Tom Betlach, Director  
Arizona Health Care Cost Containment System  
801 East Jefferson Street  
Phoenix, AZ  85034

Dear Mr. Betlach:

Enclosed is an approved copy of Arizona State Plan Amendment (SPA) 13-011, which was submitted to CMS on August 10, 2013. This amendment updates the State Plan to indicate that well visits are a covered service for adults effective on October 1, 2013 as requested.

Enclosed is the following approved State Plan page to be incorporated within your approved State Plan:

- Attachment 3.1-A Limitations, page 9(a)

If you have any questions, please have your staff contact Cheryl Young at (415) 744-3598 or at cheryl.young@cms.hhs.gov.

Sincerely,

Gloria Nagle, Ph.D., MPA  
Associate Regional Administrator  
Division of Medicaid & Children’s Health Operations

cc: Wakina Scott  
HeeYoung Ansell
TRANSMITTED AND NOTICE OF APPROVAL OF STATE PLAN MATERIAL

FOR: Centers for Medicare and Medicaid Services

TO: REGIONAL ADMINISTRATOR
CENTERS FOR MEDICARE AND MEDICAID SERVICES
DEPARTMENT OF HEALTH AND HUMAN SERVICES

5. TYPE OF PLAN MATERIAL (Check One):

☐ NEW STATE PLAN
☐ AMENDMENT TO BE CONSIDERED AS NEW PLAN
☒ AMENDMENT

COMPLETE BLOCKS 6 THRU 10 IF THIS IS AN AMENDMENT (Separate Transmittal for each amendment)

6. FEDERAL STATUTE/REGULATION CITATION:
42 USC 1396d(a)
42 CFR 440.50, 42 CFR 440.90, and 42 CFR 440.130(c)

7. FEDERAL BUDGET IMPACT:
FFY 2014: $ 48,200
FFY 2015: $ 57,300

8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT:
Attachment 3.1-A Limitations, Page 9(a)

9. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable):
Attachment 3.1-A Limitations, Page 9(a)

10. SUBJECT OF AMENDMENT:
Updates the State Plan to reflect that well exams will be covered beginning October 1, 2013.

11. 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

12. SIGNATURE OF STATE AGENCY OFFICIAL:

13. TYPED NAME:
Monica Coury

14. TITLE:
Assistant Director

15. DATE SUBMITTED:
September 10, 2013

16. RETURN TO:
Monica Coury
801 E. Jefferson, MD#4200
Phoenix, Arizona 85034

17. DATE RECEIVED:
September 10, 2013

18. DATE APPROVED:
DEC 9 2013

19. EFFECTIVE DATE OF APPROVED MATERIAL:
October 1, 2013

20. SIGNATURE OF REGIONAL OFFICIAL:

21. TYPED NAME:
Gloria Nagle

22. TITLE: Associate Regional Administrator
Division of Medicaid & Children’s Health Operations

23. REMARKS:
Box 6 – Regulatory citations added by CMS per AZ’s approval via email dated 12/5/13
Box 9 – Superceeded page added by CMS per AZ’S approval via email dated 12/5/13
13b. **Screening services.**
Coverage is available for evidence-based medically necessary screening services for children based on guidelines from the American Academy of Pediatrics and CDC/IACIP for immunizations.


13c. **Preventive services.**

Coverage is available for evidence-based medically necessary preventive services for children based on guidelines from the American Academy of Pediatrics and CDC/ACIP for immunizations.

Coverage is available for evidence-based medically necessary preventive services for adults as described in the AHCCCS Medical Policy Manual (http://www.azahcccs.gov/shared/MedicalPolicyManual/MedicalPolicyManual.aspx) which are based, in part, on guidelines from the U.S. Preventive Services Task Force. In addition to the services specified under section 4106 of the Affordable Care Act, Arizona covers, without cost-sharing, services specified under PHS 2713 which is in alignment with the Alternative Benefit Plans.

13d. **Rehabilitative services.**

**Rehabilitative Services**—Services to teach independent living, social and communication skills to persons or their families to promote the maximum reduction of behavioral health symptoms and/or restoration of an individual to his/her best age appropriate functional level for the purpose of maximizing the person’s ability to live independently and function in the community. Services may be provided to a person, a group of persons or their families with the person(s) present. Rehabilitative services must be provided by individuals who are qualified behavioral health professionals, behavioral health technicians or behavioral health paraprofessionals as described in the following pages of Attachment 3.1-A Limitations, pages 9(b) – 9(j).