

Table of Contents

State/Territory Name: Pennsylvania

State Plan Amendment (SPA) #: PA 25-0002

This file contains the following documents in the order listed:

- 1) Approval Letter
- 2) CMS 179 Form/Summary Form
- 3) Approved SPA Pages

DEPARTMENT OF HEALTH & HUMAN SERVICES

Centers for Medicare & Medicaid Services
Center for Medicaid & CHIP Services
230 South Dearborn
Chicago, Illinois 60604



Financial Management Group

April 1, 2025

Valerie A. Arkoosh, MD, MPH
Acting Secretary of Human Services
Commonwealth of Pennsylvania
Department of Human Services
Office of Medical Assistance Programs
Bureau of Policy, Analysis, and Planning
P.O. Box 2675
Harrisburg, PA 17105-2675

RE: PA-25-0002

Dear Acting Secretary Arkoosh,

The Centers for Medicare & Medicaid Services (CMS) has reviewed the proposed Pennsylvania state plan amendment (SPA) to Attachment 4.19B 25-0002 which was submitted to CMS on January 6, 2025. This SPA implements an alternative payment methodology (APM) for Federally Qualified Health Centers (FQHC) and Rural Health Clinics (RHC) for a supplemental payment at the Medical Assistance (MA) program fee schedule rate for a Long-Acting Reversible Contraceptive (LARC) device and its insertion, or the removal of a LARC device, in addition to payment for an encounter.

We reviewed your SPA submission for compliance with statutory requirements including in sections 1902(a)(2), 1902(a)(13), 1902(a)(30), and 1903 as it relates to the identification of an adequate source for the non-federal share of expenditures under the plan, as required by 1902(a)(2), of the Social Security Act and the applicable implementing Federal regulations.

Based upon the information provided by the state, we have approved the amendment with an effective date of April 1, 2025. 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 Lindsay Michael at lindsay.michael@cms.hhs.gov

Sincerely,

A solid black rectangular box used to redact the signature of the sender.

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 5 — 0 0 0 2

2. STATE

PA

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, 2025~~ April 1, 2025

5. FEDERAL STATUTE/REGULATION CITATION

Title XIX of the Social Security Act

6. FEDERAL BUDGET IMPACT (Amounts in WHOLE dollars)

a. FFY 2025 \$ 1,007,100
b. FFY 2026 \$ 1,352,200

7. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT

Attachment 4.19B, page 2bbbb
Attachment 4.19B, page 2caa

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 PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable)

Attachment 4.19B, page 2bbbb

9. SUBJECT OF AMENDMENT

Alternate payment methodology for Long-Acting Reversible Contraceptives in the Federally Qualified Health Center and Rural Health Clinic settings.

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

12. TYPED NAME
Valerie A. Arkoosh, MD, MPH

13. TITLE
Secretary of Human Services

14. DATE SUBMITTED
January 6, 2025

15. RETURN TO

Commonwealth of Pennsylvania
Department of Human Services
Office of Medical Assistance Programs
Bureau of Policy, Analysis, and Planning
P.O. Box 2675
Harrisburg, PA 17105-2675

FOR CMS USE ONLY

16. DATE RECEIVED
1/6/25

17. DATE APPROVED
April 1, 2025

PLAN APPROVED - ONE COPY ATTACHED

18. EFFECTIVE DATE OF APPROVED MATERIAL
4/1/25

19. SIGNATURE OF APPROVING OFFICIAL

20. TYPED NAME OF APPROVING OFFICIAL
Todd McMillion

21. TITLE OF APPROVING OFFICIAL
Director, DRR

22. REMARKS

Email from state 4/1/25 requesting pen n ink change effective date is approval date.

METHODS AND STANDARDS FOR ESTABLISHING PAYMENTS RATES-OTHER TYPES OF CARE

SERVICE	LIMITATIONS
8. Rural Health Clinic Services	<p data-bbox="667 304 1511 436">Payment is made on the basis of an all-inclusive visit fee established by the Department. See page 2c for descriptions of the prospective payment system (PPS) and supplemental payments under managed care.</p> <p data-bbox="667 478 1166 504">Alternative Payment Methodologies (APM)</p> <p data-bbox="667 548 1209 573">a) <u>Managed Care Organizations (MCOs)</u></p> <p data-bbox="764 617 1474 749">Effective with dates of service on and after January 1, 2016, MCOs began paying rates that are not less than the Fee-for-Service (FFS) provider-specific PPS rate to RHCs that participate in the MCO network.</p> <p data-bbox="764 810 1511 1047">Beginning June 1, 2017, RHCs participating in MCO provider networks have the option to elect to receive payments from MCOs that are at least equal to their FFS provider-specific PPS rate. If the RHC does not elect this option, the Department will make supplemental payments to RHCs that equal the difference between the payment under the PPS rate and the payment provided by the MCO.</p> <p data-bbox="667 1089 1161 1115">b) <u>COVID-19 Vaccine Administration</u></p> <p data-bbox="764 1131 1511 1360">The Department pays RHCs that agree to this APM a supplemental payment of the Medical Assistance (MA) Program Fee Schedule rate for the administration of a COVID-19 vaccine when provided during a COVID-19 vaccine-only visit by RHC practitioners who are eligible to generate a billable encounter and have the authority under state law to administer the vaccine.</p> <p data-bbox="667 1404 1300 1430">c) <u>Long-Acting Reversible Contraceptive (LARC)</u></p> <p data-bbox="764 1446 1528 1644">Effective with dates of service on and after April 1, 2025, the Department pays RHCs that agree to this APM a supplemental payment of the MA Program Fee Schedule rate for either a LARC device and its insertion, or the removal of a LARC device, in addition to payment for an encounter.</p>

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

Alternative Payment Methodologies (APM) for Federally Qualified Health Centers (FQHCs)

SERVICE	LIMITATIONS
---------	-------------

e. Long-Acting Reversible Contraceptive (LARC)

Effective with dates of service on and after April 1, 2025, the Department pays FQHCs that agree to this APM a supplemental payment of the Medical Assistance Program Fee Schedule rate for either a LARC device and its insertion, or the removal of a LARC device, in addition to payment for an encounter.