

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

## MAR 23 2012

Douglas Porter, Director Health Care Authority Post Office Box 45502 Olympia, Washington 98504-5502

RE: Washington State Plan Amendment (SPA) Transmittal Number 12-009

Dear Mr. Porter:

The Centers for Medicare & Medicaid Services (CMS) Seattle Regional office has completed its review of State Plan Amendment (SPA) Transmittal Number 12-009. In this amendment Washington is seeking an exception to the Final Rule's required implementation date of January 1, 2012, for its Medicaid Recovery Audit Contractor (RAC) Program. The State is in the process of procuring a RAC and expects to enter into a contract before June 1, 2012. In addition, the SPA states that the RAC will be paid based on a proposed flat fee schedule per identified underpayment.

This SPA is approved effective January 1, 2012.

If you have any additional questions or require any further assistance, please contact me, or have your staff contact Erin Cassady at (206) 615-2739 or <a href="mailto:erin.cassady@cms.hhs.gov">erin.cassady@cms.hhs.gov</a>.

Sincerely,

Catal J.C. Peverly

Associate Regional Administrator

Division of Medicaid and Children's Health Operations

cc: MaryAnne Lindeblad, Assistant Secretary, Aging and Disability Services Administration

TEALTH CARE PINANCING ADMINISTRATION		ONID 110. 0758-0175	
TRANSMITTAL AND NOTICE OF APPROVAL OF	1. TRANSMITTAL NUMBER: 2. STATE		
STATE PLAN MATERIAL	12-009	Washington	
FOR: HEALTH CARE FINANCING ADMINISTRATION	1	3. PROGRAM IDENTIFICATION: TITLE XIX OF THE	
FOR: HEALTH CARE FINANCING ADMINISTRATION	SOCIAL SECURITY ACT (MEDICAID)		
TO DECIONAL ADMINISTRATOR	4. PROPOSED EFFECTIVE DATE		
TO: REGIONAL ADMINISTRATOR HEALTH CARE FINANCING ADMINISTRATION			
DEPARTMENT OF HEALTH AND HUMAN SERVICES	January 1, 2012		
5. TYPE OF PLAN MATERIAL (Check One):			
5. THE OF PLAN MATERIAL (Check One).			
	CONSIDERED AS NEW PLAN		
COMPLETE BLOCKS 6 THRU 10 IF THIS IS AN AMER		n amendment)	
6. FEDERAL STATUTE/REGULATION CITATION:	7. FEDERAL BUDGET IMPACT:		
1902(a)(42) of the Act	a. FFY 2012 \$ 0		
	b. FFY 2013 \$ 0		
8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT:	9. PAGE NUMBER OF THE SUPERS	EDED PLAN SECTION	
	OR ATTACHMENT (If Applicable)	:	
Numbered Pages 36b, 36c (P&I)			
	Numbered Pgs 36b, 36c (P&	1)	
10. SUBJECT OF AMENDMENT:			
Recovery Audit Contractors			
11. GOVERNOR'S REVIEW (Check One):			
GOVERNOR'S OFFICE REPORTED NO COMMENT	☐ OTHER, AS SPEC	TIFIFD: Evenut	
COMMENTS OF GOVERNOR'S OFFICE ENCLOSED	Z OTTEK, AS SEE	on ind. Exempt	
NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL			
The Relationary and the second			
12. SIGNATURE OF STATE AGENCY OFFICIAL:	16. RETURN TO:		
	Ann Myers		
La sa Robbin Brown for	Office of Rules and Publications		
13. TYPED NAME:	Legal and Administrative Services		
DOUG PORTER	Health Care Authority		
14. TITLE:	626 8th Ave SE MS: 45504		
DIRECTOR			
15. DATE SUBMITTED:	Olympia, WA 98504-5504		
March 6, 2012	PRICE LICE ONLY		
FOR REGIONAL OF			
17. DATE RECEIVED: March 6, 2012	18. DATE APPROVED: March 2	23, 2012	
PLAN APPROVED – ON	F COPY ATTACHED		
19. EFFECTIVE DATE OF APPROVED MATERIAL:	20. STONATURE OF REGIONAL OF	FICIAL:	
January 1, 2012	Carol J. C. Verrer	حدد اسار	
21. TYPED NAME:	22 TITLE		
Carol J. C. Peverly	Associate Region	al Administrator	
23. REMARKS:	Division of N	Medicaid &	
	DIVISION OF T	- Hoolth	
	Children's	s meailli	

