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State/Territory Name: RI

State Plan Amendment (SPA) #: 22-0005

This file contains the following documents in the order listed:

- 1) Approval Letter
- 2) Summary Form (with 179-like data)
- 3) Approved SPA Pages

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

August 31, 2022

Ana P. Novais, MA, Acting Secretary Executive Office of Health and Human Services 3 West Road, Virks Building Cranston, RI 02920

Re: Rhode Island State Plan Amendment (SPA) TN 22-0005

Dear Acting Secretary Novais:

The Centers for Medicare & Medicaid Services (CMS) reviewed your Medicaid State Plan Amendment (SPA) submitted under transmittal number (TN) 22-0005. This amendment proposes to provide First Connections program services to pregnant women.

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's Medicaid SPA Transmittal Number 22-0005 was approved on August 31, 2022, with an effective date of April 26, 2022. Enclosed is a copy of the CMS-179 summary form and the approved SPA pages for incorporation into the state plan.

If you have 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

Enclosures

cc: Kristin Sousa, Interim Medicaid Program Director Kathryn Thomas, Senior Economic and Policy Analyst

TRANSMITTAL AND NOTICE OF APPROVAL OF STATE PLAN MATERIAL FOR: CENTERS FOR MEDICARE & MEDICAID SERVICES	<u> </u>	
TO: CENTER DIRECTOR CENTERS FOR MEDICAID & CHIP SERVICES DEPARTMENT OF HEALTH AND HUMAN SERVICES	4. PROPOSED EFFECTIVE DATE April 1, 2022 April 26, 2022	
5. FEDERAL STATUTE/REGULATION CITATION	6. FEDERAL BUDGET IMPACT (Amounts in WHOLE dollars) a. FFY 2022 \$ 11,000	
42 CFR 440.130	a. FFY 2022 \$ 11,000 b. FFY 2023 \$ 45,000	
7. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT Attachment 4.19-B Page 3G Attachment 3.1-A Supplement to Page 6 Page 6.16	8. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable) NEW NEW	
9. SUBJECT OF AMENDMENT		
Documentation of Coverage of First Connections Services		
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	15. RETURN TO	
12. TYPED NAME	1	
Ana Novais		
13. TITLE Acting Secretary		
14. DATE SUBMITTED 06/13/2022		
FOR CMS	USE ONLY	
16. DATE RECEIVED 06/13/2022	17. DATE APPROVED 08/31/2022	
6	ONE COPY ATTACHED	
18. EFFECTIVE DATE OF APPROVED MATERIAL 04/26/2022	19. SIGNATURE OF APPROVING OFFICIAL	
20. TYPED NAME OF APPROVING OFFICIAL	21. TITLE OF APPROVING OFFICIAL	
James G. Scott	Director Division of Program Operations	
22. REMARKS Pen & Ink change to Box 4, updating effective da	te.	

STATE OF RHODE ISLAND

1905(a)13 Preventive Services

13C. Preventive Services

13C. 3 Family Home Visiting Program for At-Risk Families

- 1. A risk assessment and response short-term home visiting program whose goal is the maximum reduction of physical or mental disability. It is designed to ensure that expectant parents are connected to appropriate services and aims to connect parents to necessary services at the earliest possible opportunity. On the recommendation of a licensed practitioner of the healing arts, First Connections visitors deliver services to expectant parents in the home, including:
 - a. Responding to urgent parent needs, such as helping access food or medical care, within 48 hours to prevent health problems during pregnancy;
 - b. Assist with connecting parents to housing, clothing, and nutrition resources to prevent poor health and/or adverse birth outcomes;
 - c. Provides referrals to social services as necessary
 - d. Providing care coordination among multiple services;
- 2. Expectant parents are primarily identified for referral through screening done during prenatal visits.
- 3. Provider Qualifications
 - Agencies who provide the program must meet RI First Connections Certification standards.
 - i. Certification requirements include:
 - 1. Demonstration of commitment to linguistic and cultural competence by the entity.
 - 2. Plan to recruit, retain, and promote a diverse staff and leadership team.
 - 3. Entity assurance of equal access as outlined by the Department of Justice, Prohibition Against National Origin Discrimination affecting Limited English Proficient Persons.
 - b. Individuals providing home visits include:
 - i. Registered Nurse
 - ii. Licensed Clinical Social Worker
 - iii. Licensed Independent Clinical Social Worker
 - iv. Licensed Mental Health Counselor
 - v. Certified Community Health Worker as defined in Attachment 3.1-A Supplement to page 6.

TN No: <u>22-0005</u>
Supersedes TN No: <u>NEW</u>

Effective Date: <u>04/26/2022</u>
Approval Date: <u>08/31/2022</u>

STATE OF RHODE ISLAND

Reimbursement for Preventive Services: First Connections Services

1. Payment methodology

- a. Agencies bill the state Medicaid agency or RIDOH directly on a per-visit basis
- b. The rates are structured to capture the cost of direct services, including intake visits and care coordination, and indirect services, such as billing activities in accordance with 2CFR 200 and the RI approved cost allocation plan.

2. Rate Increases:

EOHHS does not increase rates based on a set inflation factor on a pre-determined basis. The State will provide a temporary rate increase effective July 1, 2022 through June 30 2023 for the services below to stabilize the First Connections program following the high volume of referrals and need for care coordination during the COVID PHE.

Provider Type	Code	Description of Code	New Rate for Code per HCBS eFMAP Increase
010- Skilled Nursing 059- Early Intervention	99502TD	Home visit newborn care and assessment; Nurse	\$343.44
010- Skilled Nursing 059- Early Intervention	99502AJ	Home visit newborn care and assessment; Social Worker	\$271.40
010- Skilled Nursing 059- Early Intervention	99502	Home visit for newborn care and assessment	\$239.83
010- Skilled Nursing 059- Early Intervention	H1000	Prenatal care, at risk assessment	\$396.92

3. Date of Effective Rates

EOHHS' rates were set as of April 26, 2022 and are effective for services on or after that date. Effective June 30, 2023, the temporary rate increases reflected in the table above will end and the rates will return to the amounts effective prior to July 1, 2022.

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