TRANSMITTAL AND NOTICE OF APPROVAL OF
STATE PLAN MATERIAL
FOR: HEALTH CARE FINANCING ADMINISTRATION

1. TRANSMITTAL NUMBER: 09-61
2. STATE New York
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 September 1, 2009

5. TYPE OF PLAN MATERIAL (Check One):
   - NEW STATE PLAN
   - AMENDMENT TO BE CONSIDERED AS NEW PLAN
   - AMENDMENT
   COMPLETE BLOCKS 6 THRU 10 IF THIS IS AN AMENDMENT (Separate Transmittal for each amendment)

6. FEDERAL STATUTE/REGULATION CITATION:
   42 CFR Part 447.205
   Social Services Law Section 368-d & 368-e

7. FEDERAL BUDGET IMPACT:
   a. FFY 09/01/09 - 09/30/09 $15.2M
   b. FFY 10/01/09 - 09/30/10 $182.3M

8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT:
   Attachment 4.19-B, Pages 17(e) through 17(l)
   Attachment 3.1-A Supplement, Pages 2(xii)(A) through 2(xii)(P)
   Attachment 3.1-B Supplement, Pages 2(xii)(A) through 2(xii)(P)
   ** SEE REMARKS

9. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable):

10. SUBJECT OF AMENDMENT:
    School Supportive Health Services

11. 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

12. SIGNATURE OF STATE AGENCY OFFICIAL:
    Deborah Bachrach

13. TYPED NAME: Deborah Bachrach
14. TITLE: Deputy Commissioner
    Department of Health
15. DATE SUBMITTED: September 30, 2009

FOR REGIONAL OFFICE USE ONLY
16. RETURN TO:
    New York State Department of Health
    Corning Tower
    Empire State Plaza
    Albany, New York 12237

17. DATE RECEIVED: 
18. DATE APPROVED: APR 26 2010
19. EFFECTIVE DATE OF APPROVED MATERIAL: SEP 01 2009
20. SIGNATURE OF REGIONAL OFFICIAL:
21. TYPED NAME: Michael Melendez
22. TITLE: Acting Associate Regional Administrator
    Division of Medicaid and State Operations
23. REMARKS:

Originally submitted pages have been replaced by revised pages submitted via State e-mail of March 19, 2010, April 12, 2010, and April 14, 2010.
Type of Service

Early and Periodic Screening, Diagnostic and Treatment services

Early and Periodic Screening, Diagnostic and Treatment services for individuals under 21 years of age, and treatment of conditions found.

Reimbursement Methodologies for Early and Periodic Screening, Diagnostic and Treatment Services provided as the School Supportive Health Services (SSHS) and Pre-School Supportive Health Services (PSSHS) Programs

School Supportive Health Services (SSHS) and Pre-School Supportive Health Services (PSSHS) are delivered by or through a school district, a Section 4201 school, a county in the State or the City of New York and include the following Medicaid services as described in Appendix 1 to Attachment 3.1-A and B of the Medicaid State Plan under item 4.b, EPSDT.

1. Physical Therapy Services
2. Occupational Therapy Services
3. Speech Therapy Services
4. Psychological Counseling
5. Skilled Nursing Services
6. Psychological Evaluations
7. Medical Evaluations
8. Medical Specialist Evaluations
9. Audiological Evaluations
10. Special Transportation

Effective for dates of service on or after September 1, 2009, payments to a school district, a Section 4201 school, a county in the State or the City of New York for School Supportive Health Services and Pre-School Supportive Health Services shall be based on fees established by the Department of Health.

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Fees will be established for each service or procedure and, except for Special Transportation, such fees shall be set at 75% of the 2010 Medicare fee schedule for the Mid Hudson Region.

Fees shall be published on the Department of Health’s website, on the State Education Department’s website, on the eMedNY website and shall be issued in policy and billing guidance distributed to school districts, Section 4201 schools, and counties in the state and the City of New York.

1. Physical Therapy Services

Fees for physical therapy services and procedures shall be set at 75% percent of the 2010 Medicare fee schedule for the Mid Hudson Region.

Fees shall be published on the Department of Health’s website, on the State Education Department’s website, on the eMedNY website and shall be issued in policy and billing guidance for school districts, Section 4201 schools, counties in the State and the City of New York.

2. Occupational Therapy

Fees for occupational therapy services and procedures shall be set at 75% of the 2010 Medicare fee schedule for the Mid Hudson Region.

Fees shall be published on the Department of Health's website, on the State Education Department's website, on the eMedNY website and shall be issued in policy and billing guidance distributed to school districts, Section 4201 schools, counties in the State and the City of New York.
3. Speech Therapy Services

Fees for speech therapy services and procedures shall be set at 75% of the 2010 Medicare fee schedule for the Mid Hudson region.

Such fees shall be published on the Department of Health’s website, on the State Education Department’s website, on the eMedNY website and shall be issued in policy and billing guidance distributed to school districts, Section 4201 schools, counties in the State and the City of New York.

4. Psychological Counseling

Fees for psychological counseling services shall be set at 75% of the 2010 Medicare fee schedule for the Mid Hudson Region.

Such fees shall be published on the Department of Health’s website, on the State Education Department’s website, on the eMedNY website and shall be issued in policy and billing guidance distributed to school districts, Section 4201 schools, counties in the State and the City of New York.

5. Skilled Nursing Services

Fees for skilled nursing services shall be set at 75% of the 2010 Medicare fee schedule for the Mid Hudson Region.

Such fees shall be published on the Department of Health’s website, on the State Education Department’s website, on the eMedNY website and shall be issued in policy and billing guidance distributed to school districts, Section 4201 schools, counties in the State and the City of New York.
6. **Psychological Evaluations**

Fees for psychological evaluations shall be set at 75% of the 2010 Medicare fee schedule for the Mid Hudson Region.

Such fees shall be published on the Department of Health's website, on the State Education Department's website, on the eMedNY website and shall be issued in policy and billing guidance distributed to school districts, Section 4201 schools, counties in the State and the City of New York.

7. **Medical Evaluations**

Fees for medical evaluations shall be set at 75% of the 2010 Medicare fee schedule for the Mid Hudson Region.

Such fees shall be published on the Department of Health's website, on the State Education Department's website, on the eMedNY website and shall be issued in policy and billing guidance distributed to school districts, Section 4201 schools, counties in the State and the City of New York.

8. **Medical Specialist Evaluations**

Fees for medical specialist evaluations shall be set at 75% of the 2010 Medicare fee schedule for the Mid Hudson Region.

Such fees shall be published on the Department of Health's website, on the State Education Department's website, on the eMedNY website and shall be issued in policy and billing guidance distributed to school districts, Section 4201 schools, counties in the State and the City of New York.
9. **Audiological Evaluations**

Fees for audiological evaluations shall be set at 75% of the 2010 Medicare fee schedule for the Mid Hudson Region.

Such fees shall be published on the Department of Health's website, on the State Education Department's website, on the eMedNY website and shall be issued in policy and billing guidance distributed to school districts, Section 4201 schools, counties in the State and the City of New York.

10. **Special Transportation**

One way rates of payment for special transportation services have been set based on a statistically valid cost study that was conducted in 1999 to establish round trip transportation rates. Such rates have been trended forward based on changes in the Consumer Price Index from 7/99 through 8/09 and converted to one way rates.

