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State/Territory Name: Texas

State Plan Amendment (SPA) #: 25-0009

This file contains the following documents in the order listed:

- 1) Approval Letter
- 2) CMS Form 179
- 3) Approved SPA Pages

DEPARTMENT OF HEALTH & HUMAN SERVICES

Centers for Medicare & Medicaid Services

601 E. 12th St., Room 355

Kansas City, Missouri 64106



Medicaid and CHIP Operations Group

June 26, 2025

Emily Zalkovsky
State Medicaid Director
Texas Health and Human Services Commission (HHSC)
P.O. Box 13247
Austin, TX 78711-3247

Re: Texas State Plan Amendment (SPA) – 25-0009

Dear Director Zalkovsky:

The Centers for Medicare & Medicaid Services (CMS) reviewed your Medicaid State Plan Amendment (SPA) submitted under transmittal number (TN) 25-0009. This amendment makes requirements for physical therapy services consistent with requirements for Medicaid home health services. The proposed amendment requires physical therapy services be prescribed by a prescribing provider.

We conducted our review of your submittal according to statutory requirements in Title XIX of the Social Security Act and implementing regulations. This letter informs you that Texas' Medicaid SPA TN 25-0009 was approved on June 26, 2025, with an effective date of January 1, 2025.

Enclosed are copies of Form CMS-179 and approved SPA pages to be incorporated into the Texas State Plan.

If you have any questions, please contact Ford Blunt at (214) 767-6381 or via email at Ford.Blunt@cms.hhs.gov.

Sincerely,

Shantrina Roberts, Acting Director
Division of Program Operations

Enclosures

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

1. TRANSMITTAL NUMBER

2 5 _ 0 0 0 9

2. STATE

T X

3. PROGRAM IDENTIFICATION: TITLE XIX OF THE SOCIAL
SECURITY ACTTO: CENTER DIRECTOR
CENTERS FOR MEDICAID & CHIP SERVICES
DEPARTMENT OF HEALTH AND HUMAN SERVICES

4. PROPOSED EFFECTIVE DATE

January 1, 2025

5. FEDERAL STATUTE/REGULATION CITATION

42 CFR § 440.110

6. FEDERAL BUDGET IMPACT (Amounts in WHOLE dollars)

a. FFY 2025 \$ 0.00b. FFY 2026 \$ 0.00

7. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT

SEE ATTACHMENT TO BLOCKS 7 & 8

9. SUBJECT OF AMENDMENT

8. PAGENUMBER OF THE SUPERSEDED PLAN
SECTION OR ATTACHMENT (If Applicable)**SEE ATTACHMENT TO BLOCKS 7 & 8**

The purpose of the proposed amendment is to make requirements for physical therapy services consistent with requirements for Medicaid home health services. The proposed amendment requires physical therapy services be prescribed by a prescribing provider. A prescribing provider is defined as a physician or an allowed practitioner. An allowed practitioner is defined as a licensed physician assistant (PA) or an advanced practice registered nurse, who is licensed as a certified nurse practitioner (CNP) or clinical nurse specialist (CNS). Allowed practitioners, (PAs, CNPs, and CNSs) must maintain a valid and registered prescriptive authority agreement in accordance with state law.

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: Sent to Governor's Office this
date. Comments, if any, will be forwarded upon receipt.

11. SIGNATURE OF STATE AGENCY OFFICIAL

12. TYPED NAME

Emily Zalkovsky

13. TITLE

State Medicaid Director

14. DATE SUBMITTED

March 31, 2025

15. RETURN TO

Emily Zalkovsky
State Medicaid Director
Post Office Box 13247, MC: H-100
Austin, Texas 78711**FOR CMS USE ONLY**

16. DATE RECEIVED

March 31, 2025

17. DATE APPROVED

June 26, 2025

PLAN APPROVED - ONE COPY ATTACHED

18. EFFECTIVE DATE OF APPROVED MATERIAL

January 1, 2025

19. SIGNATURE OF APPROVING OFFICIAL

20. TYPED NAME OF APPROVING OFFICIAL

Shantrina Roberts

21. TITLE OF APPROVING OFFICIAL

Acting Director, Division of Program Operations

22. REMARKS

Attachment to Blocks 7 & 8 of CMS Form 179

Transmittal Number 25-0009

**Number of the
Plan Section or Attachment**

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

Appendix 1 to Attachment 3.1-A
Page 7g
Page 7g.1
Page 7q
Page 21

Appendix 1 to Attachment 3.1-A
Page 7g (TN 06-05)
Page 7g.1 (TN 06-05)
Page 7q (TN 10-68)
Page 21 (TN 90-06)

Appendix 1 to Attachment 3.1-B
Page 7g
Page 7g.1
Page 7q
Page 21

Appendix 1 to Attachment 3.1-B
Page 7g (TN 06-05)
Page 7g.1 (TN 06-05)
Page 7q (TN 10-68)
Page 21 (TN 90-06)

4.b. EPSDT Services (Continued)
Physical Therapy

Definition:

Physical therapy 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:

Physical therapy services must be prescribed by a prescribing provider. A prescribing provider is a physician (M.D. or D.O.) or allowed practitioner. An allowed practitioner is a licensed physician assistant (PA) or an advanced practice registered nurse, who is licensed as a certified nurse practitioner (CNP) or clinical nurse specialist (CNS). Allowed practitioners, (PAs, CNPs, and CNSs) must maintain a valid and registered prescriptive authority agreement in accordance with state law. These services include any necessary supplies and equipment utilized during the therapy session.

