

## **Table of Contents**

**State/Territory Name: PENNSYLVANIA**

**State Plan Amendment (SPA) #: PA-14-002**

This file contains the following documents in the order listed:

- 1) Approval Letter
- 2) Summary Form (with 179-like data)
- 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**

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SWIFT # 032420144093

**MAY 27 2014**

Beverly Mackereth  
Secretary of Public Welfare  
Department of Public Welfare  
Room 333, Health & Welfare Building  
P.O. Box 2675  
Harrisburg, Pennsylvania 17105-2675

Dear Ms. Mackereth:

The Centers for Medicare & Medicaid Services (CMS) has completed its review of Pennsylvania's State Plan Amendment (SPA) PA-14-002. We are pleased to inform you that SPA PA-14-002 has been approved. The effective date of SPA PA-14-002 is January 1, 2014.

PA-14-002 proposes to set forth the methodology and standards for establishing the 2014 increased primary care service payments in accordance with Section 1202 of the Affordable Care Act and updates the product codes identified on Pennsylvania's Vaccine Product Code Crosswalk.

Enclosed, please find the signed CMS 179 form, and the approved SPA pages.

If you have any questions concerning this letter, please contact Mary McKeon at (215) 861-4181.

Sincerely,

/s/

  
Francis McKeon  
Associate Regional Administrator

Enclosure



**TRANSMITTAL AND NOTICE OF APPROVAL OF  
STATE PLAN MATERIAL**

**FOR: HEALTH CARE FINANCING ADMINISTRATION**

TO: REGIONAL ADMINISTRATOR  
HEALTH CARE FINANCING ADMINISTRATION  
DEPARTMENT OF HEALTH AND HUMAN SERVICES

1. TRANSMITTAL NUMBER:  
14-002

2. STATE  
Pennsylvania

3. PROGRAM IDENTIFICATION: TITLE XIX OF THE  
SOCIAL SECURITY ACT (MEDICAID)

4. PROPOSED EFFECTIVE DATES  
January 1, 2014

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 CFR 447.400, 447.405, 447.410, 447.415

7. FEDERAL BUDGET IMPACT:  
a. FFY 2014 \$46,334,512  
b. FFY 2015 \$11,842,320

8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT:

Page 4c, Attachment 4.19B  
Page 4d, Attachment 4.19B  
Page 4f, Attachment 4.19B

9. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION  
OR ATTACHMENT (If Applicable):

Page 4c, Attachment 4.19B  
Page 4d, Attachment 4.19B  
Page 4f, Attachment 4.19B

10. SUBJECT OF AMENDMENT:

Section 1202 Increased Primary Care Payments for CY 2014

11. 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: Review and  
approval authority has been delegated  
to the Department of Public Welfare

12. SIGNATURE OF STATE AGENCY OFFICIAL:

/s/

13. TYPED NAME:

Beverly D. Mackereth

14. TITLE:

Secretary of Public Welfare

15. DATE SUBMITTED:

MAR 21 2014

16. RETURN TO:

Commonwealth of Pennsylvania  
Department of Public Welfare  
Office of Medical Assistance Programs  
Bureau of Policy, Analysis and Planning  
P.O. Box 8046  
Harrisburg, Pa. 17105

**FOR REGIONAL OFFICE USE ONLY**

17. DATE RECEIVED:

JAN 01 2014

18. DATE APPROVED:

MAY 27 2014

PLAN APPROVED - ONE COPY ATTACHED

19. EFFECTIVE DATE OF APPROVED MATERIAL:

JAN 01 2014

20. SIGNATURE OF REGIONAL OFFICIAL:

/s/

21. TYPED NAME:

22. TITLE:

23. REMARKS:



STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT  
STATE: COMMONWEALTH OF PENNSYLVANIA

ATTACHMENT 4.19B  
Page 4d

☒ The State did not make payment as of July 1, 2009 for the following codes and will not make payment for those codes under this SPA (specify codes).

90460	90461	90465	90466	90467
90468	90471	90472	90473	90474
99217	99218	99219	99220	99224
99225	99226	99234	99235	99236
99288	99339	99340	99344	99345
99354	99355	99356	99357	99358
99359	99363	99364	99366	99367
99368	99374	99375	99377	99378
99379	99380	99401	99402	99403
99404	99406	99408	99409	99411
99412	99420	99429	99441	99442
99443	99444	99450	99455	99456
99466	99467	99485	99486	99487
99488	99489	99495	99496	99499

☒ The state will make payment under this SPA for the following codes which have been added to the fee schedule since July 1, 2009 (specify code and date added).

