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**State/Territory Name: North Dakota**

**State Plan Amendment (SPA) #: 21-0017**

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  
601 E. 12th Street, Suite 355  
Kansas City, MO 64106



**Medicaid & CHIP Operations Group**

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November 15, 2021

Caprice Knapp, Medicaid Director  
Division of Medical Services  
North Dakota Department of Human Services  
600 East Boulevard Avenue, Dept. 325  
Bismarck, ND 58505-0250

RE: North Dakota State Plan Amendment (SPA) 21-0017

Dear Ms. Knapp:

We have reviewed the State Plan Amendment (SPA) submitted under transmittal number 21-0017. This SPA amends the State Plan to update pages related to cooperative arrangements with the State vocational rehabilitative agency and Title V grantee.

Please be informed that this SPA was approved on November 15, 2021, with an effective date of October 1, 2021. Enclosed are the CMS-179 and SPA pages.



Should you have any questions about this amendment, please contact Curtis Volesky at (303) 844-7033.

Sincerely,

 Digitally signed by James G.  
Scott -S  
Date: 2021.11.15 12:00:00  
'06'00'

James Scott, Director  
Division of Program Operations

cc: Krista Fremming, [krfremming@nd.gov](mailto:krfremming@nd.gov)  
Stacey Koehly, [skoehly@nd.gov](mailto:skoehly@nd.gov)  
LeeAnn Thiel, [lthiel@nd.gov](mailto:lthiel@nd.gov)

<b>TRANSMITTAL AND NOTICE OF APPROVAL OF STATE PLAN MATERIAL</b>	1. TRANSMITTAL NUMBER: <b>21-0017</b>	2. STATE <b>North Dakota</b>
	3. PROGRAM IDENTIFICATION: <b>TITLE XIX OF THE SOCIAL SECURITY ACT (MEDICAID)</b>	
<b>FOR: CENTERS FOR MEDICARE AND MEDICAID SERVICES</b>	4. PROPOSED EFFECTIVE DATE <b>October 1, 2021</b>	
TO: REGIONAL ADMINISTRATOR CENTERS FOR MEDICARE AND MEDICAID SERVICES  DEPARTMENT OF HEALTH AND HUMAN SERVICES		
5. TYPE OF PLAN MATERIAL (Check One):  <input type="checkbox"/> NEW STATE PLAN <input type="checkbox"/> AMENDMENT TO BE CONSIDERED AS NEW PLAN <input checked="" type="checkbox"/> <b>AMENDMENT</b> COMPLETE BLOCKS 6 THRU 10 IF THIS IS AN AMENDMENT (Separate Transmittal for each amendment)		
6. FEDERAL STATUTE/REGULATION CITATION: <b>1902 of the Act and 42 CFR 431.615</b>	7. FEDERAL BUDGET IMPACT: a. FFY <u>2022</u> \$ <u>0</u> b. FFY <u>2023</u> \$ <u>0</u>	
8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT: Page 52 Attachment 4.16-A (Pages 1-3)	9. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable): Page 52 (TN #78-04) Attachment 4.16-A (Pages 1-3, and 7-8) (TN No. #74-12)	
10. SUBJECT OF AMENDMENT: <b>Amends the State Plan to update pages related to cooperative arrangements with the State vocational rehabilitative agency and Title V grantee.</b>		
11. GOVERNOR'S REVIEW (Check One): <input type="checkbox"/> GOVERNOR'S OFFICE REPORTED NO COMMENT <input checked="" type="checkbox"/> OTHER, AS SPECIFIED: <input type="checkbox"/> COMMENTS OF GOVERNOR'S OFFICE ENCLOSED <u>Caprice Knapp, Director,</u> <input type="checkbox"/> NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL <u>Medical Services Division</u>		
12. SIGNATURE OF STATE AGENCY OFFICIAL: 	16. RETURN TO: <b>Caprice Knapp, Director Medical Services Division ND Department of Human Services 600 East Boulevard Avenue Dept 325 Bismarck ND 58505-0250</b>	
13. TYPED NAME: <b>Caprice Knapp</b>		
14. TITLE: <b>Director, Medical Services Division</b>		
15. DATE SUBMITTED: <b>November 10, 2021</b>		
<b>FOR REGIONAL OFFICE USE ONLY</b>		
17. DATE RECEIVED: November 10, 2021	18. DATE APPROVED: November 15, 2021	
PLAN APPROVED – ONE COPY ATTACHED		
19. EFFECTIVE DATE OF APPROVED MATERIAL: October 1, 2021	20. SIGNATURE OF REGIONAL OFFICIAL:  <small>Digitally signed by James G. Scott -S Date: 2021.11.15 12:00:41 -06'00'</small>	
21. TYPED NAME: James Scott	22. TITLE: Director, Division of Program Operations	
23. REMARKS:		

State/Territory: North Dakota

Citation

42 CFR 431.615(c)  
AT-78-90

4.16 Relations with State Health and Vocational Rehabilitation Agencies and Title V Grantees

The Medicaid agency has cooperative arrangements with State health and vocational rehabilitation agencies and with title V grantees, that meet the requirements of 42 CFR 431.615.

**Attachment 4.16-A** describes the cooperative arrangements with the State health and vocational rehabilitation agencies and with the Title V grantee.

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TN No. 21-0017  
Supersedes  
TN No. 78-04

Approval Date: November 15, 2021      Effective Date: October 1, 2021

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

STATE: North Dakota**COOPERATIVE AGREEMENT WITH THE STATE VOCATIONAL REHABILITATION AGENCY AND TITLE V GRANTEE**

The Medical Services Division of the North Dakota Department of Human Services has an agreement with the Vocational Rehabilitation Division of the North Dakota Department of Human Services. This agreement also includes the Aging Services and Developmental Disabilities Divisions of the North Dakota Department of Human Services as those Division administer the Medicaid 1915c Waivers.

The Medical Services Division of the North Dakota Department of Human Services has an interagency agreement with the North Dakota Department of Health, Maternal and Child Health (Title V Grantee).

The agreements specify:

- the mutual objectives and responsibilities for each party to the arrangement;
- the services each party offers and in what circumstances;
- the cooperative and collaborative relationships at the State level;
- the kinds of services to be provided by local agencies;
- reciprocal referrals;
- coordinating plans for health services provided or arranged for members;
- payment or reimbursement;
- exchange of reports of services furnished to members;
- periodic review and joint planning for changes in the agreements;
- continuous liaison between the parties, including designation of liaison staff; and
- joint evaluation of policies that affect the cooperative work of the parties.

The above-mentioned agreements are on file at the North Dakota Medicaid office and are available for review.

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TN. 21-0017  
Supersedes  
TN No. 74-12

Approval Date: November 15, 2021 Effective Date: October 1, 2021

VACANT

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TN. 21-0017  
Supersedes  
TN No. 74-12

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