



**DEPARTMENT OF HEALTH & HUMAN SERVICES**

Centers for Medicare & Medicaid Services  
601 E. 12th St., Room 355  
Kansas City, Missouri 64106



Medicaid and CHIP Operations Group

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September 28, 2020

Mr. Dennis Schrader, Medicaid Director  
Maryland Department of Health  
201 W. Preston St., 5<sup>th</sup> Floor  
Baltimore, MD 21201

Dear Mr. Schrader:

We are pleased to inform you of the approval of Maryland State Plan Amendment (SPA) 20-0004. This amendment expands the categories of providers allowed to order home health services to include nurse practitioners, and additionally revises the SPA language to reflect compliance with updated HH regulations and EVV requirements.

Enclosed is a copy of the approved SPA pages and the signed CMS-179 form. The effective date of this amendment is July 25, 2020.

If you have any questions regarding this SPA, please contact Talbatha Myatt at (215) 861-4259. She can also be reached at [Talbatha.Myatt@cms.hhs.gov](mailto:Talbatha.Myatt@cms.hhs.gov).

Sincerely,

A solid black rectangular box redacting the signature of James G. Scott.

James G. Scott, Director  
Division of Program Operations

cc: Katia Fortune, State Plan Coordinator  
Nina McHugh, Medicaid Provider Services Administration  
Tricia Roddy, Director, Innovation, Research, and Development  
James G. Scott, Director Division of Program Operations  
Nicole McKnight, CMCS, Branch Manager, Division of Program Operations  
Talbatha Myatt, CMCS, State Lead, Division of Program Operations

**TRANSMITTAL AND NOTICE OF APPROVAL OF  
STATE PLAN MATERIAL  
FOR: CENTERS FOR MEDICARE & MEDICAID SERVICES**

1. TRANSMITTAL NUMBER  
2 0 0 0 0 4

2. STATE  
MD

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

TO: REGIONAL ADMINISTRATOR  
CENTERS FOR MEDICARE & MEDICAID SERVICES  
DEPARTMENT OF HEALTH AND HUMAN SERVICES

4. PROPOSED EFFECTIVE DATE  
07/25/2020

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  
N/A

7. FEDERAL BUDGET IMPACT  
a. FFY 2021 \$ \$0  
b. FFY 2021 \$ \$0

8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT

~~Att. 3.1A pg. 9C 1 (20-0004)~~  
Att. 3.1A pg. 19-A (20-0004)  
Att. 3.1A pg 19B  
Att. 3.1A pg 21

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 PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (*If Applicable*)

~~Att. 3.1A pg. 9C 1 (17-0005)~~  
Att. 3.1A pg. 19-A (20-0004)  
Att. 3.1A pg 19B  
Att. 3.1A pg 21

10. SUBJECT OF AMENDMENT

This amendment expands the categories of providers allowed to order home health services. The Department now proposes to allow physicians as well as advanced practice nurses to order home health services.

11. GOVERNOR'S REVIEW (*Check One*)

GOVERNOR'S OFFICE REPORTED NO COMMENT       OTHER, AS SPECIFIED  
 COMMENTS OF GOVERNOR'S OFFICE ENCLOSED  
 NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL

12. SIGNATURE OF STATE AGENCY OFFICIAL

13. TYPED NAME  
Tricia Roddy

14. TITLE  
Director, Innovation, Research, and Development

15. DATE SUBMITTED  
6/30/2020

16. RETURN TO

Dennis Schrader  
Medicaid Director  
Maryland Department of Health  
201 W. Preston St., 5th Floor  
Baltimore, MD 21201

**FOR REGIONAL OFFICE USE ONLY**

17. DATE RECEIVED  
June 30, 2020

18. DATE APPROVED  
**09/23/2020**

**PLAN APPROVED - ONE COPY ATTACHED**

19. EFFECTIVE DATE OF APPROVED MATERIAL  
July 25, 2020

20. SIGNATURE OF REGIONAL OFFICIAL

21. TYPED NAME  
James G. Scott

22. TITLE  
Director Division of Program Operations

23. REMARKS

Maryland would requested a pen and ink change to remove the following page: Att. 3.1A pg. 9C-1.  
Maryland requested a pen and ink change to include the following pages:  
Att. 3.1A pg 19B  
Att. 3.1A pg 21