Such rates shall be published on the Department of Health's website, on the State Education Department's website, on the eMedNY website and shall be issued in policy and billing guidance distributed to school districts, Section 4201 schools, counties in the State and the City of New York.
4b. Early and Periodic Screening, Diagnostic and Treatment services (EPSDT).

School Supportive Health Services and Pre-School Supportive Health Services

School Supportive Health Services (SSHS) and Pre-School Supportive Health Services (PSSHS) are services provided by or through a school district, a Section 4201 school, a county in the State, or New York City to children with disabilities who attend public or State Education Department approved schools or preschools. The services must be:

- medically necessary and included in a Medicaid covered category in accordance with 1905(a), 1905(r)(5), 1903(c) of the Social Security Act;
- ordered or prescribed by a physician or other licensed practitioner acting within his or her scope of practice under New York State Law;
- included in the child's Individualized Education Program (IEP);
- provided by qualified professionals under contract with or employed by a school district, a Section 4201 school, a county in the State or the City of New York;
- furnished in accordance with all requirements of the State Medicaid Program and other pertinent state and federal laws and regulations, including those for provider qualifications, comparability of services, and the amount, duration and scope provisions; and
- included in the state's plan or available under Early Periodic Screening, Diagnostic and Treatment (EPSDT) services.

Effective September 1, 2009, the services covered by the SSHS and PSSHS Program for Medicaid eligible children under the age of 21 who are eligible for Early and Periodic Screening, Diagnostic and Treatment services (EPSDT) include medically necessary physical therapy services, occupational therapy services, speech therapy services, psychological counseling, skilled nursing services, psychological evaluations, medical evaluations, medical specialist evaluations, audiological evaluations, and special transportation within the limits of EPSDT services. A school district, Section 4201 school, a county in the State, and New York City must be enrolled as a Medicaid provider in order to bill Medicaid.

1. Physical Therapy Services

Definition: Physical therapy services outlined in this section of the State Plan are available to Medicaid eligible beneficiaries under 21 years of age, who are eligible for Early and Periodic Screening, Diagnostic, and Treatment (EPSDT) services and for whom services are medically necessary.

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Supersedes TN New Effective Date SEP 01, 2009
Services: Physical therapy services provided by or through a school district, a Section 4201 school, a county in the State or the City of New York, must have a written order or prescription from a physician, physician assistant, or nurse practitioner who is acting within the scope of his or her practice under NYS law and must be provided to a child by or under the direction of a qualified physical therapist. Physical therapy services must be included in the IEP as recommended by the Committee on Preschool Special Education (CPSE) or Committee on Special Education (CSE). 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 necessary to correct or ameliorate physical defects, mental illnesses, and other disabilities.

Physical therapy services include but are not limited to:

- Identification of children with physical therapy needs;
- Evaluation for the purpose of determining the nature, extent and degree of the need for physical therapy services;
- Provision of physical therapy services for the purpose of preventing or alleviating movement dysfunction and related functional problems;
- Obtaining, interpreting, and integrating information appropriate to program planning;
- Diagnosis and treatment of physical disability, injury or disease using physical and mechanical means, including but not limited to, heat, cold, light, air, water, sound, electricity, massage, mobilization and therapeutic exercise with or without assistive devices, and
- The performance and interpretation of tests and measurements to assist pathopsychological, pathomechanical and developmental deficits of human systems to determine treatment and assist in diagnosis and prognosis.

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

Providers: Services must be provided by:

- a New York State licensed and registered physical therapist qualified in accordance with 42 CFR 440.110(a) and with applicable state and federal laws and regulations, acting within his or her scope of practice under New York State Law; or
- a certified physical therapy assistant "under the direction of" such a qualified licensed and registered physical therapist, acting within his or her scope of practice under New York State Law.

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"Under the direction of" means that, with respect to each Medicaid beneficiary, the qualified therapist:

- sees the participant at the beginning of and periodically during the course of treatment;
- is familiar with the treatment plan as recommended by the referring physician or other licensed practitioner of the healing arts practicing under State law;
- has continued involvement in the care provided, and reviews the need for continued services throughout treatment;
- assumes professional responsibility for the services provided under his or her direction and monitors the need for continued services;
- spends as much time as necessary directly supervising services to ensure beneficiaries are receiving services in a safe and efficient manner in accordance with accepted standards of practice;
- ensures that individuals working under his or her direction have contact information to permit him or her direct contact with the supervising therapist as necessary during the course of treatment; and
- keeps documentation supporting the supervision of services and ongoing involvement in the treatment.

Services may be rendered in the setting in which the child's IEP will be implemented, including but not limited to Article 28 facilities, Board of Cooperative Educational Services (BOCES) programs, approved preschool programs, public schools, approved private schools, Section 4201 schools, state operated schools, in private practitioner's offices, at home and/or in community based settings.

2. Occupational Therapy Services

Definition: Occupational therapy services as outlined in this section of the State Plan are available to Medicaid eligible beneficiaries under 21 years of age, who are eligible for Early and Periodic Screening, Diagnostic and Treatment (EPSDT) services and for whom services are medically necessary.

Services: Occupational therapy services provided by or through: a school district; a Section 4201 school; a county in the State or the City of New York must have a written order or prescription from a physician, physician assistant, or nurse practitioner who is acting within the

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scope of his or her practice under New York State Law and must be provided to a child by or under the direction of a qualified occupational therapist. Occupational therapy services must be included in the IEP as recommended by the Committee on Preschool Special Education (CPSE) or Committee on Special Education (CSE). 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 necessary to correct or ameliorate physical defects, mental illnesses, and other disabilities.

Occupational therapy services include but are not limited to:

- Identification of children with occupational therapy needs;
- Evaluation for the purpose of determining the nature, extent and degree of the need for occupational therapy services;
- Improving, developing or restoring functions impaired or lost through illness, injury, or deprivation;
- Preventing through early intervention, initial or further impairment or loss of function; and
- Planning and utilization of a program of activities to develop or maintain adaptive skills designed to achieve maximal physical and mental functioning of the student in daily life tasks.

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

Providers: Services must be provided by:

- a New York State licensed and registered occupational therapist qualified in accordance with 42CFR 440.110(b) and applicable state and federal laws and regulations, acting within his or her scope of practice under New York State Law; or

- a certified occupational therapy assistant (COTA) “under the direction of” such a qualified licensed and registered occupational therapist, within his or her scope of practice under New York State Law.

“Under the direction of” means that, with respect to each Medicaid beneficiary, the qualified therapist:

- sees the participant at the beginning of and periodically during the course of treatment;

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is familiar with the treatment plan as recommended by the referring physician or other licensed practitioner of the healing arts practicing under State law;
- has continued involvement in the care provided, and reviews the need for continued services throughout treatment;
- assumes professional responsibility for the services provided under his or her direction and monitors the need for continued services;
- spends as much time as necessary directly supervising services to ensure beneficiaries are receiving services in a safe and efficient manner in accordance with accepted standards of practice;
- ensures that individuals working under his or her direction have contact information to permit him or her direct contact with the supervising therapist as necessary during the course of treatment and
- keeps documentation supporting the supervision of services and ongoing involvement in the treatment.

Services may be rendered in the settings in which the child’s IEP will be implemented, including but not limited to Article 28 facilities, Board of Cooperative Educational Services (BOCES) programs, approved preschool programs, public schools, approved private schools, 4201 schools, state operated schools, in private practitioner's offices, at home and/or in community based settings.

