PUERTO RICO MEDICAID STATE PLAN
SECTION 1
SINGLE STATE AGENCY ORGANIZATION

MAYO 2019
**STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT**

Medical Assistance Program

State/Territory: **Puerto Rico**

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**Revision:** HCFA-PM-87-4  (BERC)  MARCH 1987

**Approval Date:** OCT 20, 1983  **Effective Date:** 4/1/88

**Supersedes:** TH No. 88-1

TN No. 80-38  HCFA ID: 1002P/0010P
State Commonwealth of Puerto Rico

SECTION 1 SINGLE STATE AGENCY ORGANIZATION

Citation 42 CFR 431.10
AT-79-29

1.1 Designation and Authority

(a) The Department of Health of Puerto Rico is the single State agency designated to administer or supervise the administration of the Medicaid program under title XIX of the Social Security Act. (All references in this plan to "the Medicaid agency" mean the agency named in this paragraph.)

ATTACHMENT 1.1-A is a certification signed by the State Attorney General identifying the single State agency and citing the legal authority under which it administers or supervises administration of the program.
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<th>State</th>
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**Citation**
Sec. 1902(a) of the Act

1.1(b) The State agency that administered or supervised the administration of the plan approved under title X of the Act as of January 1, 1965, has been separately designated to administer or supervise the administration of that part of this plan which relates to blind individuals.

☐ Yes. The State agency so designated is

This agency has a separate plan covering that portion of the State plan under title XIX for which it is responsible.

☐ Not applicable. The entire plan under title XIX is administered or supervised by the State agency named in paragraph 1.1(a).

Supersedes

<p>| Approval Date: 2/6/75 | Effective Date: 4/4/74 |</p>
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<th>1.1(c) Waivers of the single State agency requirement which are currently operative have been granted under authority of the Intergovernmental Cooperation Act of 1968.</th>
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<td><strong>Yes</strong>. ATTACHMENT 1.1-B describes these waivers and the approved alternative organizational arrangements.</td>
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<tr>
<td><strong>Not applicable</strong>. Waivers are no longer in effect.</td>
</tr>
<tr>
<td><strong>Not applicable</strong>. No waivers have ever been granted.</td>
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There is a written agreement relating to these determinations between the agency named in paragraph 1.1(a) and the agency administering or supervising the administration of the State plan approved under title I or XVI of the Social Security Act. The agreement defines the relationships and respective responsibilities of the agencies.

Not applicable. The agency named in paragraph 1.1(a) has responsibility for all such determinations.
1.1(e) All other provisions of this plan are administered by the Medicaid agency except for those functions for which final authority has been granted to a Professional Standards Review Organization under title XI of the Act.

(f) All other requirements of 42 CFR 431.10 are met.
1.2 Organization for Administration

(a) ATTACHMENT 1.2-A contains a description of the organization and functions of the Medicaid agency and an organization chart of the agency.

(b) Within the State agency, the Medical Assistance Program has been designated as the medical assistance unit. ATTACHMENT 1.2-B contains a description of the organization and functions of the medical assistance unit and an organization chart of the unit.

(c) ATTACHMENT 1.2-C contains a description of the kinds and numbers of professional medical personnel and supporting staff used in the administration of the plan and their responsibilities.

(d) Eligibility determinations are made by State or local staff of an agency other than the agency named in paragraph 1.1(a). ATTACHMENT 1.2-D contains a description of the staff designated to make such determinations and the functions they will perform.

Not applicable. Only staff of the agency named in paragraph 1.1(a) make such determinations.
1.3 Statewide Operation

The plan is in operation on a Statewide basis in accordance with all requirements of 42 CFR 431.50.

☑ The plan is State administered.

☐ The plan is administered by the political subdivisions of the State and is mandatory on them.

Revision: HCFA-AT-80-38 (FPB)
May 22, 1980

State: Commonwealth of Puerto Rico
The State enrolls recipients in MCO, PIHP, PAHP, and/or PCCM programs. The State assures that it complies with 42 CFR 438.104(c) to consult with the Medical Care Advisory Committee in the review of marketing materials.

Citation | 1.4 | State Medical Care Advisory Committee
42 CFR 431.12(b) | There is an advisory committee to the Medicaid agency director on health and medical care services established in accordance with and meeting all the requirements of 42 CFR 431.12.

42 CFR 438.104 | X | The State enrolls recipients in MCO, PIHP, PAHP, and/or PCCM programs. The State assures that it complies with 42 CFR 438.104(c) to consult with the Medical Care Advisory Committee in the review of marketing materials.

Revision: HCFA-AT-80-38 (BPP) May 22, 1980

State: [Puerto Rico]

Supersedes TN # 74-1

Effective Date 08/13/03
Approval Date 02/24/2004
1. The State has implemented a program for the distribution of pediatric vaccines to program-registered providers for the immunization of federally vaccine-eligible children in accordance with section 1928 as indicated below.

a. The State program will provide each vaccine-eligible child with medically appropriate vaccines according to the schedule developed by the Advisory Committee on Immunization Practices and without charge for the vaccines.

b. The State will outreach and encourage a variety of providers to participate in the program and to administer vaccines in multiple settings, e.g., private health care providers, providers that receive funds under Title V of the Indian Health Care Improvement Act, health programs or facilities operated by Indian tribes, and maintain a list of program-registered providers.

c. With respect to any population of vaccine-eligible children a substantial portion of whose parents have limited ability to speak the English language, the State will identify program-registered providers who are able to communicate with this vaccine-eligible population in the language and cultural context which is most appropriate.

d. The State will instruct program-registered providers to determine eligibility in accordance with section 1928(b) and (h) of the Social Security Act.

e. The State will assure that no program-registered provider will charge more for the administration of the vaccine than the regional maximum established by the Secretary. The State will inform program-registered providers of the maximum fee for the administration of vaccines.

f. The State will assure that no vaccine-eligible child is denied vaccines because of an inability to pay an administration fee.

g. Except as authorized under section 1915(b) of the Social Security Act or as permitted by the Secretary to prevent fraud or abuse, the State will not impose any additional qualifications or conditions, in addition to those indicated above, in order for a provider to qualify as a program-registered provider.
2. The State has not modified or repealed any Immunization Law in effect as of May 1, 1993 to reduce the amount of health insurance coverage of pediatric vaccines.

3. The State Medicaid Agency has coordinated with the State Public Health Agency in the completion of this preprint page.

4. The State agency with overall responsibility for the implementation and enforcement of the provisions of section 1928 is:

   State Medicaid Agency

   X State Public Health Agency