

Attachment to Blocks 8 & 9 of CMS Form 179

Transmittal Number 12-004

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Plan Section or Attachment**

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4.b. EPSDT Services (Continued)

Audiology and Hearing Services

Definition:

Audiology and hearing services outlined in this section of the state plan are available to Medicaid-eligible recipients under the age of 21 years, who are eligible for Early and Periodic Screening, Diagnosis, and Treatment (EPSDT) services and for whom services are medically necessary.

Services:

Audiology Services

Pursuant to 42 CFR § 440.110, medically necessary audiology services include, but are not limited to:

1. Identification of children with hearing loss;
2. Determination of the range, nature and degree of hearing loss, including the referral for medical or other professional attention for the amelioration of hearing;
3. Provision of amelioration activities, such as language amelioration, auditory training, speech reading (lip reading), hearing evaluation and speech conversation;
4. Determination of the child's need for group and individual amplification; and
5. Hearing aid services, including necessary equipment and supplies (hearing aid instruments are described in 12c below).

Hearing Services

Hearing aid and audiometric evaluation services for Medicaid clients younger than 21 years of age are reimbursed to willing and qualified Medicaid providers, meeting the qualifications described below.

Audiology and hearing services may be provided in an individual or group setting.

Audiology and hearing services must be prescribed by a physician or by another licensed practitioner within the scope of his or her practice under state law.

Providers:

Audiology and hearing services must be provided by a qualified audiologist who meets the requirements of 42 CFR § 440.110(c)(3) and in accordance with applicable state and federal law or regulation.

Services may be provided by:

- A qualified audiologist licensed by the state to furnish audiologist services; or
- A qualified audiology assistant licensed by the state, when the services are provided in a facility setting (such as a comprehensive outpatient rehabilitation facility, an outpatient rehabilitation facility, an outpatient hospital, an inpatient hospital, or a school) and when the assistant is acting

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4b. EPSDT Services (Continued)

1) ESPD Case Management:

- a) Children birth through age 20 with a health condition/health risk.

2) Areas of state in which services will be provided:

- a) Entire State

3) Comparability of services:

- a) Services are not comparable in amount duration and scope. Under section 1915(g) of the Social Security Act, a state may provide services without regard to the comparability requirements of section 1902(a)(10)(B) of the Act.

4) Definition of services:

- a) Case management services are services furnished to assist individuals, eligible under the State Plan, in gaining access to needed medical, social, educational, and other services. Case Management includes the following assistance:
- i) Comprehensive face-to-face assessment and periodic reassessment of individual needs to determine the need for any medical, educational, social, or other services required to address short- and long-term health and well being. The frequency of assessment and reassessment is based upon client need and the complexity of the case. Additional follow-up visits can be requested based upon client need. Assessment activities include:
 - (1) taking a client's history;
 - (2) identifying the individual's needs and assessing and addressing family issues that impact the client's health condition/risk or high-risk condition and completing related documentation; and
 - (3) gathering information from other sources, such as family members, medical providers, social workers, and educators (if necessary), to form a complete assessment of the individual.
 - ii) Development (and periodic revision) of a specific care plan that:
 - (1) is based on the information collected through the face-to-face needs assessment, face-to-face follow-up contacts, or telephone follow up contacts;
 - (2) specifies the goals and actions to address the medical, social, educational, and other services needed by the individual;

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4b. EPSDT Services (Continued)

EPSDT Case Management (Continued)

- (3) includes activities such as ensuring the active participation of the eligible individual, and working with the individual (or the individual's authorized health care decision maker) and others to develop those goals; and
 - (4) identifies a course of action to respond to the assessed needs of the eligible individual, including identifying the individual responsible for contacting the appropriate health and human service providers; and designating the time frame within which the eligible recipient should access services.
- iii) Referral and related activities to help an eligible individual obtain needed services, including activities that help link an individual with:
- (1) medical, social, and educational providers; and
 - (2) other programs and services that can provide needed services, such as making referrals to providers for needed services and scheduling appointments for the individual.
- iv) Monitoring, follow-up activities, and contacts that are necessary to ensure the care plan is implemented and adequately addresses the individual's needs.
- (1) Such activities may be with the individual, family members, providers, or other entities or individuals and conducted as frequently as necessary, and include at least one annual follow-up contact for clients who are eligible for case management for longer than 12 consecutive months, to determine whether the following conditions are met:
 - (a) services are being furnished in accordance with the individual's care plan;
 - (b) services in the care plan are adequate; and
 - (c) the care plan and service arrangement are modified when the individual's needs or status change.
 - (2) Case management may include contacts with non-eligible individuals that are directly related to identifying the needs and supports for helping the eligible individual access services.
 - (3) Monitoring includes face-to-face follow-up visits and phone monitoring calls. The frequency of the follow up visits is based upon the complexity of client need. Additional follow-up visits can be requested based upon client need.

