

TRANSMITTAL AND NOTICE OF APPROVAL OF STATE PLAN MATERIAL		1. TRANSMITTAL NUMBER: 11-006	2. STATE North Dakota
FOR: HEALTH CARE FINANCING ADMINISTRATION		3. PROGRAM IDENTIFICATION: TITLE XIX OF THE SOCIAL SECURITY ACT (MEDICAID)	
TO: REGIONAL ADMINISTRATOR HEALTH CARE FINANCING ADMINISTRATION DEPARTMENT OF HEALTH AND HUMAN SERVICES		4. PROPOSED EFFECTIVE DATE July 1, 2011	
5. TYPE OF PLAN MATERIAL (Check One): <input type="checkbox"/> NEW STATE PLAN <input type="checkbox"/> AMENDMENT TO BE CONSIDERED AS NEW PLAN <input checked="" type="checkbox"/> AMENDMENT COMPLETE BLOCKS 6 THRU 10 IF THIS IS AN AMENDMENT (Separate Transmittal for each amendment)			
6. FEDERAL STATUTE/REGULATION CITATION: 42 CFR 440.60		7. FEDERAL BUDGET IMPACT: a. FFY <u>2011</u> \$ <u>-0-</u> b. FFY <u>2012</u> \$ <u>-0-</u>	
8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT: Attachment to Page 3 of Attachment 3.1-A Attachment to Page 3 of Attachment 3.1-B Attachment 4.19-B, Page 1a		9. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable): Attachment to Page 3 of Attachment 3.1-A Attachment to Page 3 of Attachment 3.1-B Attachment 4.19-B, Page 1a	
10. SUBJECT OF AMENDMENT: Amends the ND State Plan to make a technical correction to Page 3 of Attachment 3.1-A and 3.1-B, and to allow North Dakota Medicaid to enroll pharmacists to render services within their scope of practice.			
11. GOVERNOR'S REVIEW (Check One): <input type="checkbox"/> GOVERNOR'S OFFICE REPORTED NO COMMENT <input checked="" type="checkbox"/> OTHER, AS SPECIFIED: <input type="checkbox"/> COMMENTS OF GOVERNOR'S OFFICE ENCLOSED <u>Maggie D. Anderson, Director,</u> <input type="checkbox"/> NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL <u>Medical Services Division</u>			
12. SIGNATURE OF STATE AGENCY OFFICIAL:		16. RETURN TO:	
13. TYPED NAME: Maggie D. Anderson		Maggie D. Anderson, Director Division of Medical Services ND Department of Human Services 600 East Boulevard Avenue Dept 325 Bismarck ND 58505-0250	
14. TITLE: Director, Division of Medical Services			
15. DATE SUBMITTED: 6/29/2011			
FOR REGIONAL OFFICE USE ONLY			
17. DATE RECEIVED: 6/29/11		18. DATE APPROVED: 9/9/11	
PLAN APPROVED - ONE COPY ATTACHED			
19. EFFECTIVE DATE OF APPROVED MATERIAL: 7/1/11		SIGNATURE OF REGIONAL OFFICIAL:	
21. TYPED NAME: RICHARD C. ALLEN		22. TITLE: ARA, DMCHO	
23. REMARKS:			

LIMITATIONS ON AMOUNT, DURATION AND SCOPEService

- 6.b. Effective July 1, 2009, individuals 21 years of age and older are limited to one refractive examination no more often every two years after the initial examination paid under Medicaid unless more frequent examinations are prior approved as medically necessary by the department's optometric consultant. The same will apply to subsequent examinations in relation to a two-year cycle following an examination.

Individuals under 21 years of age are limited to one refractive examination no more often than one year after the initial examination paid under Medicaid unless more frequent examinations are prior approved as medically necessary by the department's optometric consultant. The same will apply to subsequent examinations in relation to a one-year cycle following an examination.

- 6.c. Chiropractic services. Effective January 1, 2004, the North Dakota Medicaid program will limit the number of spinal manipulation treatment services to no more than twelve treatments and two radiologic examinations per recipient per year unless the provider requests and receives prior authorization from the department.
- 6.d. Other practitioner's services. Effective April 1, 1992 the department shall provide for services provided by licensed psychologists.

Effective June 1, 2004, the North Dakota Medicaid program will limit the number of counseling visits to no more than 40 visits per recipient per calendar year unless the provider requests and receives prior authorization from the department. The 40-visit limit is a combined limit that applies to both psychologist and Licensed Independent Certified Social Worker services.

Effective October 1, 2003, the North Dakota Medicaid Program will pay for services provided by Certified Registered Nurse Anesthetists.

Effective April 1, 2004, the North Dakota Medicaid Program will pay for the services of Nurse Practitioners who meet North Dakota's advanced educational and clinic practice requirements and who are certified in specialties in addition to family and pediatric nurse practitioner services.

Effective June 1, 2004, the North Dakota Medicaid Program will pay for services provided by Licensed Independent Certified Social Workers (LICSW's). The number of visits will be limited to no more than 40 counseling visits per recipient per calendar year unless the provider requests and receives prior authorization from the department. The 40-visit limit is a combined limit that applies to both psychologist and Licensed Independent Certified Social Worker services.

Effective July 1, 2011, the North Dakota Medicaid Program will pay for services provided by licensed and registered pharmacists.

LIMITATIONS ON AMOUNT, DURATION AND SCOPE

Service

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METHODS AND STANDARDS FOR ESTABLISHING PAYMENT RATES – OTHER
TYPES OF CARE - (continued)

- 4) For x-ray services, Medicaid will pay the lower of billed charges or fee schedule established by the state agency.
- 5) For prosthetic devices, medical equipment, supplies and appliances, Medicaid will pay the lower of billed charges or fee schedule established by the state agency.
- 6) For physicians, podiatrists, chiropractors, and psychologists, the lower of billed charges or fee schedule established by the state agency.
 - a. For services rendered by licensed or registered pharmacists, the lower of billed charges or the fee schedule established by the state agency.
- 7) For optometrists, dentists and dentures, Medicaid will pay the lower of billed charges or Medicaid fee established by the state agency.
- 8) For private duty nursing, Medicaid will pay the lower of billed charges or the established fee as determined by the state agency.
- 9) For physical, occupational and speech therapy, payment will be the lower of billed charges or the fee established by the state agency.
- 10) For eyeglasses, Medicaid will pay the lower of billed charges or the fee schedule established by the state agency.

The agency's rates were set as of July 1, 2009 and are effective for services received on or after that date. All rates are published on the agency's web site at: <http://www.nd.gov/dhs/services/medicalserv/medicaid/provider-fee-schedules.html>. Except as otherwise noted in the plan, state developed fee schedule rates are the same for both governmental and private providers. The agency rates shall be inflated by no more than 7% annually.

TN No.: 11-006
Supersedes
TN No.: 09-014

Approval Date: 9/9/11

Effective Date: 07-01-2011