

**STATE OF RHODE ISLAND  
EXECUTIVE OFFICE OF HEALTH AND HUMAN SERVICES**

**10/29/2021 PUBLIC NOTICE OF PROPOSED AMENDMENT TO RHODE ISLAND MEDICAID  
STATE PLAN**

In accordance Rhode Island General Laws 42-35, notice is hereby given that the Executive Office of Health and Human Services (EOHHS) proposes to make the following amendment to the Rhode Island State Plan under Title XIX of the Social Security Act:

**Home Care Services Temporary Rate Increases**

EOHHS is seeking approval from the Centers for Medicare and Medicaid Services (CMS) to provide temporary rate increases to Home and Community-Based Services (HCBS) providers as authorized by Section 9817 the American Rescue Plan Act of 2021. The amendment would temporarily increase rates for Skilled Nursing Homecare providers, Severely Disabled Nursing Homecare providers and Home Care Agencies by certain percentages above the current fee schedule as listed by provider type and service on the temporary rate change chart listed on the proposed state plan page between November 1, 2021 and March 31, 2022.

These changes are proposed to take temporary effect on November 1, 2021 and end March 31, 2022. The fiscal impact is approximately \$23,889,000 all funds for Federal Fiscal Year (FFY) 2022.

This proposed amendment is accessible on the EOHHS website ([www.eohhs.ri.gov](http://www.eohhs.ri.gov)) or available in hard copy upon request (401-462-1501 or RI Relay, dial 711). Interested persons should submit data, views, or written comments by Monday, November 29, 2021 to Bryan Law, Executive Office of Health and Human Services, 3 West Rd, Cranston, RI, 02920, or [Bryan.Law@ohhs.ri.gov](mailto:Bryan.Law@ohhs.ri.gov) or via phone at (401) 462-1501.

In accordance with the Rhode Island General Laws 42-35-3, an oral hearing will be granted on the proposed State Plan Amendment if requested by twenty-five (25) persons, an agency, or by an association having at least twenty-five (25) members. A request for an oral hearing must be made within ten (10) days of this notice.

The Executive Office of Health and Human Services does not discriminate against individuals based on race, color, national origin, sex, gender identity or expression, sexual orientation, religious belief, political belief, or handicap in acceptance for or provision of services or employment in its programs or activities.

Signature: \_\_\_\_\_

Original Signed by Womazetta Jones, Secretary, Executive Office of Health and Human Services, Signed this 29th day of October 2021.

**Proposed Revisions to State Plan Pages**

(2) Early, periodic, screening, diagnosis, and treatment of individuals under 21 years of age: on the basis of a negotiated fee schedule.

(3) Family planning services, drugs and supplies for individuals of child-bearing age when such services are under the supervision of a physician, as determined according to the elements inherent in the family planning service or the drugs and contraceptive devices necessary: on the basis of a negotiated physician fee schedule and the pharmacy fee schedule.

e. Physicians’ services: on the basis of a negotiated fee schedule

f. Medical care of any other type of remedial care recognized under State law furnished by licensed practitioners within the scope of their practice as defined by law limited to:

1. Podiatry services: on the basis of a negotiated fee schedule.
2. Optometry services: on the basis of a negotiated fee schedule.

g. Home Health Services: In order for EOHHS to calculate the applicable Home Health base rate, each provider must submit a completed General Application for Enhanced Home Health Reimbursement to EOHHS. Base rates, which are defined as the minimum reimbursement rate plus any additional enhancements that the provider qualifies for, are available on the fee schedule, updated as of ~~October 1, 2018~~ July 1, 2021, and at available [https://eohhs.ri.gov/providers-partners/fee\\_schedules](https://eohhs.ri.gov/providers-partners/fee_schedules) <http://www.eohhs.ri.gov/ProvidersPartners/BillingandClaims/FeeSchedule.aspx>.

Effective November 1, 2021 through March 31, 2022, the State will provide a temporary rate increase for the services below to improve access to care through direct care workforce recruitment and retention initiatives. Additional funding provided through rate increases shall be used to increase compensation (direct pay and benefits) to direct care workforce through March 31, 2023. Providers will attend a training, sign attestation forms agreeing to this use of funds, and submit quarterly reports on their use of these funds to the State Medicaid office for the duration of the funding period.