3. Speech Therapy Services

Definition: Speech therapy services as outlined in this section of the State Plan are available to Medicaid eligible beneficiaries under 21 years of age, who are eligible for Early and Periodic Screening, Diagnostic, and Treatment (EPSDT) services and for whom services are medically necessary.

Services: Speech therapy services provided by or through: a school district; a Section 4201 school; a county in the State or the City of New York must have a written order or prescription from a physician, physician assistant, nurse practitioner, or a speech-language pathologist who is acting within his or her scope of practice under New York State law and must be provided to a child by or under the direction of a qualified speech-language pathologist. Speech therapy services must be included in the IEP as recommended by the Committee on Preschool Special Education (CPSE) or Committee on Special Education (CSE).

Medically necessary EPSDT services are health care, diagnostic services, treatments and other measures to correct or ameliorate physical defects, mental illnesses, and other disabilities.

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Speech therapy services include but are not limited to:

- Identification of children with speech disorders;
- Diagnosis and appraisal of specific speech disorders;
- Referral for medical or other professional attention necessary for the habilitation of speech disorders;
- Provision of speech or language services for the habilitation or prevention of communicative disorders;
- Evaluation and application of principles, methods and procedures of measurement, prediction, diagnosis, testing, counseling, consultation, rehabilitation and instruction, related to the development of disorders of speech, voice, and/or language, and
- Preventing, ameliorating or modifying speech disorder conditions in children and/or groups of children.

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

**Providers:** Services must be provided by:

- a licensed and registered speech-language pathologist qualified in accordance with 42CFR Section 440.110(c) and applicable state and federal laws and regulations, acting within his or her scope of practice under New York State law; or
- a teacher certified to provide speech and language services, under the documented direction of such a qualified licensed and registered speech language pathologist (ASHA-Certified or equivalent), acting within his or her scope of practice under New York State Law.

"Under the direction of" means that, with respect to each Medicaid beneficiary, the qualified therapist:

- sees the participant at the beginning of and periodically during the course of treatment;
- is familiar with the treatment plan as recommended by the referring physician or other licensed practitioner of the healing arts practicing under State law;
- has continued involvement in the care provided, and reviews the need for continued services throughout treatment;
- assumes professional responsibility for the services provided under his or her direction and monitors the need for continued services;

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spends as much time as necessary directly supervising services to ensure beneficiaries are receiving services in a safe and efficient manner in accordance with accepted standards of practice;  
ensures that individuals working under his or her direction have contact information to permit him or her direct contact with the supervising therapist as necessary during the course of treatment; and  
keeps documentation supporting the supervision of services and ongoing involvement in the treatment.

Services may be rendered in the setting in which the child’s IEP will be implemented, including but not limited to Article 28 facilities, Board of Cooperative Educational Services (BOCES) programs, approved preschool programs, public schools, approved private schools, Section 4201 schools, state operated schools, in private practitioner’s offices, at home and/or in community based settings.

4. Psychological Counseling

Definition: Psychological counseling services outlined in this section of the State Plan are available to Medicaid-eligible beneficiaries under 21 years of age who are eligible for Early and Periodic Screening, Diagnostic, and Treatment (EPSDT) services and for whom services are medically necessary.

Services: Psychological counseling provided by or through a school district; a Section 4201 school; a county in the State or the City of New York must have a referral from a physician, physician assistant, or a nurse practitioner who is acting within the scope of his or her practice under NYS law or an appropriate school official or other voluntary health or social agency and must be provided to a child by or under the direction of a qualified practitioner. Psychological counseling services must be included in the IEP as recommended by the Committee on Preschool Special Education (CPSE) or Committee on Special Education (CSE).

Medically necessary EPSDT services are health care, diagnostic services, treatments and other measures to correct or ameliorate physical defects, mental illnesses, and other disabilities.

Psychological counseling services include:

- treatment services using a variety of techniques to assist the child in ameliorating behavioral and emotional problems that are severe enough to require treatment.

Psychological counseling services may be provided in an individual or group setting.

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Providers: Psychological counseling services must be provided by a qualified practitioner, within his or her scope of practice in accordance with New York State Law and with the qualification requirements of 42 CFR Section 440.60(a) and 440.50(a)(2) and with other applicable state and federal laws or regulations. Psychological counseling services may only be provided by a professional whose credentials are comparable to those of providers who are able to provide psychological counseling services in the community.

Services may be provided by:

- a New York State licensed and registered psychiatrist qualified in accordance with 42 CFR Section 440.50(a) and other applicable state and federal law or regulations, acting within his or her scope of practice under New York State Law;
- a New York State licensed and registered psychologist qualified in accordance with 42 CFR Section 440.60(a) and other applicable state and federal law or regulations, acting within his or her scope of practice under New York State Law;
- a New York State licensed clinical social worker (LCSW), qualified in accordance 42 CFR Section 440.60(a) and other applicable state and federal law or regulations, acting within his or her scope of practice under NYS law; or
- a licensed master social worker (LMSW) qualified in accordance with 42 CFR Section 440.60(a) and other applicable state and federal law or regulations, acting within his or her scope of practice under New York State Law, under the supervision of such a qualified licensed clinical social worker, a qualified licensed and registered psychologist, or a qualified licensed and registered psychiatrist as described above.

Supervision of the clinical social work services provided by the licensed master social worker, with respect to each Medicaid beneficiary, shall consist of contact between the licensed master social worker and supervisor during which:

- the licensed master social worker apprises the supervisor of the diagnosis and treatment of each client;
- the licensed master social worker's cases are discussed;
- the supervisor provides the licensed master social worker with oversight and guidance in diagnosing and treating clients;
- the supervisor regularly reviews and evaluates the professional work of the licensed master social worker; and
- the supervisor provides at least one hour per week or two hours every other week of in-person individual or group clinical supervision, provided that at least two hours per month shall be individual clinical supervision.

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Services may be rendered in the setting in which the child’s IEP will be implemented, including but not limited to Article 28 facilities, Board of Cooperative Educational Services (BOCES) programs, approved preschool programs, public schools, approved private schools, Section 4201 schools, state operated schools, in private practitioner’s offices, at home and/or in community based settings.

5. Skilled Nursing

Definition: Skilled nursing services outlined in this section of the State Plan are available to Medicaid eligible beneficiaries under 21 years of age, who are eligible for Early and Periodic Screening, Diagnostic, and Treatment (EPSDT) services and for whom services are medically necessary.

Services: Skilled nursing services provided by or through: a school district; a Section 4201 school; a county in the State or the City of New York, must have a written order or prescription from a physician, physician assistant, or nurse practitioner acting within his or her scope of practice under New York State law and must be provided to a child by a registered nurse acting within his or her scope of practice under New York State law, or by a NYS licensed practical nurse acting within his or her scope of practice under New York State law “under the direction of” a NYS licensed and registered nurse or licensed physician, dentist or other licensed health care provider authorized under the Nurse Practice Act. Skilled nursing services must be included in the IEP as recommended by the Committee on Preschool Special Education (CPSE) or Committee on Special Education (CSE) when there is a specific need based on a medical condition of the child.

Medically necessary EPSDT services are health care, diagnostic services, treatments and other measures necessary to correct and ameliorate physical defects, mental illnesses, and other disabilities.

Skilled nursing services include the promotion of health, prevention of illness, care of the ill and disabled people through the provision of services essential to the maintenance and restoration of health. Skilled nursing services may include:

- health assessments and evaluations;
- medical treatments and procedures;
- administering and/or monitoring medication needed by the student during school hours; and
- consultation with licensed physicians, parents and staff regarding the effects of medication.

