## **Table of Contents**

# **State/Territory Name: ME**

# State Plan Amendment (SPA): ME-22-0028

This file contains the following documents in the order listed:

Approval Letter
 CMS 179 Form/Summary Form (with 179-like data)
 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**

September 15, 2022

Michelle Probert, Director Maine Department of Health and Human Services MaineCare Services Policy Division 11 State House Station Augusta, Maine 04333-0011

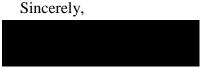
RE: TN 22-002

Dear Director Probert:

We have reviewed the proposed Maine State Plan Amendment (SPA) to Attachment 4.19-B ME-22-002 which was submitted to the Centers for Medicare & Medicaid Services (CMS) on June 24, 2022. This plan amendment updates the reimbursement methodology for Physical Therapy, Occupational Therapy, and speech, hearing, and language disorder services to the lower of provider charges or 72.4% of the current corresponding Medicare rate and updates the fee schedule for those services not covered by Medicare.

Based upon the information provided by the State, we have approved the amendment with an effective date July 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 Blake Holt at 303-844-6218 or blake.holt@cms.hhs.gov.



Todd McMillion Director Division of Reimbursement Review

Enclosures

CENTERS FOR MEDICARE & MEDICAID SERVICES	_	OMB No. 0939-0193
TRANSMITTAL AND NOTICE OF APPROVAL OF STATE PLAN MATERIAL FOR: CENTERS FOR MEDICARE & MEDICAID SERVICES	1. TRANSMITTAL NUMBER0028	2. STATE Maine (ME)
	3. PROGRAM IDENTIFICATION: TITLE XIX OF THE SOCIALSECURITY ACT	
TO: CENTER DIRECTOR CENTERS FOR MEDICAID & CHIP SERVICES DEPARTMENT OF HEALTH AND HUMAN SERVICES	4. PROPOSED EFFECTIVE DATE July 1, 2022	
5. FEDERAL STATUTE/REGULATION CITATION 1905(a)(11)	6. FEDERAL BUDGET IMPACT (Amounts in WHOLE dollars)         a. FFY       2022       \$ 1,005453         b. FFY       2023       \$ 3,977 194	
7. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT Supplement 1 to Attachment 4.19-B Page 3, 3(a), and 3(b)	8. PAGE NUMBER OF THE SUPERSE OR ATTACHMENT ( <i>if Applicable</i> ) <b>Supplement 1 to Attachme</b> <b>and 3(b)</b>	
9. SUBJECT OF AMENDMENT To implement reimbursement recommendations for Physical Th disorder from the Department's comprehensive rate system eva 2021		
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:	
11. SIGNATURE OF STATE AGENCY OFFICIAL	15. RETURN TO Michelle Probert Director, MaineCare Services	
12. TYPED NAME	#11 State House Station	
Michelle Probert	109 Capitol Street Augusta, Maine 04333-0011	
13. TITLE Director, MaineCare Services 14. DATE SUBMITTED	Augusta, mante 04050-00 m	
June 24, 2022		
FOR CMS		
June 24, 2022	7. DATE APPROVED /15/2022	
PLAN APPROVED - O		
July 1, 2022	19. SIGNATURE OF APPROVING OFFIC	IAL
20. TYPED NAME OF APPROVING OFFICIAL Todd McMillion	21. TITLE OF APPROVING OFFICIAL Director, Division of Reimbu	rsement Review
22. REMARKS		

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### STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT State: MAINE Supplement 1 to Attachment 4.19-B

