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State/Territory Name: KS

State Plan Amendment (SPA) #: 22-0001

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 Center for Medicaid & CHIP Services 233 North Michigan Ave., Suite 600 Chicago, Illinois 60601



Financial Management Group

February 18, 2022

Sarah Fertig, State Medicaid Director Kansas Department of Health and Environment Division of Health Care Finance Landon State Office Building 900 SW Jackson, Suite 900 N Topeka, KS 66612-1220

RE: TN 22-0001

Dear Ms. Fertig:

We have reviewed the proposed Kansas State Plan Amendment (SPA) to Attachment 4.19-B, KS-22-0001, which was submitted to the Centers for Medicare & Medicaid Services (CMS) on January 19, 2022. This plan amendment increases the reimbursement rates for global pregnancy services providers.

Based upon the information provided by the State, we have approved the amendment with an effective date of January 1, 2022. 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 Robert Bromwell at (410) 786-5914 or Robert Bromwell@cms.hhs.gov.

Sincerely,

Todd McMillion Director Division of Reimbursement Review

Enclosures

FORM CMS-179 (09/24)

TRANSMITTAL AND NOTICE OF APPROVAL OF STATE PLAN MATERIAL	<u>22 — 0001 KS</u>
FOR: CENTERS FOR MEDICARE & MEDICAID SERVICES	3. PROGRAM IDENTIFICATION: TITLE XIXOF THE SOCIAL SECURITY ACT
TO: CENTER DIRECTOR CENTERS FOR MEDICAID & CHIP SERVICES DEPARTMENT OF HEALTH AND HUMAN SERVICES	4. PROPOSED EFFECTIVE DATE January 1, 2022
5. FEDERAL STATUTE/REGULATION CITATION 42 CFR 447 Subpart B	6. FEDERAL BUDGET IMPACT (Amounts in WHOLE dollars) a FFY 2022 \$ 722 b. FFY 2023 \$ 957
7. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT Attachment 4.19-B #5, Obstetrical Practitioner Services, Page 2 Attachment 4.19-B #6.d. Page 2 (new) Attachment 4.19-B #17	8. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable) Attachment 4.19-B #5, Obstetrical Practitioner Services, Page 2 Attachment 4.19-B #17 Attachment 4.19-B #5 Obstetrical Practitioner Services Pages 2a - 2e (removal).
SUBJECT OF AMENDMENT Increase the global pregnancy services provider reimbursement rates.	
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: Sarah Fertig is the Governor's Designee
11. &IGNATURE OF STATE A AGENC®FFICIAL 12. TYPED NAME Sarah Fertig 13. TITLE	15. RETURN TO Sarah Fertig, State Medicaid Director KDHE, Division of Health Care Finance Landon State Office Building 900 SW Jackson, Room 900-N Topeka, KS 66612-1220
State Medicaid Director 14. DATE SUBMITTED January 19, 2022	
FOR CMS USE ONLY	
16. DATE RECEIVED January 19, 2022	17. DATE APPROVED February 18, 2022 NE COPY ATTACHED
18. EFFECTIVE DATE OF APPROVED MATERIAL	19 SIGNATURE OF APPROVING OFFICIAL
January 1, 2022	
20. TYPED NAME OF APPROVING OFFICIAL	21. TITLE OF APPROVING OFFICIAL
Todd McMillion	Director, Division of Reimbursement Review
22. REMARKS **Pen and ink change authorized to Block 8 to add "removal of 4.19B pages 2a through 2e, via email 2/11/2022	

Instructions on Back

KANSAS MEDICAID STATE PLAN

Attachment 4.19-B #5, Obstetrical Practitioner Services Page 2

Physicians' Services Methods and Standards of Established Payment Rates

Obstetrical Practitioner Services

Obstetrical practitioners are paid fee schedule rates.

Except as otherwise noted in the plan, state developed fee schedule rates are the same for both governmental and private providers for the above services. The agency's fee schedule rate was set as of January 1, 2022 and is effective for services provided on or after that date. The agency's established fee schedule rates are published on the agency's website at https://www.kmap-state-ks.us/Provider/PRICING/RefCode.asp

When the user is on the landing page of the above link, select the link Download Fee Schedules. This link will take the user to a page titled "Reference Copyright Notice." Scroll to the bottom of the page and click on the word "Accept" to access the fee schedule. The next page that appears is titled "KMAP Fee Schedules."

To access a fee schedule:

- a. Select the program from the drop-down list -TXIX;
- b. Choose the type of rates Medicaid;
- c. After choosing the rate type, the user will see a list of the current and historical versions of the corresponding schedule;
- d. Click the schedule TXIX.

KANSAS MEDICAID STATE PLAN

Attachment 4.19-B #6.d Page 2

Other Practitioner's Services Methods and Standards for Establishing Payment Rates

Mid-Level Obstetrical Practitioners

Mid-level obstetrical practitioners are paid fee schedule rates.

Except as otherwise noted in the plan, state developed fee schedule rates are the same for both governmental and private providers for the above services. The agency's fee schedule rate was set as of January 1, 2022 and is effective for services provided on or after that date. The agency's established fee schedule rates are published on the agency's website at https://www.kmap-state-ks.us/Provider/PRICING/RefCode.asp

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- b. Choose the type of rates Medicaid;
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- d. Click the schedule TXIX.

KANSAS MEDICAID STATE PLAN

Attachment 4.19-B

#17

Nurse-Midwife Services Methods and Standards for Establishing Payment Rates

Nurse-midwives are paid fee schedule rates.

Except as otherwise noted in the plan, state developed fee schedule rates are the same for both governmental and private providers for the above services. The agency's fee schedule rate was set as of January 1, 2022 and is effective for services provided on or after that date. The agency's established fee schedule rates are published on the agency's website at https://www.kmap-state-ks.us/Provider/PRICING/RefCode.asp

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- d. Click the schedule TXIX.