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State/Territory Name: Texas

State Plan Amendment (SPA) #: 13-14

This file contains the following documents in the order listed:

- 1) Approval Letter
- 2) CMS 179 Form
- 3) Superseding Page Listing
- 4) Approved SPA Pages

DEPARTMENT OF HEALTH & HUMAN SERVICES
Centers for Medicare & Medicaid Services
Dallas Regional Office
1301 Young Street, Suite 833
Dallas, Texas 75202



DIVISION OF MEDICAID & CHILDREN'S HEALTH - REGION VI

February 11, 2014

Our Reference: SPA TX 13-014

Ms. Kay Ghahremani
State Medicaid/CHIP Director
Health and Human Services Commission
Post Office Box 13247
Mail Code H100
Austin, Texas 78711

Dear Ms. Ghahremani:

We have reviewed the State's proposed amendment to the Texas State Plan submitted under Transmittal Number 13-014, dated June 28, 2013. This state plan amendment updates optometric services in Section 3 of the state plan and makes optometrists eligible for the meaningful use of electronic health record incentive payments by moving optometric services from an optional service to a mandatory service under physicians' services.

Based on the information submitted, we have approved the amendment for incorporation into the official Texas State Plan with an effective date change of July 1, 2013. A copy of the CMS-179 and approved plan pages are enclosed with this letter.

If you have questions, please contact Cheryl Rupley at (214) 767-6278.

Sincerely,

A solid black rectangular box redacting the signature of Bill Brooks.

Bill Brooks
Associate Regional Administrator

cc: Becky Brownlee, Policy Development Support

TRANSMITTAL AND NOTICE OF APPROVAL OF STATE PLAN MATERIAL FOR: CENTERS FOR MEDICARE AND MEDICAID SERVICES		1. TRANSMITTAL NUMBER: 13-014	2. STATE: TEXAS
		3. PROGRAM IDENTIFICATION: TITLE XIX OF THE SOCIAL SECURITY ACT (MEDICAID)	
TO: REGIONAL ADMINISTRATOR CENTERS FOR MEDICARE AND MEDICAID SERVICES DEPARTMENT OF HEALTH AND HUMAN SERVICES		4. PROPOSED EFFECTIVE DATE: July 1, 2013	
5. TYPE OF PLAN MATERIAL (Circle 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 441.30		7. FEDERAL BUDGET IMPACT: SEE ATTACHMENT a. FFY 2013 \$1,062,500 b. FFY 2014 \$ 425,000 c. FFY 2015 \$ 425,000	
8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT: SEE ATTACHMENT TO BLOCKS 8 & 9		9. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable): SEE ATTACHMENT TO BLOCKS 8 & 9	
10. SUBJECT OF AMENDMENT: The proposed amendment updates the optometric services section of the Basic State Plan.			
11. GOVERNOR'S REVIEW (Check One): <input type="checkbox"/> GOVERNOR'S OFFICE REPORTED NO COMMENT <input checked="" type="checkbox"/> OTHER, AS SPECIFIED: Sent to Governor's Office this date. Comments, if any, will be forwarded upon receipt. <input type="checkbox"/> COMMENTS OF GOVERNOR'S OFFICE ENCLOSED <input type="checkbox"/> NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL			
12. SIGNATURE OF STATE AGENCY OFFICIAL: 		16. RETURN TO: Kay Ghahremani State Medicaid Director Post Office Box 13247, MC: H-100 Austin, Texas 78711	
13. TYPED NAME: Kay Ghahremani			
14. TITLE: State Medicaid Director			
15. DATE SUBMITTED: June 28, 2013			
FOR REGIONAL OFFICE USE ONLY			
17. DATE RECEIVED: 28 June, 2013		18. DATE APPROVED: 11 February, 2014	
PLAN APPROVED – ONE COPY ATTACHED			
19. EFFECTIVE DATE OF APPROVED MATERIAL: 1 July, 2013		20. SIGNATURE: 	
21. TYPED NAME: Bill Brooks		22. TITLE: Associate Regional Administrator Division of Medicaid & Children's Health	
23. REMARKS: Pen and Ink change made to CMS 179 per State's RAI response dated 2/3/14 Adding additional pages to the SPA package.			

