# **Table of Contents**

# State/Territory Name: Maryland

# State Plan Amendment (SPA) #: 20-0008

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



### **Financial Management Group**

March 8, 2021

Mr. Dennis Schrader, Director Maryland Department of Health 201 W. Preston St., 5th Floor Baltimore, MD 21201

RE: MD-20-0008

Dear Mr. Schrader:

We have reviewed the proposed amendment to Attachment 4.19-B of your Medicaid State plan. This amendment provides a cost of living adjustment for targeted case management services.

Based upon the information provided by Maryland, CMS is approving the amendment with an effective date of JJuly 2, 2020. We are enclosing the approved CMS-179 and a copy of the approved plan pages.

If you have any additional questions or need further assistance, please contact Division of Reimbursement Review (DRR) analyst Gary Knight at (304) 347-5723 or Gary.Knight@cms.hhs.gov.

Sincerely,

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. STATE   2 0 0 0 8   3. PROGRAM IDENTIFICATION: TITLE XIX OF THE SOCIAL SECURITY ACT (MEDICAID)	
TO: REGIONAL ADMINISTRATOR CENTERS FOR MEDICARE & MEDICAID SERVICES DEPARTMENT OF HEALTH AND HUMAN SERVICES	4. PROPOSED EFFECTIVE DATE July 1, 2020 July 2, 2020	
5. TYPE OF PLAN MATERIAL (Check One)		
□ NEW STATE PLAN □ AMENDMENT TO BE CONSIDE	RED AS NEW PLAN	
COMPLETE BLOCKS 6 THRU 10 IF THIS IS AN AMENDMENT (Separate transmittal for each amendment)		
6. FEDERAL STATUTE/REGULATION CITATION	7. FEDERAL BUDGET IMPACT	
42 CFR 447.201	a. FFY 2020 \$ 392 \$397,892 b. FFY 2021 \$ 1,178 \$1,193,676	
8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT	9. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION	
Att 4.19B pg 42, 43, 44 (20-0008)	OR ATTACHMENT <i>(If Applicable)</i> Att 4.19B pg 42, 43, 44 (19-0005)	
10. SUBJECT OF AMENDMENT		
Under this amendment, Maryland is updating its State Plan to increase the reimbursement rate for Targeted Case Management providers by four percent based on a legislative approved Cost of Living Adjustment.		

#### 11. 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

12. ENCY OFFICIAL	16. RETURN TO
	Dennis Schrader
13. TYPED NAME Tricia Roddy	Medicaid Director
14. TITLE	Maryland Department of Health
Assistant Medicaid Director	20 W. Preston St, 5th Floor
15. DATE SUBMITTED	Baltimore, MD 21201
September 29, 2020	
FOR REGIONAL OFFICE USE ONLY	
17. DATE RECEIVED	18. DATE APPROVED
9/29/2020	3/8/2021
PLAN APPROVED - ONE COPY ATTACHED	
19. EFFECTIVE DATE OF APPROVED MATERIAL	20. FFICIAL
7/2/2020	
21. TYPED NAME	22. TITLE
Todd McMillion	Director, FMG, Division of Reimbursement Review
	•

X OTHER, AS SPECIFIED

#### 23. REMARKS

Included in the official RAI response from Maryland on December 15, 2020 were requests to make P&I changes to effective date from July 1 to July 2 in Box 4, P&I changes to add the regulatory citation to Box 6, and P&I changes revising the FFP impact for FY 2020 and 2021 to \$397,892 and \$1,193,676, respectively.

# STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

### State of Maryland

## **Reimbursement Methodology for Targeted Case Management Services – On DDA** Waiting List

- 1. Effective July 2, 2020, payments for Targeted Case Management services to the Community as defined per Section 3.1A, Supplement 7 shall be paid based on a fee-for-service schedule. The rate is the same for both governmental and private individual practitioners.
- 2. Initial Eligibility and Access Comprehensive Assessment is reimbursed at a flat rate of \$450.
- Effective July 2, 2020, the rate will be \$20.72 per unit to reflect a planned FY 21 Cost of Living Adjustment (COLA). A COLA, authorized by Maryland State Legislature, effectively increases the rate for the State Fiscal Year 2021. A unit of service means a 15 minute increment.
- 4. The State assures that billed time does not exceed available productive time by practitioner.
- 5. Services can be provided by qualified professionals that meet the qualifications outlined in Section 3.1A, Supplement 7, §F. DDA Case Management Staff Qualifications.

# STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

#### State of Maryland

## **Reimbursement Methodology for Targeted Case Management Services – Transitioning to the Community**

- 1. Effective July 2, 2020, payments for Targeted Case Management services to the Community as defined per Section 3.1A, Supplement 7 shall be paid based on a fee-for-service schedule. The rate is the same for both governmental and private individual practitioners.
- 2. Initial Eligibility and Access Comprehensive Assessment is reimbursed at a flat rate of \$450.
- 3. Effective July 2, 2020, the rate will be \$20.72 per unit to reflect a planned FY 21 Cost of Living Adjustment (COLA). A COLA, authorized by Maryland State Legislature, effectively increases the rate for the State Fiscal Year 2021. A unit of service means a 15 minute increment.
- 4. The State assures that billed time does not exceed available productive time by practitioner.
- 5. Services can be provided by qualified professionals that meet the qualifications outlined in Section 3.1A, Supplement 7, §F. DDA Case Management Staff Qualifications.

# STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State of Maryland

**Reimbursement Methodology for Targeted Case Management Services – Community Coordination Services** 

- 1. Effective July 2, 2020, payments for Targeted Case Management services to the Community as defined per Section 3.1A, Supplement 7 shall be paid based on a fee-for-service schedule. The rate is the same for both governmental and private individual practitioners.
- 2. Initial Eligibility and Access Comprehensive Assessment is reimbursed at a flat rate of \$450.
- Effective July 2, 2020, the rate will be \$20.72 per unit to reflect a planned FY 21 Cost of Living Adjustment (COLA). A COLA, authorized by Maryland State Legislature, effectively increases the rate for the State Fiscal Year 2021. A unit of service means a 15 minute increment.
- 4. The State assures that billed time does not exceed available productive time by practitioner.
- 5. Services can be provided by qualified professionals that meet the qualifications outlined in Section 3.1A, Supplement 7, §F. DDA Case Management Staff Qualifications.