

Medicaid Health Homes: State Plan Amendment Overview

The Medicaid health home option became available to states in 2011. Since that time, states have made significant strides in using this model to improve care coordination and care management for Medicaid beneficiaries with complex needs. As of June 2024, 19 states and the District of Columbia have a total of 34 approved Medicaid health home models.¹ Details of the states participating in the Medicaid health home opportunity are listed below. Some states have multiple state plan amendments (SPAs) to target different populations or phase in regional implementation.

State	Model	SPA Purpose
Connecticut	SMI	CT-15-014 : Creates a statewide serious mental illness (SMI) health home model (approved 9/28/16, effective 10/1/15)
District of Columbia	SMI	DC-15-005 : Creates a districtwide SMI health home model approved (approved 9/2/15, effective 1/1/16) DC-18-0006 : Amends the My DC Health Home program by making modifications to payment rate and billing methodology, care team structure, service definitions, and health home certification criteria (approved 2/21/19, effective 2/1/19) DC-24-0010 : Amends the My Health GPS program by making modifications to staffing ratios, payment reimbursement methodologies, and the needs assessment for level of care review (approved 6/12/24, effective 5/12/24)
District of Columbia	Chronic conditions	DC-16-0012 : Creates a districtwide chronic conditions health home model (approved 2/6/17, effective 7/1/17) DC-17-0003 : Clarifies that the eligible population must have three or more chronic conditions (approved 5/10/17, effective 7/1/17) DC-17-0007 : Extends provider eligibility for a one-time incentive payment (approved 10/23/17, effective 7/1/17) DC-18-0007 : Updates health home beneficiary risk adjustment criteria, quality provisions, and reimbursement methodology (approved 12/31/18, effective 12/1/18)
Idaho	I/DD and SMI or autism	ID-23-0001 : Creates a health home for Medicaid beneficiaries with Intellectual/Developmental Disabilities (I/DD) and a diagnosis of SMI or autism (approved 6/23/23, effective 1/1/24)
Kansas	Chronic conditions	KS-20-0005 : Creates a statewide chronic medical conditions health home model (approved 7/16/20, effective 4/1/20)
Kansas	SMI	KS-20-0004 : Creates a statewide SMI health home model (approved 7/16/20, effective 4/1/20)
Maine	Chronic conditions	ME-12-004 : Creates a statewide chronic medical conditions health home model (approved 1/23/13, effective 1/1/13) ME-13-012 : Updates the deadline for health homes to achieve Patient-Centered Medical Home certification (approved 7/12/13, effective 4/1/13) ME-22-0033-CCT : Implements Community Care Teams (CCTs) to deliver health home services designed to address whole-person needs, including assessment of level of care coordination needs based on risk factors of adults and children with chronic conditions, polypharmacy, and high emergency department utilization (approved 7/13/23, effective 7/1/22)

