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State/Territory Name: Rhode Island

State Plan Amendment (SPA) #: 21-0012

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
May 23, 2022

Ana P. Novais, MA, Acting Secretary
Womazetta Jones, Secretary
Executive Office of Health and Human Services State of Rhode Island
3 West Road
Cranston, Rhode Island 02920

Re: Rhode Island State Plan Amendment (SPA) 21-0012

Dear Acting Secretary Novais:

The Centers for Medicare & Medicaid Services (CMS) reviewed your Medicaid State Plan Amendment (SPA) submitted under transmittal number 21-0012. This amendment proposes to add coverage of certified community health worker (CHW) services who provide health promotion and coaching; health education and training; health system navigation and resource coordination services; and care planning.

We conducted our review of your submittal according to statutory requirements in Title XIX of the Social Security Act and implementing regulations 42 CFR 440.130. This letter is to inform you that Rhode Island Medicaid SPA Transmittal Number 21-0012 was approved on May 23, 2022 with an effective date of July 1, 2021.

As described in the state’s letter to CMS dated April 29, 2022 regarding its Hospital Licensing Fee (HLF) and in CMS’s response letter dated May 19, 2022, please note that CMS’s approval of this State Plan Amendment (SPA) whose non-federal share source may include the HLF relates only to the requested change in payment methodology, not the source of non-federal share. Approval of this SPA does not relieve the state of its responsibility to comply with federal laws and regulations, and to ensure that claims for federal financial participation are consistent with all applicable requirements.
If you have any questions, please contact Joyce Butterworth at 857-338-0554 or via email at Joyce.Butterworth@cms.hhs.gov.

Sincerely,

James G. Scott, Director
Division of Program Operations

cc: Kristin Sousa, Interim Medicaid Program Director
Kathryn Thomas, Senior Economic and Policy Analyst
**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**HEALTH CARE FINANCING ADMINISTRATION**

**TRANSMITTAL AND NOTICE OF APPROVAL OF STATE PLAN MATERIAL**

<table>
<thead>
<tr>
<th>1. TRANSMITTAL NUMBER:</th>
<th>21-0012</th>
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<tbody>
<tr>
<td>2. STATE RI</td>
<td></td>
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<tr>
<td>3. PROGRAM IDENTIFICATION: TITLE XIX OF THE SOCIAL SECURITY ACT (MEDICAID)</td>
<td></td>
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<tr>
<td>4. PROPOSED EFFECTIVE DATE</td>
<td></td>
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<tr>
<td>July 1, 2021</td>
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**FOR: CENTERS FOR MEDICARE AND MEDICAID SERVICES**

**TO: REGIONAL ADMINISTRATOR**

**CENTERS FOR MEDICARE AND MEDICAID SERVICES**

**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**5. TYPE OF PLAN MATERIAL (Check One):**

- [ ] NEW STATE PLAN
- [ ] AMENDMENT TO BE CONSIDERED AS NEW PLAN
- [ ] AMENDMENT

**COMPLETE BLOCKS 6 THRU 10 IF THIS IS AN AMENDMENT (Separate Transmittal for each amendment)**

6. FEDERAL STATUTE/REGULATION CITATION:

42 CFR 440.130

7. FEDERAL BUDGET IMPACT:

- a. FFY 2021 $687,488
- b. FFY 2022 $2,648,317

8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT:

- Attachment 3.1-A Supplement to Page 9a
- Attachment 3.1-A Supplement to Page 9a-1
- Attachment 3.1-A Supplement 2 to Page 9a-2
- Attachment 4.19-B Page 3E
- Attachment 7.19-B Page 3E-T
- Attachment 3.1-A Supplement to Page 6, Page 6.12
- Attachment 3.1-A Supplement to Page 6, Page 6.13

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

- NEW
- NEW
- NEW
- NEW
- NEW
- OTHER, AS SPECIFIED: See Attached Letter

10. SUBJECT OF AMENDMENT:

Community Health Worker Services

11. 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

12. SIGNATURE OF STATE AGENCY OFFICIAL:

[Blank]

13. TYPED NAME: Womazetta Jones

14. TITLE: Secretary

15. DATE SUBMITTED: September 28, 2021

16. RETURN TO: EOHHS

3 West Rd, Virks Building

Cranston, RI 02920

17. DATE RECEIVED: September 28, 2021

18. DATE APPROVED: May 23, 2022

19. EFFECTIVE DATE OF APPROVED MATERIAL: July 1, 2021

20. SIGNATURE OF REGIONAL OFFICIAL:

[Blank]

21. TYPED NAME: James G. Scott, Director, Division of Program Operations

22. TITLE: Director, Division of Program Operations

23. REMARKS:

Pen & Ink change to Box 8 correcting pagination issues.
Community Health Worker Services Payment:

Payment methodology:

Service time billed must be for either direct contact with a beneficiary (in-person or through telehealth) or for collateral services on an individual basis. Collateral services are those delivered on behalf of an individual beneficiary but that are not delivered in that beneficiary’s presence/directly to the beneficiary. The collateral service must actively involve the beneficiary in the sense of being tailored to the beneficiary’s individual needs. There may be times when, based on clinical judgment, the beneficiary is not present during the delivery of the service, but remains the focus of the service.

