

**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

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November 17, 2021

Susan Birch, Director  
Dr. Charissa Fotinos, Acting Medicaid Director  
Health Care Authority  
PO Box 45502  
Olympia, WA 98504-5010

Re: Washington State Plan Amendment (SPA) WA-21-0027

Dear Ms. Birch and Dr. Fotinos:

The Centers for Medicare & Medicaid Services (CMS) reviewed your Medicaid State Plan Amendment (SPA) submitted under transmittal number (TN) WA-21-0027. This amendment proposes to add Licensed Social Workers under the OLP benefit to the types of providers who may furnish Home Health services, and amends the Home Health benefit. Anticipated impact to beneficiaries is positive.

We conducted our review of your submittal according to statutory requirements in Title XIX of the Social Security Act and implementing regulations 42 CFR § 435.733. This letter is to inform you that Washington Medicaid SPA WA-21-0027 was approved on November 17, 2021, with an effective date of January 1, 2022.

If you have any questions, please contact Edwin Walaszek at 212-616-2512 or via email at [Edwin.Walaszek@cms.hhs.gov](mailto:Edwin.Walaszek@cms.hhs.gov)

Sincerely,

James G. Scott, Director  
Division of Program Operations

cc: Ann Myers-[ann.myers@hca.wa.gov](mailto:ann.myers@hca.wa.gov)  
Cynthia Rivers-[cynde.rivers@hca.wa.gov](mailto:cynde.rivers@hca.wa.gov)

<b>TRANSMITTAL AND NOTICE OF APPROVAL OF STATE PLAN MATERIAL</b>	1. TRANSMITTAL NUMBER: <b>21-0027</b>	2. STATE Washington
<b>FOR: HEALTH CARE FINANCING ADMINISTRATION</b>	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 January 1, 2022
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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: 1902 of the Social Security Act	7. FEDERAL BUDGET IMPACT: a. FFY 2022 \$224,625 b. FFY 2023 \$299,500
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8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT:  Attachment 3.1-A pages 21C, 22 Attachment 3.1-B pages 22B, 23	9. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT ( <i>If Applicable</i> ):  Attachment 3.1-A pages 21C, 22 Attachment 3.1-B pages 22B, 23
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10. SUBJECT OF AMENDMENT:

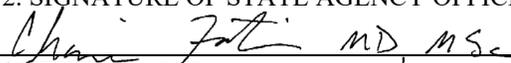
Add Social Worker as a Home Health Provider

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: 	16. RETURN TO: Ann Myers Rules and Publications Division of Legal Services Health Care Authority 626 8 <sup>th</sup> Ave SE, MS: 42716 Olympia, WA 98504-2716
13. TYPED NAME: Charissa Fotinos, MD, MSc	
14. TITLE: Acting Medicaid Director	
15. DATE SUBMITTED: September 7, 2021	

FOR REGIONAL OFFICE USE ONLY	
17. DATE RECEIVED: 9/07/2021	18. DATE APPROVED: November 17, 2021

PLAN APPROVED – ONE COPY ATTACHED	
19. EFFECTIVE DATE OF APPROVED MATERIAL: 1/01/2022	20. SIGNATURE OF REGIONAL OFFICIAL:
21. TYPED NAME: James G. Scott	22. TITLE: Director, Division of Program Operations

23. REMARKS:

11/8/21

- Replace 3.1-A page to read Attachment 3.1-A pages 21c, 22
- Replace 3.1-B pages to read Attachment 3.1-B pages 22b, 23

11/4/21:

- Replace 3.1-A page "22" with page "21c"
- Replace 3.1-B pages "23, 24" with page "22b"

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State WASHINGTON

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

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6.d. Other licensed practitioners (cont)

(9) Emergency Medical Services (EMS) providers

EMS providers furnish services within their scope of practice as defined by state law. EMS practitioner certification is equivalent to licensure in the state.

(10) Social Work Services to Enhance the Effectiveness of Home Health Services

Licensed social workers are covered within their scope of practice in accordance with state law. Medical Social Services are provided as part of an authorizing practitioner-ordered Home Health service.

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## 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

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## 7. Home health care services

- a. Intermittent or part-time nursing services provided by a home health agency or by a registered nurse when no home health agency exists in the area.

- 1) Applies to home health agencies and to services provided by a registered nurse when no home health agency exists in the area.
- 2) Approval required when period of service exceeds limits established by the single state agency.
- 3) Nursing care services are limited to:
  - (a) Services that are medically necessary;
  - (b) Services that can be safely provided in the home setting;
  - (c) Two visits per day (except for the services listed below);
  - (d) Three high risk obstetrical visits per pregnancy; and
  - (e) Infant home phototherapy that was not initiated in the hospital setting.
- 4) Services must be ordered by a physician, physician assistant (PA), or advanced registered nurse practitioner (ARNP) as part of a written plan of care.
- 5) Exceptions are made on a case-by-case basis.

- b. Home health care services provided by a home health agency

- Home health aide services must be:
  - 1) Intermittent or part time;
  - 2) Ordered by a physician, physician assistant (PA), or advanced registered nurse practitioner (ARNP) on a plan of care established by the nurse or therapist;
  - 3) Provided by a Medicare-certified home health agency;
  - 4) Limited to one medically necessary visit per day; and
  - 5) Supervised by the nurse or therapist biweekly in the client's home.

Exceptions are made on a case-by-case basis

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State WASHINGTON

AMOUNT, DURATION, AND SCOPE OF SERVICES PROVIDED TO THE  
MEDICALLY NEEDY GROUP(S): ALL

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6.d. Other Licensed practitioners (cont)

(9) Emergency Medical Services (EMS) providers

EMS providers furnish services within their scope of practice as defined by state law.  
EMS practitioner certification is equivalent to licensure in the state.

(10) Social Work Services to Enhance the Effectiveness of Home Health Services

Licensed social workers are covered within their scope of practice in accordance with state law. Medical Social Services are provided as part of an authorizing practitioner-ordered Home Health service.

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

State WASHINGTONAMOUNT, DURATION, AND SCOPE OF SERVICES PROVIDED TO THE  
MEDICALLY NEEDY GROUP(S): ALL

## 7. Home health services

## a. Intermittent or part-time nursing services

- (1) Applies to home health agencies and to services provided by a registered nurse when no home health agency exists in the area.
- (2) Approval required when period of service exceeds limits established by the single state agency.
- (3) Nursing care services are limited to:
  - (a) Services that are medically necessary;
  - (b) Services that can be safely provided in the home setting;
  - (c) Two visits per day (except for the services listed below);
  - (d) Three obstetrical visits per pregnancy for high-risk pregnancy clients; and
  - (e) Infant home phototherapy that was not initiated in the hospital setting.
- (4) Exceptions are made on a case-by-case basis.

Approval required when period or services or total monthly reimbursement exceeds limits established by the single state agency. Applies to home health agency and to services provided by a registered nurse when no home health agency exists in area.

## b. Home health care services provided by a home health agency

- Home health aide services must be:
  - (1) Intermittent or part time;
  - (2) Ordered by a physician on a plan of care established by the nurse or therapist;
  - (3) Provided by a Medicare-certified home health agency;
  - (4) Limited to one medically necessary visit per day; and
  - (5) Supervised by the nurse or therapist biweekly in the client's home.

Exceptions are made on a case-by-case basis.