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Providers: Skilled nursing services must be provided by:

- a New York State licensed registered nurse qualified in accordance with the requirements at 42 CFR 440.60(a) and other applicable state and federal law and regulations, acting within his or her scope of practice; or
- a New York State licensed practical nurse qualified in accordance with 42 CFR 440.60(a) and other applicable state and federal law or regulations, acting within his or her scope of practice "under the direction of" a licensed registered nurse, a physician, dentist or other licensed health care provider authorized under the Nurse Practice Act.

"Under the direction of" means that the licensed registered nurse, physician or other licensed health care provider authorized under the Nurse Practice Act:

- sees the participant at the beginning of and periodically during the course of treatment;
- is familiar with the treatment plan as recommended by the referring physician or other licensed practitioner of the healing arts practicing under State law;
- has continued involvement in the care provided, and reviews the need for continued services throughout treatment;
- assumes professional responsibility for the services provided under his or her direction and monitors the need for continued services;
- spends as much time as necessary directly supervising services to ensure beneficiaries are receiving services in a safe and efficient manner in accordance with accepted standards of practice;
- ensures that individuals working under his or her direction have contact information to permit him or her direct contact with the supervising therapist as necessary during the course of treatment; and
- keeps documentation supporting the supervision of services and ongoing involvement in the treatment.

Services may be provided by:

- a New York State licensed and registered nurse; or
- a New York State licensed practical nurse, under the direction of a New York State licensed and registered nurse, or licensed physician, dentist or other licensed health care practitioner legally authorized under the Nurse Practice Act.

Services may be rendered in the setting in which the child's IEP will be implemented, including but not limited to Article 28 facilities, Board of Cooperative Educational Services (BOCES).
programs, approved preschool programs, public schools, approved private schools, Section 4201 schools, state operated schools, in private practitioner's offices, and/or in community based settings.

6. Psychological Evaluations

Definition: Psychological evaluations outlined in this section of the State Plan are available to Medicaid-eligible beneficiaries under 21 years of age, who are eligible for Early and Periodic Screening, Diagnostic, and Treatment (EPSDT) services and for whom services are medically necessary.

Psychological evaluations provided by or through a school district; a Section 4201 school; a county in the State or the City of New York must have a referral from a physician, physician assistant, or nurse practitioner acting within his or her scope of practice under New York State law or an appropriate school official or other voluntary health or social agency and must be provided to a child by a qualified practitioner. Psychological evaluations must be included in the IEP as recommended by the Committee on Preschool Special Education (CPSE) or Committee on Special Education (CSE). If a psychological evaluation is used to identify a child's health related needs as part of the IEP process, the evaluation is eligible for Medicaid coverage once the evaluation is reflected in the child's IEP.

Services: Medically necessary EPSDT services are health care, diagnostic services, treatments, and other measures to correct or ameliorate physical defects, mental illnesses, and other disabilities.

Psychological evaluations include but are not limited to:

- Administering psychological tests and other assessment procedures;
- Interpreting testing and assessment results, and
- Evaluating a Medicaid recipient for the purpose of determining the needs for specific psychological, health or related services.

Providers: Psychological evaluations must be provided by a qualified provider who meets the requirements of 42 CFR Section 440.60 or 42 CFR Section 440.50(a) and other applicable state and federal laws and regulations. Psychological evaluation services may only be provided by a professional whose credentials are comparable to those of providers who are able to provide psychological evaluation services in the community.
Services may be provided by:

- a New York State licensed and registered psychiatrist, qualified in accordance with 42CFR Section 440.50(a) and other applicable state and federal law or regulations, acting within his or her scope of practice under NYS law; or

- a New York State licensed and registered psychologist, qualified in accordance with 42CFR Section 440.60(a) and other applicable state and federal law or regulations, acting within his or her scope of practice under NYS law.

Services may be rendered in the setting in which the child’s IEP will be implemented, including but not limited to Article 28 facilities, Board of Cooperative Educational Services (BOCES) programs, approved preschool programs, public schools, approved private schools, Section 4201 schools, state operated schools, in private practitioner’s offices, and/or in community-based settings.

7. Medical Evaluations

Definition: Medical evaluations outlined in this section of the State Plan are available to Medicaid-eligible beneficiaries under 21 years of age, who are eligible for Early and Periodic Screening, Diagnostic, and Treatment (EPSDT) services and for whom services are medically necessary.

Services: Medically necessary EPSDT services are health care, diagnostic services, treatments, and other measures to correct or ameliorate physical defects, mental illnesses, and other disabilities.

Medical evaluations provided by or through: a school district; a Section 4201 school; a county in the State or the City of New York must be performed by a physician, physician assistant, or nurse practitioner acting within the scope of his or her practice under New York State law. A medical evaluation must be included in the IEP as recommended by the Committee on Preschool Special Education (CPSE) or Committee on Special Education (CSE). If a medical evaluation is used to identify a child’s health related needs as part of the IEP process, the evaluation is eligible for Medicaid coverage once the evaluation is reflected in the child’s IEP.

A medical evaluation is the recording of:

- chief complaints;
- present illness;

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Supplement

- past medical history;
- personal history and social history;
- a system review;
- a complete physical evaluation;
- ordering of appropriate diagnostic tests and procedures, and
- recommended plan of treatment.

**Providers:** A medical evaluation must be provided by a New York State licensed and registered physician, physician assistant, or nurse practitioner qualified in accordance with 42 CFR Section 440.50(a), 440.60(a) and 440.166(a) and other applicable state and federal laws and regulations, acting within his or her scope of practice under NYS law.

Services may be rendered in the setting in which the child’s IEP will be implemented, including but not limited to: Article 28 facilities, Board of Cooperative Educational Services (BOCES) programs, approved preschool programs, public schools, approved private schools, Section 4201 schools, state operated schools, in private practitioner’s offices, and/or in community based settings.

8. Medical Specialist Evaluations

**Definition:** Medical specialist evaluations outlined in this section of the State Plan are available to Medicaid-eligible beneficiaries under 21 years of age, who are eligible for Early and Periodic Screening, Diagnostic, and Treatment (EPSDT) services and for whom services are medically necessary.

**Services:** Medically necessary EPSDT services are health care, diagnostic services, treatments, and other measures to correct and ameliorate physical defects, mental illnesses, and other disabilities.

Medical specialist evaluations provided by or through: a school district; a Section 4201 school; a county in the State or the City of New York must be provided by a New York State licensed and registered physician, physician assistant, or nurse practitioner specialist acting within his or her scope of practice and related area of specialization. A medical specialist evaluation must be included in the IEP as recommended by the Committee on Preschool Special Education (CPSE) or Committee on Special Education (CSE). If a medical specialist evaluation is used to identify a child’s health related needs as part of the IEP process, the evaluation is eligible for Medicaid coverage once the evaluation is reflected in the child’s IEP.

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A medical specialist evaluation is:

- an examination of the affected bodily area or organ system and other symptomatic or related organ systems;
- the ordering of appropriate diagnostic tests and procedures; and
- the reviewing of the results and reporting on the tests and procedures.

**Providers:** A medical specialist evaluation must be provided by a qualified New York State licensed and registered physician, physician assistant, or nurse practitioner specialist practicing in the related area of specialization within his or her scope of practice under NYS law, in accordance with 42CFR Section 440.50(a), 440.60(a), and 440.166(a) and other applicable state and federal laws and regulations.

