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State/Territory Name: Rhode Island

State Plan Amendment (SPA) #:19-009

This file contains the following documents in the order listed:

- 1) Approval Letter
- 2) 179 Form
- 3) Approved SPA Pages

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



Regional Operations Group/ Boston

October 31, 2019

Ms. Womazetta Jones, Secretary
Executive Office of Health and Human Services
State of Rhode Island and Providence Plantations
3 West Road
Cranston, RI 02920

Dear Secretary Jones:

On August 15, 2019 the Centers for Medicare and Medicaid Services (CMS) received Rhode Island State Plan Amendment (SPA) transmittal number 19-009 proposing to decrease hospice rates.

We are pleased to inform you that RI 19-009 was approved on October 31, 2019 with an effective date of July 1, 2019.

Please keep in mind that both current and historic state plan rates need to be posted and accessible online. As published Medicaid Hospice rates change, all rates must be updated accordingly. The State Plan must be amended to reflect any changes to the methodology or CMS Medicaid Hospice policy that are not currently reflected in the approved pages.

If you have any questions regarding this matter you may contact Lynn DelVecchio (401) 380-5604 or by e-mail at Lynn.DelVecchio@cms.hhs.gov

Sincerely,

/s/

Francis T. McCullough
Director, Regional Operations Group
(Boston)

Cc: Patrick Tigue, Medicaid Director
Melody Lawrence, Interdepartmental Project Manager
Gretchen Bell

**TRANSMITTAL AND NOTICE OF APPROVAL OF
STATE PLAN MATERIAL**

1. TRANSMITTAL NUMBER:
19-009

2. STATE
RI

FOR: CENTERS FOR MEDICARE AND MEDICAID SERVICES

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
July 1, 2019

5. TYPE OF PLAN MATERIAL (*Check One*):

NEW STATE PLAN AMENDMENT TO BE CONSIDERED AS NEW PLAN XX AMENDMENT

COMPLETE BLOCKS 6 THRU 10 IF THIS IS AN AMENDMENT (*Separate Transmittal for each amendment*)

6. FEDERAL STATUTE/REGULATION CITATION:

42 CFR 440.70

7. FEDERAL BUDGET IMPACT:

a. FFY 2019 - \$ 699,049
b. FFY 2020 - \$ 2,816,387

8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT:

Attachment 4.19-B page 3-3a

9. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION
OR ATTACHMENT (*If Applicable*):

Attachment 4.19-B page 3-3a

10. SUBJECT OF AMENDMENT:

Hospice Rates in a Skilled Nursing Facility

11. GOVERNOR'S REVIEW (*Check One*):

- GOVERNOR'S OFFICE REPORTED NO COMMENT
 COMMENTS OF GOVERNOR'S OFFICE ENCLOSED
 NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL

XX OTHER, AS SPECIFIED:
See Attached Letter

12. SIGNATURE OF STATE AGENCY OFFICIAL:

13. TYPED NAME: Womazetta Jones

14. TITLE: Secretary

15. DATE SUBMITTED: August 15, 2019

16. RETURN TO:

EOHHS
3 West Rd, Virks Building
Cranston, RI 02920

FOR REGIONAL OFFICE USE ONLY

17. DATE RECEIVED: 8/15/2019

18. DATE APPROVED: 10/31/2019

PLAN APPROVED - ONE COPY ATTACHED

19. EFFECTIVE DATE OF APPROVED MATERIAL: 7/1/2019

20. SIGNATURE OF REGIONAL OFFICIAL:
/s/

21. TYPED NAME: Francis T. Mccullough

22. TITLE: Director, Regional Operations Group East,
Boston

23. REMARKS:

STATE OF RHODE ISLAND

Items on the basis of the current prevailing rate at which the item is generally available to the public in the State of Rhode Island.

