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State/Territory Name: ME

State Plan Amendment (SPA): ME-22-0040

This file contains the following documents in the order listed:

- 1) Approval Letter
- 2) CMS 179 Form/Summary Form (with 179-like data)
- 3) Approved SPA Pages

DEPARTMENT OF HEALTH & HUMAN SERVICES

Centers for Medicare & Medicaid Services Center for Medicaid & CHIP Services 233 North Michigan Ave., Suite 600 Chicago, Illinois 60601



Financial Management Group

March 27, 2023

Michelle Probert, Director
Maine Department of Health and Human Services
MaineCare Services
Policy Division
11 State House Station
Augusta, Maine 04333-0011

RE: TN 22-0040

Dear Director Probert:

We have reviewed the proposed Maine State Plan Amendment (SPA) to Attachment 4.19-B ME-22-0040 which was submitted to the Centers for Medicare & Medicaid Services (CMS) on September 30, 2022. This plan amendment updates the reimbursement methodology for physician services to align payment for topical fluoride varnish with the applicable dental service reimbursement methodology.

Based upon the information provided by the State, we have approved the amendment with an effective date August 1, 2022. We are enclosing the approved CMS-179 and a copy of the new state plan page.

If you have any additional questions or need further assistance, please contact Blake Holt at 303-844-6218 or blake.holt@cms.hhs.gov.

Sincerely,

Todd McMillion
Director
Division of Reimbursement Review

Enclosures

TRANSMITTAL AND NOTICE OF APPROVAL OF	1. TRANSMITTAL NUMBER 22 0040	2. STATE Maine (ME) —————	
FOR: CENTERS FOR MEDICARE & MEDICAID SERVICES	3. PROGRAM IDENTIFICATION: TITLE XIX SOCIALSECURITY ACT	3. PROGRAM IDENTIFICATION: TITLE XIX OF THE SOCIALSECURITY ACT	
TO: CENTER DIRECTOR CENTERS FOR MEDICAID & CHIP SERVICES DEPARTMENT OF HEALTH AND HUMAN SERVICES	4. PROPOSED EFFECTIVE DATE 8/1/22		
5. FEDERAL STATUTE/REGULATION CITATION 1905(a)(5)(A)	a FFY\$ 2,41		
7. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT Supplement 1 to Attachment 4.19-B Page 1-a	8. PAGE NUMBER OF THE SUPERSED OR ATTACHMENT (If Applicable) Supplement 1 to Attachment		
9. SUBJECT OF AMENDMENT Updates reimbursement for CPT 99188 under Physicians Services to match reimbursement for application of topical fluoride varnish under Dental Services.			
10. GOVERNOR'S REVIEW (Check One)			
GOVERNOR'S OFFICE REPORTED NO COMMENT OTHER, AS SPECIFIED:			
COMMENTS OF GOVERNOR'S OFFICE ENCLOSED			
NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL			
11. SIGNATURE OF STATE AGENCY OFFICIAL	15. RETURN TO		
	Michelle Probert	Michelle Probert	
	Director, MaineCare Services		
12. TYPED NAME	#11 State House Station		
Michelle Probert	109 Capitol Street		
13. TITLE	Augusta, Maine 04333-0011		
Director, MaineCare Services			
14. DATE SUBMITTED			
9/30/2022			
FOR CMS	USE ONLY		
16. DATE RECEIVED September 30, 2022	17. DATE APPROVED March 27, 2023		
PLAN APPROVED - ONE COPY ATTACHED			
18. EFFECTIVE DATE OF APPROVED MATERIAL	19. SIGNATURE OF APPROVING OFFICIA	L	
August 1, 2022			
20. TYPED NAME OF APPROVING OFFICIAL	TITLE OF APPROVING OFFICIAL		
Todd McMillion	Director, Division of Reimbursement Review		
22. REMARKS			

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

STATE: Maine Supplement 1 to Attachment 4.19-B

Page 1-a

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

- 5. Physicians' Services -The State agency reimburses at the lowest of 1) Seventy-two point four percent (72.4%) of the current Maine Medicare 'area 99' rate per code, including appropriate Medicare fee adjustments for place-of-service modifiers in effect at the time of service; or 2) The provider's usual or customary charge, and 3) Where no other options are applicable, the Department researches all other State Medicaid agencies that cover the relevant service/code. The Department then bases its rates on the average cost of the relevant services/codes from those other agencies at the time Maine adds coverage and can be found on the Department's fee schedule. The agency's fee schedule rate was set as of July 1, 2022 and is effective for services provided on or after that date. All rates are published here. If the provider's usual and customary charge for a service is lower than the fee schedule rate, the provider's usual and customary charge will be reimbursed. MaineCare considers a claim paid in full if the third party payment exceeds the MaineCare rate of reimbursement.
 - a) Reimbursement for CPT code 99188 will be equal to the amount reimbursed under Dental Services for application of topical fluoride varnish.

TN No. 22-0040 Supersedes TN No. 22-0029 Effective Date: 8/1/22