

December 30, 2024

Brian Zolynas  
Division of Medicaid and Children's Health Operations  
U.S. Department of Health & Human Services  
Centers for Medicare & Medicaid Services  
90 Seventh Street, Suite 5-300 (5W)  
San Francisco, CA 94103-6707

**RE: Arizona SPA # AZ-24-0024, Pharmacy Vaccine Administration Fee Change**

Dear Mr. Zolynas:

Enclosed is State Plan Amendment (SPA) # AZ-24-0024 Pharmacy Vaccine Administration Fee Change. This SPA updates the state plan Pharmacy Vaccine Administration Fee effective December 15, 2024.

**Tribal Consultation** on this SPA occurred on November 14, 2024. The Tribal Consultation presentation is available on the following webpage:

<https://www.azahcccs.gov/AmericanIndians/TribalConsultation/>

**Public Notice** for this SPA was posted on the following webpages:

[https://www.azahcccs.gov/AHCCCS/Downloads/PublicNotices/Final\\_PublicNotice\\_VaccineAdministration.pdf](https://www.azahcccs.gov/AHCCCS/Downloads/PublicNotices/Final_PublicNotice_VaccineAdministration.pdf)

The **Federal Fiscal Impact** of this SPA has been calculated as:

- FFY 2025: (\$1,950)
- FFY 2026: (\$2,400)

AHCCCS is estimating a savings of \$1,950 for the remainder of FFY 2025 and a savings of \$2,400 for the full FFY 2026. The FFY 2025 and FFY 2026 estimate is the federal fiscal impact only using an FMAP of 64.89% in FFY 2025 and 64.34% in FFY 2026. In addition, FFY 2025 assumes the change occurs from December 15th through September 30th while FFY 2026 estimate is annualized.

If there are any questions about the enclosed SPA, please contact Maxwell Seifer at [Maxwell.Seifer@azahcccs.gov](mailto:Maxwell.Seifer@azahcccs.gov) or 602-417-4722.

Sincerely,



Kyle Sawyer  
Assistant Director, Public Policy and Strategic Planning  
Arizona Health Care Cost Containment System (AHCCCS)

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

1. TRANSMITTAL NUMBER <b>24 — 0024</b>	2. STATE <b>AZ</b>
3. PROGRAM IDENTIFICATION: TITLE <b>19</b> OF THE SOCIAL SECURITY ACT	

TO: CENTER DIRECTOR  
CENTERS FOR MEDICAID & CHIP SERVICES  
DEPARTMENT OF HEALTH AND HUMAN SERVICES

4. PROPOSED EFFECTIVE DATE  
**December 15, 2024**

5. FEDERAL STATUTE/REGULATION CITATION  
**42 CFR 447.201**

6. FEDERAL BUDGET IMPACT (Amounts in WHOLE dollars)  
a. FFY: **2025** \$ **(1,950)**  
b. FFY: **2026** \$ **(2,400)**

7. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT  
**Attachment 4.19-B: page 5(b)**

8. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable)  
**Attachment 4.19-B: page 5(b)**

9. SUBJECT OF AMENDMENT  
Updates the state plan Pharmacy Vaccine Administration Fee effective December 15, 2024.

10. 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

OTHER, AS SPECIFIED:

11. SIGNATURE OF STATE AGENCY OFFICIAL  


15. RETURN TO  
Kyle Sawyer  
801 E. Jefferson St., MD #4200  
Phoenix, AZ 85034

12. TYPED NAME  
Kyle Sawyer

13. TITLE  
Assistant Director, Public Policy and Strategic Planning

14. DATE SUBMITTED: December 30, 2024

**FOR CMS USE ONLY**

16. DATE RECEIVED

17. DATE APPROVED

**PLAN APPROVED - ONE COPY ATTACHED**

18. EFFECTIVE DATE OF APPROVED MATERIAL

19. SIGNATURE OF APPROVING OFFICIAL

20. TYPED NAME OF APPROVING OFFICIAL

21. TITLE OF APPROVING OFFICIAL

22. REMARKS

State: ARIZONA

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METHODS AND STANDARDS FOR ESTABLISHING PAYMENT RATES  
OTHER TYPES OF CARE

- Other Licensed Practitioner Services
  - OLP-Pharmacist: AHCCCS-registered pharmacies will be reimbursed for all AHCCCS covered immunizations and anaphylaxis agents administered by licensed pharmacists within the scope of their practice. AHCCCS will provide an administration fee for pharmacies administering the vaccine. The administration fee [is effective for services provided on or after December 15, 2024, and](#) can be found on the AHCCCS website at <https://www.azahcccs.gov/PlansProviders/RatesAndBilling/FFS/pharmacy.html>
  - OLP-Emergency Medical Care Technician: EMCT personnel providing Treat and Refer services through an AHCCCS-registered Treat and Refer entity whereby the entity will be reimbursed for Treat and Refer services subject to the available rates located at <https://www.azahcccs.gov/PlansProviders/RatesAndBilling/FFS/>
- Dental Services
- Vision Services (including eye examinations, eyeglasses and contact lenses)
- Diagnostic, Screening and Preventive Services
- Respiratory Care Services
- Transportation Services (see page 5h for information about ambulance rates)
- Private Duty Nurse Services
- Other practitioner's services
- Physical therapy
- Occupational therapy
- Services for individuals with speech, hearing and language disorders
- Prosthetic devices
- Screening services
- Preventative services
- Rehabilitation services
- EPSDT services
- Face-to-Face Tobacco Cessation Counseling Services Benefit Package for Pregnant Women: The rates for these services are included in the fee schedules listed under this Attachment associated with the relevant provider services.

TN ~~24-0024XXXX~~16-006

Supersedes TN No. 16-0063  
202416

Approved: October 25, 2016

Effective: December ~~October~~ 15,