(4) Eyeglasses prescribed by a physician skilled in diseases of the eye or by an optometrist, except as otherwise noted in the State Plan, state-developed fee schedule rates are the same for both governmental and private providers of eyeglasses. The agency's fee schedule rate was set as of April 1993 for frames and March 2009 for lenses and is effective for services provided on or after those dates. All rates are published at <http://www.eohhs.ri.gov/Portals/0/Uploads/Documents/Fee%20Schedules/Medicaid%20Fee%20Schedule.pdf>

m. Nurse midwife services: except as otherwise noted in the State Plan, state-developed fee schedule rates are the same for both governmental and private providers of nurse mid-wife services. The agency's fee schedule rate was set as of 2000 and is effective for services provided on or after that date. All rates are published at <http://www.eohhs.ri.gov/Portals/0/Uploads/Documents/Fee%20Schedules/Medicaid%20Fee%20Schedule.pdf>

n. Hospice Services: Reimbursement for Hospice care will be made at predetermined rates for each day in which a beneficiary is under the care of the Hospice. The daily rate is applicable to the type and intensity of services furnished to the beneficiary for that day.

Effective July 1, 2019, with the exception of payment for physician services, base rates for levels of hospice care are as follows:

- Routine Home Care Days 1-60: \$239.05 per day
- Routine Home Care Days 60+: \$187.75 per day
- Continuous Home Care: \$50.40 per hour
- Inpatient Respite Care: \$225.22 per day
- General Inpatient Care: \$920.81 per day
- Service Intensity Add-On (SIA)-Clinical Social Worker: \$50.44 per hour
- Service Intensity Add-On (SIA)-Registered Nurse: \$53.68 per hour

Effective October 1, 2019, the hospice rates will be for each individual level of hospice care to pay the greater of either:

1. The hospice rate listed above; or
2. The current Medicaid minimum hospice rate published by CMS (effective 10/1/19)

The following methodology will be used to calculate the subsequent hospice rates for the individual levels of care:

- Each July 1, the rates effective October 1st of the previous calendar year will be trended by the May release of the New England Consumer Price Index card, as determined by the United States Department of Labor for medical care.

- Each October 1, the fee schedule rates will be updated for each individual level of hospice care to pay the greater of either:
 1. The state's current calendar year's July 1st hospice rate; or
 2. The current Medicaid minimum hospice rate published by CMS

Except as otherwise noted in the plan, state-developed fee schedules and rates are the same for both governmental and private providers. The current rates will be published at <http://www.eohhs.ri.gov/ProvidersPartners/FeeSchedule.aspx>.

Effective July 1, 2019, the rate for Hospice providers room and board expenses in a skilled nursing facility shall be ninety-five percent (95%) of the state plan skilled nursing facility rate. The hospice provider is responsible for passing the room and board payment through to the nursing facility.

For each hospice, the total number of inpatient days (both for general inpatient care and inpatient respite care) must not exceed 20 percent of the aggregate total number of days of hospice care provided to all Medicaid members enrolled in the hospice during the same period, beginning with services rendered October 1 or each year and ending September 30 of the next year.

- p. Home and community-based services: except as otherwise noted in the State Plan, state-developed fee schedule rates are the same for both governmental and private providers of home and community-based services. The agency's fee schedule rate was set as of July 1, 2018 and is effective for services provided on or after that date. All rates are published at <http://www.eohhs.ri.gov/ProvidersPartners/ProviderManualsGuidelines/MedicaidProviderManual/HomeandCommunityBasedServices.aspx>
- q. Rehabilitative services: except as otherwise noted in the State Plan, state-developed fee schedule rates are the same for both governmental and private providers of rehabilitative services. The agency's fee schedule rate was set as of February 2012 and is effective for services provided on or after that date. All rates are published at <http://www.eohhs.ri.gov/Portals/0/Uploads/Documents/Fee%20Schedules/Medicaid%20Fee%20Schedule.pdf>.
- r. Case management services: except as otherwise noted in the State Plan, state-developed fee schedule rates are the same for both governmental and private providers of case management services. The agency's fee schedule rate was set under the specific program that case management operates in a specific instance and is effective for services provided on or after those dates. All rates are published at <http://www.eohhs.ri.gov/Portals/0/Uploads/Documents/Fee%20Schedules/Medicaid%20Fee%20Schedule.pdf>.