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

December 13, 2012

Nicholas A. Toumpas, Commissioner Department of Health and Human Services State of New Hampshire 129 Pleasant Street Concord, NH 03301

Re: New Hampshire SPA 06-008

Dear Commissioner Toumpas:

Enclosed is a copy of approved New Hampshire State Plan Amendment (SPA) No. 06-008. This amendment added a prior authorization requirement for certain non-emergent, high cost diagnostic x-ray services. The State indicated that this requirement would help manage the utilization of high cost and high volume outpatient diagnostic imaging tests by ensuring that the most appropriate imaging study will be undertaken to effectively meet the clinical needs of Medicaid recipients.

Based on a review of the initial SPA submission, CMS determined that additional information was needed before a final decision could be made. A formal request for additional information (RAI) was sent to the State on December 18, 2006. Your response was received by the Boston Regional Office on November 17, 2008. At the request of CMS, the State withdrew this RAI response to allow for additional discussion on outstanding issues. A subsequent RAI response was submitted to CMS on September 29, 2011 and was later withdrawn on December 8, 2011. The State continued to work with CMS to address outstanding questions via weekly work sessions.

In order to address questions related to the corresponding reimbursement methodologies related to this amendment, CMS requested that the State submit a revised state plan Attachment 4.19-B, page 1 to clarify the State's reimbursement method for outpatient hospital and x-ray services. Because the State did not provide the necessary public notice with respect to this change in payment methodology, CMS subsequently requested that the 4.19-B page be withdrawn from the RAI response. The State agreed to clarify those methodologies as part of NH SPA 10-014.

As approved, this SPA includes only a prior authorization requirement for certain non-emergent, high cost, x-ray services. As such, the SPA does not change the State plan's payment methodology and, consequently, is not subject to the public notice requirements.

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Therefore, based on the review of the September 18, 2012 final RAI response, this SPA is approved effective August 1, 2006 as requested by the State.

We are enclosing the CMS-179 and the following amended plan pages.

- o Attachment 3.1A, page 1a
- Attachment 3.1B, page 2a and 2a(1)

If you have any questions regarding this matter you may contact Angel Miller at 617-565-1324 or by email at <u>Angel.Miller@cms.hhs.gov</u>.

Sincerely,

/s/

Richard R. McGreal Associate Regional Administrator

Enclosure

cc: Kathleen Dunn, State Medicaid Director Diane Peterson, Medicaid Business and Policy