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State: MINNESOTA

State Plan Amendment (SPA) #: 23-0006

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 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

January 27, 2023

Cynthia McDonald
Assistant Commissioner and Medicaid Director
Health Care Administration
State of Minnesota, Department of Human Services
540 Cedar Street PO Box 64983
ST. Paul, MN 55167-0983

RE: TN 23-0006

Dear Ms. McDonald:

We have reviewed the proposed Minnesota State Plan Amendment (SPA) to Attachment 4.19-B, MN-23-0006 which was submitted to the Centers for Medicare & Medicaid Services (CMS) on January 9, 2023. This plan amendment updates the rates for Adult Foster Care.

Based upon the information provided by the State, we have approved the amendment with an effective date of January 1, 2023. 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 DRR analyst name at 1-312-886-0360 or Deborah.Benson@cms.hhs.gov.

Sincerely,



Todd McMillion
Director
Division of Reimbursement Review

Enclosures

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

1. TRANSMITTAL NUMBER

2 3 — 0 0 0 6

2. STATE

MN

3. PROGRAM IDENTIFICATION: TITLE OF THE SOCIAL SECURITY ACT

XIX XXI

TO: CENTER DIRECTOR
CENTERS FOR MEDICAID & CHIP SERVICES
DEPARTMENT OF HEALTH AND HUMAN SERVICES

4. PROPOSED EFFECTIVE DATE

January 1, 2023

5. FEDERAL STATUTE/REGULATION CITATION

42 CFR § 440

6. FEDERAL BUDGET IMPACT (Amounts in WHOLE dollars)

a. FFY 2023 \$ 17,000
b. FFY 2024 \$ 17,000

7. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT

Attachment 4.19-B Page 45c

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 PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable)

same

9. SUBJECT OF AMENDMENT

This amendment updates the rates for Adult Foster Care locations that provide Residential Crisis Stabilization.

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

[Redacted Signature]

12. TYPED NAME

Patrick Hultman

13. TITLE

Deputy Medicaid Director

14. DATE SUBMITTED

January 9, 2023

15. RETURN TO

Alley Zoellner
Minnesota Department of Human Services
Federal Relations Unit
540 Cedar Street, PO Box 64983
Saint Paul, MN 55164

FOR CMS USE ONLY

16. DATE RECEIVED **January 9, 2023**

17. DATE APPROVED

January 27, 2023

PLAN APPROVED - ONE COPY ATTACHED

18. EFFECTIVE DATE OF APPROVED MATERIAL

January 1, 2023

19. SIGNATURE OF APPROVING OFFICIAL

[Redacted Signature]

20. TYPED NAME OF APPROVING OFFICIAL

Todd McMillion

21. TITLE OF APPROVING OFFICIAL

Director, Division of Reimbursement Review

22. REMARKS

STATE: MINNESOTA

Effective: January 1, 2023

TN: 23-06

Approved: **January 27, 2023**

Supersedes: 21-32 (19-01, 15-14, 14-17, 11-02, 07-16, 04-15(a), 04-08)

13.d. Rehabilitative services. (continued)

ATTACHMENT 4.19-B

Page 45c

Crisis assessment, crisis intervention, and crisis stabilization

provided as part of mental health crisis response services are paid:

- As described in item 4.b. when provided by mental health professionals or mental health practitioners;
- when provided by mental health rehabilitation workers, the lower of the submitted charge or \$18.59 per 15- minute unit;
- in a group setting (which does not include short-term services provided in a supervised, licensed residential setting that is not an IMD), regardless of the provider, the lower of the submitted charge or \$9.29 per 15-minute unit. For the purposes of mental health crisis response services, "group" is defined as two to 10 recipients;

For a supervised, licensed residential setting with four or fewer beds, and does not provide intensive residential treatment services, payment is based on a historical calculation of the average cost of providing the component services of crisis assessment, crisis intervention and crisis stabilization in a residential setting, exclusive of costs related to room and board or other unallowable facility costs, and is equal to the lower of the submitted charge or \$523.10 ~~\$484.80~~ per day.