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State/Territory Name: Washington

State Plan Amendment (SPA) #: 25-0006

This file contains the following documents in the order listed:

- 1) Approval Letter
- 2) CMS Form 179
- 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

May 28, 2025

MaryAnne Lindeblad, Director Dr. Charissa Fotinos, State Medicaid Director Washington State Health Care Authority Post Office Box 45502 Olympia, WA 98504-5010

Re: Washington State Plan Amendment (SPA) – 25-0006

Dear Director Lindeblad and Dr. Fotinos:

The Centers for Medicare & Medicaid Services (CMS) reviewed your Medicaid State Plan Amendment (SPA) submitted under transmittal number (TN) 25-0006. This amendment will add Certified Anesthesiologist Assistants and Dental Therapists to Other Licensed Providers section in the State Plan.

We conducted our review of your submittal according to statutory requirements in Section 1905 of Title XIX of the Social Security Act (The Act) and implementing regulations at 42 Code of Federal Regulations (CFR) 440.60. This letter informs you that Washington's Medicaid SPA TN WA-25-0006 was approved on May 28, 2025, with an effective date of July 1, 2025.

Enclosed are copies of Form CMS-179 and approved SPA pages to be incorporated into the Washington State Plan.

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

Sincerely,

Shantrina Roberts, Acting Director Division of Program Operations

Enclosures

cc: Ann Myers, Section Manager & State Plan Coordinator, Health Care Authority

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 1905(a)(6), 42 CFR 440.60 7. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT	1. TRANSMITTAL NUMBER 2 5 — 0 0 0 6 WA 3. PROGRAM IDENTIFICATION: TITLE OF THE SOCIAL SECURITY ACT XIX XXI 4. PROPOSED EFFECTIVE DATE July 1, 2025 6. FEDERAL BUDGET IMPACT (Amounts in WHOLE dollars) a FFY 2026 \$ 143,571 b. FFY 2027 \$ 504,630 8. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION	
Attachment 3.1-A pages 20, 20a Attachment 3.1-B page 21	OR ATTACHMENT (If Applicable) Attachment 3.1-A pages 20 (TN# 24-0013), 20a (TN# 24-0013) Attachment 3.1-B page 21 (TN# 24-0013)	
SUBJECT OF AMENDMENT Add Certified Anesthesiologist Assistants and Dental Therapists to Certified Anesthesiologist Assistants and Dental Therapists and Dental The	Other Licensed Providers	
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:	
Sta PC	RETURN TO ate Plan Coordinator OB 42716 ympia, WA 98504-2716	
FOR CMS USE	ONLY	
March 31, 2025	DATE APPROVED May 28, 2025	
PLAN APPROVED - ONE		
	. SIGNATURE OF APPROVING OFFICIAL	
July 1, 2025 20. TYPED NAME OF APPROVING OFFICIAL 21.	TITLE OF APPROVING OFFICIAL	
Shantrina Roberts 22. REMARKS	Acting Director, Division of Program Operations	

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State_	WASHINGTON	
,	DURATION, AND SCOPE OF MEDICAL AND REMEDIAL	
CARE AN	ID 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.
- 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. These practitioners are limited to services within their scope of practice and specialty area.
 - Advanced registered nurse practitioners including certified registered nurse anesthetists
 - Certified behavior support specialists under the supervision of a licensed practitioner covered under this benefit whose scope of practice includes assessment, diagnosis, and treatment of identifiable mental and behavioral health conditions.
 - Chiropractors (for EPSDT only)
 - Dental health aide therapists* (under the supervision of a dentist within the 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.) *Technical correction: Dental health aide therapists added per SPA
 17-0027 approved 6/21/2023 effective 7/23/2017.
 - Dental hygienists
 - Dental therapists under the supervision of a licensed dentist.
 - Denturists
 - Licensed non-nurse midwives
 - Naturopathic physicians (services are limited to physician-related primary care services)
 - Opticians

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State	WASHINGTON		
AMOUNT, DURA	ATION, AND SCOPE OF	MEDICAL AND REME	DIAL
CARE AND SERV	ICES PROVIDED TO TH	HE CATEGORICALLY N	NEEDY

- 6. Other practitioners' services (cont)
 - Pharmacists
 - 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
 - Physician assistants
 - Psychologist
 - Certified substance use disorder professionals
 - (2) 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 Advance Social Workers
 - Licensed Advance Social Worker Associates
 - Licensed Independent Clinical Social Workers
 - Licensed Independent Clinical Social Worker Associates
 - Licensed Marriage and Family Therapists
 - Licensed Mariage and Family Therapist Associates
 - Licensed Mental Health Counselors
 - Licensed Mental Health Counselor Associates
 - Licensed Psychiatric Advanced Nurse Practitioner
 - Licensed Psychologist

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.

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State_	WASHINGTON
AMOUNT, DURATION, MEDICALLY NEED	AND SCOPE OF SERVICES PROVIDED TO THE 'GROUP(S): ALL

- 6. d.Other practitioners' services
 - (1) All other practitioners covered by the department include, but are not limited to, the following licensed practitioners. These practitioners are limited to services within their scope of practice and specialty area.
 - Advanced registered nurse practitioners including certified registered nurse anesthetists
 - Certified behavior support specialists under the supervision of a licensed practitioner covered under this benefit whose scope of practice includes assessment, diagnosis, and treatment of identifiable mental and behavioral health conditions.
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 - Physician assistants
 - Psychologist
 - Certified substance use disorder professionals
 - (2) Other practitioners are covered as specified in other sections of the State Plan and as approved by the department.