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State/Territory Name: WA

State Plan Amendment (SPA) #: 23-0047

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 24, 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 23-0047

Dear Susan Birch and Dr. Fotinos:

Enclosed please find a corrected approval package for your Washington State Plan Amendment (SPA) submitted under transmittal Number (TN) WA-23-0047. This SPA, which will add Dental Health Aide Therapists per Court Order on January 12, 2023, and will align original SPA 17-0027 submitted on August 22, 2017, into the current Washington State Medicaid plan to cover and reimburse Dental Health Aide Therapists in accordance with state Senate Bill 5079 (codified into law at RCW 70.350.020).

The approval package sent to Washington included the following errors:

- Incorrect version of attachment 4.19-B was included in the original state submission.
- Pen and Ink change to the CMS 179 to accurately reflect the correct SPA pages.

The enclosed corrected package contains the original signed letter, the corrected CMS-179, and the corrected SPA pages.

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

Sincerely.

James G. Scott, Director Division of Program Operations

Enclosures

cc: Ann Myers-ann.myers@hca.wa.gov

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 22, 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 23-0047

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-23-0047. This amendment will add Dental Health Aide Therapists per Court Order on January 12, 2023, and will align original SPA 17-0027 submitted on August 22, 2017, into the current Washington State Medicaid plan to cover and reimburse Dental Health Aide Therapists in accordance with state Senate Bill 5079 (codified into law at RCW 70.350.020).

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 23-0047 was approved on August 21, 2023, with an effective date of July 14, 2023.

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

Sincerely,

Nicole McKnight, Acting Director Division of Program Operations

Enclosures

cc: Ann Myers-ann.myers@hca.wa.gov

| TRANSMITTAL AND NOTICE OF APPROVAL OF STATE PLAN MATERIAL FOR: CENTERS FOR MEDICARE & MEDICAID SERVICES TO: CENTER DIRECTOR CENTERS FOR MEDICAID & CHIP SERVICES DEPARTMENT OF HEALTH AND HUMAN SERVICES 5. FEDERAL STATUTE/REGULATION CITATION 1902(a) of the Act 7. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT Attachment 3.1-A page 20 Attachment 3.1-B page 21 Attachment 4.19-B page 2+ 14 | 1. TRANSMITTAL NUMBER 2 3 — 0 0 4 7 WA 3. PROGRAM IDENTIFICATION: TITLE OF THE SOCIAL SECURITY ACT XIX XXI 4. PROPOSED EFFECTIVE DATE July 14, 2023 6. FEDERAL BUDGET IMPACT (Amounts in WHOLE dollars) a. FFY 2023 \$ 0 b. FFY 2024 \$ 0 8. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable) Attachment 3.1-A page 20 Attachment 3.1-B page 21 Attachment 4.19-B page 24- 14 (TN #23-0006) | |
|---|--|--|
| SUBJECT OF AMENDMENT Technical Correction to Add Dental Health Aide Therapists per Cou | rt Order re SPA WA 17-0027 | |
| 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 | |
| St TYPED NAME | 5. RETURN TO tate Plan Coordinator OB 42716 Iympia, WA 98504-2716 | |
| 13. TITLE Medicaid and Behavioral Health Medical Director 14. DATE SUBMITTED July 14, 2023 | | |
| FOR CMS US | | |
| 16. DATE RECEIVED July 14, 2023 | 7. DATE APPROVED August 21, 2023 | |
| PLAN APPROVED - ONE | COPY ATTACHED | |
| 18. EFFECTIVE DATE OF APPROVED MATERIAL 19 | D. SIC | |
| July 14, 2023 | | |
| 20. TYPED NAME OF APPROVING OFFICIAL 21 | TITLE OF APPROVING OFFICIAL | |
| James G. Scott | rector, Division of Program Operations | |
| 22. REMARKS 8/24/23:State authorized pen and ink changes to blocks 7 & 8. | | |

FORM CMS-179 (09/24)

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

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| CARE AND S | SERVICES PROVIDED TO THE CATEGORICALLY | NEEDY |

6. Other Practitioners Services

Medical care and any other type of remedial care recognized under State law, furnished by licensed practitioners within the scope of their practice as defined by State law

- a. Podiatrists' services
 - (1) Foot care is covered only for specific medical conditions that must be treated by a podiatrist.
 - (2) Reimbursement is according to Attachment 4.19-B III. Physicians' Services.
- b. Optometrists' services
 - (1) The Medicaid agency covers medically necessary eye examinations, refractions, and fitting fees every 24 months for asymptomatic adults 21 years or older.
 - (2) Exceptions will be considered for all individuals based on medical necessity.
 - (3) For clients under 21 years of age, services will be provided in accordance with EPSDT requirements at 1905(r), subject to determination of medical necessity and prior authorization by the Medicaid agency.
- d. Other practitioners' services
 - (1) All other practitioners covered by the Medicaid agency include, but are not limited to, the following licensed practitioners: pharmacists, naturopathic physicians (services are limited to physician-related primary care services), physician assistants, advanced registered nurse practitioners including certified registered nurse anesthetists, psychologists, dental hygienists, denturists, chiropractors (for EPSDT only), opticians, licensed non-nurse midwives, and dental health aide therapists* (under the supervision of a dentist within their scope of practice as defined under state law. The supervising licensed practitioner assumes professional responsibility for the services provided by the unlicensed practitioner and the licensed practitioner bills for services furnished by unlicensed practitioners). These practitioners are limited to services within their scope of practice and specialty area. *Technical correction: Dental health aide therapists added per SPA 17-0027 approved 6/21/2023 effective 7/23/2017.
 - Pharmacy interns and pharmacy technicians may furnish services in accordance with their professional scope of practice in accordance with state law.
 - Pharmacies are qualified providers of COVID-19 vaccinations per the HHS COVID-19 PREP Act Declaration and authorizations.
 - (2) Counselors, social workers, and other practitioners are covered as specified in other sections of the State Plan and as approved by the Medicaid agency.
 - (3) Mental health outpatient services may be provided by the following providers licensed by the state under 42 CFR 440.060(a): Licensed Psychologists; Licensed Psychiatric Advanced Nurse Practitioners; Licensed Independent Clinical Social Workers; Licensed Advance Social Workers; Licensed Marriage and Family Therapists; and Licensed Mental Health Counselors.