Services may be rendered in the setting in which the child’s IEP will be implemented, including but not limited to Article 28 facilities, Board of Cooperative Educational Services (BOCES) programs, approved preschool programs, public schools, approved private schools, Section 4201 schools, state operated schools, in private practitioner’s offices, and/or in community based settings.

**9. Audiological Evaluations**

**Definition:** Audiological evaluations as outlined in this section of the State Plan are available to Medicaid-eligible beneficiaries under 21 years of age, who are eligible for Early and Periodic Screening, Diagnostic, and Treatment (EPSDT) services and for whom services are medically necessary.

**Services:** Audiological evaluations provided by or through: a school district; a Section 4201 school; a county in the State or the City of New York must have a written order from a physician, physician assistant, or nurse practitioner who is acting within the scope of his or her practice under NYS law and provided to a child by a qualified practitioner. An audiological evaluation must be included in the IEP as recommended by the Committee on Preschool Special Education (CPSE) or Committee on Special Education (CSE). If an audiological evaluation is used to identify a child’s health related needs as part of the IEP process, the evaluation is eligible for Medicaid coverage once the evaluation is reflected in the child’s IEP.

Medically necessary EPSDT services are health care, diagnostic services, treatments, and other measures to correct and ameliorate physical defects, mental illnesses, and other disabilities.
Medically necessary audiology services include but are not limited to:

- Identification of children with hearing loss;
- Determination of the range, nature and degree of hearing loss, including the referral for medical or other professional attention for the amelioration of hearing; and
- Determination of the child’s need for group and individual amplification.

An audiological evaluation is the determination of the range, nature and degree of hearing loss including:

- Measurement of hearing acuity;
- Tests relating to air and bone conduction;
- Speech reception threshold;
- Speech discrimination;
- Conformity evaluations;
- Pure tone audiometry.

Providers: Audiology evaluation services must be provided by a New York State licensed and registered audiologist, qualified in accordance with 42 CFR Section 440.60(a) and 42 CFR Section 440.110(c)(3) and other applicable state and federal law or regulations, acting within his or her scope of practice under NYS law.

Services may be rendered in the setting in which the child’s IEP will be implemented, including but not limited to, Article 28 facilities, Board of Cooperative Educational Services (BOCES) programs, approved preschool programs, public schools, approved private schools, Section 4201 schools, state operated schools, in private practitioner’s offices, and/or in community based settings.

10. Special Transportation

Definition: Special transportation outlined in this section of the State Plan is available to Medicaid-eligible beneficiaries under 21 years of age, who are eligible for Early and Periodic Screening, Diagnostic, and Treatment (EPSDT) services and for whom services are medically necessary.

Medically necessary EPSDT services are health care, diagnostic services, treatments, and other measures to correct and ameliorate physical defects, mental illnesses, and other disabilities.
Services: Special transportation provided by or through a school district; a Section 4201 school; a county in the State or the City of New York must be included in the IEP as recommended by the Committee on Special Education (CSE), or the Committee on Preschool Special Education (CPSE). Special transportation arrangements must be identified in the IEP.

Special transportation is provided when a child requires specialized transportation equipment, supports or services because of his/her disability as cited in 34 CFR 300.34(c)(16)(iii).

Special transportation is limited to those situations where the child receives transportation to obtain a Medicaid covered service (other than transportation), and both the Medicaid covered service and the need for special transportation are included in the child’s IEP. Special transportation can only be billed on a day that a Medicaid reimbursable service was delivered and may only be billed at the rate for each one way trip.

Providers: Special transportation services must be provided by a qualified Medicaid provider. Attendance documentation (bus logs) is required in order to bill Medicaid. In order to receive payment for services provided to a Medicaid recipient, a vendor must be lawfully authorized to provide transportation services on the date the services are rendered.
4b. Early and Periodic Screening, Diagnostic and Treatment services (EPSDT).

School Supportive Health Services and Pre-School Supportive Health Services

School Supportive Health Services (SSHS) and Pre-School Supportive Health Services (PSSHS) are services provided by or through a school district, a Section 4201 school, a county in the State, or New York City to children with disabilities, who attend public or State Education Department approved schools or preschools. The services must be:

- medically necessary and included in a Medicaid covered category in accordance with 1905(a), 1905(r)(5), 1903(c) of the Social Security Act;
- ordered or prescribed by a physician or other licensed practitioner acting within his or her scope of practice under New York State Law;
- included in the child's Individualized Education Program (IEP);
- provided by qualified professionals under contract with or employed by a school district, a Section 4201 school, a county in the State or the City of New York;
- furnished in accordance with all requirements of the State Medicaid Program and other pertinent state and federal laws and regulations, including those for provider qualifications, comparability of services, and the amount, duration and scope provisions; and
- included in the state's plan or available under Early Periodic Screening, Diagnostic and Treatment (EPSDT) services.

Effective September 1, 2009, the services covered by the SSHS and PSSHS Program for Medicaid eligible children under the age of 21 who are eligible for Early and Periodic Screening, Diagnostic and Treatment services (EPSDT) include medically necessary physical therapy services, occupational therapy services, speech therapy services, psychological counseling, skilled nursing services, psychological evaluations, medical evaluations, medical specialist evaluations, audiological evaluations, and special transportation within the limits of EPSDT services. A school district, Section 4201 school, a county in the State, and New York City must be enrolled as a Medicaid provider in order to bill Medicaid.

1. Physical Therapy Services

**Definition:** Physical therapy services outlined in this section of the State Plan are available to Medicaid eligible beneficiaries under 21 years of age, who are eligible for Early and Periodic Screening, Diagnostic, and Treatment (EPSDT) services and for whom services are medically necessary.
Services: Physical therapy services provided by or through a school district, a Section 4201 school, a county in the State or the City of New York, must have a written order or prescription from a physician, physician assistant, or nurse practitioner who is acting within the scope of his or her practice under NYS law and must be provided to a child by or under the direction of a qualified physical therapist. Physical therapy services must be included in the IEP as recommended by the Committee on Preschool Special Education (CPSE) or Committee on Special Education (CSE). 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 necessary to correct or ameliorate physical defects, mental illnesses, and other disabilities.

Physical therapy services include but are not limited to:

- Identification of children with physical therapy needs;
- Evaluation for the purpose of determining the nature, extent and degree of the need for physical therapy services;
- Provision of physical therapy services for the purpose of preventing or alleviating movement dysfunction and related functional problems;
- Obtaining, interpreting, and integrating information appropriate to program planning;
- Diagnosis and treatment of physical disability, injury or disease using physical and mechanical means, including but not limited to, heat, cold, light, air, water, sound, electricity, massage, mobilization and therapeutic exercise with or without assistive devices, and
- The performance and interpretation of tests and measurements to assist pathopsychological, pathomechanical and developmental deficits of human systems to determine treatment and assist in diagnosis and prognosis.

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

Providers: Services must be provided by:

- a New York State licensed and registered physical therapist qualified in accordance with 42 CFR 440.110(a) and with applicable state and federal laws and regulations, acting within his or her scope of practice under New York State Law; or
- a certified physical therapy assistant "under the direction of" such a qualified licensed and registered physical therapist, acting within his or her scope of practice under New York State Law.