<u>Provider Type</u>	<u>Code</u>	<u>Description of Code</u>	<u>Percentage Increase above 10/31/2021 Rate</u>
<u>Skilled Nursing Homecare Providers</u>	<u>G0156</u>	<u>Services of Home Health or Hospice Settings per 15 minutes increments</u>	<u>78%</u>
	<u>X0043</u>	<u>Home Health and Nursing and Therapy Visits</u>	<u>78%</u>
<u>Severely Disabled Nursing Homecare Provider</u>	<u>S5125 Minimum Reimbursement Rate</u>	<u>Attendant Care Services per 15- minute increments</u>	<u>107%</u>
	<u>T1000</u>	<u>Private Duty Independent Nursing Services per 15- minute increments</u>	<u>65%</u>
<u>Home Care Agencies (Personal Care Aide/Assistant Provider)</u>	<u>S5125 Minimum Reimbursement Rate</u>	<u>Attendant Care Services per 15-minute increments</u>	<u>152%</u>
	<u>S5130 minimum Reimbursement Rate</u>	<u>Homemaker Service per 15- minute increments</u>	<u>125%</u>
	<u>T1001</u>	<u>Nursing Assessment/Evaluation</u>	<u>110%</u>

Effective April 1, 2022, this temporary rate increase will end, and the rates will return to those listed in the fee schedule effective July 1, 2021 available at <https://eohhs.ri.gov/providers-partners/fee-schedules>

Effective July 1, 2019, and each July 1 thereafter, the base rates for personal care attendant services and skilled nursing and therapeutic services, provided by home care providers and home nursing care providers, will be increased by the New England Consumer Price Index card as determined by the United States Department of Labor for medical care.

Home Health Base Rate methodology: Minimum reimbursement rates will be adjusted based on the following qualifications:

1. Staff Education and Training

- Enhanced Reimbursement per 15-minutes for all Personal Care and Combination Personal Care/Homemaker services provided by a qualified agency.
- Qualifications: The qualified agency must offer in-services at a frequency at least 20% over the RI Department of Health's licensure requirement. This means that at least fourteen (14) one-hour in-services will be required in a year.
- How to Receive Enhancement: A plan of scheduled in-service topics, dates, times and instructors should be submitted to EOHHS for the six month period following initial application for this enhancement. To continue receiving the enhanced base rate beyond the initial six-month period, the agency must submit for each in-service the title, training objectives, number of CNAs on the payroll on the date of the in-service, and a copy of the in-service sign-in sheet. Submissions should be for at least seven (7) in-services over a six-month period.

2. National Accreditation or State Agency Accreditation

*National:*

- Enhanced Reimbursement per 15-minutes of Personal Care and Combination Personal Care/Homemaker services provided by a qualified agency.
- Qualifications: An agency with current National Accreditation is entitled to this enhancement.  
Community Health Accreditation Program (CHAP) or  
Council on Accreditation (COA) or  
Joint Commission for Accreditation of Healthcare Facilities (JCAHO)
- How to Receive Enhancements: Submit current CHAP, COA or JCAHO Accreditation certificate, and copy of the most recent survey results. Submit new certificate(s) and survey results as they are completed to continue payment of the enhanced base rate.

Note: Agencies can either receive State Accreditation or National Accreditation, not both.

*State:*

- Enhanced Reimbursement per 15-minutes of Personal Care and Combination Personal Care/Homemaker services provided by a qualified agency. The goal of this standard is to encourage home health agencies to development and implement initiatives that result in high value, client-oriented, effective care and services.
  - Qualifications: Available to home health agencies with National Accreditation (CHAP, COA or JCAHO).
  - How to Receive Enhancement: Submit application for an on-site review and successfully meet Accreditation Standards. In addition, at the request of the home health agency, DHS will review evidence provided that demonstrates exceeding Department of Health Regulations. Evidence may be demonstrated through policy, procedures, client records, personnel records, meeting minutes, strategic plans, etc. Emphasis will be placed on how the evidence is linked between the different sources i.e. policy/procedure compliance noted in record documentation.
-

### 3. Client Satisfaction, Continuity of Care, and Worker Satisfaction

- Enhanced Reimbursement per 15-minutes of Personal Care and Combination Personal Care and Homemaker Services for each of these three areas (client satisfaction, continuity of care, and worker satisfaction) based on former enhanced standards.
- Qualifications: Maintain compliance with applicable standards. If found out of compliance during random site visits, providers may lose the enhancement for the area out of compliance or be asked to submit a corrective action plan.