



DEPARTMENT OF HEALTH & HUMAN SERVICES

Centers for Medicare & Medicaid Services

SECRETARY'S OFFICE
RECEIVED

JUN 23 2006

DEPARTMENT OF SOCIAL
& HEALTH SERVICES

Region 10
2201 Sixth Avenue, MS/RX-43
Seattle, Washington 98121

JUN 16 2006

Robin Arnold-Williams, Secretary
Department of Social and Health Services
PO Box 45010
Olympia, Washington 98504-5010

RE: TN 06-008

Dear Ms. Arnold-Williams:

The Department of Social and Health Services submitted Washington Title XIX State Plan Transmittal Number 06-008 for our review. This amendment updates the home health care provider qualifications described in Attachment 3.1-A page 25. The amendment makes a technical change that spells out more clearly that beneficiaries will receive the same services regardless of age, or which administration (Children's Services or Aged and Disabled) provides the services. Also, the name of the Medicaid Administration Agency (MAA) has been updated to reflect the new name for the state agency, the Health and Recovery Services Administration (HRSA). The Centers for Medicare and Medicaid Services (CMS) has completed the review of this amendment including the original submission of April 19, 2006.

The state plan amendment is approved effective April 1, 2006 as you requested.

If you have additional questions or require further assistance, please contact Lydia Skeen at (206) 615-2339 or Lydia.Skeen@cms.hhs.gov

Sincerely,

Karen B. O'Connor
Karen O'Connor *BKR*
Associate Regional Administrator
Medicaid and Children's Health

cc: Douglas Porter, Assistant Secretary, HRSA
Ann Myers, State Plan Coordinator

TRANSMITTAL AND NOTICE OF APPROVAL OF
STATE PLAN MATERIAL

1. TRANSMITTAL NUMBER:
06-008

2. STATE
Washington

FOR: HEALTH CARE FINANCING ADMINISTRATION

3. PROGRAM IDENTIFICATION: TITLE XIX OF THE
SOCIAL SECURITY ACT (MEDICAID)

TO: REGIONAL ADMINISTRATOR
HEALTH CARE FINANCING ADMINISTRATION
DEPARTMENT OF HEALTH AND HUMAN SERVICES

4. PROPOSED EFFECTIVE DATE
~~Jan 1, 2006~~ April 1, 2006

5. TYPE OF PLAN MATERIAL (Check One):

- NEW STATE PLAN AMENDMENT TO BE CONSIDERED AS NEW PLAN AMENDMENT

COMPLETE BLOCKS 6 THRU 10 IF THIS IS AN AMENDMENT (Separate Transmittal for each amendment)

6. FEDERAL STATUTE/REGULATION CITATION:

7. FEDERAL BUDGET IMPACT:
a. FFY 2006 \$0
b. FFY 2007 \$0

8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT:
Attachment 3.1-A, page 2 and 25

9. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION
OR ATTACHMENT (if Applicable):
Attachment 3.1-A, page 2 and 25

10. SUBJECT OF AMENDMENT:

Home Health Care Provider Qualifications

11. GOVERNOR'S REVIEW (Check One):

- GOVERNOR'S OFFICE REPORTED NO COMMENT OTHER, AS SPECIFIED: Exempt
 COMMENTS OF GOVERNOR'S OFFICE ENCLOSED
 NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL

12. SIGNATURE OF STATE AGENCY OFFICIAL:
Robin Arnold-Williams
13. TYPED NAME:
ROBIN ARNOLD-WILLIAMS
14. TITLE:
Secretary
15. DATE SUBMITTED:
1-18-06

16. RETURN TO:
Ann Myers, State Plan Coordinator
Department of Social and Health Services
Health and Recovery Services Administration
925 Plum St SE MS: 45533
Olympia, WA 98504-5533

FOR REGIONAL OFFICE USE ONLY

17. DATE RECEIVED: APR 19 2006

18. DATE APPROVED: JUN 16 2006

PLAN APPROVED - ONE COPY ATTACHED

19. EFFECTIVE DATE OF APPROVED MATERIAL: APR - 1 2006

20. SIGNATURE OF REGIONAL OFFICIAL:
Karen S. O'Conner

21. TYPED NAME: Karen O'Conner

22. TITLE: Associate Regional Administrator
Division of Medicaid &
Children's Health

23. REMARKS: P+I change authorized by state to change proposed eff. date in Block #4.

P+I change authorized by state to remove page 22 in Blocks 8 & 9

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State WASHINGTONAMOUNT, DURATION, AND SCOPE OF MEDICAL AND REMEDIAL
CARE AND SERVICES PROVIDED TO THE CATEGORICALLY NEEDY

8. Private duty nursing services

The purpose of the Private Duty Nursing (PDN) Program is to reduce the cost of healthcare services through equally effective, more conservative, and/or less costly treatment in a client's home. The department's Health and Recovery Services Administration has oversight for the program for clients 17 years of age or younger. Eligible clients must meet all of the following: be 17 years of age or younger; need continuous skilled nursing care that can be provided safely outside an institution; and have prior authorization from the department. PDN program services for those age 18 and older are administered by the department's Aging and Disability Services Administration, and are indistinguishable from services for those under age 18.

The department contracts with state licensed home health agencies to provide PDN services. These agencies are not required to obtain Medicare certification to provide PDN services. Within the home health agency, private duty nursing services must be performed by a licensed and appropriately trained registered nurse and/or a licensed practical nurse. For persons 18 years and older with an approved exception to policy, a private (non-home health agency) RN or LPN under the direction of the physician can provide PDN services only when the geographic location precludes a contracted home health agency from providing services, or when no contracted home health agency is willing to provide PDN services.

PDN services meet complex medical needs for persons who require at least four continuous hours of skilled nursing care on a day-to-day basis. Services provide alternatives to institutionalization in a hospital or nursing facility and are not intended to supplant or replace other means of providing the services.