

## DEPARTMENT OF SOCIAL SERVICES

### Notice of Proposed Medicaid State Plan Amendment (SPA)

#### **SPA21-AB: Private Intermediate Care Facilities for Individuals with Intellectual Disabilities (ICF/IID) Reimbursement**

The State of Connecticut Department of Social Services (DSS) proposes to submit the following Medicaid State Plan Amendment (SPA) to the Centers for Medicare & Medicaid Services (CMS) within the U.S. Department of Health and Human Services (HHS).

#### **Changes to Medicaid State Plan**

Effective on or after July 1, 2021, this SPA will amend Attachment 4.19-D of the Medicaid State Plan to make the following changes to the reimbursement methodology for private ICF/IIDs.

For SFY 2022 and SFY 2023, the minimum per diem, per bed rate for each private ICF/IID increases to \$501. Any private ICF/IID with a rate below such amount will be increased to that rate for SFY 2022 and SFY 2023.

For State Fiscal Year (SFY) 2022 and SFY 2023, this SPA implements a rate increase for the purpose of wage and benefit enhancements for ICF/IID employees. Facilities that receive a rate adjustment for the purpose of wage and benefit enhancements but do not provide employee salary increases on or before July 31, 2021, and July 31, 2022, respectively, may be subject to a rate decrease in the same amount as rate increase.

For SFY 2022, rates shall not exceed those in effect for SFY 2021, except that DSS may, in the commissioner's discretion and within available appropriations, provide pro rata fair rent increases to facilities that have documented fair rent additions placed in service in the cost report year ending September 30, 2020, that are not otherwise included in rates issued. For SFY 2023, rates shall not exceed those in effect for SFY 2022, except that DSS may, in the commissioner's discretion and within available appropriations, provide pro rata fair rent increases to facilities which have documented fair rent additions placed in service in the cost report year ending September 30, 2021, that are not otherwise included in rates issued. For SFY 2022 and SFY 2023, a facility may receive a rate increase for a capital improvement approved by the Department of Developmental Services, in consultation with DSS, for the health or safety of the residents during SFY 2022 or SFY 2023, only to the extent such rate increases are within available appropriations.

For SFY 2022 and SFY 2023, DSS may provide fair rent increases to any facility that has undergone a material change in circumstances related to fair rent and has an approved certificate of need.

The purpose of this SPA is to comply with sections 356 and 361 of Senate Bill 1202 of the June special session of the Connecticut General Assembly, as amended, An Act Concerning Provisions Related to Revenue and Other Items to Implement the State Budget for the Biennium Ending June 30, 2023. That bill is anticipated to be signed into law shortly after this notice is submitted for publication in the Connecticut Law Journal. Section 361 specifically requires DSS to increase the minimum per diem rate for private ICF/IIDs to \$501. Section 356 sets forth authorization for the other changes described above.

### **Fiscal Impact**

Based on the information that is available at this time, DSS anticipates that this SPA will increase annual aggregate Medicaid expenditures by approximately \$4.9 million in SFY 2022 and \$6.8 million in SFY 2023.

### **Obtaining SPA Language and Submitting Comments**

This SPA is posted on the DSS web site at this link: <https://portal.ct.gov/DSS/Health-And-Home-Care/Medicaid-State-Plan-Amendments>. The proposed SPA may also be obtained at any DSS field office or the Town of Vernon Social Services Department, or upon request from DSS (see below).

To request a copy of the SPA from DSS or to send comments about the SPA, please email: [Public.Comment.DSS@ct.gov](mailto:Public.Comment.DSS@ct.gov) or write to: Medical Policy Unit, Department of Social Services, 55 Farmington Avenue, 9th Floor, Hartford, CT 06105 (Phone: 860-424-5067). Please reference: "SPA 21-AB: Private ICF/IID Reimbursement".

Anyone may send DSS written comments about this SPA. Written comments must be received by DSS at the above contact information no later than July 29, 2021.

**State Plan under Title XIX of the Social Security Act  
State: Connecticut  
Methods for Establishing Payment Rates – Intermediate Care Facilities for  
Individuals with Intellectual Disabilities (ICF/IID)**

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TN # 21-AB  
Supersedes  
TN # NEW

Approval Date \_\_\_\_\_

Effective Date 07/01/2021