



STATE OF WASHINGTON  
**HEALTH CARE AUTHORITY**

626 8th Avenue, SE • P.O. Box 45502 • Olympia, Washington 98504-5502

April 28, 2022

Dear Tribal Leader:

**SUBJECT: Medicaid State Plan Amendment 22-0006: Primary Care Case Management Entities (PCCMe)**

In accordance with section 1902(a)(73)(A) of the Social Security Act regarding the solicitation of advice prior to the submission of any Medicaid State Plan Amendment (SPA) or waiver likely to have a direct effect on Indians, Indian Health Programs, or Urban Indian Organizations, the Health Care Authority (HCA) hereby seeks your advice on the following matter.

**Purpose**

HCA intends to submit SPA 22-0006 to authorize the Medicaid Primary Care Case Management entity (PCCMe) program, which will provide Indian health care providers (IHCPs) the choice of participating in and administering a PCCMe program. The PCCMe program is similar to the current Primary Care Case Management (PCCM) program available to IHCPs in Washington State, but with a larger and more defined list of responsibilities. The addition of the PCCMe program provides the opportunity for IHCPs be recognized and reimbursed for their active role in managing the care of American Indian/Alaska Native (AI/AN) enrollees in the Medicaid fee-for-service program. IHCPs will have the choice of administering the PCCM program, the PCCMe program or neither program.

The PCCMe program requires the IHCP to provide the following primary care case management services:

- Provision of intensive telephonic case management
- Provision of face-to-face case management
- Development of enrollee care plans
- Provision of enrollee outreach and education activities
- Operation of a customer service call center
- Implementation of quality improvement activities including administering enrollee satisfaction surveys or collecting data necessary for performance measurement of providers
- Coordination with behavioral health systems/providers
- Coordination with long-term services and supports systems/providers

A workgroup of IHCPs, convened by the American Indian Health Commission (AIHC) of Washington State at the request of the HCA Office of Tribal Affairs (OTA), identified these eight (8) functions as the most likely functions, on a statewide basis, for IHCPs to successfully implement as PCCMe.

With the submission of the SPA, HCA intends to ask the Center for Medicare and Medicaid Services (CMS) for approval of the following rates for reimbursement to participating PCCMe IHCPs:

# enrollees	A	B	C	D	E
1,000+	\$45 PMPM	\$7.50 PMPM	\$15 PMPM	\$15 PMPM	\$15 PMPM
400 – 999	\$45 PMPM	\$7,500 / mo	\$20 PMPM	\$20 PMPM	\$20 PMPM
167 – 399	\$45 PMPM	\$7,500 / mo	\$7,500 / mo	\$7,500 / mo	\$7,500 / mo
1 – 166	\$7,500 / mo	\$7,500 / mo	\$7,500 / mo	\$7,500 / mo	\$7,500 / mo

**Note 1:** “PMPM” or “per member per month” refers to the payment that the IHCP participating in the PCCMe program will receive for every person enrolled into the IHCP’s PCCMe program (which CMS refers to as “members”).

**Note 2:** In order to be considered sustainable, a PCCMe program must have enough enrollees to generate sufficient funds to cover the expenses of the program. CMS has advised HCA that the PCCMe program can be authorized to pay a minimum aggregate monthly payment to IHCPs participating in the PCCMe program that do not meet a minimum enrollee threshold, if paid on a PMPM basis. HCA has estimated that an IHCP will need to receive at least \$7,500 per month for each of the five services categories in order to offer that category of service.

The headers in the table above refer to the following service categories:

**A** = PCCMe: All eight functions listed on the previous page

**B** = Add-on reimbursement for chronic disease self-management

**C** = Add-on reimbursement for IHCP utilization of health information exchange and community information exchange

**D** = Add-on reimbursement for IHCP creation and maintenance of a provider referral network under a care coordination agreement as described in State Health Official Letter 16-002 and related CMS guidance

**E** = Add-on reimbursement for IHCP quality outcome improvement program that will prepare the IHCP to perform population health management for PCCMe program enrollees

In addition, HCA intends to ask CMS for authorization to reimburse IHCPs for startup costs to begin offering these services, up to \$200,000 per IHCP.

**Anticipated Impact on Indians/Indian Health Programs/Urban Indian Organizations**

HCA anticipates this SPA to have a positive impact that is specific to American Indian/Alaska Native Medicaid enrollees and IHCPs. HCA would appreciate any input or concerns that Tribal representatives wish to share, including the functions to be authorized in the SPA, the services that will receive add-on payments, and the amounts and structure of the payments under this proposed PCCMe program.

**Copy Available**

A copy of the draft SPA is available for your review at <https://www.hca.wa.gov/about-hca/tribal-affairs/primary-care-case-management-entities-pccme-state-plan-amendment>. A hard copy is available upon request.

**Roundtables and Consultation**

HCA recognizes the need for roundtables and consultation. At the April 13, 2022, Monthly Tribal Meeting, we collectively identified the following dates and times for roundtables and consultation.

<b>Meeting</b>	<b>Date and Time</b>	<b>Zoom Link</b>
Round Table #1	May 11, 3:30 – 5:00 pm	During the regularly scheduled Monthly Tribal Meeting (MTM): <a href="https://zoom.us/j/98328536558?pwd=c1lURW1NLzJtZTFvdVVjZzE2QVFvUT09">https://zoom.us/j/98328536558?pwd=c1lURW1NLzJtZTFvdVVjZzE2QVFvUT09</a>
Round Table #2	May 18, 3:30 – 5:00 pm	Following the Governor’s Tribal Leaders Social Service Council (GTLSSC): <a href="https://us02web.zoom.us/j/87368755117">https://us02web.zoom.us/j/87368755117</a>
Consultation	June 8, 3:30 – 5:00 pm	During the regularly scheduled MTM: <a href="https://zoom.us/j/91285275482?pwd=eXhEUk9qL3dMYmNRY1VyN0JNbnQzZz09">https://zoom.us/j/91285275482?pwd=eXhEUk9qL3dMYmNRY1VyN0JNbnQzZz09</a>

**Comments and Questions**

HCA would appreciate any input or concerns that Tribal representatives wish to share regarding this SPA. To request a copy of the draft SPA or return any comments, please contact Lou McDermott, Deputy Director and Interim Tribal Affairs Administrator via email at [lou.mcdermott@hca.wa.gov](mailto:lou.mcdermott@hca.wa.gov), with a courtesy copy to Ann Myers, State Plan Coordinator, at [ann.myers@hca.wa.gov](mailto:ann.myers@hca.wa.gov), by May 30, 2022.

Please forward this information to any interested party.

Sincerely,



Charissa Fotinos, MD, MSc  
Acting Medicaid Director

cc: Lou McDermott, Deputy Director and Interim Tribal Affairs Administrator, OTA, HCA  
Ann Myers, State Plan Coordinator, DLS, HCA