

O C T O B E R 2 0 2 5

## Medicaid Health Homes: State Plan Amendment Overview

The Medicaid health home option became available to states in 2011. Since that time, states have made significant strides in using this model to improve care coordination and care management for Medicaid beneficiaries with complex needs. As of October 2025, 19 states and the District of Columbia have a total of 33 approved Medicaid health home models.<sup>1</sup> Details of the states participating in the Medicaid health home opportunity are listed below. Some states have multiple state plan amendments (SPAs) to target different populations, phase in regional implementation or amend an existing program model.

| State                | Model              | SPA Purpose   |
|----------------------|--------------------|---|
| Connecticut          | SMI                | <p><a href="#">CT-15-014</a>: Creates a statewide SMI health home model (approved 9/28/16, effective 10/1/15)</p> <p><a href="#">CT-24-0024</a>: Assures compliance with mandatory annual state reporting requirements (approved 3/21/25, effective 10/1/24)</p>  |
| District of Columbia | SMI                | <p><a href="#">DC-15-005</a>: Creates a districtwide SMI health home model approved (approved 9/2/15, effective 1/1/16)</p> <p><a href="#">DC-18-0006</a>: Amends the My DC Health Home program by making modifications to payment rate and billing methodology, care team structure, service definitions, and health home certification criteria (approved 2/21/19, effective 2/1/19)</p> <p><a href="#">DC-24-0020</a>: Assures compliance with mandatory annual state reporting requirements (approved 10/9/24, effective 9/30/24)</p>   |
| District of Columbia | Chronic conditions | <p><a href="#">DC-16-0012</a>: Creates a districtwide chronic conditions health home model (approved 2/6/17, effective 7/1/17)</p> <p><a href="#">DC-17-0003</a>: Clarifies that the eligible population must have three or more chronic conditions (approved 5/10/17, effective 7/1/17)</p> <p><a href="#">DC-17-0007</a>: Extends provider eligibility for a one-time incentive payment (approved 10/23/17, effective 7/1/17)</p> <p><a href="#">DC-18-0007</a>: Updates health home beneficiary risk adjustment criteria, quality provisions, and reimbursement methodology (approved 12/31/18, effective 12/1/18)</p> <p><a href="#">DC-24-0010</a>: Amends the My Health GPS program by making modifications to staffing ratios, payment reimbursement methodologies, and the needs assessment for level of care review (approved 6/12/24, effective 5/12/24)</p> <p><a href="#">DC-24-0021</a>: Assures compliance with mandatory annual state reporting requirements (approved 10/9/24, effective 9/30/24)</p> |
| Idaho                | I/DD               | <p><a href="#">ID-23-0001</a>: Creates a health home for Medicaid beneficiaries with I/DD and a diagnosis of SMI or autism (approved 6/23/23, effective 1/1/24)</p> <p><a href="#">ID-25-0003</a>: Assures compliance with mandatory annual state reporting requirements (approved 4/22/25, effective 1/1/25)</p>   |