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Maine	SMI/SED	<p>ME-14-001: Creates a statewide SMI health home model (approved 12/17/14, effective 4/1/14)</p> <p>ME-15-005: Updates the payment methodology for the SMI health home model (approved 4/21/15, effective 1/1/15)</p> <p>ME-16-0001: Revises the reimbursement methodology for comprehensive health home services provided to adults and children with significant mental health and co-occurring diagnoses (approved 9/8/16, effective 1/1/16)</p> <p>ME-18-0002: Creates a pay-for-performance component to health home payment and makes other updates to operational aspects of the health home program (approved 1/7/19, effective 4/21/18)</p> <p>ME-22-0010: Creates a Behavioral Health Home (BHH) to address the needs of adults and children with significant mental health and co-occurring diagnoses (approved 2/9/23, effective 7/1/22)</p> <p>ME-23-0014-BHH: Updates the reimbursement plan pages to identify two distinct per member per month (PMPM) rates: one for children and one for adults. This was due to in part a rate study performed by a contracted vendor for the MaineCare Rate System Reform codification (approved 6/20/23, effective 1/1/23)</p>
Maine	SUD	<p>ME-17-0006: Creates a statewide opioid treatment health home model (approved 10/13/17, effective 10/1/17)</p> <p>ME-18-0032: Creates a tiered rate structure to reflect varying levels of treatment and alters staffing requirements (approved 8/7/19, effective 11/21/18)</p> <p>ME 22-0018: Adds Patient Navigator for MaineMOM (approved 5/27/22, effective 7/1/22)</p>
Maryland	SMI and SUD	<p>MD-13-15: Creates a statewide health home model for SMI and substance use disorder (SUD) treatment (approved 9/27/13, effective 10/1/13)</p> <p>MD-16-0001: Clarifies the monthly reimbursement rate for health homes (approved 6/23/16, effective 1/1/16)</p> <p>MD-18-0008: Increases payment rates for health homes (approved 10/16/18, effective 7/1/18)</p> <p>MD-19-0009: Increases payment rates for BHHs (approved 10/29/19, effective 7/1/19)</p> <p>MD-20-0006: Allows one-time reimbursement for the completion of each participants' initial intake and assessment necessary for enrollment into the health home (approved 11/3/20, effective 7/1/20)</p> <p>MD-21-0005: Increases the rates for Behavioral Health, Health Home Program by 3.5% beginning January 1, 2021 (approved 4/30/21, effective 1/1/21)</p> <p>MD-23-0017: Increases provider rates by 3% pursuant to its passed state Senate/House bill for its 2024 state budget (approved 12/8/23, effective 7/1/23)</p> <p>MD-24-0006: Increases reimbursement rates for Behavioral Health, Health Homes by 8% (approved 4/9/24, effective 1/1/24)</p>
Michigan	SMI/SED	<p>MI-14-0008: Creates a SMI health home model in two counties (approved 12/11/14, effective 7/1/14)</p> <p>MI-16-1500: Makes technical corrections (approved 3/15/17, effective 10/1/16)</p> <p>MI-20-1500: Expands BHHs by add new qualifying diagnoses, operational components, and new geographic areas (approved 9/9/20, effective 10/1/20)</p>
Michigan	Chronic conditions	<p>MI-15-2000: Creates a chronic conditions health home model in 21 counties (approved 3/4/16, effective, 7/1/16)</p>

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Michigan	SUD	<p>MI-18-1500: Creates an opioid treatment health home model in 21 counties (approved 10/3/18, effective 10/1/18)</p> <p>MI-20-1501: Expands the opioid health home model to an additional 18 counties (approved 9/9/20, effective 10/1/20)</p> <p>MI-21-1500: Expands the opioid health home model to an additional nine counties (approved 11/2/21, effective 10/1/21)</p> <p>MI-22-1500: Expands the opioid health home model to an additional five counties (approved 4/1/22, effective 4/1/22)</p> <p>MI-22-1501: Expands the opioid health home model to an additional 27 counties; for payments made to health home providers for health home participants who newly qualify based on the health home program's increased geographical coverage under this amendment, a Federal Medical Assistance Percentage (FMAP) rate of 90% applies to such payments for the period 10/1/22 to 9/30/24 (approved 10/26/22, effective 10/1/22)</p> <p>MI-23-1500: Expands the opioid health home model to an additional 20 counties; for payments made to health home providers for health homes participants who newly qualify based on the health home program's increased geographical coverage under this amendment, a FMAP rate of 90% applies to such payments for the period 5/1/23 to 3/31/25 (approved 4/3/23, effective 5/1/23)</p>
Minnesota	SMI/SED	<p>MN-15-0004: Creates BHHs for adults with SMI and children and youth experiencing serious emotional disturbance (SED) (approved 3/21/16, effective 7/1/16)</p> <p>MN-16-0002: Expands coverage of Medicaid services provided via telemedicine (approved 6/21/16, effective 1/1/16)</p> <p>MN-16-0011: Provides reimbursement to Federally Qualified Health Centers (FQHCs) and rural health clinics for BHH services, and makes a technical revision to Alternative Payment Method I to reimburse for BHH services (approved 5/9/17, effective 7/1/16)</p> <p>MN-16-0012: Makes technical corrections (approved 1/9/17, effective 7/1/16)</p> <p>MN-19-0015: Allows for a community health worker to serve in the role of systems navigator on BHH services team, and allows for BHH services to begin following a diagnosis of SMI/SED (approved 10/1/19, effective 12/10/19)</p> <p>MN-22-0036: Adds conforming updates in state law, including commissioner authority to grant variance of BHH service provider requirements; clarification of provider requirements and expectations; corrects the list of qualified positions for a Qualified Health Home Specialist; and adds requirement for BHH providers to notify the contact designated by an enrollee's managed care plan within 30 days of the start of BHH services (approved 2/3/23, effective 10/1/22)</p> <p>MN-24-0008: Increases reimbursement rate by 3% (approved 4/16/24, effective 1/1/24)</p>
Missouri	Chronic conditions	<p>MO-11-15: Creates a statewide chronic medical conditions health home model (approved 12/22/11, effective 1/1/12)</p> <p>MO-16-0002: Adds mental health conditions and SUD as qualifying conditions for health home participants (approved 6/21/16, effective 4/1/16)</p> <p>MO-16-0007: Adds additional chronic care conditions as qualifying conditions for community mental health-centered (CMHC) health homes and makes data conversion from the Medicaid Model Data Lab (approved 12/20/16, effective 6/1/16)</p> <p>MO-19-0003: Increases conditions covered under the state health home model (approved 8/15/19, effective 9/1/19)</p>
Missouri	I/DD	<p>MO-24-0005: Creates a statewide Developmental Disabilities Health Home (DD Health Home) for individuals served through the Missouri Department of Mental Health, Division of DD, who have a qualifying chronic health condition, have or are at risk of developing another condition, and are eligible for Division of DD services (approved 4/29/24, effective 7/1/24)</p>
Missouri	SMI	<p>MO-11-0011: Creates a statewide SMI health home model (approved 10/20/11, effective 1/1/12)</p> <p>MO-16-0007: Makes the data conversion from the Medicaid Model Data Lab and adds additional chronic conditions as qualifying conditions for community mental health-centered health homes (approved 12/20/16, effective 6/1/16)</p> <p>MO-19-0017: Adds a 1.5% rate increase to PMPM for CMHC Health Homes (approved 11/13/19, effective 7/1/19)</p> <p>MO-19-0020: Adds a 1.5% rate increase to PMPM for Primary Care Health Homes (approved 11/13/19, effective 7/1/19)</p>

