

**DEPARTMENT OF HEALTH & HUMAN SERVICES**

Centers for Medicare & Medicaid Services  
601 E. 12th St., Room 355  
Kansas City, Missouri 64106



Medicaid and CHIP Operations Group

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December 21, 2022

Jami Snyder, Director  
Arizona Health Care Cost Containment System  
801 East Jefferson Street  
Phoenix, AZ 85034

Re: Arizona State Plan Amendment (SPA) 22-0018

Dear Ms. Snyder:

The Centers for Medicare & Medicaid Services (CMS) reviewed your Medicaid State Plan Amendment (SPA) submitted under transmittal number (TN) 22-0018. This amendment adds chiropractors' services.

We conducted our review of your submittal according to statutory requirements in Title XIX of the Social Security Act and implementing regulations. This letter is to inform you that Arizona Medicaid SPA 22-0018 was approved on December 21, 2022 with an effective date of October 1, 2022.

If you have any questions, please contact Brian Zolynas at 415-744-3601 or via email at [Brian.Zolynas@cms.hhs.gov](mailto:Brian.Zolynas@cms.hhs.gov)

Sincerely,

James G. Scott, Director  
Division of Program Operations

cc: Alex Demyan, AHCCCS  
Dana Flannery, AHCCCS  
Ruben Soliz, AHCCCS

**TRANSMITTAL AND NOTICE OF APPROVAL OF  
STATE PLAN MATERIAL****FOR: CENTERS FOR MEDICARE & MEDICAID SERVICES**

1. TRANSMITTAL NUMBER

**22 - 0018**

2. STATE

**AZ**3. PROGRAM IDENTIFICATION: TITLE **XIX** OF THE  
SOCIAL SECURITY ACTTO: CENTER DIRECTOR  
CENTERS FOR MEDICAID & CHIP SERVICES  
DEPARTMENT OF HEALTH AND HUMAN SERVICES4. PROPOSED EFFECTIVE DATE  
**October 1, 2022**5. FEDERAL STATUTE/REGULATION CITATION  
~~42 U.S.C. §1396a(a)(13)(1997)~~ Title XIX of the Social Security Act6. FEDERAL BUDGET IMPACT (Amounts in WHOLE dollars)  
a. FFY 23 \$ 344,100  
b. FFY: 24 \$ 331,700

7. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT

Attachment 3.1-A, page 3  
Attachment 3.1-A Limitations, page 68. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION  
OR ATTACHMENT (If Applicable)Attachment 3.1-A, page 3  
Attachment 3.1-A Limitations, page 6

9. SUBJECT OF AMENDMENT

Adds chiropractors' services, with limitations, to the state plan.

10. GOVERNOR'S REVIEW (Check One)

- GOVERNOR'S OFFICE REPORTED NO COMMENT  OTHER, AS  
 SPECIFIED: COMMENTS OF GOVERNOR'S OFFICE ENCLOSED  
 NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL

11. SIGNATURE OF STATE AGENCY OFFICIAL



15. RETURN TO

Dana Flannery  
801 E. Jefferson St., MD # 4200  
Phoenix, AZ 85034

12. TYPED NAME

Dana Flannery

13. TITLE

Assistant Director

14. DATE SUBMITTED: October 5, 2022

**FOR CMS USE ONLY**

16. DATE RECEIVED

October 5, 2022

17. DATE APPROVED

December 21, 2022

**PLAN APPROVED - ONE COPY ATTACHED**

18. EFFECTIVE DATE OF APPROVED MATERIAL

October 1, 2022

19. SIGNATURE OF APPROVING OFFICIAL

20. TYPED NAME OF APPROVING OFFICIAL

James G. Scott

21. TITLE OF APPROVING OFFICIAL

Director, Division of Program Operations

22. REMARKS

Pen-and-ink change made to Box 5 with the approval of the state on 12/19/2022.

State/Territory: ARIZONA  
AMOUNT, DURATION, AND SCOPE OF MEDICAL  
AND REMEDIAL CARE AND SERVICES PROVIDED TO THE CATEGORICALLY NEEDY

b. Optometrists' services.

Provided:  No limitations  With limitations\*  
 Not provided.

c. Chiropractors' services.

Provided:  No limitations  With limitations\*  
 Not provided.

d. Other practitioners' services.

Provided: Identified in Limitations section of Attachment.  
 Not provided.

7. Home health services.

a. Intermittent or parttime nursing services provided by a home health agency or by a registered nurse when no home health agency exists in the area.

Provided:  No limitations  With limitations\*

b. Home health aide services provided by a home health agency.

Provided:  No Limitation  With limitations\*

c. Medical supplies, equipment, and appliances suitable for use in the home.

Provided:  No Limitations  With limitations\*\*

\* Description provided in Limitations section of this Attachment.

\*\*Sole limitation is authorization by appropriate entity as defined in the Limitations section of this Attachment.

6. Medical care and any other types of remedial care recognized under State law, furnished by licensed practitioners within the scope of their practice as defined by State law.

6b. Optometrists' Services Optometrists' services when they are provided by a licensed optometrist. See section 12d for limitations on eyeglasses and contact lenses.

6c. Chiropractors' Services

Coverage is available for evidence-based, medically necessary chiropractors' services within their scope of practice as defined by state law and subject to the following limitations. The service must be ordered by a primary care provider. The service is limited to twenty visits that include treatment, annually. Medically necessary chiropractic services beyond the twenty-visit annual limit, are subject to prior authorization requirements. Acupuncture is excluded. Beneficiaries of the EPSDT benefit are not subject to these limitations.

6d. Other practitioners' services.

Other practitioners' services provided by:

- i. Services of a licensed respiratory therapist within the scope of practice according to state law.
- ii. Services of a licensed Certified Nurse Practitioner within their scope of practice according to state law.
- iii. Services of a licensed Certified Registered Nurse Anesthetist within their scope of practice according to state law.
- iv. Services of a licensed Non-physician First Surgical Assistants and Physician Assistant within their scope of practice according to state law.
- v. Services of a licensed midwife within their scope of practice according to state law.
- vi. Services of a licensed affiliated practice dental hygienist within their scope of practice according to state law.
- vii. Services of a licensed social worker within their scope of practice according to state law.
- viii. Services of a licensed physician assistant within their scope of practice according to state law.
- ix. Services of a licensed psychologist within their scope of practice according to state law.
- x. Services of a licensed counselor within their scope of practice according to state law.
- xi. Services of a licensed registered nurse within their scope of practice according to state law.
- xii. Services of a licensed psychiatric nurse practitioner within their scope of practice according to state law.
- xiii. Services of a licensed marriage and family therapist within their scope of practice according to state law.
- xiv. Services of a licensed substance abuse counselor within their scope of practice according to state law.
- xv. Services of an ADHS licensed Emergency Medical Care Technician (EMCT) within their scope of practice according to state law
- xvi. Services of a licensed Clinical Nurse Specialist within their scope of practice according to state law