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Under the direction or means that, with respect to each Medicaid beneficiary, the qualified therapist:

- sees the participant at the beginning of and periodically during the course of treatment;
- is familiar with the treatment plan as recommended by the referring physician or other licensed practitioner of the healing arts practicing under State law;
- has continued involvement in the care provided, and reviews the need for continued services throughout treatment;
- assumes professional responsibility for the services provided under his or her direction and monitors the need for continued services;
- spends as much time as necessary directly supervising services to ensure beneficiaries are receiving services in a safe and efficient manner in accordance with accepted standards of practice;
- ensures that individuals working under his or her direction have contact information to permit him or her direct contact with the supervising therapist as necessary during the course of treatment; and
- keeps documentation supporting the supervision of services and ongoing involvement in the treatment.

Services may be rendered in the setting in which the child’s IEP will be implemented, including but not limited to Article 28 facilities, Board of Cooperative Educational Services (BOCES) programs, approved preschool programs, public schools, approved private schools, Section 4201 schools, state operated schools, in private practitioner’s offices, at home and/or in community based settings.

2. Occupational Therapy Services

Definition: Occupational therapy services as outlined in this section of the State Plan are available to Medicaid eligible beneficiaries under 21 years of age, who are eligible for Early and Periodic Screening, Diagnostic and Treatment (EPSDT) services and for whom services are medically necessary.

Services: Occupational therapy services provided by or through: a school district; a Section 4201 school; a county in the State or the City of New York must have a written order or prescription from a physician, physician assistant, or nurse practitioner who is acting within the
scope of his or her practice under New York State Law and must be provided to a child by or under the direction of a qualified occupational therapist. Occupational therapy services must be included in the IEP as recommended by the Committee on Preschool Special Education (CPSE) or Committee on Special Education (CSE). 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 necessary to correct or ameliorate physical defects, mental illnesses, and other disabilities.

Occupational therapy services include but are not limited to:

- Identification of children with occupational therapy needs;
- Evaluation for the purpose of determining the nature, extent and degree of the need for occupational therapy services;
- Improving, developing or restoring functions impaired or lost through illness, injury, or deprivation;
- Preventing through early intervention, initial or further impairment or loss of function; and
- Planning and utilization of a program of activities to develop or maintain adaptive skills designed to achieve maximal physical and mental functioning of the student in daily life tasks.

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

Providers: Services must be provided by:

- a New York State licensed and registered occupational therapist qualified in accordance with 42CFR 440.110(b) and applicable state and federal laws and regulations, acting within his or her scope of practice under New York State Law; or

- a certified occupational therapy assistant (COTA) "under the direction of" such a qualified licensed and registered occupational therapist, within his or her scope of practice under New York State Law.

"Under the direction of" means that, with respect to each Medicaid beneficiary, the qualified therapist:

- sees the participant at the beginning of and periodically during the course of treatment;

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is familiar with the treatment plan as recommended by the referring physician or other licensed practitioner of the healing arts practicing under State law;
- has continued involvement in the care provided, and reviews the need for continued services throughout treatment;
- assumes professional responsibility for the services provided under his or her direction and monitors the need for continued services;
- spends as much time as necessary directly supervising services to ensure beneficiaries are receiving services in a safe and efficient manner in accordance with accepted standards of practice;
- ensures that individuals working under his or her direction have contact information to permit him or her direct contact with the supervising therapist as necessary during the course of treatment and
- keeps documentation supporting the supervision of services and ongoing involvement in the treatment.

Services may be rendered in the settings in which the child’s IEP will be implemented, including but not limited to Article 28 facilities, Board of Cooperative Educational Services (BOCES) programs, approved preschool programs, public schools, approved private schools, 4201 schools, state operated schools, in private practitioner’s offices, at home and/or in community based settings.

3. Speech Therapy Services

Definition: Speech therapy services as outlined in this section of the State Plan are available to Medicaid eligible beneficiaries under 21 years of age, who are eligible for Early and Periodic Screening, Diagnostic, and Treatment (EPSDT) services and for whom services are medically necessary.

Services: Speech therapy services provided by or through: a school district; a Section 4201 school; a county in the State or the City of New York must have a written order or prescription from a physician, physician assistant, nurse practitioner, or a speech-language pathologist who is acting within his or her scope of practice under New York State law and must be provided to a child by or under the direction of a qualified speech-language pathologist. Speech therapy services must be included in the IEP as recommended by the Committee on Preschool Special Education (CPSE) or Committee on Special Education (CSE).

Medically necessary EPSDT services are health care, diagnostic services, treatments and other measures to correct or ameliorate physical defects, mental illnesses, and other disabilities.

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Speech therapy services include but are not limited to:

- Identification of children with speech disorders;
- Diagnosis and appraisal of specific speech disorders;
- Referral for medical or other professional attention necessary for the habilitation of speech disorders;
- Provision of speech or language services for the habilitation or prevention of communicative disorders;
- Evaluation and application of principles, methods and procedures of measurement, prediction, diagnosis, testing, counseling, consultation, rehabilitation and instruction, related to the development of disorders of speech, voice, and/or language, and
- Preventing, ameliorating or modifying speech disorder conditions in children and/or groups of children.

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

**Providers:** Services must be provided by:

- a licensed and registered speech-language pathologist qualified in accordance with 42CFR Section 440.110(c) and applicable state and federal laws and regulations, acting within his or her scope of practice under New York State law; or
- a teacher certified to provide speech and language services, under the documented direction of such a qualified licensed and registered speech language pathologist (ASHA-Certified or equivalent), acting within his or her scope of practice under New York State Law.

"Under the direction of" means that, with respect to each Medicaid beneficiary, the qualified therapist:

- sees the participant at the beginning of and periodically during the course of treatment;
- is familiar with the treatment plan as recommended by the referring physician or other licensed practitioner of the healing arts practicing under State law;
- has continued involvement in the care provided, and reviews the need for continued services throughout treatment;
- assumes professional responsibility for the services provided under his or her direction and monitors the need for continued services;

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- spends as much time as necessary directly supervising services to ensure beneficiaries are receiving services in a safe and efficient manner in accordance with accepted standards of practice;
- ensures that individuals working under his or her direction have contact information to permit him or her direct contact with the supervising therapist as necessary during the course of treatment; and
- keeps documentation supporting the supervision of services and ongoing involvement in the treatment.

Services may be rendered in the setting in which the child's IEP will be implemented, including but not limited to Article 28 facilities, Board of Cooperative Educational Services (BOCES) programs, approved preschool programs, public schools, approved private schools, Section 4201 schools, state operated schools, in private practitioner's offices, at home and/or in community based settings.

4. Psychological Counseling

**Definition:** Psychological counseling services outlined in this section of the State Plan are available to Medicaid-eligible beneficiaries under 21 years of age who are eligible for Early and Periodic Screening, Diagnostic, and Treatment (EPSDT) services and for whom services are medically necessary.

**Services:** Psychological counseling provided by or through a school district; a Section 4201 school; a county in the State or the City of New York must have a referral from a physician, physician assistant, or a nurse practitioner who is acting within the scope of his or her practice under NYS law or an appropriate school official or other voluntary health or social agency and must be provided to a child by or under the direction of a qualified practitioner. Psychological counseling services must be included in the IEP as recommended by the Committee on Preschool Special Education (CPSE) or Committee on Special Education (CSE).

Medically necessary EPSDT services are health care, diagnostic services, treatments and other measures to correct or ameliorate physical defects, mental illnesses, and other disabilities.

Psychological counseling services include:

- treatment services using a variety of techniques to assist the child in ameliorating behavioral and emotional problems that are severe enough to require treatment.