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New Jersey	SMI (adults)	<p>NJ-14-0005: Creates a BHH for adults in Bergen County (approved 3/12/15, effective 7/1/14)</p> <p>NJ-14-0014: Creates a BHH for adults in Mercer County (approved 8/12/15, effective 10/1/14)</p> <p>NJ-16-0001: Expands BHHs for adults in Atlantic, Cape May, and Monmouth counties (approved 5/12/16, effective 4/1/16)</p>
New Jersey	SED (children)	<p>NJ-14-0006: Creates a BHH for children under age 21 in Bergen County (approved 3/12/15, effective 7/1/14)</p> <p>NJ-14-0015: Creates a BHH for children under age 21 in Mercer County (approved 8/12/15, effective 10/1/14)</p> <p>NJ-16-0002: Expands BHHS for children under age 21 in Atlantic, Cape May, and Monmouth counties (approved 5/12/16, effective 1/1/16)</p>
New Mexico	SMI/SED	<p>NM-15-0014: Creates BHHs in two counties (approved 3/21/16, effective 4/1/16)</p> <p>NM-18-0002: Expands BHHs to eight additional counties with seven providers, one of which will be a Tribal Health Home. Will also pilot a high-fidelity wraparound (HFW) model with two providers for children/adolescents (approved 7/3/18, effective 4/1/18)</p> <p>NM-23-0008: Removes the HFW language from the health home SPA since it will now be a part of a new 1115 demonstration to prevent duplication of services (approved 8/15/23, effective 6/30/23)</p>
New York	Chronic conditions and SMI	<p>NY-11-56: Creates a chronic medical conditions and SMI health home model for high-cost, high-need enrollees in 10 counties (approved 2/3/12, effective 1/1/12)</p> <p>NY-12-10: Phase II expands health homes to 13 additional counties (approved 12/4/12, effective 4/1/12)</p> <p>NY-12-11: Phase III expands health homes to another 39 counties (approved 12/4/12, effective 7/1/12)</p> <p>NY-13-18: Eliminates the proposed blended rate for targeted case management (TCM) programs converting to health homes and continues the full TCM rate for two years (approved 6/24/13, effective 2/14/13)</p> <p>NY-13-63: Amends the payment methodology for case management programs that have become health homes (approved 9/19/14, effective 1/1/14)</p> <p>NY-14-0016: Adds distributions from New York's 1115 demonstration waiver to health home payment rates (approved 3/10/15, effective 8/1/14)</p> <p>NY-15-0002: Extends the legacy rates for health home that formerly provided TCM services (approved 3/2/16, effective 1/1/16)</p> <p>NY-15-0020: Adds health home eligibility criteria for children with complex trauma (approved 4/7/16, effective 10/1/16)</p> <p>NY-16-0034: Continues reimbursement of converted TCM providers at the existing Health Home Legacy rate from September 1, 2016, to November 30, 2016 (approved 12/22/16, effective 9/1/16)</p> <p>NY-17-0053: Implements a budget modification for 2017–2018 that reduces the case finding payment and modifies the claiming period for case finding (approved 3/23/18, effective 10/1/17)</p> <p>NY-18-0051: Changes payment approach for children's health homes (approved 8/13/18, effective 6/1/18)</p> <p>NY-19-0007: Creates a transitional health home payment for providers transitioning from providing eligible children with 1915(c) waiver services to providing eligible children with health home services (approved 1/16/19, effective 1/1/19)</p> <p>NY-20-0034: Eliminates the separate PMPM outreach payment to health homes serving adults and health homes serving children (approved 9/9/20, effective 7/1/20)</p> <p>NY-20-0054: Implements program improvements and efficiencies to reflect historical utilization and efficiencies related to the transition to Care Coordination Organizations/Health Homes (approved 12/22/20, effective 7/1/20)</p> <p>NY 21-0026: Add sickle cell as a targeted condition (approved 3/24/22, effective 9/1/21)</p> <p>NY-22-0072: Updates health home rates to reflect a 1% across the board rate increase for health home serving adults and children, and adjusts Health Home Plus rates statewide to reflect a 5.4% cost of living adjustment (approved 9/16/22, effective 5/1/22)</p> <p>NY-22-0088: Adds an assessment fee to the health home program to ensure that any child who may be eligible for home and community-based services (HCBS) under the Children's Waiver, demonstration, or state plan authority will be eligible to receive an HCBS assessment under the health home program (approved 3/7/23, effective 10/1/22)</p> <p>NY-23-0061: Updates to health homes plus rates to reflect 4% cost-of-living adjustment (approved 9/12/23, effective 4/1/23)</p>