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| Iowa   | SMI/SED            | <p><a href="#">IA-13-002</a>: Creates a health home model focused on SMI in adults and SED in children in five counties (approved 6/18/13, effective 7/1/13)</p> <p><a href="#">IA-14-003</a>: Expands the serious and persistent mental illness (SPMI) health home model to 29 additional counties (approved 4/22/14, effective 4/1/24)</p> <p><a href="#">IA-14-009</a>: Expands the SPMI health home program to 66 additional counties to make the program statewide (approved 6/19/14, effective 7/1/14)</p> <p><a href="#">IA-16-0013</a>: Revises the delivery system and payment methodology for serious and persistent mental illness health home services to reflect the move to statewide managed care (approved 7/12/16, effective 4/1/16)</p> <p><a href="#">IA-21-0003</a>: Updates the Migrated HH.IA-16-013 IA SPMI Health Homes—Managed Care Implementation billing code (approved 5/18/21, effective 1/1/21)</p> <p><a href="#">IA-22-0004</a>: Updates IA-16-013 to reflect the change in the integrated health home informational only code for comprehensive transitional care from G2065 to 99429. Increases the integrated health home PMPM reimbursement rate for pediatric non-integrated care management enrollees (approved 9/12/22, effective 1/1/22)</p>  |
| Kansas | Asthma             | <a href="#">KS-20-0005</a> : Creates a statewide chronic medical conditions health home model (approved 7/16/20, effective 4/1/20)  |
| Kansas | SMI                | <a href="#">KS-20-0004</a> : Creates a statewide SMI health home model (approved 7/16/20, effective 4/1/20)   |
| Maine  | Chronic conditions | <p><a href="#">ME-12-004</a>: Creates a statewide chronic medical conditions health home model (approved 1/23/13, effective 1/1/13)</p> <p><a href="#">ME-13-012</a>: Updates the deadline for health homes to achieve Patient-Centered Medical Home certification (approved 7/12/13, effective 4/1/13)</p> <p><a href="#">ME-22-0033-CCT</a>: Implements Community Care Teams (CCTs) to deliver health home services designed to address whole-person needs, including assessment of level of care coordination needs based on risk factors of adults and children with chronic conditions, polypharmacy, and high emergency department utilization (approved 7/13/23, effective 7/1/22)</p> <p><a href="#">ME-24-0026</a>: Assures compliance with mandatory annual state reporting requirements (approved 11/14/24, effective 10/1/24)</p>   |
| Maine  | SMI/SED            | <p><a href="#">ME-14-001</a>: Creates a statewide SMI health home model (approved 12/17/14, effective 4/1/14)</p> <p><a href="#">ME-15-005</a>: Updates the payment methodology for the SMI health home model (approved 4/21/15, effective 1/1/15)</p> <p><a href="#">ME-16-0001</a>: Revises the reimbursement methodology for comprehensive health home services provided to adults and children with significant mental health and co-occurring diagnoses (approved 9/8/16, effective 1/1/16)</p> <p><a href="#">ME-18-0002</a>: Creates a pay-for-performance component to health home payment and makes other updates to operational aspects of the health home program (approved 1/7/19, effective 4/21/18)</p> <p><a href="#">ME-22-0010</a>: Creates a BHH to address the needs of adults and children with significant mental health and co-occurring diagnoses (approved 2/9/23, effective 7/1/22)</p> <p><a href="#">ME-23-0014-BHH</a>: Updates the reimbursement plan pages to identify two distinct PMPM rates: one for children and one for adults. This was due to in part a rate study performed by a contracted vendor for the MaineCare Rate System Reform codification (approved 6/20/23, effective 1/1/23)</p> <p><a href="#">ME-24-0025-BHH</a>: Assures compliance with mandatory annual state reporting requirements (approved 11/14/24, effective 10/1/24)</p> |
| Maine  | OUD                | <p><a href="#">ME-17-0006</a>: Creates a statewide opioid treatment health home model (approved 10/13/17, effective 10/1/17)</p> <p><a href="#">ME-18-0032</a>: Creates a tiered rate structure to reflect varying levels of treatment and alters staffing requirements (approved 8/7/19, effective 11/21/18)</p> <p><a href="#">ME-22-0018</a>: Adds Patient Navigator for MaineMOM, the perinatal opioid use disorder program (approved 5/27/22, effective 7/1/22)</p> <p><a href="#">ME-24-0023</a>: Assures compliance with mandatory annual state reporting requirements (approved 11/14/24, effective 10/1/24)</p>  |