3/6/12 - Pen & Ink changes authorized by the State on 3/6/12.

## STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State	WASHINGTON
4.5b Med	icaid Recovery Audit Contractor Program
Citation	
Section 1902(a)(42)(V)(i) of the Social Security Act	The State has established a program under which it will contract with one or more recovery audit contractors (RACs) for the purpose of identifying underpayments and overpayments of Medicaid claims under the State plan and under any waiver of the State plan.
	X The State is seeking an exception to establishing such program for the following reasons:
	Washington is seeking an exception to the January 1, 2012, implementation date described in the Final Rule. No later than June 1, 2012, Washington will have an RAC contract in place that adheres to the attestations in this SPA.
Section 1902(2)(42)(B)(ii)(I) of the Act	X The State/Medicaid Agency has contracts of the type(s)) listed in section 1902(a)(42)(B)(ii)(I) of the Act. All contracts meet the requirements of the statute. RACs are consistent with the statute.
	Note: The State is in the process of procuring an RAC and expects to enter into a contract before June 1,2012.
	Place a check mark to provide assurance of the following:
	X The State will make payments to the RAC(s) only from amounts recovered.
Section 1902(a)(42)(B)(ii)(II)(aa) of the Act	X The State will make payments to the RAC(s) on a contingent basis for collecting overpayments.
	The following payment methodology shall be used to determine State payments to Medicaid RACs for identification and recovery of overpayments (e.g., the percentage of the contingency fee):
	X The State attests that the contingency fee rate paid to the Medicaid RAC will not exceed the highest rate paid to Medicare RACs, as published in the Federal Register.
	The State attests that the contingency fee rate paid to the Medicaid RAC will exceed the highest rate paid to Medicare RACs, as published in the Federal Register. The State will only submit for FFP up to the amount equivalent to that published rate.

## STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

	State	WASHINGTON
	4.5b Medica	aid Recovery Audit Contractor Program (cont)
		The contingency fee rate paid to the Medicaid RAC that will exceed the highest rate paid to Medicare RACs, as published in the Federal Register. The State will submit a justification for that rate and will submit for FFP for the full amount of the contingency fee.
Section 1902(a)(42)( of the Act	B)(ii)(II)(BB)	X The following payment methodology shall be used to determine State payments to Medicaid RACs for the identification of underpayments (e.g., amount of flat fee, the percentage of the contingency fee):
		Washington will pay the RAC based on a proposed flat fee schedule for the identification of underpayments, per identified underpayment.
Section 1902(a)(42)( of the Act	B)(ii)(III)	X The State has an adequate appeal process in place for entities to appeal any adverse determination made by the Medicaid RAC(s).
Section 1902(a)(42)( of the Act	B)(ii)(IV)(aa)	X The State assures that the amounts expended by the State to carry out the program will be amounts expended as necessary for the proper and efficient administration of the State plan or waiver of the plan.
Section 1902(a)(42)( of the Act	B)(ii)(IV)(bb)	X The State assures that the recovered amounts will be subject to the State's quarterly expenditure estimates and funding of the State's share.
Section 1902(a)(42)( of the Act	(B)(ii)(IV)(cc)	X Efforts of the Medicaid RAC(s) will be coordinated with other contractors or entities performing audits of entities receiving payments under the State plan or waiver in the State, and/or State and federal law enforcement entities and the CMS Medicaid Integrity Program.

Back to TOC