Psychological counseling services may be provided in an individual or group setting.

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Providers: Psychological counseling services must be provided by a qualified practitioner, within his or her scope of practice in accordance with New York State Law and with the qualification requirements of 42 CFR Section 440.60(a) and 440.50(a)(2) and with other applicable state and federal laws or regulations. Psychological counseling services may only be provided by a professional whose credentials are comparable to those of providers who are able to provide psychological counseling services in the community.

Services may be provided by:

- a New York State licensed and registered psychiatrist qualified in accordance with 42 CFR Section 440.50(a) and other applicable state and federal law or regulations, acting within his or her scope of practice under New York State Law;
- a New York State licensed and registered psychologist qualified in accordance with 42 CFR Section 440.60(a) and other applicable state and federal law or regulations, acting within his or her scope of practice under New York State Law;
- a New York State licensed clinical social worker (LCSW), qualified in accordance 42 CFR Section 440.60(a) and other applicable state and federal law or regulations, acting within his or her scope of practice under New York State Law; or
- a licensed master social worker (LMSW) qualified in accordance with 42 CFR Section 440.60(a) and other applicable state and federal law or regulations, acting within his or her scope of practice under New York State Law, under the supervision of such a qualified licensed clinical social worker, a qualified licensed and registered psychologist, or a qualified licensed and registered psychiatrist as described above.

Supervision of the clinical social work services provided by the licensed master social worker, with respect to each Medicaid beneficiary, shall consist of contact between the licensed master social worker and supervisor during which:

- the licensed master social worker apprises the supervisor of the diagnosis and treatment of each client;
- the licensed master social worker's cases are discussed;
- the supervisor provides the licensed master social worker with oversight and guidance in diagnosing and treating clients;
- the supervisor regularly reviews and evaluates the professional work of the licensed master social worker; and
- the supervisor provides at least one hour per week or two hours every other week of in-person individual or group clinical supervision, provided that at least two hours per month shall be individual clinical supervision.
Services may be rendered in the setting in which the child’s IEP will be implemented, including but not limited to Article 28 facilities, Board of Cooperative Educational Services (BOCES) programs, approved preschool programs, public schools, approved private schools, Section 4201 schools, state operated schools, in private practitioner’s offices, at home and/or in community based settings.

5. Skilled Nursing

**Definition:** Skilled nursing services outlined in this section of the State Plan are available to Medicaid eligible beneficiaries under 21 years of age, who are eligible for Early and Periodic Screening, Diagnostic, and Treatment (EPSDT) services and for whom services are medically necessary.

**Services:** Skilled nursing services provided by or through a school district, a Section 4201 school, a county in the State or the City of New York, must have a written order or prescription from a physician, physician assistant, or nurse practitioner acting within his or her scope of practice under New York State law and must be provided to a child by a registered nurse acting within his or her scope of practice under New York State law, or by a NYS licensed practical nurse acting within his or her scope of practice under New York State law "under the direction of" a NYS licensed and registered nurse or licensed physician, dentist or other licensed health care provider authorized under the Nurse Practice Act. Skilled nursing services must be included in the IEP as recommended by the Committee on Preschool Special Education (CPSE) or Committee on Special Education (CSE) when there is a specific need based on a medical condition of the child.

Medically necessary EPSDT services are health care, diagnostic services, treatments and other measures necessary to correct and ameliorate physical defects, mental illnesses, and other disabilities.

Skilled nursing services include the promotion of health, prevention of illness, care of the ill and disabled people through the provision of services essential to the maintenance and restoration of health. Skilled nursing services may include:

- health assessments and evaluations;
- medical treatments and procedures;
- administering and/or monitoring medication needed by the student during school hours; and
- consultation with licensed physicians, parents and staff regarding the effects of medication.

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Providers: Skilled nursing services must be provided by:

- a New York State licensed registered nurse qualified in accordance with the requirements at 42 CFR 440.60(a) and other applicable state and federal law and regulations, acting within his or her scope of practice; or
- a New York State licensed practical nurse qualified in accordance with 42 CFR 440.60(a) and other applicable state and federal law or regulations, acting within his or her scope of practice "under the direction of" a licensed registered nurse, a physician, dentist or other licensed health care provider authorized under the Nurse Practice Act.

"Under the direction of" means that the licensed registered nurse, physician or other licensed health care provider authorized under the Nurse Practice Act:

- sees the participant at the beginning of and periodically during the course of treatment;
- is familiar with the treatment plan as recommended by the referring physician or other licensed practitioner of the healing arts practicing under State law;
- has continued involvement in the care provided, and reviews the need for continued services throughout treatment;
- assumes professional responsibility for the services provided under his or her direction and monitors the need for continued services;
- spends as much time as necessary directly supervising services to ensure beneficiaries are receiving services in a safe and efficient manner in accordance with accepted standards of practice;
- ensures that individuals working under his or her direction have contact information to permit him or her direct contact with the supervising therapist as necessary during the course of treatment; and
- keeps documentation supporting the supervision of services and ongoing involvement in the treatment.

Services may be provided by:

- a New York State licensed and registered nurse; or
- a New York State licensed practical nurse, under the direction of a New York State licensed and registered nurse, or licensed physician, dentist or other licensed health care practitioner legally authorized under the Nurse Practice Act.

Services may be rendered in the setting in which the child's IEP will be implemented, including but not limited to Article 28 facilities, Board of Cooperative Educational Services (BOCES).

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programs, approved preschool programs, public schools, approved private schools, Section 4201 schools, state operated schools, in private practitioner's offices, and/or in community based settings.

6. Psychological Evaluations

**Definition:** Psychological evaluations outlined in this section of the State Plan are available to Medicaid-eligible beneficiaries under 21 years of age, who are eligible for Early and Periodic Screening, Diagnostic, and Treatment (EPSDT) services and for whom services are medically necessary.

Psychological evaluations provided by or through a school district; a Section 4201 school; a county in the State or the City of New York must have a referral from a physician, physician assistant, or nurse practitioner acting within his or her scope of practice under New York State law or an appropriate school official or other voluntary health or social agency and must be provided to a child by a qualified practitioner. Psychological evaluations must be included in the IEP as recommended by the Committee on Preschool Special Education (CPSE) or Committee on Special Education (CSE). If a psychological evaluation is used to identify a child's health related needs as part of the IEP process, the evaluation is eligible for Medicaid coverage once the evaluation is reflected in the child's IEP.

**Services:** Medically necessary EPSDT services are health care, diagnostic services, treatments, and other measures to correct or ameliorate physical defects, mental illnesses, and other disabilities.

Psychological evaluations include but are not limited to:

- Administering psychological tests and other assessment procedures;
- Interpreting testing and assessment results; and
- Evaluating a Medicaid recipient for the purpose of determining the needs for specific psychological, health or related services.

**Providers:** Psychological evaluations must be provided by a qualified provider who meets the requirements of 42 CFR Section 440.60 or 42 CFR Section 440.50(a) and other applicable state and federal laws and regulations. Psychological evaluation services may only be provided by a professional whose credentials are comparable to those of providers who are able to provide psychological evaluation services in the community.
Services may be provided by:

- a New York State licensed and registered psychiatrist, qualified in accordance with 42CFR Section 440.50(a) and other applicable state and federal law or regulations, acting within his or her scope of practice under NYS law; or

- a New York State licensed and registered psychologist, qualified in accordance with 42CFR Section 440.60(a) and other applicable state and federal law or regulations, acting within his or her scope of practice under NYS law.