To diagnose and treat clients eighteen years of age and younger, the practitioner must be listed above and must:

- a. Meet state requirements for a Children's Mental Health Specialist; or
 - b. Be working under the supervision of a licensed practitioner listed above who meets the state requirement for a Children's Mental Health Specialist.

Mental health payment rates methodology is in accordance with Attachment 4.19-B.

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

| State | WASHINGTON | |
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6. d.Other practitioners' services

- (1) All other practitioners covered by the department include, but are not limited to, the following licensed practitioners: pharmacists, naturopathic physicians (services are limited to physician-related primary care services), physician assistants, advanced registered nurse practitioners including certified registered nurse anesthetists, psychologists, dental hygienists, denturists, chiropractors (for EPSDT only), opticians, licensed non-nurse midwives, and dental health aide therapists* (under the supervision of a dentist within their scope of practice as defined under state law. The supervising licensed practitioner assumes professional responsibility for the services provided by the unlicensed practitioner and the licensed practitioner bills for services furnished by unlicensed practitioners.) These practitioners are limited to services within their scope of practice and specialty area. *Technical correction: Dental health aide therapists added per SPA 17-0027 approved 6/21/2023 effective 7/23/2017.
 - Pharmacy interns and pharmacy technicians may furnish services in accordance with their professional scope of practice in accordance with state law.
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- (2) Counselors, social workers, and other practitioners are covered as specified in other sections of the State Plan and as approved by the department.
- (3) Mental health outpatient services may be provided by the following providers licensed by the state under 42 CFR 440.060(a): Licensed Psychologists; Licensed Psychiatric Advanced Nurse Practitioners; Licensed Independent Clinical Social Workers; Licensed Advanced Social Workers; Licensed Marriage and Family Therapists; and Licensed Mental Health Counselors.

To diagnose and treat clients eighteen years of age and younger, the practitioner must be listed above and must:

- a. Meet state requirements for a Children's Mental Health Specialist; or
- b. Be working under the supervision of a licensed practitioner listed above who meets the state requirement for a Children's Mental Health Specialist.

Mental health payment rate methodology is in accordance with Attachment 4.19-B.

- (4) The Medicaid agency does not cover services provided by:
 - Acupuncturists
 - Christian Science practitioners or theological healers
 - Herbalists
 - Homeopathists
 - Masseuses
 - Masseurs
 - Sanipractors
- (5) Licensed non-nurse midwives

To participate in home births and in birthing centers, midwives must be an agency-approved provider.

- (6) Psychologists.
 - Psychological testing must be medically necessary, prior authorized, in an outpatient setting, and is limited to 2 units per client.
 - Neurobehavioral status examinations require prior authorization.
 - Neuropsychological testing requires prior authorization.
 - Prior authorization is required for additional services that are medically necessary.

TN #<u>23-0047</u> Supersedes TN #<u>22-0032</u>

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

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POLICY AND METHODS USED IN ESTABLISHING PAYMENT RATES FOR EACH OF THE OTHER TYPES OF CARE OR SERVICE LISTED IN SECTION 1905 (A) OF THE ACT THAT IS INCLUDED IN THE PROGRAM UNDER THE PLAN (cont.)

VI. Dental Services and Dentures

- A. The Medicaid agency pays directly to the specific provider the lesser of the usual and customary charge or a fee based on an agency fee schedule for dentures and dental services that are provided within their specific scope of practice by dentists, dental hygienists, denturists, and dental health aide therapists* (under supervision of a dentist within their scope of practice as defined under state law. The supervising licensed practitioner assumes professional responsibility for the services provided by the unlicensed practitioner and the licensed practitioner bills for services furnished by unlicensed practitioners) throughout the state. There are no geographical or other variations in the fee schedule. *Technical correction: Dental health aide therapists added per SPA 17-0027 approved 6/21/2023 effective 7/23/2017.
- B. The usual and customary charge is defined as that fee usually charged for a given service by an individual dentist, dental hygienist, dental health aide therapist, or denturist to private patients (e.g., that provider's usual fee) and which fee is within the range of usual fees charged by dentists, dental hygienists, or denturists of similar training and experience.
- C. Except as otherwise noted in the plan, fee schedule rates are the same for both governmental and private providers of dentures, dental services and dental hygiene.
 - See 4.19-B I, General, #G for the agency's website where the fee schedules are published.
 - The agency's fee schedule rate was set as of January 1, 2023, and is effective for services provided on or after that date.
- D. Under the Oral Health Connections pilot program, eligible dental providers are paid an enhanced rate to provide up to three additional periodontal treatments (for a total of four) per calendar year to adult Medicaid clients who have diabetes or who are pregnant. The Oral Health Connections pilot program is effective for dates of service on or after January 1, 2019.
- E. Eligible dental providers are paid an enhanced rate to provide additional dental services to eligible clients age 5 and under as described in Attachment 3.1-A and 3.1-B section 10.