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| Maryland | SMI/SED and OUD    | <p><a href="#">MD-13-15</a>: Creates a statewide health home model for SMI and substance use disorder (SUD) treatment (approved 9/27/13, effective 10/1/13)</p> <p><a href="#">MD-16-0001</a>: Clarifies the monthly reimbursement rate for health homes (approved 6/23/16, effective 1/1/16)</p> <p><a href="#">MD-18-0008</a>: Increases payment rates for health homes (approved 10/16/18, effective 7/1/18)</p> <p><a href="#">MD-19-0009</a>: Increases payment rates for BHHs (approved 10/29/19, effective 7/1/19)</p> <p><a href="#">MD-20-0006</a>: Allows one-time reimbursement for the completion of each participants' initial intake and assessment necessary for enrollment into the health home (approved 11/3/20, effective 7/1/20)</p> <p><a href="#">MD-21-0005</a>: Increases the rates for Behavioral Health, Health Home Program by 3.5% beginning January 1, 2021 (approved 4/30/21, effective 1/1/21)</p> <p><a href="#">MD-23-0017</a>: Increases provider rates by 3% pursuant to the state Senate/House bill for its 2024 state budget (approved 12/8/23, effective 7/1/23)</p> <p><a href="#">MD-24-0006</a>: Increases reimbursement rates for Behavioral Health, Health Homes by 8% (approved 4/9/24, effective 1/1/24)</p> <p><a href="#">MD-24-0014</a>: Increases reimbursement rates for Behavioral Health, Health Home Program by 3% (approved 9/10/24, effective 7/1/24)</p>                                       |
| Michigan | SMI/SED            | <p><a href="#">MI-14-0008</a>: Creates a SMI health home model in two counties (approved 12/11/14, effective 7/1/14)</p> <p><a href="#">MI-16-1500</a>: Makes technical corrections (approved 3/15/17, effective 10/1/16)</p> <p><a href="#">MI-20-1500</a>: Expands BHHs by adding new qualifying diagnoses, operational components, and new geographic areas (approved 9/9/20, effective 10/1/20)</p>  |
| Michigan | Chronic conditions | <a href="#">MI-15-2000</a> : Creates a chronic conditions health home model in 21 counties (approved 3/4/16, effective, 7/1/16)  |
| Michigan | SUD                | <p><a href="#">MI-18-1500</a>: Creates an opioid treatment health home model in 21 counties (approved 10/3/18, effective 10/1/18)</p> <p><a href="#">MI-20-1501</a>: Expands the opioid health home model to an additional 18 counties (approved 9/9/20, effective 10/1/20)</p> <p><a href="#">MI-21-1500</a>: Expands the opioid health home model to an additional nine counties (approved 11/2/21, effective 10/1/21)</p> <p><a href="#">MI-22-1500</a>: Expands the opioid health home model to an additional five counties (approved 4/1/22, effective 4/1/22)</p> <p><a href="#">MI-22-1501</a>: Expands the opioid health home model to an additional 27 counties (approved 10/26/22, effective 10/1/22)</p> <p><a href="#">MI-23-1500</a>: Expands the opioid health home model to an additional 20 counties; for payments made to health home providers for health homes participants who newly qualify (approved 4/3/23, effective 5/1/23)</p> <p><a href="#">MI-24-1002</a>: Expands the list of applicable diagnoses to reflect the SUD health home in conjunction with the related traditional SPA MI-24-1501 (approved 9/25/24, effective 10/1/24)</p> <p><a href="#">MI-24-1501</a>: Expands the opioid health home model to an additional seven counties and adds additional diagnoses of alcohol use disorder and stimulant use disorder in conjunction with MI-24-1002, allowing the model to expand to a SUD health home model.</p> |

