

## **Table of Contents**

**State/Territory Name: Washington**

**State Plan Amendment (SPA) #: 23-0025**

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  
601 E. 12th St., Room 355  
Kansas City, Missouri 64106



Medicaid and CHIP Operations Group

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July 27, 2023

Susan Birch, Director  
Dr. Charissa Fotinos, Medicaid Director  
Health Care Authority  
PO Box 45502  
Olympia, WA 98504-5010

Re: Washington State Plan Amendment (SPA) Transmittal Number 23-0025


Dear Susan Birch and Dr. Fotinos:

The Centers for Medicare & Medicaid Services (CMS) reviewed your Medicaid State Plan Amendment (SPA) submitted under transmittal number (TN) WA-23-0025. This amendment will add language back to the Medicaid State Plan to clarify the state covers and reimburses all United States Preventive Services Task Force (USPSTF) grade A and B preventive services and approved vaccines recommended by the Advisory Committee on Immunization Practices (ACIP).

We conducted our review of your submittal according to statutory requirements in Title XIX of the Social Security Act. This letter is to inform you that Washington state Medicaid SPA TN 23-0025 was approved on July 20, 2023, with an effective date of April 1, 2023.

If you have any questions, please contact Edwin Walaszek at 212-616-2512 or via email at [Edwin.Walaszek1@cms.hhs.gov](mailto:Edwin.Walaszek1@cms.hhs.gov).

Sincerely,

 Digitally signed by  
James G. Scott -S  
Date: 2023.07.27  
18:05:15 -05'00'

James G. Scott, Director  
Division of Program Operations

Enclosures

cc: [Ann Myers-ann.myers@hca.wa.gov](mailto:Ann.Myers-ann.myers@hca.wa.gov)

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

1. TRANSMITTAL NUMBER

2 3 — 0 0 2 5

2. STATE

WA

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

April 1, 2023

5. FEDERAL STATUTE/REGULATION CITATION

1902(a) of the Act

6. FEDERAL BUDGET IMPACT (Amounts in WHOLE dollars)

a. FFY 2023 \$ 0  
b. FFY 2024 \$ 0

7. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT

Attachment 3.1-A page 36  
Attachment 3.1-B page 36

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 PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable)

Attachment 3.1-A page 36  
Attachment 3.1-B page 36

9. SUBJECT OF AMENDMENT

Add USPSTF to Preventive 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: Exempt

11. SIGNATURE OF STATE AGENCY OFFICIAL

 MD, MSc

12. TYPED NAME

Charissa Fotinos MD, MSc

13. TITLE

Medicaid and Behavioral Health Medical Director

14. DATE SUBMITTED

June 30, 2023

15. RETURN TO

State Plan Coordinator  
POB 42716  
Olympia, WA 98504-2716

**FOR CMS USE ONLY**

16. DATE RECEIVED

June 30, 2023

17. DATE APPROVED

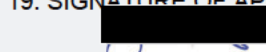
July 27, 2023

**PLAN APPROVED - ONE COPY ATTACHED**

18. EFFECTIVE DATE OF APPROVED MATERIAL

April 1, 2023

19. SIGNATURE OF APPROVING OFFICIAL

 Digitally signed by James G. Scott -S  
Date: 2023.07.27 18:09:45 -05'00'

20. TYPED NAME OF APPROVING OFFICIAL

James G. Scott

21. TITLE OF APPROVING OFFICIAL

Director, Division of Program Operations

22. REMARKS

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State WASHINGTON

AMOUNT, DURATION, AND SCOPE OF MEDICAL AND REMEDIAL CARE AND SERVICES PROVIDED TO THE CATEGORICALLY NEEDY

13. c. Preventive services

**Screening, Brief Intervention, and Referral to Treatment (SBIRT) services (cont.)**

Provider	Qualifications	Services Provided	Servicing or Billing Provider
Marriage & family therapist	• Licensed per chapters 18.225 RCW & 246-809 WAC	All	Billing & servicing: may provide & bill for services
Mental health counselor	• Licensed per chapters 18.225 RCW & 246-809 WAC	All	Servicing: may not bill independently for services
Physician	• Licensed per chapters 18.71 RCW & 246-919 WAC	All	Billing & servicing: may provide & bill for services
Physician assistant	• Licensed per chapters 18.71A RCW & 246-918 WAC	All	Servicing: may not bill independently for services
Psychologist	• Licensed per chapters 18.83 RCW & 246-840 WAC	All	Billing & servicing: may provide & bill for services
Registered nurse	• Licensed per chapters 18.79 RCW & 246-840 WAC	All	Servicing: may not bill independently for services
Social worker: advanced & independent	• Licensed per chapters 18.225 RCW & 246-809 WAC	All	Billing & servicing: may provide & bill for services

**B. SERVICES**

SBIRT services are covered for determining risk factors that are related to alcohol and other drug use disorders. SBIRT services are:

- *Screening and assessment* (Occurs during an Evaluation and Management (E/M) exam which involves client history, a physical exam, and medical decision-making): The health care professional uses a standardized screening tool to assess a client's substance use behaviors.
- *Brief intervention* in the form of counseling (Limited to 4 sessions per client per provider per calendar year; additional sessions are allowed with prior authorization when medically necessary. In accordance with EPSDT requirements at 1905(r), clients under 21 years of age will receive all medically necessary services to which they are entitled): The health care professional engages the client in a short conversation, providing health information, feedback, motivation, and advice.
- *Referral for treatment*, if indicated: The health care professional provides a referral to a licensed and certified behavioral health agency for assessment and treatment as appropriate.

Washington covers and reimburses all United States Preventive Services Task Force (USPSTF) grade A and B preventive services and approved adult vaccines recommended by the Advisory Committee on Immunization Practices (ACIP), and their administration, without cost-sharing. Changes to ACIP recommendations are incorporated into coverage and billing codes as necessary.

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State WASHINGTON

AMOUNT, DURATION, AND SCOPE OF SERVICES PROVIDED TO THE  
MEDICALLY NEEDY GROUP(S): ALL

13. c. Preventive services  
**Screening, Brief Intervention, and Referral to Treatment (SBIRT) services (cont)**

Provider	Qualifications	Services Provided	Servicing or Billing Provider
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Physician	<ul style="list-style-type: none"> <li>Licensed per chapters 18.71 RCW &amp; 246-919 WAC</li> </ul>	All	Billing & servicing: may provide & bill for services
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