#### Page 3

OMB No: 0938

## METHODS AND STANDARDS FOR ESTABLISHING PAYMENT RATES -OTHER TYPES OF CARE

- 11. Physical Therapy and related services.
  - a. Physical Therapy:
    - (1) Where Medicare provides a reimbursement rate, except for orthotic devices, the Department will reimburse the lowest of the following:
      - a. Seventy-two point four percent (72.4%) of the current Medicare rate per code, including appropriate Medicare fee adjustments for place-of-service modifiers in effect at the time of service; or
      - b. The provider's usual or customary charge.
    - (2) For orthotics devices provided as part of Physical Therapy Services reimbursement is consistent with Supplement 1 to Attachment 4.19-B, Item 7(b).
    - (3) For services where Medicare does not provide a reimbursement rate, the Department will reimburse according to an agency fee schedule. State-developed fee schedule rates are the same for both governmental and private providers. The agency 's fee schedule rates were set as of July 1, 2022. All rates are published at: <a href="https://mainecare.maine.gov/Provider%20Fee%20Schedules/Forms/Publication.asp">https://mainecare.maine.gov/Provider%20Fee%20Schedules/Forms/Publication.asp</a> x?RootFolder=%2FProvider%20Fee%20Schedules%2FRate%20Setting%2FSection %20085%20%2D%20Physical%20Therapy%20Services&FolderCTID=0x0120002 64D1FBA0C2BB247BF40A2C571600E81&View=%7B69CEE1D4%2DA5CC%2 D4DAE%2D93B6%2D72A66DE366E0%7D

### STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: MAINE

Supplement 1 to Attachment 4.19-B

Page 3(a)

## METHODS AND STANDARDS FOR ESTABLISHING PAYMENT RATES -OTHER TYPES OF CARE

- b. Occupational Therapy:
  - (1) Where Medicare provides a reimbursement rate, except for orthotic devices, the Department will reimburse the lowest of the following:
    - a. Seventy-two point four percent (72.4%) of the current Medicare rate per code, including appropriate Medicare fee adjustments for place-of-service modifiers in effect at the time of service; or
    - b. The provider's usual or customary charge.
  - (2) For orthotics devices when provided as part of Occupational Therapy Services, reimbursement is consistent with Supplement 1 to Attachment 4.19-B, Item 7(b).
  - (3) For services where Medicare does not provide a reimbursement rate, the Department will reimburse according to an agency fee schedule. State-developed fee schedule rates are the same for both governmental and private providers. The agency's fee schedule rates were set as of July 1, 2022 respectively and were effective for services provided on or after that date. All rates are published at: <u>https://mainecare.maine.gov/Provider%20Fee%20Schedules/Forms/Publication.aspx?RootFolder</u>

=%2FProvider%20Fee%20Schedules%2FRate%20Setting%2FSection%20068%20%2D%20Occ upational%20Therapy%20Services&FolderCTID=0x012000264D1FBA0C2BB247BF40A2C571 600E81&View=%7B69CEE1D4%2DA5CC%2D4DAE%2D93B6%2D72A66DE366E0%7D

## METHODS AND STANDARDS FOR ESTABLISHING PAYMENT RATES – OTHER TYPES OF CARE

- c. Services for individuals with speech, hearing, and language disorder: -
  - (1) Where Medicare provides a reimbursement rate the Department will reimburse the lowest of the following:
    - a. Seventy-two point four percent (72.4%) of the current Medicare rate per code, including appropriate Medicare fee adjustments for place-of-service modifiers in effect at the time of service; or
    - b. The provider's usual or customary charge.

(2) For services where Medicare does not provide a reimbursement rate, the Department will reimburse according to an agency fee schedule. State-developed fee schedule rates are the same for both governmental and private providers. The agency's fee schedule rates were set as of July 1, 2022 and were effective for services provided on or after that date. All rates are published at:

https://mainecare.maine.gov/Provider% 20Fee% 20Schedules/Forms/Publication.aspx?RootFolder=% 2FPr ovider% 20Fee% 20Schedules% 2FRate% 20Setting% 2FSection% 20109% 20% 2D% 20Speech% 20and% 20 Hearing% 20Services& FolderCTID=0x012000264D1FBA0C2BB247BF40A2C571600E81&View=% 7B 69CEE1D4% 2DA5CC% 2D4DAE% 2D93B6% 2D72A66DE366E0% 7D