

WSR 21-06-071

HEALTH CARE AUTHORITY

[Filed March 1, 2021, 8:46 a.m.]

NOTICE

Title or Subject: Medicaid State Plan Amendment (SPA) 21-0009 Home Health Services.

Effective Date: January 1, 2021.

Description: The health care authority (HCA) intends to submit medicaid SPA 21-0009 to comply with a request from the Centers for Medicare and Medicaid Services to describe limitations on covered prosthetic and orthotic devices. The SPA does not change current policy and practice; it is for clarification purposes only.

SPA 21-0009 is expected to have no effect on the annual aggregate expenditures, reimbursement, or payment for home health services.

SPA 21-0009 is in the development process; therefore, a copy is not yet available for review. HCA would appreciate any input or concerns regarding this SPA. To request a copy when it becomes available, you may contact the person named below. To submit comments, please contact the person named below (please note that all comments are subject to public review and disclosure, as are the names of those who comment).

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