

STATE PLAN AMENDMENT PROCESS

ALASKA'S CONTRACT WITH THE FEDERAL
GOVERNMENT

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What is Alaska's State Plan

- Contract between State and Federal Government/Center for Medicare and Medicaid Services (CMS).
- Defines how Alaska operates Medicaid
 - Program Administration,
 - Medicaid eligibility criteria;
 - Service coverage;
 - Provider reimbursement.
- Living document always subject to change, and subject to contract law.

Table of contents for the State Plan

1. Single State Agency Organization
2. Coverage and Eligibility
3. Services: General Provision
4. General Program Administration
5. Personnel Administration
6. Financial Administration
7. General Provisions

Alaska State Plan Web site:

<http://dhss.alaska.gov/Commissioner/Pages/MedicaidStatePlan/default.aspx#TOC>

What is a SPA

- State Plan Amendment
- Subject to approval by CMS
- State Plans defined in [42 CFR 430.10](#) and various other sections in the Code of Federal Regulations (CFR)

Why do we care?

No Federal Financial Participation (FFP) without SPA approval.

When is a SPA needed

- Federal changes in:
 - Law
 - Regulation
 - Policy interpretations
 - Court decisions
- Material changes in State:
 - Law
 - Regulation
 - Organization or policy
 - Operation of program

SPA Timeframes - CMS

- Quarterly submission
- Effective to the first day of quarter
- CMS has 90 days to disapprove or request additional information (RAI)
- State has 90 days to respond to RAI
- 90 day clock begins again when CMS gets the State response to the RAI
- No FFP until approved

State Plan Amendment Process

- Analyze need
- Draft SPA
- Tribal Consultation
- Catalog and Track
- Submit
- Negotiate
- Distribute
- Appeal

Federal SPA Process

- SPA received by CMS
- 90 day notice sent to state
- Federal analysis
- Coordination with CMS Central office
- Approval/RAI/Disapproval
- Negotiations
- Appeal

What we are experiencing

- Informal questions
- Same Page Review
- Companion Letter

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Questions