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| Minnesota  | SMI/SED            | <p><a href="#">MN-15-0004</a>: Creates BHHs for adults with SMI and children and youth experiencing SED (approved 3/21/16, effective 7/1/16)</p> <p><a href="#">MN-16-0011</a>: Provides reimbursement to FQHCs and rural health clinics for BHH services, and makes a technical revision to Alternative Payment Method I to reimburse for BHH services (approved 5/9/17, effective 7/1/16)</p> <p><a href="#">MN-16-0012</a>: Makes technical corrections (approved 1/9/17, effective 7/1/16)</p> <p><a href="#">MN-19-0015</a>: Allows for a community health worker to serve in the role of systems navigator on a BHH services team and allows for BHH services to begin following a diagnosis of SMI/SED (approved 10/1/19, effective 12/10/19)</p> <p><a href="#">MN-21-0005</a>: Revises the health home provider section and the health home services section for BHH (approved 5/4/21, effective 1/1/21)</p> <p><a href="#">MN-22-0036</a>: Adds conforming updates in state law, including commissioner authority to grant variance of BHH service provider requirements; clarifies provider requirements and expectations; corrects the list of qualified positions for a Qualified Health Home Specialist; and adds requirement for BHH providers to notify the contact designated by an enrollee's managed care plan within 30 days of the start of BHH services (approved 2/3/23, effective 10/1/22)</p> <p><a href="#">MN-23-0027</a>: Changes the qualification requirements for the Integration Specialist in a mental health setting from a registered nurse to a licensed nurse, which permits the position to be filled by a registered nurse, licensed practical nurse, or an advanced practice nurse (approved 11/7/23, effective 7/1/23)</p> <p><a href="#">MN-24-0008</a>: Increases reimbursement rate by 3% (approved 4/16/24, effective 1/1/24)</p> <p><a href="#">MN-24-0025</a>: Approves of the Medicare economic index to be used as an annual adjustment to payment rates, and the state replacing the "Partner Portal", with a population health management tool to identify past and current treatment or services and identify potential gaps in care (approved 9/6/24, effective 7/1/24)</p> <p><a href="#">MN-24-0035</a>: Assures that data from BHH providers will be included in the state's mandatory core set measure reporting (approved 11/20/24, effective 10/1/24)</p> |
| Missouri   | Chronic conditions | <p><a href="#">MO-11-15</a>: Creates a statewide chronic medical conditions health home model (approved 12/22/11, effective 1/1/12)</p> <p><a href="#">MO-16-0002</a>: Adds mental health conditions and SUD as qualifying conditions for health home participants (approved 6/21/16, effective 4/1/16)</p> <p><a href="#">MO-16-0007</a>: Adds additional chronic care conditions as qualifying conditions for CMHC health homes and makes data conversion from the Medicaid Model Data Lab (approved 12/20/16, effective 6/1/16)</p> <p><a href="#">MO-19-0003</a>: Increases the number of conditions covered under the state health home model (approved 8/15/19, effective 9/1/19)</p> <p><a href="#">MO-19-0020</a>: Adds a 1.5% rate increase to PMPM for Primary Care Health Homes (approved 11/13/19, effective 7/1/19)</p>   |
| Missouri   | I/DD               | <a href="#">MO-24-0005</a> : Creates a statewide Developmental Disabilities (DD) Health Home for individuals served through the Missouri Department of Mental Health, Division of DD, who have a qualifying chronic health condition, have or are at risk of developing another condition, and are eligible for Division of DD services (approved 4/29/24, effective 7/1/24)   |
| Missouri   | SMI and SUD/MH     | <p><a href="#">MO-11-0011</a>: Creates a statewide SMI health home model (approved 10/20/11, effective 1/1/12)</p> <p><a href="#">MO-16-0007</a>: Makes the data conversion from the Medicaid Model Data Lab and adds additional chronic conditions as qualifying conditions for CMHC health homes (approved 12/20/16, effective 6/1/16)</p> <p><a href="#">MO-19-0017</a>: Adds a 1.5% rate increase to PMPM for CMHC Health Homes (approved 11/13/19, effective 7/1/19)</p>  |
| New Jersey | SMI                | <p><a href="#">NJ-14-0005</a>: Creates a BHH for adults in Bergen County (approved 3/12/15, effective 7/1/14)</p> <p><a href="#">NJ-14-0014</a>: Creates a BHH for adults in Mercer County (approved 8/12/15, effective 10/1/14)</p> <p><a href="#">NJ-16-0001</a>: Expands BHHs for adults in Atlantic, Cape May, and Monmouth counties (approved 5/12/16, effective 4/1/16)</p> <p><a href="#">NJ-24-0027</a>: Assures compliance with mandated annual state reporting requirements (approved 2/27/25, effective 10/1/24)</p>  |

| State      | Model                | SPA Purpose   |
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| New Jersey | SED, I/DD and MH/SUD | <p><a href="#"><u>NJ-14-0006</u></a>: Creates a BHH for children under age 21 in Bergen County (approved 3/12/15, effective 7/1/14)</p> <p><a href="#"><u>NJ-14-0015</u></a>: Creates a BHH for children under age 21 in Mercer County (approved 8/12/15, effective 10/1/14)</p> <p><a href="#"><u>NJ-16-0002</u></a>: Expands BHHS for children under age 21 in Atlantic, Cape May, and Monmouth counties (approved 5/12/16, effective 1/1/16)</p> <p><a href="#"><u>NJ-24-0028</u></a>: Assures compliance with mandated annual state reporting requirements (approved 2/27/25, effective 10/1/24)</p>  |
| New Mexico | SMI/SED              | <p><a href="#"><u>NM-15-0014</u></a>: Creates BHHS in two counties (approved 3/21/16, effective 4/1/16)</p> <p><a href="#"><u>NM-18-0002</u></a>: Expands BHHS to eight additional counties with seven providers, one of which will be a Tribal Health Home. Will also pilot a high-fidelity wraparound (HFW) model with two providers for children/adolescents (approved 7/3/18, effective 4/1/18)</p> <p><a href="#"><u>NM-21-0005</u></a>: Adds SUD as an additional eligibility criterion for health home services (approved 4/15/21, effective 1/1/21)</p> <p><a href="#"><u>NM-23-0008</u></a>: Removes the HFW language from the health home SPA since it will now be a part of a new 1115 demonstration to prevent duplication of services (approved 8/15/23, effective 6/30/23)</p> <p><a href="#"><u>NM-24-0010</u></a>: Assures compliance with mandated annual state reporting requirements (approved 1/8/25, effective 12/31/24)</p> |

