

## **DEPARTMENT OF SOCIAL SERVICES**

### **Notice of Proposed Medicaid State Plan Amendment (SPA)**

#### **Updates to School Based Child Health (SPA 16-0014)**

The State of Connecticut Department of Social Services (DSS) proposes to submit the following Medicaid State Plan Amendment (SPA) to the Centers for Medicare & Medicaid Services (CMS) within the U.S. Department of Health and Human Services (HHS).

#### **Changes to Medicaid State Plan**

Effective on or after July 1, 2016, SPA 16-0014 will amend Attachments 3.1-A, 3.1-B, and 4.19-B of the Medicaid State Plan to make the following updates to school-based child health services. This SPA adds Behavioral Modification Services and Personal Care Services and also enables the utilization of a section 504 Plan to document the service needs for school-based child health services. This SPA also updates the ratio used to calculate the direct Medicaid allowable costs. These changes are necessary to more comprehensively and accurately reimburse for school-based child health services.

#### **Fiscal Impact**

DSS estimates that this SPA will increase annual aggregate Medicaid expenditures by approximately \$4.2 million in State Fiscal Year 2017 and \$5.4 million in State Fiscal Year 2018.

#### **Obtaining SPA Language and Submitting Comments**

The proposed SPA is posted on the DSS website at this link: <http://www.ct.gov/dss>. Go to “Publications” and then “Updates”. The proposed SPA may also be obtained at any DSS field office and upon request from DSS.

To request a copy of the SPA or to send comments about the SPA, please email: [ginny.mahoney@ct.gov](mailto:ginny.mahoney@ct.gov) or write to: Ginny Mahoney, Department of Social Services, Medical Policy Unit, 55 Farmington Avenue, 9th Floor, Hartford, CT 06105 (Phone: 860-424-5145, Fax: 860-424-5799). Please reference: SPA 16-0014 – Updates to School-Based Child Health.

Anyone may send DSS written comments about this SPA. Written comments must be received at the above contact information no later than July 13, 2016.

**STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT**

**State: CONNECTICUT**

- (4)
- (b) Early and periodic screening and diagnosis of individuals under 21 years of age. Rates for medically necessary services not covered under the state plan that are ordered by a physician are negotiated on a case-by-case basis in order to ensure access as required under Section 1905(r)(5) of the Social Security Act.

(b.1.) EPSDT Services delivered in the School-Based Setting

School Based Child Health services are provided by School Based Child Health providers, which are school districts and other educational entities that are enrolled with the Connecticut Medical Assistance Program as providers of School Based Child Health services. School Based Child Health services are provided pursuant to an Individualized Education Plan (IEP) or a Section 504 plan and include medical services as described under Item 4.b.1. EPSDT in School Based Child Health Service Setting in Addendum to Attachment 3.1-A/B or services are provided pursuant to a 504 plan and include medical services as described under Item 4.b.1. EPSDT in School Based Child Health Service Setting in Addendum to Attachment 3.1-A/B. School Based Child Health services include physical therapy, occupational therapy and other services, including services provided by audiologists and services for individuals with speech, hearing and language disorders, performed by, or under the direction of, providers who meet the qualifications set forth at 42 CFR 440.110; and nursing services coverable under 42 CFR 440.130(d), including services delegated to individuals who receive appropriate teaching, direction, and supervision from a Registered Nurse or Practical Nurse; services performed by licensed practitioners within the scope of their practice for individuals with behavioral health (mental health and substance abuse) disorders, as defined under state law, and coverable as medical or other remedial care under 42 CFR 440.60; diagnostic screening, preventative, and rehabilitative services covered under 42 CFR 440.130. Assessments are covered as necessary to assess or reassess the need for medical services in a child's treatment plan and must be performed by any of the above licensed practitioners within their scope of practice.

**STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT**

**State: CONNECTICUT**

**Cost Reimbursement Methodology for School Based Child Health Services**

1. **Interim Rates**

Interim rates for SBCH services shall be established for services beginning October 1, 2010 with adjusted interim rates reviewed at least every two years thereafter. Interim rates are provisional in nature, pending the completion of a cost reconciliation and cost settlement for that period.

2. **Cost Reimbursement Methodology**

All bills submitted to the Department for payment of School Based Child Health services must be substantiated by documentation in the eligible student's permanent service record. Final reimbursement is based on the certified reports that are submitted by Local Educational Agencies based upon the methodology approved by the Centers for Medicare and Medicaid Services, which includes the scope of cost and methods of cost allocation that have been approved by CMS, consistent with the process described below.

To determine the Medicaid allowable costs of providing School Based Child Health services, the following steps are performed:

- i. Direct costs of providing School Based Child Health services include payroll costs and other costs that can be directly charged to School Based Child Health services including costs that are integral to School Based Child Health services. Direct costs shall not include room and board charges.

Other direct costs include costs directly attributable to activities performed by the personnel who are approved to deliver School Based Child Health services, including but not limited to, travel, purchased services, materials and supplies. These direct costs are accumulated on the annual School Based Child Health Cost Report, approved by CMS.

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ii. Direct costs for School Based Child Health services from Item i. above are reduced by any federal payments for those costs, resulting in adjusted direct costs for School Based Child Health services.

iii. Adjusted direct costs from Item ii. above are then allocated to identify Medicaid-reimbursable costs for School Based Child Health services according to the time study results that are identified according to the process described in the Connecticut School Based Child Health Time Study User Guide, approved by CMS.

iv. Indirect costs are calculated using the unrestricted indirect cost rate set by the Connecticut State Department of Education as the cognizant agency or a de minimis rate in lieu of the cognizant agency rate. Indirect costs are equal to adjusted direct costs (iii) multiplied by the unrestricted indirect cost rate. These indirect costs are then added to the adjusted direct costs (iii) to determine the total School Based Child Health costs.

v. Medicaid allowable costs are identified by applying the Individual Education Plan (IEP)/504 Ratio to the total direct costs (iv). The IEP/504 Ratio is the ratio of all eligible Medicaid students with at least one SBCH covered direct service prescribed in their IEP or 504 Plan for whom the district is financially responsible to all students with at least one SBCH covered direct service prescribed in their IEP or 504 Plan for whom the district is financially responsible. The IEP/504 ratio is calculated using the first school day of each quarter. For the purpose of determining the Medicaid allowable costs, the following three quarters will be utilized: October-December; January – March; and April-June.