STATE PLAN FOR MEDICAL ASSISTANCE UNDER  
TITLE XIX OF THE SOCIAL SECURITY ACT

STATE OF MARYLAND

PROGRAM	LIMITATIONS
<p>7. Home Health Services – General</p> <p>Skilled nursing services, home health aide services, physical therapy services, occupational therapy services, speech pathology services, and medical supplies.</p>	<p>The state will comply with the Electronic Visit Verification System (EVV) requirements for home health services by January 1, 2023 in accordance with section 12006 of the 21st Century CURES Act.</p> <p>1. Providers of home health services must:</p> <ol style="list-style-type: none"> <li>a. Be licensed as a home health agency in the state; and</li> <li>b. Participate under Medicare as a home health agency.</li> </ol> <p>2. Services must be:</p> <ol style="list-style-type: none"> <li>a. Provided upon the written order of the physician or nurse practitioner, in accordance with State law, and furnished under the current plan of treatment;</li> <li>b. Consistent with the current diagnosis and treatment of the participant's condition;</li> <li>c. In accordance with accepted standards of medical practice;</li> <li>d. Required by the medical condition rather than the convenience or preference of the participant;</li> <li>e. Considered under accepted standards of medical practice to be a specific and effective treatment for the participant's condition;</li> <li>f. Required on a part-time, intermittent basis when skilled nursing services are rendered;</li> <li>g. Rendered by an approved provider in the participant's home, or other setting when normal life activities take the participant outside the home;</li> <li>h. Adequately described in the signed and dated progress notes;</li> <li>i. Documented as received by the participant as indicated by the participant's signature or signature of a witness;</li> <li>j. Documented that a physician, nurse practitioner, clinical nurse specialist, certified nurse midwife, or physician assistant who is not employed by the home health agency, has had a face-to-face encounter with the participant no more than 90 days before the home health start of care date or within 30 days after the start of the home health care, including the date of the encounter; and</li> <li>k. Documented by the attending acute or post-acute physician, the clinical findings of the face-to-face encounter for participants admitted immediately to home health upon discharge from a hospital or post-acute setting.</li> </ol>

TN NO. 20-0004  
Supercedes TN No. 10-03

Approval Date 09/23/2020  
Effective Date: 7/25/2020

STATE PLAN FOR MEDICAL ASSISTANCE UNDER TITLE XIX OF THE SOCIAL SECURITY ACT  
STATE OF MARYLAND

PROGRAM	LIMITATIONS
<p>7. Home Health Services-General</p> <p>Skilled nursing services, home health aide services, physical therapy services, occupational therapy services, speech pathology services, and medical supplies.</p>	<p>3. Home health aide services must come under the direct supervision of a nurse. The home health agency must have a registered nurse provide biweekly supervisory visits to the recipient's home. Every second visit shall include observations of the delivery of services by the aide to the recipient.</p>

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

STATE OF MARYLAND

7. Home Health Services - **Medical Supplies and Equipment**

Medical supplies are healthcare related items that are consumable or disposable, or cannot withstand repeated use by more than one participant, that are required to address a participant's medical disability, illness or injury.

Equipment and appliances are items that are primarily and customarily used to serve a medical purpose, generally are not useful to a participant in the absence of a disability, illness, or injury, can withstand repeated use, and can be reusable or removable.

Medical supplies and equipment and appliances are covered when:

1. Ordered by a physician or a licensed practitioner of the healing arts acting within the scope of practice authorized under State law, as part of a written plan of care reviewed by the ordering practitioner annually.
2. Medically necessary; and
3. Furnished by enrolled Maryland Medicaid medical equipment and supply providers.