Rates established are inclusive of travel time and time spent conducting outreach to a new patient not yet receiving any CHW services.

The bases of payment are:

1. 15-minute units of service for individuals (new patients)
2. 15-minute units of service for individuals (established patients)
3. 15-minute units of service for groups of 2 or more beneficiaries

Rates and Rate Increases:

The current rates will be published at: https://eohhs.ri.gov/providers-partners/fee-schedules. These rates are effective as of July 1, 2021.

The following methodology will be used to calculate annual adjustments to rates for CHW services:

- Each July 1, the rates that were in effect on October 1st of the preceding calendar year will be trended by the March release of the New England Consumer Price Index Card, as determined by the United States Department of Labor for medical care (which contains February data).

Limitations or prior authorization requirements:

There are no limitations or prior authorization requirements.
13.C.1 Preventive Services

Community Health Worker Services:

Description of the services and each of the component services:

Community Health Worker (CHW) services is a preventive health service to prevent disease, disability, and other health conditions or their progression; to prolong life; and/or to promote physical and mental health and efficiency.

CHWs are frontline public health professionals who often have similar cultural beliefs, chronic health conditions, disability, or life experiences as other people in the same community. As trusted leaders, they often serve as a link between their community and needed health or social services. CHWs help to improve access to, quality of, and cultural responsiveness of service providers. These trusting relationships enable them to serve as a liaison/link/intermediary between health/social services and the community to facilitate access to services and improve the quality and cultural responsiveness of service delivery. CHWs build individual and community capacity by increasing health knowledge and self-sufficiency through a range of activities such as engagement, community education, social support and advocacy. CHWs hold a unique position within an often-rigid health care system in that they can be flexible and creative in responding to specific individual and community needs. The unique strength of CHWs is their ability to develop rapport with people and other community members due to shared culture, community residence, chronic condition, disability, language, and life experiences. They are also able to enhance the cultural and linguistic appropriateness of care and help to counteract factors such as social exclusion, poverty, and marginalization. An important role of the CHW is to advocate for the socioeconomic, environmental, and political rights of individuals and their communities. CHWs often link people to needed health information and services. By addressing the social and environmental situations that interfere with an individual or community achieving optimal health and well-being, CHWs prevent disease, disability, and other health conditions or their progression, prolong life, and promote physical and mental health and efficiency.

The following component services are covered when performed by CHWs within the scope of their practice:

- **Health Promotion and Coaching** for beneficiaries, including assessment and screening for health-related social needs, setting goals and creating an action plan, and providing information and/or coaching.

- **Health Education and Training** for groups of beneficiaries on methods and measures that have been proven effective in preventing disease, disability, and other health conditions or their progression; prolonging life; and/or promoting physical and mental health and efficiency. Health Education and Training services provided by CHWs are covered when the CHW provides the education and/or training using established training materials.
Health system navigation and resource coordination services, including helping to engage, re-engage, or ensure patient-led follow-up in primary care, routine preventive care, adherence to treatment plans, and/or self-management of chronic conditions including by assisting beneficiaries to access covered services and other relevant community resources.

Care planning with a beneficiary’s interdisciplinary care team as part of a team-based, person-centered approach to prevent disease, disability, and other health conditions, prolong life, and/or promote physical and mental health and efficiency by meeting a beneficiary’s situational health needs and health-related social needs, including time-limited episodes of instability and ongoing secondary and tertiary prevention for members with chronic condition management needs.

CHW services must be recommended by licensed practitioner of the healing arts within the scope of their practice under State law.

Provider Qualifications:

Qualified CHWs are:

1. Individuals certified by the Rhode Island Certification Board as a CHW; or
2. Individuals who have a plan for working toward RI certification, to be achieved within 18 months.

Certification by the Rhode Island Certification Board includes the following requirements:

- Completion of six months or 1,000 hours of paid or volunteer work experience within the last five years;
- Completion of 50 hours of supervised work;
- Completion of 70 hours of education; and
- Submission of a portfolio, which is a collection of personal and professional activities and achievements.