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State/Territory Name: MN

State Plan Amendment (SPA) #: 17-0018

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
233 North Michigan Avenue, Suite 600
Chicago, Illinois 60601-5519



December 8, 2017

Marie Zimmerman, State Medicaid Director
Minnesota Department of Human Services
P.O. Box 64983
St. Paul, MN 55164-0983

Dear Ms. Zimmerman:

Enclosed for your records is an approved copy of the following State Plan Amendment:

Transmittal #17-0018 --Increases payment rates for dental services provided to children.

--Effective Date: July 1, 2017

--Approval Date: December 8, 2017

If you have any additional questions, please have a member of your staff contact Sandra Porter at (312) 353-8310 or via e-mail at Sandra.Porter@cms.hhs.gov.


Sincerely,

/s/

Ruth A. Hughes
Associate Regional Administrator
Division of Medicaid and Children's Health Operations

Enclosures

cc: Ann Berg, MDHS
 Sean Barrett, MDHS

TRANSMITTAL AND NOTICE OF APPROVAL OF STATE PLAN MATERIAL FOR: CENTER FOR MEDICARE & MEDICAID SERVICES		1. TRANSMITTAL NUMBER: 17-18	2. STATE Minnesota
		3. PROGRAM IDENTIFICATION: TITLE XIX OF THE SOCIAL SECURITY ACT (MEDICAID)	
TO: REGIONAL ADMINISTRATOR CENTER FOR MEDICARE & MEDICAID SERVICES DEPARTMENT OF HEALTH AND HUMAN SERVICES		4. PROPOSED EFFECTIVE DATE July 1, 2017	
5. TYPE OF PLAN MATERIAL (<i>Check One</i>): <input type="checkbox"/> NEW STATE PLAN <input type="checkbox"/> AMENDMENT TO BE CONSIDERED AS NEW PLAN <input checked="" type="checkbox"/> AMENDMENT COMPLETE BLOCKS 6 THRU 10 IF THIS IS AN AMENDMENT (<i>Separate Transmittal for each amendment</i>)			
6. FEDERAL STATUTE/REGULATION CITATION: 42 CFR §§440.100		7. FEDERAL BUDGET IMPACT (in thousands): FFY '17=\$150 (pen/ink change, SP, CMS) FFY '18 = \$850 FFY '19 = \$1,050	
8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT: Attachment 4.19-B, page 31c Attachment 4.19-B, Supplement 2, pages 16 – 17		9. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (<i>If Applicable</i>): Same	
10. SUBJECT OF AMENDMENT: Dental			
11. GOVERNOR'S REVIEW (<i>Check One</i>): <input checked="" type="checkbox"/> GOVERNOR'S OFFICE REPORTED NO COMMENT <input type="checkbox"/> OTHER, AS SPECIFIED: <input type="checkbox"/> COMMENTS OF GOVERNOR'S OFFICE ENCLOSED <input type="checkbox"/> NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL			
12. SIGNATURE OF STATE AGENCY OFFICIAL: 		16. RETURN TO: Sean Barrett Minnesota Department of Human Services Federal Relations Unit PO Box 64983 St. Paul, MN 55164-0983	
13. TYPED NAME: Ann Berg			
14. TITLE: Deputy Medicaid Director			
15. DATE SUBMITTED: September 26, 2017			
FOR REGIONAL OFFICE USE ONLY			
17. DATE RECEIVED: September 26, 2017		18. DATE APPROVED: December 8, 2017	
PLAN APPROVED – ONE COPY ATTACHED			
19. EFFECTIVE DATE OF APPROVED MATERIAL: July 1, 2017		20. SIGNATURE OF REGIONAL OFFICIAL: /s/	
21. TYPED NAME: Ruth A. Hughes		22. TITLE: Associate Regional Administrator	
23. REMARKS:			

STATE: MINNESOTA

ATTACHMENT 4.19-B

Effective: July 1, 2017

Page 31c

TN: 17-18

Approved: 12/8/17

Supersedes: 15-21 (13-23,12-25,11-19,11-15,10-24,07-12,07-18,06-14,04-15a,03-37)

10. Dental services (continued):

X-ray services are paid according to the dental services methodology listed above. Effective January 1, 2002, payment for x-ray services provided to recipients under age 21 are paid the lower of:

- 1) the submitted charge; or
- 2) 85% of the median charges submitted in 1999.

Diagnostic examinations are paid according to the dental services methodology listed above. Effective January 1, 2002, payment for diagnostic examinations provided to recipients under age 21 are paid the lower of:

- 1) the submitted charge; or
- 2) 85% of the median charges submitted in 1999.

Effective for services provided on or after October 1, 1999, **tooth sealants** and **fluoride treatments** are paid at the lower of:

- 1) submitted charge; or
- 2) 80% of the median charges submitted in 1997.

Effective January 1, 2000, the rate is increased by three percent.

Medical and surgical services (as defined by the Department) furnished by dentists are paid using the same methodology as item 5.a., Physicians' services.

Community health worker services educating patients to promote good oral health and self-management of dental conditions when supervised by a dentist are paid using the same methodology that applies to community health workers in item 5.a., Physicians' services.

The base rates as described in this item are adjusted by the following clauses of Supplement 2 of this Attachment:

~~X. Dental Services rate decrease 2011 (does not apply to state operated dental clinics)~~

cc. Supplemental payment for medical education

dd. Dental Services rate increase 2014

ii. Dental Services rate increase 2015

ll. Rate increase for dental services provided to children, effective July 1, 2017

D. MinnesotaCare Tax Rate Adjustment

STATE: MINNESOTA
Effective: July 1, 2017
TN: 17-18
Approved: 12/8/17
Supersedes: 15-22, 15-21

Supplement 2 to ATTACHMENT 4.19-B
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ii. Dental Services rate increase 2015

Effective for dental services provided by dental providers located outside of the seven-county metropolitan area on or after July 1, 2015, payment rates shall be increased by 9.65 percent from the rates in effect on June 30, 2015. This increase does not apply to state-operated dental clinics, federally qualified health centers, rural health centers, Indian Health Service, and tribal 638 facilities.

jj. Rate increase for miscellaneous services, effective July 1, 2015

Effective July 1, 2015, payment rates for the following services are increased 90 percent from the rates in effect on June 30, 2015, when provided by an essential community provider that was formerly a state hospital, and is now an outpatient hospital specializing in the treatment of cerebral palsy, spina bifida, epilepsy, closed head injuries, specialized orthopedic problems, and other disabling conditions:

- Outpatient hospital facility fees (Item 2.a)
- Medical supplies and durable medical equipment not subject to a volume purchase agreement (Item 7.c)
- Physical therapy (Item 11.a)
- Occupational therapy (Item 11.b)
- Speech pathology (Item 11.c)
- Prosthetics and orthotics (Item 12.c)

Payments made under this item are not limited by item H of this supplement.

kk. Ambulance services rate increase 2016

Effective for ambulance services provided on or after July 1, 2016, payment rates for services are increased by 5 percent for ambulance providers located within a municipality with a population of less than 1,000, or located outside the seven-county metro area and the cities of Duluth, Mankato, Moorhead, St. Cloud, and Rochester.

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Effective: July 1, 2017
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Supersedes: 16-14

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11. Rate increase for dental services provided to children, effective July 1, 2017

Effective for dental services provided on or after July 1, 2017, to recipients under 21 years of age by dental providers, payment rates shall be increased by 23.8 percent from the payment rates in effect on June 30, 2017. This increase does not apply to state-operated dental clinics, federally qualified health centers, rural health centers, Indian Health Service, and tribal 638 facilities.