Revision:

HCFA-PM-92-3

**APRIL 1992** 

(MB)

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State/Territory: <u>Oregon</u>

## AMOUNT, DURATION, AND SCOPE OF MEDICAL AND REMEDIAL CARE AND SERVICES PROVIDED TO THE CATEGORICALLY NEEDY

4.a.	Nursing facility services (other than services in an institution for mental diseases) for individuals 21 years of age or older.					
	Provided:		No limitations	$\boxtimes$	With limitations*	
4.b.	Early and periodic screening, diagnostic and treatment services for individuals under 21 years of age, and treatment of conditions found.*					
4.c.	Family planning services and supplies for individuals of childbearing age.					
	Provided:	□ N	o limitations	$\boxtimes$	With limitations*	
4.d.	Face-to-Face Tobacco Cessation Counseling Services for Pregnant Women.					
	Provided:	□N	o limitations		With limitations*	
5.a.	Physicians' services whether furnished in the office, the patient's home, a hospital, a nursing facility or elsewhere.					
	Provided:	$\square$ N	o limitations	$\boxtimes$	With limitations*	
b.	Medical and surgical services furnished by a dentist (in accordance with section 1905(a)(5)(B) of the Act).					
	Provided: _	□ N	o limitations	$\boxtimes$	With limitations*	
6.	Medical care and any other type of remedial care recognized under State law, furnished by licensed practitioners within the scope of their practice as defined by State law.					
a.	Podiatrists' services.					
	Provided:	□ N	o limitations	$\boxtimes$	With limitations*	
* Description provided on Attachment.						
	o. <u>13-08</u> cedes TN No. 92-16		oval Date August 14, 201	3	Effective Diate $\frac{4/1/13}{}$	

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## STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT State/Territory: OREGON

## AMOUNT, DURATION, AND SCOPE OF MEDICAL AND REMEDIAL CARE AND SERVICES PROVIDED TO THE CATEGORICALLY NEEDY

4.d.	Tobacco Cessation Counseling Services for Pregnant Women:				
1)	Face-to-Face Tobacco Cessation Counseling Services provided				
$\boxtimes$	(i) By or under supervision of a physician;				
$\boxtimes$	(ii) By any other health care professional who is legally authorized to furnish such services under state law and who is authorized to provide Medicaid coverable services other than tobacco cessation services; or				
	(iii) Any other health care professional legally authorized to provide tobacco cessation services under state law and who is specifically designated by the Secretary in regulation (none are designated at this time)				
*	Describe any limits on who can provide these counseling services.				
2)	Face-to-face tobacco cessation counseling services benefit package for pregnant women				
	benefit package that consists of less than four (4) counseling sessions per quit attempt, with a num of two (2) quit attempts per 12 month period (eight (8) per year) should be explained below.				
	e describe any limitations: There are no limitations for tobacco cessation counseling. PW are ed up to 4 quit attempts per 12 month period and as many as 10 FTF counseling sessions per quite ot.				
	o. 13-08 Approval Date: Effective Date: 4/1/13				
Super	sedes TN No August 14, 2013				