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| New York | Chronic conditions and SMI/SED | <p><a href="#">NY-11-56</a>: Creates a chronic medical conditions and SMI health home model for high-cost, high-need enrollees in 10 counties (approved 2/3/12, effective 1/1/12)</p> <p><a href="#">NY-12-10</a>: Phase II expands health homes to 13 additional counties (approved 12/4/12, effective 4/1/12)</p> <p><a href="#">NY-12-11</a>: Phase III expands health homes to another 39 counties (approved 12/4/12, effective 7/1/12)</p> <p><a href="#">NY-13-18</a>: Eliminates the proposed blended rate for targeted case management (TCM) programs converting to health homes and continues the full TCM rate for two years (approved 6/24/13, effective 2/14/13)</p> <p><a href="#">NY-13-63</a>: Amends the payment methodology for TCM programs that have become health homes (approved 9/19/14, effective 1/1/14)</p> <p><a href="#">NY-14-0016</a>: Adds distributions from New York's 1115 demonstration waiver to health home payment rates (approved 3/10/15, effective 8/1/14)</p> <p><a href="#">NY-15-0002</a>: Extends the legacy rates for health homes that formerly provided TCM services (approved 3/2/16, effective 1/1/16)</p> <p><a href="#">NY-15-0020</a>: Adds health home eligibility criteria for children with complex trauma (approved 4/7/16, effective 10/1/16)</p> <p><a href="#">NY-16-0034</a>: Continues reimbursement of converted TCM providers at the existing Health Home Legacy rate from September 1, 2016, to November 30, 2016 (approved 12/22/16, effective 9/1/16)</p> <p><a href="#">NY-17-0053</a>: Implements a budget modification for 2017–2018 that reduces the case finding payment and modifies the claiming period for case finding (approved 3/23/18, effective 10/1/17)</p> <p><a href="#">NY-18-0051</a>: Changes payment approach for children's health homes (approved 8/13/18, effective 6/1/18)</p> <p><a href="#">NY-19-0007</a>: Creates a transitional health home payment for providers transitioning from providing eligible children with 1915(c) waiver services to providing eligible children with health home services (approved 1/16/19, effective 1/1/19)</p> <p><a href="#">NY-20-0034</a>: Eliminates the separate PMPM case finding payment to health homes serving adults and health homes serving children (approved 9/9/20, effective 7/1/20)</p> <p><a href="#">NY-21-0026</a>: Adds sickle cell disease as a targeted condition (approved 3/24/22, effective 9/1/21)</p> <p><a href="#">NY-22-0072</a>: Updates health home rates to reflect a 1% across the board rate increase for health home serving adults and children and adjusts Health Home Plus rates statewide to reflect a 5.4% cost of living adjustment (approved 9/16/22, effective 5/1/22)</p> <p><a href="#">NY-22-0088</a>: Adds an assessment fee to the health home program to ensure that any child who may be eligible for home and community-based services (HCBS) under the Children's Waiver, demonstration or state plan authority will be eligible to receive an HCBS assessment under the health home program (approved 3/7/23, effective 10/1/22)</p> <p><a href="#">NY-23-0061</a>: Updates health homes plus rates to reflect 4% cost-of-living adjustment (approved 9/12/23, effective 4/1/23)</p> <p><a href="#">NY-24-0023</a>: Updates the fees of care management for health homes serving children and provides an additional tiered fee for health homes serving children who meet HFW eligibility criteria (approved 6/27/24, effective 1/1/24)</p> <p><a href="#">NY-24-0085</a>: Assures compliance with mandatory annual state reporting requirements and updates the final standards for use of health information technology (approved 2/26/25, effective 12/31/24)</p> |