Services may be rendered in the setting in which the child's IEP will be implemented, including but not limited to Article 28 facilities, Board of Cooperative Educational Services (BOCES) programs, approved preschool programs, public schools, approved private schools, Section 4201 schools, state operated schools, in private practitioner's offices, and/or in community based settings.

7. Medical Evaluations

Definition: Medical evaluations outlined in this section of the State Plan are available to Medicaid-eligible beneficiaries under 21 years of age who are eligible for Early and Periodic Screening, Diagnostic, and Treatment (EPSDT) services and for whom services are medically necessary.

Services: Medically necessary EPSDT services are health care, diagnostic services, treatments, and other measures to correct or ameliorate physical defects, mental illnesses, and other disabilities.

Medical evaluations provided by or through: a school district; a Section 4201 school; a county in the State or the City of New York must be performed by a physician, physician assistant, or nurse practitioner acting within the scope of his or her practice under New York State law. A medical evaluation must be included in the IEP as recommended by the Committee on Preschool Special Education (CPSE) or Committee on Special Education (CSE). If a medical evaluation is used to identify a child's health related needs as part of the IEP process, the evaluation is eligible for Medicaid coverage once the evaluation is reflected in the child's IEP.

A medical evaluation is the recording of:

- chief complaints;
- present illness;

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past medical history;
personal history and social history;
a system review
a complete physical evaluation;
ordering of appropriate diagnostic tests and procedures, and
recommended plan of treatment

**Providers:** A medical evaluation must be provided by a New York State licensed and registered physician, physician assistant, or nurse practitioner qualified in accordance with 42 CFR Section 440.50(a), 440.60(a) and 440.166(a) and other applicable state and federal laws and regulations, acting within his or her scope of practice under NYS law.

Services may be rendered in the setting in which the child’s IEP will be implemented, including but not limited to Article 28 facilities, Board of Cooperative Educational Services (BOCES) programs, approved preschool programs, public schools, approved private schools, Section 4201 schools, state operated schools, in private practitioner’s offices, and/or in community based settings.

8. Medical Specialist Evaluations

**Definition:** Medical specialist evaluations outlined in this section of the State Plan are available to Medicaid-eligible beneficiaries under 21 years of age, who are eligible for Early and Periodic Screening, Diagnostic, and Treatment (EPSDT) services and for whom services are medically necessary.

**Services:** Medically necessary EPSDT services are health care, diagnostic services, treatments, and other measures to correct and ameliorate physical defects, mental illnesses, and other disabilities.

Medical specialist evaluations provided by or through: a school district; a Section 4201 school; a county in the State or the City of New York must be provided by a New York State licensed and registered physician, physician assistant, or nurse practitioner specialist acting within his or her scope of practice and related area of specialization. A medical specialist evaluation must be included in the IEP as recommended by the Committee on Preschool Special Education (CPSE) or Committee on Special Education (CSE). If a medical specialist evaluation is used to identify a child’s health related needs as part of the IEP process, the evaluation is eligible for Medicaid coverage once the evaluation is reflected in the child’s IEP.
A medical specialist evaluation is:

- an examination of the affected bodily area or organ system and other symptomatic or related organ systems;
- the ordering of appropriate diagnostic tests and procedures, and
- the reviewing of the results and reporting on the tests and procedures.

**Providers:** A medical specialist evaluation must be provided by a qualified New York State licensed and registered physician, physician assistant, or nurse practitioner specialist practicing in the related area of specialization within his or her scope of practice under NYS law, in accordance with 42CFR Section 440.50(a), 440.60(a), and 440.166(a) and other applicable state and federal laws and regulations.

Services may be rendered in the setting in which the child’s IEP will be implemented, including but not limited to Article 28 facilities, Board of Cooperative Educational Services (BOCES) programs, approved preschool programs, public schools, approved private schools, Section 4201 schools, state operated schools, in private practitioner’s offices, and/or in community based settings.

9. **Audiological Evaluations**

**Definition:** Audiological evaluations as outlined in this section of the State Plan are available to Medicaid-eligible beneficiaries under 21 years of age, who are eligible for Early and Periodic Screening, Diagnostic, and Treatment (EPSDT) services and for whom services are medically necessary.

**Services:** Audiological evaluations provided by or through: a school district; a Section 4201 school; a county in the State or the City of New York must have a written order from a physician, physician assistant, or nurse practitioner who is acting within the scope of his or her practice under NYS law and provided to a child by a qualified practitioner. An audiological evaluation must be included in the IEP, as recommended by the Committee on Preschool Special Education (CPSE) or Committee on Special Education (CSE). If an audiological evaluation is used to identify a child’s health related needs as part of the IEP process, the evaluation is eligible for Medicaid coverage once the evaluation is reflected in the child’s IEP.

Medically necessary EPSDT services are health care, diagnostic services, treatments, and other measures to correct and ameliorate physical defects, mental illnesses, and other disabilities.
Medically necessary audiology services include but are not limited to:

- Identification of children with hearing loss;
- Determination of the range, nature and degree of hearing loss, including the referral for medical or other professional attention for the amelioration of hearing; and
- Determination of the child's need for group and individual amplification.

An audiological evaluation is the determination of the range, nature and degree of hearing loss including:

- Measurement of hearing acuity;
- Tests relating to air and bone conduction;
- Speech reception threshold;
- Speech discrimination;
- Conformity evaluations;
- Pure tone audiometry.

Providers: Audiology evaluation services must be provided by a New York State licensed and registered audiologist, qualified in accordance with 42 CFR Section 440.60(a) and 42 CFR Section 440.110(c)(3) and other applicable state and federal law or regulations, acting within his or her scope of practice under NYS law.

Services may be rendered in the setting in which the child's IEP will be implemented, including but not limited to, Article 28 facilities, Board of Cooperative Educational Services (BOCES) programs, approved preschool programs, public schools, approved private schools, Section 4201 schools, state operated schools, in private practitioner's offices, and/or in community based settings.

10. Special Transportation

Definition: Special transportation outlined in this section of the State Plan is available to Medicaid-eligible beneficiaries under 21 years of age, who are eligible for Early and Periodic Screening, Diagnostic, and Treatment (EPSDT) services and for whom services are medically necessary.

Medically necessary EPSDT services are health care, diagnostic services, treatments, and other measures to correct and ameliorate physical defects, mental illnesses, and other disabilities.
Services: Special transportation provided by or through a school district: a Section 4201
school; a county in the State or the City of New York must be included in the IEP as
recommended by the Committee on Special Education (CSE), or the Committee on Preschool
Special Education (CPSE). Special transportation arrangements must be identified in the IEP.

Special transportation is provided when a child requires specialized transportation equipment,
supports or services because of his/her disability as cited in 34 CFR 300.34(c)(16)(iii).

Special transportation is limited to those situations where the child receives transportation to
obtain a Medicaid covered service (other than transportation), and both the Medicaid covered
service and the need for special transportation are included in the child's IEP. Special
transportation can only be billed on a day that a Medicaid reimbursable service was delivered
and may only be billed at the rate for each one way trip.

Providers: Special transportation services must be provided by a qualified Medicaid provider.
Attendance documentation (bus logs) is required in order to bill Medicaid. In order to receive
payment for services provided to a Medicaid recipient, a vendor must be lawfully authorized to
provide transportation services on the date the services are rendered.