	Procedure code	Effective Date		Procedure code	Effective Date
1	99477	7/13/2009	20	90636	8/30/2010
2	99315	6/14/2010	21	90650	8/30/2010
3	99316	6/14/2010	22	90654	12/15/2012
4	99460	6/14/2010	23	90670	8/30/2010
5	99461	6/14/2010	24	90681	7/13/2009
6	99462	6/14/2010	25	90696	7/13/2009
7	99463	6/14/2010	26	90743	8/30/2010
8	99465	6/14/2010	27	90672	6/17/2013
9	99468	6/14/2010	28	90686	6/17/2013
10	99469	6/14/2010	29	90661	5/28/2013
11	99471	6/14/2010	30	90685	1/06/2014
12	99472	6/14/2010	31	90688	1/06/2014
13	99475	6/14/2010			
14	99476	6/14/2010			
15	99478	6/14/2010			
16	99479	6/14/2010			
17	99480	6/14/2010			
18	99464	1/03/2011			
19	99407	6/25/2012			

TN# 14-002  
Supersedes  
TN 13-004

Approval Date **MAY 27 2014**

Effective Date January 1, 2014

**Pennsylvania Vaccine Product Code to Vaccine Administration Code Crosswalk**

VACCINE PRODUCT CODE	NATIONAL VACCINE ADMINISTRATION CODE *	RATE
90585	90460	\$23.14
90632	90460	\$23.14
90633	90460	\$23.14
90634	90460	\$23.14
90636	90460	\$23.14
90645	90460	\$23.14
90646	90460	\$23.14
90647	90460	\$23.14
90648	90460	\$23.14
90649	90460	\$23.14
90650	90460	\$23.14
90654	90460	\$23.14
90655	90460	\$23.14
90656	90460	\$23.14
90657	90460	\$23.14
90658	90460	\$23.14
90660	90460	\$23.14
90661	90460	\$23.14
90669	90460	\$23.14
90670	90460	\$23.14
90672	90460	\$23.14
90675	90460	\$23.14
90676	90460	\$23.14
90680	90460	\$23.14
90681	90460	\$23.14
90685	90460	\$23.14
90686	90460	\$23.14
90688	90460	\$23.14
90690	90460	\$23.14
90691	90460	\$23.14
90692	90460	\$23.14
90693	90460	\$23.14
90696	90460	\$23.14
90698	90460	\$23.14
90700	90460	\$23.14

VACCINE PRODUCT CODE	NATIONAL VACCINE ADMINISTRATION CODE *	RATE
90702	90460	\$23.14
90703	90460	\$23.14
90704	90460	\$23.14
90705	90460	\$23.14
90706	90460	\$23.14
90707	90460	\$23.14
90708	90460	\$23.14
90710	90460	\$23.14
90713	90460	\$23.14
90714	90460	\$23.14
90715	90460	\$23.14
90716	90460	\$23.14
90717	90460	\$23.14
90719	90460	\$23.14
90721	90460	\$23.14
90723	90460	\$23.14
90725	90460	\$23.14
90727	90460	\$23.14
90732	90460	\$23.14
90733	90460	\$23.14
90734	90460	\$23.14
90735	90460	\$23.14
90736	90460	\$23.14
90743	90460	\$23.14
90744	90460	\$23.14
90746	90460	\$23.14
90747	90460	\$23.14
90748	90460	\$23.14
90749	90460	\$23.14
G0008	90460	\$23.14
G0009	90460	\$23.14

\*Pennsylvania does not cover procedure code 90460.  
Procedure code 90460 is used only for crosswalk purposes for this SPA.

TN# 14-002  
Supersedes  
TN 13-004

Approval Date **MAY 27 2014**

Effective Date January 1, 2014



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METHOD AND STANDARDS FOR ESTABLISHING PAYMENT RATES- OTHER TYPES OF CARE

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**Increased Primary Care Service Payment 42 CFR 447.405, 447.410, 447.415**

**Attachment 4.19-B: Physician Services 42 CFR 447.405 Amount of Minimum Payment**

The state reimburses for services provided by physicians meeting the requirements of 42 CFR 447.400(a) at the Medicare Part B fee schedule rate using the Medicare physician fee schedule rate in effect in calendar years 2013 and 2014 or, if greater, the payment rates that would be applicable in those years using the calendar year 2009 Medicare physician fee schedule conversion factor. If there is no applicable rate established by Medicare, the state uses the rate specified in a fee schedule established and announced by CMS.

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

- ☐ The rates reflect all Medicare geographic/locality adjustments.

- ☒ The rates are statewide and reflect the mean value over all counties for each of the specified evaluation and management and vaccine billing codes.

The following formula was used to determine the mean rate over all counties for each code:  $(5 \times \text{GPCI 01 rate} + 62 \times \text{GPCI 99 rate}) \div 67$

GPCI 01 is Pennsylvania Geographic Practice Cost Index for the Philadelphia region  
GPCI 99 is Pennsylvania Geographic Practice Cost Index for the rest of this Commonwealth

Pennsylvania is using the fee schedule that CMS sent to Pennsylvania on February 6, 2014. Pennsylvania will not adjust the fee schedule to account for any changes in Medicare rates throughout the year.

**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 state reimburses a supplemental amount equal to the difference between the Medicaid rate in effect on July 1, 2009 and the minimum payment required at 42 CFR 447.405.

Supplemental payment is made: ☐ monthly ☐ quarterly

**Primary Care Services Affected by this Payment Methodology**

- ☐ This payment applies to all Evaluation and Management (E&M) billing codes 99201 through 99499.