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New York	Chronic conditions (I/DD)	<p>NY-17-0025: Creates a statewide health home for individuals with I/DD (approved 4/9/18, effective 7/1/18)</p> <p>NY-22-0073: Provides a 5.4% cost of living adjustment for Care Coordination Organizations/Health Homes for individuals with I/DDs (approved 9/16/22, effective 4/1/22)</p> <p>NY-23-0062: Reflects a 4.0% cost of living adjustment for Care Coordination Organization/Health Home rates for individuals with I/DD (approved 9/12/23, effective 4/1/23)</p>
North Carolina	Chronic conditions (I/DD, TBI, SUD, SMI/SED)	<p>NC-22-0024: Creates a new health home program (approved 6/28/23, effective 7/1/23)</p>
Rhode Island	Chronic conditions and SMI	<p>RI-11-0006: Creates a statewide health home model for children and youth with special health care needs (approved 11/23/11, effective 10/1/11)</p> <p>RI-16-001: Implements payment rate and methodology changes for health home services (approved 1/13/17, effective 1/1/16)</p> <p>RI-18-0009: Grants authority to offer health home services (i.e., Comprehensive Evaluation, Diagnosis, Assessment, Referral, and Re-Evaluation [CEDARR] services as a managed care benefit (approved 10/17/18, effective 7/1/18)</p> <p>RI-23-0010: Implements a change in payment rate methodology for Cedar Family Centers (approved 12/11/23, effective 7/1/23)</p>
Rhode Island	SMI	<p>RI-11-0007: Creates a statewide BHH for adults (approved 11/23/11, effective 10/1/11)</p> <p>RI-16-002: Adds health home services as an in-plan benefit for Medicaid managed care organizations (approved 1/12/17, effective 1/1/16)</p> <p>RI-18-006: Removes payment withhold from health home payment methodology (approved 9/27/18, effective 6/1/18)</p>
Rhode Island	SUD	<p>RI-13-011: Creates a statewide opioid treatment health home model (approved 11/6/13, effective 7/1/13)</p> <p>RI-16-006: Grants authority to move opioid treatment health home services in-network for Medicaid managed care organizations (approved 12/9/16, effective 7/1/16)</p> <p>RI-21-0025: Removed assertive community treatment services and providers from the health home model (approved 7/29/22, effective 12/1/21)</p>
South Dakota	Chronic conditions and SMI	<p>SD-13-0008: Creates a statewide chronic medical conditions and SMI health home model (approved 11/21/13, effective 7/2/13)</p> <p>SD-19-0003: Implements supplemental incentive payments to health homes (approved 4/30/19, effective 1/1/19)</p> <p>SD-20-0008: Implements a 2.0% inflationary increase to the health home PMPM payment (approved 10/21/20, effective 7/1/20)</p> <p>SD-22-0009: Codifies a 6.0% inflationary increase in appropriations resulting from recently passed state legislation (approved 10/27/22, effective 07/7/22)</p>
Tennessee	SMI	<p>TN-16-0004: Creates a statewide SMI health home model (approved 4/28/17, effective 1/1/17)</p>
Vermont	SUD	<p>VT-13-001: Creates an opioid treatment health home model in nine counties (approved 3/4/14, effective 7/1/13)</p> <p>VT-14-007: Expands the opioid treatment health home model to five additional counties (approved 4/10/14, effective 1/1/14)</p>

