

**STATE OF RHODE ISLAND
EXECUTIVE OFFICE OF HEALTH AND HUMAN SERVICES**

**3/23/2015 PUBLIC NOTICE OF PROPOSED AMENDMENT TO RHODE ISLAND
MEDICAID STATE PLAN**

In accordance Rhode Island General Laws 42-35, notice is hereby given that the Executive Office of Health and Human Services (EOHHS) proposes to make the following amendment to the Rhode Island State Plan under Title XIX of the Social Security Act:

RATE REDUCTION FOR INCONTINENCE SUPPLIES

EOHHS is continuing its efforts to control durable medical equipment (DME) costs. In January 2014, the federal Department of Health and Human Services's Inspector General (OIG) issued a report on state Medicaid spending for incontinence supplies. In that report, the OIG evaluated state Medicaid payment rates for nine incontinence supply codes. Rhode Island's Medicaid rates for each of the codes were the highest or among the highest in the county.

In a July 2014 report, the OIG recommended that Rhode Island adjust its fee schedule for incontinence supplies. As a result, this state plan amendment seeks to lower rates for 16 incontinence supply items. Furthermore, this amendment will bring Rhode Island's payment rates for incontinence supplies into conformity with rates paid in the other New England states.

This proposed amendment is accessible on the EOHHS website (www.eohhs.ri.gov) or available in hard copy upon request (401-462-1965 or RI Relay, dial 711). Interested persons should submit data, views, or written comments by 24 April 2015 to Darren J. McDonald, Office of Policy and Innovation, Executive Office of Health and Human Services, 57 Howard Avenue, Cranston, RI, 02920, or darren.mcdonald@ohhs.ri.gov.

In accordance with the Rhode Island General Laws 42-35-3, an oral hearing will be granted on the proposed State Plan Amendment if requested by twenty-five (25) persons, an agency, or by an association having at least twenty-five (25) members. A request for an oral hearing must be made within fourteen (14) days of this notice.

The Executive Office of Health and Human Services does not discriminate against individuals based on race, color, national origin, sex, gender identity or expression, sexual orientation, religious belief, political belief, or handicap in acceptance for or provision of services or employment in its programs or activities.

| Procedure Code | Procedure Description | Current Rate | New Rate Eff. 4/1/15 |
|----------------|--|--------------|----------------------|
| T4521 | ADULT SIZED DISPOSABLE INCONTINENCE PRODUCT, BRIEF/DIAPER, SMALL, EACH | \$0.95 | \$0.46 |
| T4522 | ADULT SIZED DISPOSABLE INCONTINENCE PRODUCT, BRIEF/DIAPER, MEDIUM, EACH | \$0.95 | \$0.53 |
| T4523 | ADULT SIZED DISPOSABLE INCONTINENCE PRODUCT, BRIEF/DIAPER, LARGE, EACH | \$0.95 | \$0.71 |
| T4524 | ADULT SIZED DISPOSABLE INCONTINENCE PRODUCT, BRIEF/DIAPER, EXTRA LARGE, EACH | \$0.95 | \$0.74 |
| T4525 | ADULT SIZED DISPOSABLE INCONTINENCE PRODUCT, PROTECTIVE UNDERWEAR/PULL-ON, SMALL, EACH | \$0.95 | \$0.66 |
| T4526 | ADULT SIZED DISPOSABLE INCONTINENCE PRODUCT, PROTECTIVE UNDERWEAR/PULL-ON, MEDIUM, EACH | \$0.95 | \$0.79 |
| T4527 | ADULT SIZED DISPOSABLE INCONTINENCE PRODUCT, PROTECTIVE UNDERWEAR/PULL-ON, LARGE, EACH | \$0.95 | \$0.79 |
| T4528 | ADULT SIZED DISPOSABLE INCONTINENCE PRODUCT, PROTECTIVE UNDERWEAR/PULL-ON, EXTRA LARGE, EACH | \$0.95 | \$0.79 |
| T4529 | PEDIATRIC SIZED DISPOSABLE INCONTINENCE PRODUCT, BRIEF/DIAPER, SMALL/MEDIUM | \$0.95 | \$0.66 |
| T4530 | PEDIATRIC SIZED DISPOSABLE INCONTINENCE PRODUCT, BRIEF/DIAPER, LARGE SIZE, EACH | \$0.95 | \$0.83 |
| T4531 | PEDIATRIC SIZED DISPOSABLE INCONTINENCE PRODUCT, PROTECTIVE UNDERWEAR/PULL-ON, SMALL/MEDIUM | \$0.95 | \$0.70 |
| T4532 | PEDIATRIC SIZED DISPOSABLE INCONTINENCE PRODUCT, PROTECTIVE UNDERWEAR/PULL-ON, LARGE SIZE, EACH | \$0.95 | \$0.58 |
| T4533 | YOUTH SIZED DISPOSABLE INCONTINENCE PRODUCT, BRIEF/DIAPER, EACH | \$0.95 | \$0.46 |
| T4534 | YOUTH SIZED DISPOSABLE INCONTINENCE PRODUCT, PROTECTIVE UNDERWEAR/PULL-ON, EACH | \$0.95 | \$0.72 |
| T4535 | DISPOSABLE LINER/SHIELD/GUARD/PAD/UNDERGARMENT, FOR INCONTINENCE, EACH | \$0.77 | \$0.40 |
| T4541 | INCONTINENCE PRODUCT, DISPOSABLE UNDERPAD, LARGE, EACH | \$0.29 | \$0.29 |
| T4542 | INCONTINENCE PRODUCT, DISPOSABLE UNDERPAD, SMALL SIZE, EACH | \$0.29 | \$0.29 |
| T4543 | DISPOSABLE INCONTINENCE PRODUCT, BRIEF/DIAPER, BARIATRIC, EACH | \$2.85 | \$2.00 |
| T4544 | ADULT SIZED DISPOSABLE INCONTINENCE PRODUCT, PROTECTIVE UNDERWEAR/PULL-ON, ABOVE EXTRA LARGE, EACH | \$0.95 | \$0.79 |