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| New York       | I/DD                       | <p><a href="#">NY-17-0025</a>: Creates a statewide health home for individuals with I/DD (approved 4/9/18, effective 7/1/18)</p> <p><a href="#">NY-20-0054</a>: Implements program improvements and efficiencies to reflect historical utilization and efficiencies related to the transition to Care Coordination Organizations (CCOs)/Health Homes (approved 12/22/20, effective 7/1/20)</p> <p><a href="#">NY-22-0073</a>: Provides a 5.4% cost of living adjustment for CCOs/Health Homes for individuals with I/DD (approved 9/16/22, effective 4/1/22)</p> <p><a href="#">NY-23-0062</a>: Reflects a 4.0% cost of living adjustment for CCO/Health Home rates for individuals with I/DD (approved 9/12/23, effective 4/1/23)</p> <p><a href="#">NY-24-0084</a>: Assures compliance with mandatory annual state reporting requirements and updates the final standards for use of health information technology (approved 2/26/25, effective 12/31/24)</p>  |
| North Carolina | SMI, I/DD, TBI and SUD     | <p><a href="#">NC-22-0024</a>: Creates a new health home program (approved 6/28/23, effective 7/1/23)</p> <p><a href="#">NC-24-0028</a>: Increases reimbursement rates for higher acuity beneficiaries and assures compliance with mandatory annual state reporting requirements (approved 11/14/24, effective 7/1/24)</p>   |
| Rhode Island   | Chronic conditions and SMI | <p><a href="#">RI-11-0006</a>: Creates a statewide health home model for children and youth with special health care needs (approved 11/23/11, effective 10/1/11)</p> <p><a href="#">RI-16-0001</a>: Implements payment rate and methodology changes for health home services (approved 1/13/17, effective 1/1/16)</p> <p><a href="#">RI-18-0009</a>: Grants authority to offer health home services (i.e., Comprehensive Evaluation, Diagnosis, Assessment, Referral, and Re-Evaluation [CEDARR] services) as a managed care benefit (approved 10/17/18, effective 7/1/18)</p> <p><a href="#">RI-23-0010</a>: Implements a change in payment rate methodology for Cedar Family Centers (approved 12/11/23, effective 7/1/23)</p> <p><a href="#">RI-24-0018</a>: Assures CEDARR health home compliance with mandatory annual state reporting requirements and updates state plan assurances with mandated quality reporting requirements (approved 1/8/25, effective 10/1/24)</p> <p><a href="#">RI-24-0019</a>: Assures compliance with mandatory annual state reporting requirements (approved 1/6/25, effective 10/1/24)</p> <p><a href="#">RI-25-0002</a>: Assures CEDARR health home compliance with mandatory annual state reporting requirements (approved 1/17/25, effective 1/1/25)</p> |
| Rhode Island   | SMI                        | <p><a href="#">RI-11-0007</a>: Creates a statewide BHH for adults (approved 11/23/11, effective 10/1/11)</p> <p><a href="#">RI-16-002</a>: Adds health home services as an in-plan benefit for Medicaid managed care organizations (approved 1/12/17, effective 1/1/16)</p> <p><a href="#">RI-18-006</a>: Removes payment withhold from health home payment methodology (approved 9/27/18, effective 6/1/18)</p>   |
| Rhode Island   | OUD                        | <p><a href="#">RI-13-011</a>: Creates a statewide opioid treatment health home model (approved 11/6/13, effective 7/1/13)</p> <p><a href="#">RI-16-006</a>: Grants authority to move opioid treatment health home services in network for Medicaid managed care organizations (approved 12/9/16, effective 7/1/16)</p> <p><a href="#">RI-21-0025</a>: Removes assertive community treatment services and providers from the health home model (approved 7/29/22, effective 12/1/21)</p> <p><a href="#">RI-25-0001</a>: Assures opioid treatment health home compliance with the mandatory annual state reporting requirements (approved 1/17/25, effective 1/1/25)</p>   |
| South Dakota   | Chronic conditions and SMI | <p><a href="#">SD-13-0008</a>: Creates a statewide chronic medical conditions and SMI health home model (approved 11/21/13, effective 7/2/13)</p> <p><a href="#">SD-19-0003</a>: Implements supplemental incentive payments to health homes (approved 4/30/19, effective 1/1/19)</p> <p><a href="#">SD-20-0008</a>: Implements a 2.0% inflationary increase to the health home PMPM payment (approved 10/21/20, effective 7/1/20)</p> <p><a href="#">SD-22-0009</a>: Codifies a 6.0% inflationary increase in appropriations resulting from recently passed state legislation (approved 10/27/22, effective 7/7/22)</p>  |

