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State/Territory Name: District of Columbia

State Plan Amendment (SPA) #: 15-0011

This file contains the following documents in the order listed:

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

DEPARTMENT OF HEALTH & HUMAN SERVICES
Centers for Medicare & Medicaid Services
150 S. Independence Mall West
Suite 216, The Public Ledger Building
Philadelphia, Pennsylvania 19106-3499



Region III/Division of Medicaid and Children's Health Operations

SWIFT # 120920154004

February 17, 2016

Claudia Schlosberg, J.D.
Senior Deputy Director/State Medicaid Director
Department of Health Care Finance
441 4th Street, N.W., Suite 900 South
Washington, D.C. 20001

Dear Ms. Schlosberg:

I am writing to inform you that we have reviewed the District of Columbia's State Plan Amendment (SPA) 15-011 entitled, Primary Care Provider Rate Increase Permanent Extension. This amendment will permanently extend existing provider increases for certain primary care services provided by qualified physicians. In addition, this SPA would extend the rate increase for the same services when provided by psychiatrists, obstetricians/gynecologists, and advanced practice registered nurses.

We are pleased to inform you that, after extensive review, this amendment is approved; its effective date is January 1, 2016.

A copy of the approved SPA pages and signed CMS-179 form are included under this cover.

If you have any further questions regarding this SPA, please contact Alice Robinson Penn at 215-861-4261 or by email at Alice.RobinsonPenn@cms.hhs.gov.

Sincerely,

A solid black rectangular box used to redact the signature of Francis McCullough.

Francis McCullough
Associate Regional Administrator

Enclosures

cc: M. Diane Fields, DHCF

TRANSMITTAL AND NOTICE OF APPROVAL OF STATE PLAN MATERIAL FOR: CENTERS FOR MEDICARE & MEDICAID SERVICES	1. TRANSMITTAL NUMBER: 15-011	2. STATE District of Columbia
	3. PROGRAM IDENTIFICATION: Title XIX of the Social Security Act	
TO: Regional Administrator Centers for Medicare & Medicaid Services Department of Health and Human Services	4. PROPOSED EFFECTIVE DATE January 1, 2016	

5. TYPE OF PLAN MATERIAL (Check One):

☐ NEW STATE PLAN ☐ AMENDMENT TO BE CONSIDERED AS NEW PLAN ☒ AMENDMENT

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


6. FEDERAL STATUTE/REGULATION CITATION 42 C.F.R. 435.112 Section 1902(A)(52) Section 1925 of the Act	7. FEDERAL BUDGET IMPACT a. FFY 16 \$ 630,000 (Jan-Sept) b. FFY 17 \$ 855,000
8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT Attachment 4.19B, pp. 4-4a Supplement 3 to Attachment 4.19B pp. 1-2	9. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable) Attachment 4.19B, pp. 4-4a Supplement 3 to Attachment 4.19B pp. 1-2

10. SUBJECT OF AMENDMENT:


Primary Care Provider Rate Increase Permanent Extension

11. GOVERNOR'S REVIEW (Check One)

☐ GOVERNOR'S OFFICE REPORTED NO COMMENT ☒ OTHER, AS SPECIFIED: PR21-0393
☐ COMMENTS OF GOVERNOR'S OFFICE ENCLOSED
☐ NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL

 13. TYPED NAME Claudia Schlosberg, JD 14. TITLE Senior Deputy Director/State Medicaid Director 15. DATE SUBMITTED December 2, 2015	16. RETURN TO Claudia Schlosberg, J.D. Senior Deputy Director/State Medicaid Director Department of Health Care Finance 441 4 th St. N.W., Suite 900 South Washington, DC 20001
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FOR REGIONAL OFFICE USE ONLY

17. DATE RECEIVED December 2, 2015	18. DATE APPROVED February 17, 2016
PLAN APPROVED - ONE COPY ATTACHED	
19. EFFECTIVE DATE OF APPROVED MATERIAL January 1, 2016	20. SIGNATURE OF REGIONAL OFFICIAL 
21. TYPED NAME Francis McCullough	22. TITLE Associate Regional Administrator
23. REMARKS	

- (d) Diabetic preparations (e.g., Insulin, syringes, etc.);
- (e) Pediatric, prenatal and geriatric vitamin formulations;
- (f) Family planning drugs and supplies; and
- (g) Senna extract, single dose preparations when required for diagnostic radiological procedures performed under the supervision of a physician.

