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State/Territory Name: Alabama

State Plan Amendment (SPA) #: 23-0006

This file contains the following documents in the order listed:

- 1) Approval Letter
- 2) Summary Form (with 179-like data)
- 3) Approved SPA Page

DEPARTMENT OF HEALTH & HUMAN SERVICES
Centers for Medicare & Medicaid Services
7500 Security Boulevard, Mail Stop S2-26-12
Baltimore, Maryland 21244-1850



June 14, 2023

Stephanie McGee Azar
Commissioner
Alabama Medicaid Agency
501 Dexter Avenue
Post Office Box 5624
Montgomery, AL 36103-5624

Re: Alabama State Plan Amendment (SPA) AL-23-0006

Dear Commissioner Azar:

The Centers for Medicare & Medicaid Services (CMS) reviewed the proposed Medicaid State Plan Amendment (SPA) submitted under transmittal number (TN) AL-23-0006. This amendment proposes to temporarily extend the increased nursing facility per diem rate through June 30, 2023, originally approved in Disaster Relief SPA TN 22-0014.

CMS conducted our review of your submittal according to statutory requirements in Title XIX of the Social Security Act and implementing regulations. This letter is to inform you that Alabama's Medicaid SPA Transmittal Number AL-23-0006 is approved effective May 12, 2023.

If you have any questions, please contact Rita Nimmons at (404) 562-7415 or via email at Rita.Nimmons@cms.hhs.gov.

Sincerely,

Alissa M.
Deboy -S

Digitally signed by Alissa
M. Deboy -S
Date: 2023.06.14
09:30:25 -04'00'

Alissa Mooney DeBoy
On Behalf of Anne Marie Costello, Deputy Director
Center for Medicaid and CHIP Services

Enclosures

TRANSMITTAL AND NOTICE OF APPROVAL OF STATE PLAN MATERIAL FOR: CENTERS FOR MEDICARE & MEDICAID SERVICES	1. TRANSMITTAL NUMBER <u>2 3 — 0 0 0 6</u>	2. STATE <u>AL</u>
	3. PROGRAM IDENTIFICATION: TITLE OF THE SOCIAL SECURITY ACT <input checked="" type="radio"/> XIX <input type="radio"/> XXI	
TO: CENTER DIRECTOR CENTERS FOR MEDICAID & CHIP SERVICES DEPARTMENT OF HEALTH AND HUMAN SERVICES	4. PROPOSED EFFECTIVE DATE May 11, 2020 May 12, 2023	
5. FEDERAL STATUTE/REGULATION CITATION Title 19 of the Social Security Act	6. FEDERAL BUDGET IMPACT (Amounts in WHOLE dollars) a FFY 2020 2022 \$ <u>39,000,000</u> b FFY 2021 \$ 88,888,888	
7. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT Section 7.4.B Temporary Extension to the Disaster Relief Policies for COVID-19 National Emergency Page 1	8. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable) New	

9. SUBJECT OF AMENDMENT
Extension to the Disaster Relief Policies to temporarily extend the increased nursing facility per diem rate through June 30, 2023.

10. 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

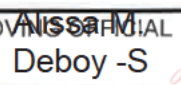
OTHER, AS SPECIFIED: Governor's designee on file via letter with CMS

12. TYPED NAME Stephanie McGee Azar	15. RETURN TO Stephanie McGee Azar Commissioner Alabama Medicaid Agency 501 Dexter Avenue Post Office Box 5624 Montgomery, Alabama 36103-5624
13. TITLE Commissioner	
14. DATE SUBMITTED 4/3/23	

FOR CMS USE ONLY

16. DATE RECEIVED April 3, 2023	17. DATE APPROVED June 14, 2023
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PLAN APPROVED - ONE COPY ATTACHED

18. EFFECTIVE DATE OF APPROVED MATERIAL May 12, 2023	19. SIGNATURE OF APPROVING OFFICIAL <div style="text-align: center;">  Alissa M. Deboy -S </div> <small>Digitally signed by Alissa M. Deboy -S Date: 2023.06.14 09:30:53 -04'00'</small>
20. TYPED NAME OF APPROVING OFFICIAL Alissa Mooney DeBoy On Behalf of Anne Marie Costello	21. TITLE OF APPROVING OFFICIAL Deputy Director, Center for Medicaid and CHIP Services

22. REMARKS
Pen and ink changes in boxes 4, 5, and 6 per email dated May 9, 2023 from the state.

7.4.B. Temporary Extension to the Disaster Relief Policies for the COVID-19 National Emergency

Effective May 12, 2023 until June 30, 2023, the agency temporarily extends the following elections(s) of section 7.4 (approved 04/12/2021 in SPA number AL-22-0014) of the state plan:

Section E – Payments

Increases to state plan payment methodologies:

1. X The agency increases payment rates for the following services:

Increase payments for nursing facilities

- a. X Payment increases are targeted based on the following criteria:

A supplemental payment for all nursing homes due to increases in cost associated with staffing, supplies, social distancing standards and other factors.

- b. Payments are increased through:

- i. X A supplemental payment or add-on within applicable upper payment limits:

A supplemental payment totaling \$50 million allocated to each Nursing home based on pro-rata share of Medicaid patient days during the period from July 1, 2021 through June 30, 2022. The amount so determined for each Nursing Home will be paid in equal installments monthly beginning September 1, 2022 through June 30, 2023.