Medically necessary EPSDT services are health care, diagnostic services, treatments, and other measures to correct ameliorate any disability and chronic conditions. These services include but are not limited to:

1. Identification of children with physical therapy needs;
2. Evaluation for the purpose of determining the nature, extent and degree of the need for physical therapy services;
3. Physical therapy services provided for the purpose of preventing or alleviating movement dysfunction and related functional problems; and
4. Obtaining, interpreting, and integrating information appropriate to program planning.

Physical therapy services may be provided in an individual or group setting.

Providers:

Physical therapy services must be provided by a qualified physical therapist who meets the requirements of 42 CFR § 440.110(a) and in accordance with applicable state and federal law or regulation.

Services may be provided by:

- A qualified physical therapist licensed by the state to furnish physical therapy services; or

State of Texas

4.b. EPSDT Services (Continued)
Physical Therapy (continued)

- A licensed physical therapy assistant (LPTA) when the services are provided in a facility setting (including a comprehensive outpatient rehabilitation facility, an outpatient rehabilitation facility, an outpatient hospital, an inpatient hospital, or a school) and when the assistant is acting under the supervision or direction of a qualified physical therapist in accordance with 42 CFR § 440.110 and other applicable state and federal law.

Place of Service:

Physical therapy services may be delivered in the following places of service: office, home, outpatient setting, or other location e.g., school.

4b. EPSDT Services (continued)
Speech and Language Therapy (continued)

Provider Qualifications

Speech and language therapy services must be provided by a:

- a) Licensed speech language pathologist (SLP) who meets the requirements of 42 CFR 440.110(c), and all other applicable state and federal law or
- b) Licensed assistant in SLP when the assistant is acting under the direction of a licensed SLP in accordance with 42 CFR 440.110 or
- c) Licensed intern when the intern is acting under the direction of a qualified SLP in accordance with 42 CFR 440.110 and all other applicable state and federal law.

C. Physical Therapy

Physical therapy includes services to address the promotion of sensorimotor function through enhancement of musculoskeletal status, neurobehavioral organization, perceptual and motor development, cardiopulmonary status, and effective environmental adaption.

Services must be performed in accordance with 42 CFR 440.110.

A licensed physical therapist may perform an evaluation without a prescribing provider referral as allowed by state law.

A licensed physical therapist may reevaluate the child every 30 days to determine if changes to the plan of care are necessary.

Physical therapy services must be identified on the IFSP and prescribed by a prescribing provider.

Services may be delivered on an individual or group basis.

Physical therapy services are provided in the home or other community setting (the child's natural environment)

Provider Qualifications

Physical therapy services must be provided by

- a) A licensed physical therapist who meets the requirements of 42 CFR 440.110(a) or

11.a. Physical Therapists' Services.

Subject to the specifications, conditions, requirements, and limitations established by the Single State Agency, physical therapy services, which include necessary equipment and supplies, provided by a licensed physical therapist are covered by the Texas Medical Assistance Program. A licensed physical therapist is an individual who is a graduate of a program of physical therapy approved by the Commission on Accreditation in Physical Therapy Education, and who is licensed by the Texas State Board of Physical Therapy Examiners or other appropriate state licensing authority.

To be payable, services must be within the physical therapist's scope of practice, as defined by state law; and be reasonable and medically necessary, as determined by the Single State Agency or its designee. Therapy must be prescribed by a prescribing provider. A prescribing provider is a licensed physician (M.D. or D.O.) or allowed practitioner. An allowed practitioner is a licensed physician assistant (PA) or an advanced practice registered nurse, who is licensed as a certified nurse practitioner (CNP) or clinical nurse specialist (CNS). Allowed practitioners, (PAs, CNPs, and CNSs) must maintain a valid and registered prescriptive authority agreement in accordance with state law. Therapy must be performed under a plan of care developed by the prescribing provider and/or physical therapist. Covered services also include the services of a physical therapist assistant when the services are provided under the direction of and billed by the licensed physical therapist. Therapy to maintain function once maximum benefit has been reached, or to promote general fitness or well being is not a benefit of the program.

4.b. EPSDT Services (Continued) **Physical Therapy**

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Physical therapy services may be provided in an individual or group setting.

Providers:

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Services may be provided by:

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4.b. EPSDT Services (Continued)
Physical Therapy (continued)

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