

## **Table of Contents**

**State/Territory Name: WI**

**State Plan Amendment (SPA) #: 22-0012**

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

DEPARTMENT OF HEALTH & HUMAN SERVICES  
Centers for Medicare & Medicaid Services  
Center for Medicaid & CHIP Services  
233 North Michigan Ave., Suite 600  
Chicago, Illinois 60601



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**Financial Management Group/ Division of Reimbursement Review**

August 23, 2022

Bailey Dvorak  
State Plan Amendment Coordinator  
Department of Health Services  
1 W. Wilson St.  
P.O. Box 309  
Madison, WI 53701-0309

RE: Wisconsin State Plan Amendment TN: #22-0012

Dear Bailey Dvorak,

We have reviewed the proposed Wisconsin State Plan Amendment, TN: #22-0012 which was submitted to the Centers for Medicare & Medicaid Services (CMS) on June 27, 2022. This State Plan Amendment adds the Collaborative Care Model as a reimbursable service under the Medical Assistance (MA) program under physician services.

Based upon the information provided by the State, we have approved the amendment with an effective date of June 1, 2022. We are enclosing the approved CMS-179 and a copy of the new state plan pages.

If you have any additional questions or need further assistance, please contact Matthew Klein at 214-767-4625 or [matthew.klein@cms.hhs.gov](mailto:matthew.klein@cms.hhs.gov)

Sincerely,

A black rectangular box redacting the signature of Todd McMillion.

Todd McMillion  
Director, Division of Reimbursement Review

Enclosures

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

1. TRANSMITTAL NUMBER

2 2 — 0 0 1 2

2. STATE

WI

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

June 1, 2022

5. FEDERAL STATUTE/REGULATION CITATION

1902(a) of the Social Security Act

6. FEDERAL BUDGET IMPACT (Amounts in WHOLE dollars)

a. FFY 2022 \$ 215,893

b. FFY 2023 \$ 1,972,686

7. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT

New

Attachment 4.19-B

Page 4.d.

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 PAGE NUMBER OF THE SUPERSEDED PLAN SECTION  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

Same

Attachment 4.19-B

Page 4.d.

9. SUBJECT OF AMENDMENT

The Department is going to begin coverage of the Collaborative Care Model under the MA program with a payment only SPA.  
Attached 4.19B for payment of 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:

6/7/2022

11. SIGNATURE OF STATE AGENCY OFFICIAL

6/7/2022

12. TYPED NAME

Lisa Olson

13. TITLE

State Medicaid Director

14. DATE SUBMITTED

6/27/2022

15. RETURN TO

Bailey Dvorak  
State Plan Amendment Coordinator  
1 W. Wilson St.  
P.O. Box 309  
Madison, WI 53701-0309

**FOR CMS USE ONLY**

16. DATE RECEIVED

June 27, 2022

17. DATE APPROVED

August 23, 2022

**PLAN APPROVED - ONE COPY ATTACHED**

18. EFFECTIVE DATE OF APPROVED MATERIAL

June 1, 2022

19. SIGNATURE OF APPROVING OFFICIAL

20. TYPED NAME OF APPROVING OFFICIAL

Todd, McMillion

21. TITLE OF APPROVING OFFICIAL

Director, Division of Reimbursement and Review

22. REMARKS

### Collaborative Care Model Services

Collaborative Care Model services are provided to members in order to reduce symptoms of their behavioral health issues by integrating behavioral health care management services and regular psychiatric consultation within the medical model of physician services. Any full-benefit Medicaid member is eligible to receive Collaborative Care Services if their treating practitioner's clinical judgement warrants integrating these behavioral health services into their medical care.

The state reimburses for Collaborative Care services provided by physicians meeting the requirement of 42 CFR 47.400(a). Only medical providers eligible to provider evaluation and management services are allowed to be a billing provider for this service.

The Department establishes maximum allowable fees for Collaborative Care Model (CoCM) services. Except as otherwise noted in the plan, state-developed fee schedule rates are the same for both governmental and private providers of COCM services. The agency's fee schedule rates were set as of June 1, 2022 and are effective for services provided on or after that date.

All rates are published on the Wisconsin ForwardHealth website:

<https://www.forwardhealth.wi.gov/WIPortal/Subsystem/Publications/MaxFeeDynamicSearch.aspx>

These rates were last updated on June 1, 2022.

For each covered service, the Department shall pay the lesser of a provider's usual and customary charge or the maximum fee established by the Department.

#### Section C Premiums and Cost Sharing:

*The agency will not collect deductibles, copayments, coinsurance, and other cost sharing charges for specified items and services or for specified eligibility groups consistent with 42 CFR 447.52(d) or for specified income levels consistent with 42 CFR 447.52(g).*