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**State/Territory Name: Massachusetts** 

State Plan Amendment (SPA) #: 22-0005

This file contains the following documents in the order listed:

- 1) Approval Letter
- 2) CMS 179 Summary Page
- 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 17, 2022

MaryLou Sudders, Secretary
The Commonwealth of Massachusetts
Executive Office of Health and Human Services
Office of Medicaid
One Ashburton Place, Room 1109
Boston, MA 02108

Re: Massachusetts State Plan Amendment (SPA) 22-0005

Dear Secretary Sudders:

We reviewed your proposed Medicaid State Plan Amendment (SPA) submitted under transmittal number (TN) 22-0005. This amendment updates the state plan to add coverage for urgent care clinics.

We conducted our review of your submittal according to statutory requirements in Title XIX of the Social Security Act and implementing regulations 42 CFR Part 440 and 447. This letter is to inform you that Massachusetts Medicaid SPA 22-0005, was approved on August 16, 2022, with an effective date of January 21, 2022. Enclosed is a copy of the CMS-179 summary form, as well as the approved pages for incorporation into the Massachusetts State Plan.

If you have any questions, please contact Marie DiMartino at (617) 565-9157 or via email at Marie.DiMartino@cms.hhs.gov.

Sincerely,

James G. Scott, Director Division of Program Operations

Enclosures

TRANSMITTAL AND NOTICE OF APPROVAL OF STATE PLAN MATERIAL FOR: CENTERS FOR MEDICARE & MEDICAID SERVICES	2 2 - 0 0 0 5 M A
	SECURITY ACT
TO: CENTER DIRECTOR CENTERS FOR MEDICAID & CHIP SERVICES DEPARTMENT OF HEALTH AND HUMAN SERVICES	4. PROPOSED EFFECTIVE DATE 01/21/2022
5. FEDERAL STATUTE/REGULATION CITATION	6. FEDERAL BUDGET IMPACT (Amounts in WHOLE dollars) a FFY 22 \$ 125,000
42 CFR Part 447, 42 CFR 440	b FFY 23 \$ 180,000
7. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT	8. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable)
Supplement to Attachment 3.1-A p. 3-ix1 (NEW) Supplement to Attachment 3.1-B p. 3-ix1 (NEW) Attachment 4.19-B p. 1a13 (NEW)	
9. SUBJECT OF AMENDMENT	
An amendment regarding urgent care clinic services	
10. GOVERNOR'S REVIEW (Check One)	
GOVERNOR'S OFFICE REPORTED NO COMMENT	OTHER, AS SPECIFIED:
COMMENTS OF GOVERNOR'S OFFICE ENCLOSED NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL	Not required under 42 CFR 430.12(b)(2)(i)
11. SIGNATURE OF STATE AGENCY OFFICIAL	15. RETURN TO
12. TYPED NAME Marylou Sudders	The Commonwealth of Massachusetts Executive Office of Health and Human Services Office of Medicaid
13. TITLE Secretary	One Ashburton Place, Room 1109 Boston, MA 02108
14. DATE SUBMITTED	9 m m m m m m m m m m m m m m m m m m m
03/31/22  FOR CMS USE ONLY	
16. DATE RECEIVED 03/31/2022	17. DATE APPROVED 08/16/2022
PLAN APPROVED - ONE COPY ATTACHED	
18. EFFECTIVE DATE OF APPROVED MATERIAL	19. SIGNATURE OF APPROVING OFFICIAL
01/21/2022	
20. TYPED NAME OF APPROVING OFFICIAL	21. TITLE OF APPROVING OFFICIAL Director
James G. Scott	Division of Program Operations
22. REMARKS	577 1595

# State Plan under Title XIX of the Social Security Act State: Massachusetts Amount, Duration, and Scope of Medical and Remedial Care and Services Provided to the Categorically Needy

(Item 9 Clinic Services, continued)

### **l.** Urgent Care clinic

MassHealth covers urgent care services rendered in urgent care clinics. "Urgent Care" is the delivery of episodic care for the diagnosis, treatment, management or monitoring of acute and chronic disease or injury that is:

- (1) for the treatment of illness or injury that is immediate in nature, but does not require emergency services;
- (2) generally provided on a walk-in basis without prior appointment; and
- (3) available to the general public; and not intended as the patient's primary care provider.

When an urgent care clinic provides covered X-rays, laboratory tests, or diagnostic tests to a member in the urgent care clinic during an urgent care visit, MassHealth will cover those X-rays, laboratory tests, or diagnostic tests in addition to the urgent care visit.

TN- 22-0005 Approval Date: 08/16/22 Effective Date: 01/21/22 Supersedes: NEW

## State Plan under Title XIX of the Social Security Act State: Massachusetts Amount, Duration, and Scope of Medical and Remedial Care and Services Provided to the Medically Needy Groups

(Item 9 Clinic Services, continued)

#### **l.** Urgent Care clinic

MassHealth covers urgent care services rendered in urgent care clinics. "Urgent Care" is the delivery of episodic care for the diagnosis, treatment, management or monitoring of acute and chronic disease or injury that is:

- (1) for the treatment of illness or injury that is immediate in nature, but does not require emergency services:
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TN: 22-0005 Approval Date: 08/16/22 Effective Date: 01/21/22 Supersedes: NEW

### State Plan under Title XIX of the Social Security Act State: Massachusetts Methods and Standards for Establishing Payment Rates – Other Types of Care

### (Item h. Clinic Services, continued)

13. Urgent Care Clinic services - See Attachment 4.19-B, sections 8.b and 8.d for the fee-for-service rates for Urgent Care Clinic services. These sections of Attachment 4.19-B are reimbursement methodologies for laboratory and x-ray services, and physician, certified nurse-midwife, certified pediatric and family nurse practitioner, and other midlevel practitioner services, respectively.

TN: 22-0005 Approval Date: 08/16/22 Effective Date: 01/21/22

Supersedes: NEW