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# **State/Territory Name: WA**

# State Plan Amendment (SPA) #: 22-0021

This file contains the following documents in the order listed:

Approval Letter
CMS 179 Form/Summary Form (with 179-like data)
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/ Division of Reimbursement Review

July 19, 2022

Susan Birch, Director DR. Charissa Fotinos, Acting Medicaid Director Health Care Authority PO Box 45502 Olympia, WA 98504-5010

### RE: Washington State Plan Amendment (SPA) Transmittal Number 22-0021

Dear Ms. Birch and Ms. Fontinos:

We have reviewed the proposed Washington state plan amendment (SPA) to attachment 4.19-B of your state plan, which was submitted to the Centers for Medicare & Medicaid Services (CMS) on June 22, 2022. This SPA was submitted in order to specify that audio-only telemedicine services do not receive facility fees for originating or distant sites.

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

If you have any additional questions or need further assistance, please contact DRR analyst James Moreth at James.Moreth@cms.hhs.gov or (206) 615-2043.

Sincerely,

Todd McMillion Director

Enclosures

TRANSMITTAL AND NOTICE OF APPROVAL OF STATE PLAN MATERIAL FOR: CENTERS FOR MEDICARE & MEDICAID SERVICES	
TO: CENTER DIRECTOR CENTERS FOR MEDICAID & CHIP SERVICES DEPARTMENT OF HEALTH AND HUMAN SERVICES	4. PROPOSED EFFECTIVE DATE July 1, 2022
5. FEDERAL STATUTE/REGULATION CITATION 1905(a) of the Social Security Act	6. FEDERAL BUDGET IMPACT (Amounts in WHOLE dollars) a. FFY 2022 \$ 0 b. FFY 2023 \$ 0
7. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT Attachment 4.19-B page 45	8. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable) Attachment 4.19-B page 45
9. SUBJECT OF AMENDMENT Telemedicine/Telehealth Rates	
10. 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	• OTHER, AS SPECIFIED: Exempt
	15. RETURN TO State Plan Coordinator Office of Rules & Publications
12. TYPED NAME Charissa Entinos, MD, MSc	Health Care Authority
13. TITLE Medicaid and Behavioral Health Medical Director	POB 42716 Olympia, WA 98504
14. DATE SUBMITTED June 22, 2022	
FOR CMS USE ONLY	
16. DATE RECEIVED 6/22/22	17. DATE APPROVED July 19, 2022
PLAN APPROVED - ONE COPY ATTACHED	
18. EFFECTIVE DATE OF APPROVED MATERIAL 7/1/22	19 SIGNATURE OF APPROVING OFFICIAL
20. TYPED NAME OF APPROVING OFFICIAL	21. TITLE OF APPROVING OFFICIAL
	DRR Director
22 REMARKS	

#### STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: WASHINGTON

#### XX. Telemedicine services

Payment for telemedicine/telehealth services is made as follows:

Originating sites (the physical location of the client at the time the service is provided) are paid a facility fee per completed transmission, according to the fee schedule.

Distant sites (the physical location of the practitioner providing the service) are paid the current fee schedule amount for the service provided.

Hospitals billing for audio only telemedicine/telehealth are not paid a facility fee for originating or distance sites.

Maximum allowable fees are developed using the Resource Based Relative Value Scale (RBRVS) methodology. Rates are established and updated using the RBRVS methodology as adopted in the Medicare Fee Schedule Data Base (MFSDB), or flat fee (based upon market value, other state's fee, budget impacts, etc.). In the RBRVS methodology, under Washington Administrative Code, chapter 182-531, the State uses CMS-established relative value units (RVU) multiplied by the Geographic Practice Cost Indices (GPCI) and the conversion factors, both of which are specific to Washington. Current conversion factors and descriptions are found in Supplement 3 to Attachment 4.19-B.

Except as otherwise noted in the plan, fee schedule rates are the same for both governmental and private providers of telemedicine/telehealth services. See 4.19-B, I, General, #G for the agency's website where the fee schedules are published.