Table of Contents

State/Territory Name: Maine

State Plan Amendment (SPA) #: 23-0018

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 Page

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

July 13, 2023

Michelle Probert, Director Office of MaineCare Services Department of Health and Human Services 109 Capitol Street, 11 State House Station Augusta, Maine 04333-0011

Re: Maine State Plan Amendment (SPA) 23-0018

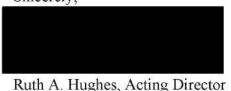
Dear Director Probert:

The Centers for Medicare & Medicaid Services (CMS) reviewed your Medicaid State Plan Amendment (SPA) submitted under transmittal number (TN) 23-0018. This amendment proposes to extend Maine's previously granted Recovery Audit Contractor (RAC) program exception from June 1, 2023, to June 1, 2025.

We conducted our review of your submittal according to statutory requirements in Title XIX of the Social Security Act and implementing regulations Section 1902(a)(42)(B)(i). This letter is to inform you that Maine Medicaid SPA 23-0018 was approved on July 12, 2023, with an effective of June 1, 2023.

If you have any questions, please contact Gilson DaSilva at (617) 565-1227 or via email at Gilson.DaSilva@cms.hhs.gov.

Sincerely,



Division of Program Operations

Enclosures

cc: Kristin Merrill, State Plan Manager, Office of MaineCare Services

	OMB No. 0938-
MITTAL NUMBER 0018 0018	2. STATE Maine (ME)
S 3. PROGRAM IDENTIFICATION: TITLE XIX OF THE SOCIAL SECURITY ACT	
DSED EFFECTIVE DA 1, 2023	TE
	(Amounts in WHOLE dollars) \$ <u>0</u> \$ <u>0</u>
NUMBER OF THE SUP TACHMENT (<i>If Applical</i> hment 4.5 of Pag e	
June 1, 2025	
THER, AS SPECIFIED:	
TO Probert MaineCare Servi	ces
e House Station itol Street	
, Maine 04333-00 ⁴	11
PROVED 07/12/2023	
	FICIA
	AL sion of Program Operations
J	TACHED JRE OF APPROVING OF F APPROVING OFFICIA Acting Director, Divis

OFFICIAL 36(b)

Revision:

State: Maine

4.5 Medicaid Recovery Audit Contractor Program

Citation

Section 1902(a)(42)(B)(i) Of the Social Security Act	☐ The State has established a program under which it will contract with one or more recovery audit contractors (RACs) for the purpose of identifying underpayments and overpayments of Medicaid claims under the State plan and under any waiver of the State plan.		
	IXI The State is seeking an except program for the following reason granted an exception through Jur exception through June 1, 2025. objectives of the RAC program through current program integrit	ns: Maine previously was ne 1, 2023 and now seeks an Maine believes that the are efficiently achieved	
Section 1902(a)(42)(B)(ii)(I) of the Act	□ The State/Medicaid agency hat listed in section 1902(a)(42)(B)(in meet the requirements of the State the statute.	ii)(I) of the act. All contracts	
Section 1902 (a)(42)(8)(ii)(ii)(aa) of the Act	Place a check to provide assu The State will make payments amounts recovered.		
	The State will make payments contingent basis for collecting ov The following payment methodology State payments to Medicaid RACs fo recovery of overpayments (e.g., the p contingency fee):	verpayments. shall be used to determine r identification and	
Section 1902 (a)(42)(B)(ii)(II)(bb) of the Act	□ The State attests that the contingency fee rate paid to the Medicaid RAC will not exceed the highest rate paid to Medicare RACs as published in the Federal Register.		
	□The contingency fee rate paid to that Medicaid RAC that will exceed the highest rate paid to Medicare RACs, as published in the Federal Register. The State will submit a justification for that rate and will submit for FFP for the full amount of the contingency fee.		
TN No. 23-0018	Approval Date: 07/12/2023	Effective Date: 06/01/23	