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Washington	Chronic conditions	<p>WA-13-08: Creates a chronic medical conditions health home model in 14 counties (Phase I) (approved 6/28/13, effective 7/1/13)</p> <p>WA-13-17: Creates a chronic medical conditions health home model in 23 additional counties (Phase II) (approved 12/11/13, effective 10/1/13)</p> <p>WA-15-0011: Removes payment withholds and makes technical amendments (approved 6/11/15, effective 1/1/15)</p> <p>WA-16-0026: Adds King and Snohomish Counties to Washington's health home program (approved 3/30/17, effective 4/1/17)</p> <p>WA-18-0028: Increases provider payments and reduces the performance incentive payment (approved 11/29/18, effective 8/8/18)</p> <p>WA-20-0031: Updates the payment methodology for health home services during the period of the Presidential and Secretarial emergency declarations related to the COVID-19 outbreak (approved 11/20/20, effective 7/1/20)</p> <p>WA-23-0027: Updates SPA language regarding appropriate provider types to reflect current Care Coordination Organizations and will modify language to better align with current program policy, and updates rates for the health home program (approved 10/30/23, effective 7/1/23)</p>
West Virginia	SMI	<p>WV-14-0009: Creates a SMI health home model in six counties (approved 1/27/15, effective 7/1/14)</p> <p>WV-16-0007: Expands the SMI health home model statewide (approved 5/4/17, effective 4/1/17)</p>
West Virginia	Chronic conditions	<p>WV-16-0008: Creates a chronic medical conditions health home model in 14 counties (approved 5/4/17, effective 4/1/17)</p>
Wisconsin	HIV/AIDS	<p>WI-12-008: Creates a HIV/AIDS health home model in four counties (approved 1/29/13, effective 10/1/12)</p>
Wisconsin	SUD	<p>WI-21-0012: Creates a SUD health home model in eight counties and four tribal territories (approved 9/21/23, effective 7/1/21)</p> <p>WI-22-0013: Revises the maximum fee rates for SUD health home rates: two new billing tiers have been added to the PMPM reimbursement rate that providers receive for administering the six core health home services. The billing requirements to qualify for tiers of reimbursement will no longer be determined by direct time (time spent with the member in person or via telehealth) but rather by delivery of core service time (approved 9/15/22, effective 5/1/22)</p> <p>WI-23-0021: Expands SUD health home services to an additional seven counties and one tribal territory (approved 1/18/24, effective 10/1/23)</p>

Acronym key: BHH, behavioral health home; CMHC, community mental health center; FQHC, federally qualified health center; I/DD, intellectual/developmental disabilities; PMPM, per member per month; SED, serious emotional disturbance; SMI, serious mental illness; SUD, substance use disorder; TBI, traumatic brain injury.

¹ Alabama, California, Delaware, Illinois, Iowa, Ohio, Oklahoma, and Oregon have terminated their Medicaid health home SPAs and no longer provide health home services.