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State/Territory Name: AZ

State Plan Amendment (SPA) #: 24-0025

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 Center for Medicaid & CHIP Services 230 South Dearborn Chicago, Illinois 60604



Financial Management Group

January 13, 2025

Carmen Heredia, Director Arizona Health Care Cost Containment System 801 East Jefferson Street Phoenix, AZ 85034

RE: TN AZ-24-0025

Dear Director Heredia:

The Centers for Medicare & Medicaid Services (CMS) has reviewed the proposed Arizona (AZ) State Plan Amendment (SPA) to Attachment 4.19-B AZ-24-0025, which was submitted to the Centers for Medicare & Medicaid Services (CMS) on December 30, 2024. This SPA updates the fee schedule rates for Multi-Specialty Interdisciplinary Clinic (MSIC) services.

We reviewed your SPA submission for compliance with statutory requirements including in sections 1902(a)(2), 1902(a)(13), 1902(a)(30), and 1903 as it relates to the identification of an adequate source for the non-federal share of expenditures under the plan, as required by 1902(a)(2), of the Social Security Act and the applicable implementing Federal regulations.

Based upon the information provided by the state, we have approved the amendment with an effective date of January 1, 2025. We are enclosing the approved CMS-179 and a copy of the new state plan pages.

If you have any additional questions or need further assistance, please contact Blake Holt at 303-844-6218 or via email at blake.holt@cms.hhs.gov.

Sincerely,

Todd McMillion Director Division of Reimbursement Review

Enclosures

TRANSMITTAL AND NOTICE OF APPROVAL OF STATE PLAN MATERIAL		2. STATE 	
FOR: CENTERS FOR MEDICARE & MEDICAID SERVICES	3. PROGRAM IDENTIFICATION: TITLE 1 SOCIAL SECURITY ACT	9 OF THE	
TO: CENTER DIRECTOR	4. PROPOSED EFFECTIVE DATE		
CENTERS FOR MEDICAID & CHIP SERVICES DEPARTMENT OF HEALTH AND HUMAN SERVICES	January 1, 2025	January 1, 2025	
5. FEDERAL STATUTE/REGULATION CITATION 42 CFR Part 447	a FFY: <u>2025</u> \$ <u>18,200</u> b. FFY: <u>2026</u> \$ <u>24,100</u>	b. FFY: 2026 \$ 24,100	
7. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT	8. PAGE NUMBER OF THE SUPERSED OR ATTACHMENT (If Applicable)	8. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable)	
Attachment 4.19-B: page 5c	Attachment 4.19-B: page 5c		
9. SUBJECT OF AMENDMENT Updates the state plan MSIC rates effective January 1, 2025.			
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			
11. SIGNATURE OF STATE AGENCY OFFICIAL	15. RETURN TO		
H. GONATORE OF CHATE AGENOT OF HOLAE	Kyle Sawyer 801 E. Jefferson St., MD #4200 Phoenix, AZ 85034		
12. TYPED NAME			
Kyle Sawyer			
13. TITLE			
Assistant Director, Public Policy and Strategic Planning			
14. DATE SUBMITTED: December 30, 2024	105 ONLY		
16. DATE RECEIVED December 30, 2024	17. DATE APPROVED January 13, 2025		
PLAN APPROVED - ONE COPY ATTACHED			
18. EFFECTIVE DATE OF APPROVED MATERIAL January 1, 2025	19. SIGNATURE OF APPROVING OFFICIAI	_	
20. TYPED NAME OF APPROVING OFFICIAL	21. TITLE OF APPROVING OFFICIAL		
Todd McMillion	Director, Division of Reimbursement Review		

22. REMARKS

STATE OF ARIZONA METHODS AND STANDARDS FOR ESTABLISHING PAYMENT RATES OTHER TYPES OF CARE

Rate Update:

Except as otherwise noted in the plan, state-developed fee schedule rates are the same for both governmental and private providers for other types of care. The agency's fee schedule rates are effective for services provided on or after January 1, 2025. All rates are published at: https://www.azahcccs.gov/PlansProviders/RatesAndBilling/FFS/