

**STATE OF CONNECTICUT
DEPARTMENT OF SOCIAL SERVICES**

Notice of Proposed Medicaid State Plan Amendment (SPA)

SPA 24-0013: Federally Qualified Health Centers (FQHC) Stabilization Payment

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). Public comment information is at the bottom of this document.

Changes to Medicaid State Plan

Effective on or after June 12, 2024, SPA 24-0013 will amend Attachment 4.19-B of the Medicaid State Plan to incorporate one-time stabilization payments (i.e., a one-time supplemental payment) made to in-state Federally Qualified Health Centers (FQHCs) enrolled in Connecticut Medicaid. The purpose of this change is necessary to provide one-time temporary stabilization funding to each in-state FQHC and help ensure ongoing access to services provided by FQHCs for Medicaid members. This is a one-time supplemental payment that does not affect each FQHC's underlying prospective payment system methodology. Payments will be equally distributed to each FQHC that meets the criteria from a total pool of \$32,000,000.

Fiscal Impact

This proposed change is estimated to increase annual aggregate expenditures by \$32,000,000 in State Fiscal Year (SFY) 2024.

Obtaining SPA Language and Submitting Comments

The proposed SPA is posted on the DSS website 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 resource center, at 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 or write to: Department of Social Services, Medical Policy Unit, 55 Farmington Avenue, 9th Floor, Hartford, CT 06105. Please reference "SPA 24-0013: Federally Qualified Health Centers (FQHC) Stabilization Payment".

Anyone may send DSS written comments about this SPA. Written comments must be received by DSS at the above contact information no later than **June 27, 2024**.

**STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT
State: CONNECTICUT**

One-Time Supplemental Payment

Effective June 12, 2024, a one-time supplemental payment shall be made to in-state Federally Qualified Health Centers (FQHCs) for services provided to Medicaid members. The one-time payment provides stabilization funding to in-state FQHCs. Payments will be equally distributed to each of the seventeen in-state FQHCs from a total pool of \$32,000,000.00. Each health center will receive a one-time payment of \$1,882,352.94. Payment is for services provided during the state fiscal year ending June 30, 2024.

TN # 24-0013

Approval Date _____

Effective Date 06/12/2024

Supersedes

TN # NEW