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State/Territory Name: Maine

State Plan Amendment (SPA) #: 24-0026-CCT

This file contains the following documents in the order listed:

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- 2) Summary Form (with 179-like data)
- 3) Approved SPA Page

ME - Submission Package - ME2024MS00080 - (ME-24-0026-CCT) - Health Homes

Summary Reviewable Units Versions Analyst Notes **Approval Letter** Transaction Logs News Related Actions

DEPARTMENT OF HEALTH & HUMAN SERVICES
Centers for Medicare & Medicaid Services
Medicaid and CHIP Operations Group
601 E. 12th Street
Room 355
Kansas City, MO 64106



Center for Medicaid & CHIP Services

November 14, 2024

Michelle Probert
Director
Office of MaineCare Services
109 Capitol Street
11 State House Station
Augusta, ME 04330-0011

Re: Approval of State Plan Amendment ME 24-0026 Community Care Teams (CCT) Health Homes

Dear Director Probert,

On September 30, 2024, the Centers for Medicare and Medicaid Services (CMS) received Maine State Plan Amendment (SPA) ME 24-0026 related to Community Care Teams (CCT) Health Homes to comply with all requirements described in 42 CFR 437.10 and 437.15 related to mandatory reporting of the Core Set measures.

We approve Maine's State Plan Amendment (SPA) ME 24-0026 (CCT) with an effective date of October 01, 2024.

If you have any questions regarding this amendment, please contact Gilson DaSilva at gilson.dasilva@cms.hhs.gov.

Sincerely,

Ruth A. Hughes

Acting Director, Division of Program
Operations

Center for Medicaid & CHIP Services

ME - Submission Package - ME2024MS00080 - (ME-24-0026-CCT) - Health Homes

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Submission - Summary

MEDICAID | Medicaid State Plan | Health Homes | ME2024MS00080 | ME-24-0026-CCT | MIGRATED_HH.CONVERTED Maine Health Homes Services

CMS-10434 OMB 0938-1188

Package Header

Package ID	ME2024MS00080	SPA ID	ME-24-0026-CCT
Submission Type	Official	Initial Submission Date	9/30/2024
Approval Date	11/14/2024	Effective Date	N/A
Superseded SPA ID	N/A		

State Information

State/Territory Name: Maine

Medicaid Agency Name: Office of MaineCare Services

Submission Component

- State Plan Amendment
- Medicaid
- CHIP

Submission - Summary

MEDICAID | Medicaid State Plan | Health Homes | ME2024MS00080 | ME-24-0026-CCT | MIGRATED_HH.CONVERTED Maine Health Homes Services

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SPA ID and Effective Date

SPA ID ME-24-0026-CCT

Reviewable Unit	Proposed Effective Date	Superseded SPA ID
Health Homes Monitoring, Quality Measurement and Evaluation	10/1/2024	ME-22-0033-CCT

Submission - Summary

MEDICAID | Medicaid State Plan | Health Homes | ME2024MS00080 | ME-24-0026-CCT | MIGRATED_HH.CONVERTED Maine Health Homes Services

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Executive Summary

Summary Description Including Goals and Objectives Update template for compliance with all requirements in 42 CFR §§ 437.10 and 437.15.

Federal Budget Impact and Statute/Regulation Citation

Federal Budget Impact

	Federal Fiscal Year	Amount
First	2024	\$0
Second	2025	\$0

Federal Statute / Regulation Citation

42 CFR §§ 437.10 and 437.15.

Supporting documentation of budget impact is uploaded (optional).

Name	Date Created
No items available	

Submission - Summary

MEDICAID | Medicaid State Plan | Health Homes | ME2024MS00080 | ME-24-0026-CCT | MIGRATED_HH.CONVERTED Maine Health Homes Services

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Governor's Office Review

- No comment
- Comments received
- No response within 45 days
- Other

Describe N/A

PRA Disclosure Statement: Centers for Medicare & Medicaid Services (CMS) collects this mandatory information in accordance with (42 U.S.C. 1396a) and (42 CFR 430.12); which sets forth the authority for the submittal and collection of state plans and plan amendment information in a format defined by CMS for the purpose of improving the state application and federal review processes, improve federal program management of Medicaid programs and Children's Health Insurance Program, and to standardize Medicaid program data which covers basic requirements, and individualized content that reflects the characteristics of the particular state's program. The information will be used to monitor and analyze performance metrics related to the Medicaid and Children's Health Insurance Program in efforts to boost program integrity efforts, improve performance and accountability across the programs. Under the Privacy Act of 1974 any personally identifying information obtained will be kept private to the extent of the law. According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0938-1188. The time required to complete this information collection is estimated to range from 1 hour to 80 hours per response (see below), including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection. If you have comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: CMS, 7500 Security Boulevard, Attn: PRA Reports Clearance Officer, Mail Stop C4-26-05, Baltimore, Maryland 21244-1850.

