

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

**09/27/2024 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:

**Outpatient Hospital Facility Fees**

EOHHS is seeking approval from the Centers for Medicare and Medicaid Services (CMS) to update the Medicaid State Plan to reflect a new payment methodology for dental surgery in hospital outpatient facilities, in accordance with the FY2025 Enacted Budget.

The changes have an effective date of September 28, 2024 and have an estimated fiscal impact of \$252,259 in SFY2025 and \$299,713 (all funds) in SFY 2026.

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 (401-462-2407 or RI Relay, dial 711). Interested persons should submit data, views, or written comments by October 27, 2024 to Brittany Church, Executive Office of Health and Human Services, 3 West Rd, Cranston, RI, 02920, or [Brittany.Church@ohhs.ri.gov](mailto:Brittany.Church@ohhs.ri.gov) or via phone at (401) 462-2407.

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.

**Original signed by Richard Charest, Secretary, Rhode Island Executive  
Office of Health and Human Services on this 27th day of October, 2024.**

## STATE OF RHODE ISLAND

METHODS AND STANDARDS FOR ESTABLISHING PAYMENT RATES – OTHER TYPES OF CARE  
PAYMENT FOR MEDICAL AND REMEDIAL CARE AND SERVICES

1. Fee structures will be established which are designed to enlist participation of a sufficient number of providers of services in the program so that eligible persons can receive the medical care and services included in the plan at least to the extent they are available.
2. Participation in the program will be limited to providers of service who accept, as payment in full, the amounts paid in accordance with the fee structure.
  - Payment for physician, dentist and other individual practitioner services will be equal to the lesser of the billed charge or the State's fee for that service. Fee schedules are posted on the Executive Office of Health and Human Services web site under the Providers and Partners tab: <http://www.eohhs.ri.gov/ProvidersPartners/GeneralInformation/ProviderDirectories/Hospitals.aspx>. All governmental and private service providers are reimbursed according to the same published fee schedule. The Medical Assistance Program rates were set as of July 1, 2017 and are effective for services on or after that date.

The following is a description of the payment structure by items of service.

a.1. Inpatient hospital services: as described in attachment 4.19A.

b.2. Outpatient hospital services: The Medical Assistance Program will pay for outpatient hospital services using a fee schedule approach based on, but necessarily identical to, the Medicare outpatient prospective payment system. Specific provisions are as follows:

- a. In general, payment will be by fee schedule, with the fee multiplied by the number of allowable units on the claim line. Fees will be derived as follows:
- b. For visits, surgeries, imaging procedures, drugs, and other services where Medicare pays hospitals using Ambulatory Payment Classification (APC) groups, except as otherwise noted in the plan, state-developed fee schedule rates are the same for both governmental and private providers of outpatient hospital services. The agency's fee schedule rate was set as of July 1, 2019 and is effective for services provided on or after that date. All rates are published on the EOHHS website at the address listed above. For the period of July 1, 2019 through June 30, 2020 outpatient rates will be increased by 7.2%. For the period of July 1, 2022 through June 30, 2023, outpatient rates will be increase by 5.0%. For each state fiscal year thereafter, rates will be increased based on the change in the 'actual regulation market basket' as reflected in the CMS Outpatient Hospital Prospective Payment System Market Basket Update without productivity adjustment for the calendar year that contains the start of the current state fiscal year. The methodology above does not, however, apply to CPT code 41899, which is reimbursed at a rate equivalent of 95 percent of Medicare OPPS rate for G0330.
- c. For physical, occupational, and speech therapy services, except as otherwise noted in the plan, state-developed fee schedule rates are the same for both governmental and private providers of outpatient hospital services. The agency's fee schedule rate was set as of July 1, 2019 and is effective for services provided on or after that date. All rates are published on the EOHHS website at the address listed above. For the period of July 1, 2019 through June 30, 2020 outpatient rates will be increased by 7.2%. For the period of July 1, 2022 through June 30, 2023, outpatient rates will be increase by 5.0%. For each state fiscal year thereafter, rates will be increased based on the change in the 'actual regulation market basket' as reflected in the CMS Outpatient Hospital Prospective Payment System Market Basket Update without productivity adjustment for the calendar year that contains the start of the current state fiscal year.
- d. For laboratory services with dates of service on or after January 1, 2016, payment will be at the non-hospital community laboratory rate. The fees are effective for claims with a date of service on or after January 1, 2016. The fee schedule can be found on the EOHHS website at the address listed above.

TN No: 24-001X

Supersedes

TN No. 22-0010

Approval Date:

Effective Date: September 20, 2024

STATE OF RHODE ISLAND

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