6. Physician and Specialty Services

- (a) For service where the procedure code falls within the Medicare (Title XVIII) fee schedule, payment will be the lesser of the Medicare rate; the actual charges to the general public; or the rate listed in DHCF's fee schedule. Effective January 1, 2011, DHCF will use the Medicare rates to determine the Medicaid rates for services on or after that date. Beginning January 1, 2011, physician and specialty services rates will be reimbursed at eighty percent (80%) of the Medicare rate. All rates will be set on January 1 and are effective for services provided on or after that date. Except as otherwise noted in the Plan, State developed fee schedule rates are the same for both governmental and private individual practitioners and the fee schedule and any annual/periodic adjustments to the fee schedule are published in www.dc-medicaid.com. Effective January 1, 2015 through September 30, 2015, the state reimburses for services provided by physicians with a primary specialty designation of family medicine, pediatric medicine or internal medicine using the enhanced rates in effect pursuant to the requirements of 42 CFR 447.400(a).

Effective January 1, 2016, the state reimburses for specified services provided by qualified physicians and advanced practice registered nurses (APRNs) with a primary specialty designation of family medicine, pediatric medicine, psychiatry, obstetrics and gynecology or internal medicine utilizing Evaluation and Management (E&M) Codes and Vaccine Administration Codes authorized in Supplement 3 to Attachment 4.19B. Both physicians and APRNs shall deliver services that are predicated upon their scopes of practice and are in accordance with rules and regulations promulgated by the District of Columbia Health Occupations Board.

- (b) Effective January 1, 2011, for services where the procedure code does not fall within the Medicare fee schedule, DHCF will apply the lowest of the following: (1) usual and customary charges; (2) rates paid by the surrounding states of Maryland and Virginia; or (3) rates set by national benchmark compendiums when available.

7. Nursing Home Services
(See attachment 4.19D)

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

STATE: District of Columbia

Reimbursement for Increased Primary Care Service Payment

The state reimburses for specified services provided by qualified physicians and advanced practice registered nurses (APRNs) with a primary specialty designation of family medicine, pediatric medicine, psychiatry, obstetrics and gynecology or internal medicine. Both physicians and APRNs shall deliver services that are predicated upon their scopes of practice and are in accordance with rules and regulations promulgated by the District of Columbia Health Occupations Board. The state will pay for these services using the Medicare fee schedule rates in effect on or after January 1, 2016.

☒ The rates do not reflect site of service adjustments, but reimburse at the Medicare rate applicable to the office setting.

A. ☐ ☐ Method of Payment

☒ The state has adjusted its fee schedule to make payment at the higher rate for each E&M and vaccine administration code. The District will adopt rates on an annual basis.

B. Primary Care Services Affected by this Payment Methodology

☐ This payment applies to all Evaluation and Management (E&M) billing codes 99201 through 99499 except for the following:

☒ Evaluation and Management Codes: 99238, 99239, 99289, 99290, 99292, 99294, 99295, 99296, 99298, 99299, 99300, 99315, 99316, 99326, 99339, 99340, 99358, 99359, 99360, 99374, 99375, 99377, 99378, 99379, 99380, 99386, 99387, 99402, 99403, 99412, 99420, 99431, 99432, 99433, 99435, 99436, 99440, 99499; and Vaccine Administration Codes: 90460, 90465, 90466, 90467, 90468, 90473, and 90474.

C. Physician Services – Vaccine Administration

For services provided on or after January 1, 2016, the state reimburses vaccine administration services furnished by physicians meeting the requirements of 42 CFR 447.400(a) at the state regional maximum administration fee set by the Vaccines for Children (VFC) program.

D. Effective Date of Payment

a. E & M Services

This reimbursement methodology applies to services delivered on and after January 1, 2016. All rates are published on the Department of Health Care Finance's website at www.dhcf.dc.gov.

b. Vaccine Administration

This reimbursement methodology applies to services delivered on and after January 1, 2016. All rates are published on the Department of Health Care Finance's website www.dhcf.dc.gov.