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ME - Submission Package - ME2024MS00080 - (ME-24-0026-CCT) - Health Homes

Summary Reviewable Units Versions Analyst Notes Approval Letter Transaction Logs News **Related Actions**

Health Homes Monitoring, Quality Measurement and Evaluation

MEDICAID | Medicaid State Plan | Health Homes | ME2024MS00080 | ME-24-0026-CCT | MIGRATED_HH.CONVERTED Maine Health Homes Services

CMS-10434 OMB 0938-1188

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Submission Type	Official	Initial Submission Date	9/30/2024
Approval Date	11/14/2024	Effective Date	<u>10/1/2024</u>
Superseded SPA ID	ME-22-0033-CCT		
	System-Derived		

Monitoring

Describe the state's methodology for calculating cost saving (and report cost savings annually in Quality Measure Report). Include savings that result from improved coordination of care and chronic disease management achieved through the Health Homes Program, including data sources and measurement specifications, as well as any savings associated with dual eligibles, and if Medicare data was available to the state to utilize in arriving at its cost-savings estimates:

MaineCare complies with Health Homes core set reporting and will be reevaluating the methodology for calculating cost savings for the CCT and CCT II Provider service, based on utilization following the change in this State Plan Amendment. This Health Home SPA is now exclusively focused on high-risk/high-need members and the cost saving methodology will be adjusted to look for impacts such as hospitalizations, ambulance, and other high-acuity services. Additional cost impacts may be seen through increased chronic care and wellness service utilization such as primary care, behavioral health, and prescription drugs. These impacts will be monitored and reported in required reporting.

Describe how the state will use health information technology in providing Health Homes services and to improve service delivery and coordination across the care continuum (including the use of wireless patient technology to improve coordination and management of care and patient adherence to recommendations made by their provider).

HIT plays a central role in CCT and CCT II Provider service delivery. Through MaineCare's web-based portal, providers can access information regarding eligible and pending members and information on key quality and utilization measures. Online utilization reports supply CCT and CCT II Providers with monthly utilization data from MaineCare claims to assist providers with identifying members with high needs/high-cost and as a tool to scan for and act upon any gaps in care. All CCT and CCT II Providers must have EHR systems that allow integration of secure messaging into the EHR. CCT and CCT II Providers should be able to share health information, including care planning documents, to and from other treating providers/organizations and across the team of professionals. CCT and CCT II Providers will also be expected to use population-based management tools, such as disease registries and other tracking techniques in order to engage members in care. MaineCare requires or prioritizes connection with Maine's state designated healthcare information exchange (HIE). Utilizing this tool supports comprehensive transitional supports and enhanced care management and coordination. In addition, Maine's HIE has the ability to notify care managers when their assigned patients visit the ED or are admitted to or discharged from the hospital. This functionality supports CCT and CCT II Provider teams reduce ED use and hospital readmissions.

Health Homes Monitoring, Quality Measurement and Evaluation

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Quality Measurement and Evaluation

- The state provides assurance that all Health Homes providers report to the state on all applicable quality measures as a condition of receiving payment from the state.
- The state provides assurance that it will identify measureable goals for its Health Homes model and intervention and also identify quality measures related to each goal to measure its success in achieving the goals.
- The state provides assurance that it will report to CMS information to include applicable mandatory Core Set measures submitted by Health Home providers in accordance with all requirements in 42 CFR §§ 437.10 through 437.15 no later than state reporting on the 2024 Core Sets, which must be submitted and certified by December 31, 2024 to inform evaluations, as well as Reports to Congress as described in Section 2703(b) of the Affordable Care Act and as described by CMS. In subsequent years, states must report annually, by December 31st, on all measures on the applicable mandatory Core Set measures that are identified by the Secretary.
- The state provides assurance that it will track avoidable hospital readmissions and report annually in the Quality Measures report.

PRA Disclosure Statement: Centers for Medicare & Medicaid Services (CMS) collects this mandatory information in accordance with (42 U.S.C. 1396a) and (42 CFR 430.12); which sets forth the authority for the submittal and collection of state plans and plan amendment information in a format defined by CMS for the purpose of improving the state application and federal review processes, improve federal program management of Medicaid programs and Children's Health Insurance Program, and to standardize Medicaid program data which covers basic requirements, and individualized content that reflects the characteristics of the particular state's program. The information will be used to monitor and analyze performance metrics related to the Medicaid and Children's Health Insurance Program in efforts to boost program integrity efforts, improve performance and accountability across the programs. Under the Privacy Act of 1974 any personally identifying information obtained will be kept private to the extent of the law. According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0938-1188. The time required to complete this information collection is estimated to range from 1 hour to 80 hours per response (see below), including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection. If you have comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: CMS, 7500 Security Boulevard, Attn: PRA Reports Clearance Officer, Mail Stop C4-26-05, Baltimore, Maryland 21244-1850.

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