rates are published <http://www.maine.gov/dhhs/audit/rate-setting/documents/S85R09012010.pdf>

The following methodology is used to determined rates for orthotics devices when done as part of Physical Therapy Services:

The lowest of:

- 1. 85% of the 2011 Medicare fee schedule or 85% of the rate in the year Medicare assigned a rate to that code;
- 2. Medicare’s allowable amount; or
- 3. The provider’s usual and customary charge

- b. Occupational Therapy –State-developed fee schedule rates are the same for both governmental and private providers. The agency’s fee schedule rates were set as of September 28, 2010 and were effective for services provided on or after that date. All rates are published at <http://www.maine.gov/dhhs/audit/rate-setting/documents/S68R09282010.pdf>

The following methodology is used to determined rates for orthotics devices when done as part Occupational Therapy Services:

The lowest of:

- 1. 85% of the 2011 Medicare fee schedule or 85% of the rate in the year Medicare assigned a rate to that code;
- 2. Medicare’s allowable amount; or
- 3. The provider’s usual and customary charge

- c. Services for individuals with speech, hearing, and language disorder –State-developed fee schedule rates are the same for both governmental and private providers. The agency’s fee schedule rates were set as of January 31, 2014, and were effective for services provided on or after that date. All rates are published at <http://www.maine.gov/dhhs/audit/rate-setting/documents/S109R912010a.pdf>. The agency’s fee schedule rates for hearing aids were set as of January 1, 2014 and were effective for services provided on or after that date. All rates for hearing aids are published at <http://www.maine.gov/dhhs/audit/rate-setting/documents/S35HearingAidsandServices.pdf>.

Providers of hearing aids will be limited to purchasing digital hearing aids only from the Division of Purchases designated Hearing Aid Procurement Program.

Maine meets the certification requirements of Section 1902(a)(23) of the Social Security Act to permit the selection of one or more providers, through a competitive bidding process, to deliver digital hearing aids on a statewide basis under the authority of Section 1915(a)(1)(B) of the Social Security Act and 42 CFR 431.54(d).