Attachment to Blocks 8 & 9 of CMS Form 179

Transmittal Number 13-014

**Number of the
Plan Section or Attachment**

**Number of the Superseded
Plan Section or Attachment**

Basic State Plan
Page 27

Basic State Plan
Page 27 (TN 87-010)

Appendix 1 to Attachment 3.1-A
Page 9
Page 11
Page 30

Appendix 1 to Attachment 3.1-A
Page 9 (TN 13-021)
Page 11(TN 05-008)
Page 30 (TN 09-009)

Appendix 1 to Attachment 3.1-B
Page 9
Page 11
Page 30

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Page 9 (TN 13-021)
Page 11 (TN 05-008)
Page 30 (TN 09-009)

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5. Physicians' and Dentists' Services.

- a. Physicians' Services. Services by or under the personal supervision of a physician licensed to practice medicine or osteopathy are covered by the Texas Medical Assistance Program as specified in 42 CFR §440.50.

(1) Telemedicine

Services provided via telemedicine are a benefit of the Texas Medicaid Program. Telemedicine is defined as the practice of health care delivery by a provider who is located at a site other than the site where the patient is located for the purposes of evaluation, diagnosis, consultation, or treatment that requires the use of advanced telecommunications technology. Telephone conversations, chart reviews, electronic mail messages, and facsimile transmissions are not considered telemedicine.

The distant site provider uses telemedicine to provide a service to the client at the patient site. Qualifying distant site providers are reimbursed in accordance with the standard Medicaid reimbursement methodology. Qualifying patient sites are reimbursed a facility fee.

(2) Optometrists' Services

Physician services include services of the type which an optometrist is also legally authorized to perform and such services are reimbursed whether furnished by a physician or an optometrist.

Diagnostic and treatment services provided by an optometrist are covered by the Texas Medical Assistance Program if the services are (1) within the optometrist's scope of practice, as defined by state law and (2) reasonable and medically necessary as determined by the single state agency or its designee.

- b. Dentists' Services. Subject to the specifications, conditions and limitations established by the single state agency, services by a Doctor of Dental Surgery or Doctor of Dental Medicine (Dentists' services) are covered by the Texas Medical Assistance Program if the services (1) are within the dentist scope of practice, as defined by law; and (2) would be covered by the Texas Medical Assistance Program when they are provided by a licensed physician (M.D. or D.O.).

6.b. Optometric Services

Eligible medical assistance recipients covered under the Early and Periodic Screening, Diagnosis, and Treatment (EPSDT) Program receive optometric and eyeglasses services through the EPSDT program as described elsewhere in this State Plan.

Optometric services provided in skilled or intermediate care facilities are reimbursable by the program if the recipient's attending physician has ordered the service(s) and the order is included in the recipient's medical records at the nursing facility.

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13.c. Preventive Services

Preventive services provided under this section are provided by practitioners who meet individual practitioner certification standards according to federal and state law. Each provider must be approved for participation in the Texas Medical Assistance Program by the Texas Health and Human Services Commission.

Preventive services include services to:

- a) prevent disease, disability and other health conditions or their progression,
- b) prolong life, and
- c) promote physical and mental health and efficiency.

Eligible recipients, other than EPSDT recipients, are entitled to one comprehensive preventive exam per year. The preventive services must be provided in accordance with the United States Preventive Services Task Force (USPSTF).

Optometric Services

Eligible recipients, other than EPSDT recipients, are entitled to one eye exam by refraction every two state fiscal year period (a 24 consecutive months biennial period from September 1 through August 31), whether performed by a Doctor of Optometry or a physician. Payment will be made by the Texas Medical Assistance Program for one eye examination with refraction per recipient, per every two state fiscal year (24 months) period. This limit applies only to determinations of visual acuity, not to other diagnostic services or to treatment of the eye for medical conditions.

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Citation
42 CFR 441.30
AT-78-90

3.1 (f)(1) Optometric Services

Optometric services (other than those provided under §§435.531 and 436.531) are not now, but were previously provided under the plan. Services of the type an optometrist is legally authorized to perform are specifically included in the term "physicians' services" under this plan and are reimbursed whether furnished by a physician or an optometrist.

- Yes.
- No. The conditions described in the first sentence apply but the term "physicians' services" does not specifically include services of the type an optometrist is legally authorized to perform.
- Not applicable. The conditions in the first sentence do not apply.

1903(i) (l)
Of the Act,
P.L. 99-272
(Section 9507)

(2) Organ Transplant Procedures

Organ transplant procedures are provided.

- No.
- Yes. Similarly situated individuals are treated alike and any restriction on the facilities that may, or practitioners who may, provide those procedures is consistent with the accessibility of high quality care to individuals eligible for the procedures under this plan. Standards for the coverage organ transplant procedures are described at **ATTACHMENT 3.1-E.**

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