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4b. EPSDT Services (Continued)

EPSDT Case Management (Continued)

7) Limitations:

- a) Case Management does not include:
 - i) Activities for which third parties are liable to pay;
 - ii) Activities not consistent with the definition of case management services under section 6052 of the Deficit Reduction Act, codified at section 1915(g)(2) of the SSA;
 - iii) The direct delivery of an underlying medical, educational, social, or other service to which an eligible individual has been referred.

8) Other Limitations:

- a) Case management services are prior authorized by the Department of State Health Services. The number of billable contacts that are prior authorized is based on the client's level of need, level of medical involvement, and complicating psychosocial factors.

9) Payment:

- a) Payment for case management or targeted case management services under the plan does not duplicate payments made to public agencies or private entities under other program authorities for this same purpose.

10) Case Records:

- a) For all individuals receiving case management, providers maintain case records that document the following:
 - (i) The name of the individual;
 - (ii) the dates of the case management services;
 - (iii) the name of the provider agency (if relevant) and the person providing the case management service;
 - (iv) the nature, content, units of the case management services received and whether goals specified in the care plan have been achieved;
 - (v) whether the individual has declined services in the care plan;
 - (vi) the need for, and occurrences of, coordination with other case managers;
 - (vii) a timeline for obtaining needed services; and
 - (viii) a timeline for reevaluation of the plan.

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12c. **Prosthetics**

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a) Definition

Prosthetics outlined in this section of the state plan include orthotic devices and prosthetic devices.

Orthotic and prosthetic devices are defined as replacement, correction, or support devices prescribed by the physician or other licensed practitioner of the healing arts within the scope of professional practice as defined by Texas law to:

- (1) artificially replace a missing portion of the body;
- (2) prevent or correct physical deformity or malfunction; or
- (3) support a weak or deformed portion of the body.

Hearing aids are considered prosthetic devices and defined as an electronic device that amplifies sound to compensate for impaired hearing.

External breast prosthesis is defined as an external prosthetic device that is used to replace breast tissue and to produce a symmetrical appearance of the breasts.

b) Services

With the exception of hearing aids and external breast prostheses described below, the provision of orthotics and prosthetic devices are limited to EPSDT recipients.

- (1) *Orthotics and Prosthetics.*
Orthotic and prosthetic devices require prior authorization and must be medically necessary. The services are provided under 42 CFR §440.120(c) and in accordance with applicable state and federal law and regulation. Orthotic and prosthetic devices are available to Medicaid EPSDT-eligible recipients under the age of 21 years when medically necessary and eligible for federal financial participation.
- (2) *Hearing Aids.*
Hearing aids are a benefit for all Medicaid eligible recipients when medically necessary. Medical necessity for a hearing aid must be determined through an examination conducted by a physician or other licensed practitioner of the healing arts within the scope of his practice as defined by State law.

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4.b. EPSDT Services (Continued)

Audiology and Hearing Services

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3. Provision of amelioration activities, such as language amelioration, auditory training, speech reading (lip reading), hearing evaluation and speech conversation;
4. Determination of the child's need for group and individual amplification; and
5. Hearing aid services, including necessary equipment and supplies (hearing aid instruments are described in 12c below).

Hearing Services

Hearing aid and audiometric evaluation services for Medicaid clients younger than 21 years of age are reimbursed to willing and qualified Medicaid providers, meeting the qualifications described below.

Audiology and hearing services may be provided in an individual or group setting.

Audiology and hearing services must be prescribed by a physician or by another licensed practitioner within the scope of his or her practice under state law.

Providers:

Audiology and hearing services must be provided by a qualified audiologist who meets the requirements of 42 CFR § 440.110(c)(3) and in accordance with applicable state and federal law or regulation.

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4b. EPSDT Services (Continued)

1) ESPD Case Management:

- a) Children birth through age 20 with a health condition/health risk.

2) Areas of state in which services will be provided:

- a) Entire State

3) Comparability of services:

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 - (1) taking a client's history;
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 - (3) gathering information from other sources, such as family members, medical providers, social workers, and educators (if necessary), to form a complete assessment of the individual.
 - ii) Development (and periodic revision) of a specific care plan that:
 - (1) is based on the information collected through the face-to-face needs assessment, face-to-face follow-up contacts, or telephone follow up contacts;
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4b. EPSDT Services (Continued)

EPSDT Case Management (Continued)

- (3) includes activities such as ensuring the active participation of the eligible individual, and working with the individual (or the individual's authorized health care decision maker) and others to develop those goals; and
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4b. EPSDT Services (Continued)

EPSDT Case Management (Continued)

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 - (vi) the need for, and occurrences of, coordination with other case managers;
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 - (viii) a timeline for reevaluation of the plan.

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12c. Prosthetics

a) Definition

Prosthetics outlined in this section of the state plan include orthotic devices and prosthetic devices.

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(2) *Hearing Aids.*

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