Table of Contents

State/Territory Name: TX

State Plan Amendment (SPA) : 22-0008

This file contains the following documents in the order listed:

  1) Approval Letter
  2) CMS 179 Form/Summary Form (with 179-like data)
  3) Approved SPA Pages
Financial Management Group

April 29, 2022

Ms. Stephanie Stephens
State Medicaid/CHIP Director
Health and Human Services Commission
Mail Code: H100
Post Office Box 13247
Austin, Texas 78711

RE: Texas TN 22-0008

Dear Ms. Stephens:

We have reviewed the proposed Texas State Plan Amendment (SPA) to Attachment 4.19-B, TX#22-0008, which was submitted to the Centers for Medicare & Medicaid Services (CMS) on March 16, 2022. The proposed amendment updates the physicians’ and other practitioners’ fee schedules. Furthermore, this amendment removes language previously included in error. Paragraph g was removed from Attachment 4.19-B, Page 1a.3, and moved to page 1 by TN 20-0018. The language was included and approved in TN 20-0019 in error.

Based upon the information provided by the State, we have approved the amendment with an effective date of March 1, 2022. We are enclosing the approved CMS-179 and a copy of the new state plan page.

If you have any additional questions or need further assistance, please contact Monica Neiman at: Monica.Neiman@cms.hhs.gov.

Sincerely,

Todd McMillion

Todd McMillion
Director
Division of Reimbursement Review

Enclosures
The proposed amendment updates the physicians’ and other practitioners’ fee schedules.

**GOVERNOR’S REVIEW (Check One)**
- [ ] GOVERNOR’S OFFICE REPORTED NO COMMENT
- [ ] COMMENTS OF GOVERNOR’S OFFICE ENCLOSED
- [ ] NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL

**SIGNATURE OF STATE AGENCY OFFICIAL**

**Stephanie Stephens**

**State Medicaid Director**

**DATE SUBMITTED**

March 16, 2022

**RETURN TO**

Stephanie Stephens
State Medicaid Director
Post Office Box 13247, MC: H-100
Austin, Texas 78711

**DATE RECEIVED**

March 16, 2022

**DATE APPROVED**

April 29, 2022

**SIGNATURE OF APPROVING OFFICIAL**

Todd McMillion

Director Division of Reimbursement Review

**DATE OF APPROVED MATERIAL**

March 01, 2022

**TITLE OF APPROVING OFFICIAL**

Todd McMillion

**REMARKS**
1. Physicians and Other Practitioners (continued)

(f) When a procedure code is nationally discontinued, a replacement procedure code is nationally assigned for the discontinued procedure code, and Medicaid implements the replacement procedure code, and a state plan amendment will not be submitted since the fee for the service has not changed.

(g) All fee schedules are available through the agency’s website, as outlined on Attachment 4.19-B, page 1.

(h) The agency’s fee schedule was revised with new fees for services provided by physicians and other practitioners affiliated with tuberculosis clinics or employed by tuberculosis clinics, effective July 1, 2018, and this fee schedule was posted on the agency’s website on July 6, 2018.

(i) The agency’s fee schedule was revised with new fees for therapy assistants. Effective September 1, 2019, the reimbursement for therapy assistants will equal 80 percent of the payment to a therapist.

(j) The agency’s fee schedule was revised with new fees to include peer specialists effective March 1, 2022. This fee schedule will be posted on the agency’s website on or prior to March 15, 2022.

(k) For dates of service on or after February 1, 2021, the reimbursement for services provided by a licensed assistant behavioral analyst will be reimbursed at 80 percent of the rate paid to a licensed behavior analyst.

(l) The agency’s fee schedule was revised with new fees for physicians and other practitioners effective March 1, 2022. The fee schedule will be posted on the agency website on or prior to March 15, 2022.