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| Tennessee  | SMI                | <p><a href="#">TN-16-0004</a>: Creates a statewide SMI health home model (approved 4/28/17, effective 1/1/17)</p> <p><a href="#">TN-24-0003</a>: Assures compliance with mandatory annual state reporting requirements (approved 11/4/24, effective 10/1/24)</p>  |
| Vermont    | OUD                | <p><a href="#">VT-13-001</a>: Creates an opioid treatment health home model in nine counties (approved 3/4/14, effective 7/1/13)</p> <p><a href="#">VT-14-007</a>: Expands the opioid treatment health home model to five additional counties (approved 4/10/14, effective 1/1/14)</p> <p><a href="#">VT-24-0019</a>: Assures compliance with mandatory annual state reporting requirements (approved 1/17/25, effective 10/1/24)</p>   |
| Washington | Chronic conditions | <p><a href="#">WA-13-08</a>: Creates a chronic medical conditions health home model in 14 counties (Phase I) (approved 6/28/13, effective 7/1/13)</p> <p><a href="#">WA-13-17</a>: Creates a chronic medical conditions health home model in 23 additional counties (Phase II) (approved 12/11/13, effective 10/1/13)</p> <p><a href="#">WA-15-0011</a>: Removes payment withhold and makes technical amendments (approved 6/11/15, effective 1/1/15)</p> <p><a href="#">WA-16-0026</a>: Adds King and Snohomish Counties to the health home program (approved 3/30/17, effective 4/1/17)</p> <p><a href="#">WA-18-0028</a>: Increases provider payments and reduces the performance incentive payment (approved 11/29/18, effective 8/8/18)</p> <p><a href="#">WA-20-0031</a>: Updates the payment methodology for health home services during the period of the Presidential and Secretarial emergency declarations related to the COVID-19 outbreak (approved 11/20/20, effective 7/1/20)</p> <p><a href="#">WA-23-0027</a>: Updates SPA language regarding appropriate provider types to reflect current Care Coordination Organizations and better align with current program policy, and updates rates for the health home program (approved 10/30/23, effective 7/1/23)</p> <p><a href="#">WA-24-0023</a>: Assures compliance with mandatory annual state reporting requirements (approved 10/9/24, effective 10/1/24)</p> |
| Wisconsin  | HIV/AIDS           | <p><a href="#">WI-12-008</a>: Creates a HIV/AIDS health home model in four counties (approved 1/29/13, effective 10/1/12)</p> <p><a href="#">WI-24-0025</a>: Assures compliance with mandatory annual state reporting requirements (approved 1/8/25, effective 10/1/24)</p>   |
| Wisconsin  | SUD                | <p><a href="#">WI-21-0012</a>: Creates a SUD health home model in eight counties and four tribal territories (approved 9/21/23, effective 7/1/21)</p> <p><a href="#">WI-22-0013</a>: Revises the maximum fee rates for SUD health home rates: two new billing tiers have been added to the PMPM reimbursement rate that providers receive for administering the six core health home services. The billing requirements to qualify for tiers of reimbursement will no longer be determined by direct time (time spent with the member in person or via telehealth) but rather by delivery of core service time (approved 9/15/22, effective 5/1/22)</p> <p><a href="#">WI-23-0021</a>: Expands SUD health home services to an additional seven counties and one tribal territory (approved 1/18/24, effective 10/1/23)</p> <p><a href="#">WI-24-0024</a>: Assures compliance with mandatory annual state reporting requirements (approved 1/8/25, effective 12/31/24)</p>   |

Acronym key: BHH = behavioral health home; CMHC = community mental health center; FQHC = federally qualified health center; I/DD = intellectual/developmental disabilities; OUD = opioid use disorder; PMPM = per member per month; SED = serious emotional disturbance; SMI = serious mental illness; SUD = substance use disorder; TBI = traumatic brain injury.

<sup>1</sup> Alabama, California, Delaware, Illinois, Ohio, Oklahoma, Oregon, and West Virginia have terminated their Medicaid health home SPAs and no longer provide health home services.