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3. **Certification of Public Expenditures**  
Each School Based Child Health services provider certifies on an annual basis through its completed School Based Child Health Cost Report its total actual, incurred Medicaid allowable costs, including the federal share and the nonfederal share. These costs may include the de minimis indirect cost if a provider does not have an unrestricted indirect cost rate approved by the Connecticut State Department of Education as the cognizant agency.
4. **Annual Cost Reports**  
Each School Based Child Health services provider annually will complete a School Based Child Health Cost Report for all services delivered during the previous state fiscal year covering July 1 through June 30. Beginning with the 2016-2017 school year, each School Based Child Health services provider shall submit a copy of their filed ED001 report for the same period of the Cost Report. Cost reports and ED001's are due to the State no later than June 30<sup>th</sup> of the year following the close of the year during which the costs included in the Cost Report were accrued. The annual cost report includes the certification of funds as described in Section 3 above. Submitted cost reports are subject to desk review by the single state agency or its designee.
5. **Cost Reconciliation**  
The total Medicaid allowable costs based on the CMS approved School Based Child Health Cost Report are compared to the School Based Child Health Services Provider's interim rate claims for services delivered during the reporting period, as documented in the MMIS. School Based Child Health service providers' interim rate claims will be adjusted to reflect, in aggregate, the total Medicaid allowable costs based upon the certified cost report identified in Section 3. This results in cost reconciliation. Reconciliation will occur within 24 months of the end of the reporting period contained in the School Based Child Health service providers' submitted cost report.

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Cost reports will be reconciled and settlements will occur within 24 months of the reporting period contained in the annual SBCH cost report. Connecticut will not modify the CMS-approved scope of costs, time study methodology or the annual cost report methodology without CMS approval. If it has been determined that an overpayment has been made, the Department of Social Services will return the federal share of the overpayment. If the actual, certified Medicaid allowable costs of a School Based Child Health Service Provider exceed the interim Medicaid rates, the Department of Social Services will submit claims to CMS for the underpayment. Cost settlement will occur within the timelines set forth in 42 CFR 433 Subpart F.

**7. Audit**

All supporting accounting and school records, statistical data and all other records related to the provision of School Based Child Health services paid for by the Department shall be subject to audit. If an audit discloses discrepancies in the accuracy and/or allowances of actual direct or indirect costs or statistical data as submitted for each fiscal year by the Local Educational Agency, the Department's payment rate for the said period shall be subject to adjustment.

- (c) Family Planning Services, drugs, supplies, and devices when such services are under the supervision of a physician: outpatient hospital services, same as item (2a); Federally Qualified Health Centers, same as item (2)(c); laboratory services, same as item (3); physician services, same as item (5); clinics, same as item (9); drug and supplies, same as item (12); nurse midwives, same as item (17) and pediatric or family nurse practitioners, same as item (21).

State: CONNECTICUT

AMOUNT, DURATION AND SCOPE OF SERVICES PROVIDED  
MEDICALLY NEEDY GROUP(S): ALL

- 4.
- a. Nursing facility services (other than services in an institution for mental diseases) for individuals 21 years of age or older.

No Limitations

- b. EPSDT

Early and periodic screening, diagnostic, and treatment services (EPSDT) services are coverable under one or more of the service categories described in section 1905(r) of the Social Security Act. As required by section 1905 (r), any limitations specified in the State plan will be exceeded for individuals eligible under EPSDT based on a determination of medical necessity. This requirement also includes any services that are not otherwise covered or described in the State plan.

- b.1. EPSDT in School Based Child Health Service Setting:

School Based Child Health (SBCH) Services are early and periodic screening, diagnostic, and treatment services (EPSDT) services that are ordered or prescribed by a physician or other licensed practitioner, either as a member of the planning and placement team (PPT) and/or 504 team as applicable or by a qualified practitioner outside the PPT and/or 504 team as applicable, acting within his or her scope of practice under Connecticut State Law and listed in a recipient student's Individualized Education Plan (IEP) or in a 504 plan that are coverable under one or more of the service categories described in Section 1905(a)and Section 1905(r) of the Social Security Act.

Service providers shall be licensed or otherwise qualified under the applicable State practice act or comparable licensing criteria by the State Department of Public Health and shall meet applicable qualifications under 42 CFR 440.

**State: CONNECTICUT**

**AMOUNT, DURATION AND SCOPE OF SERVICES PROVIDED  
MEDICALLY NEEDY GROUP(S): ALL**

The following services are considered School Based Child Health services:

**1. Assessments**

Assessments are conducted to determine a child's health-related needs for purposes of the IEP or the Section 504 plan. Assessments are covered, as necessary, to assess or reassess the need for medical services in a child's treatment plan. Assessments are services provided under section 1905(a) the Social Security Act. Assessments shall be performed by a licensed practitioner who meets the qualifications in accordance with his or her scope of practice under Connecticut State Law.

Payment for the assessment costs is available under Medicaid once an individual's IEP or 504 Plan has been approved.

Assessment services include the identification and assessment of health-related needs for medical services for the purpose of determining educational recommendations.

**2. Audiology**

Audiology services are provided by providers who meet the qualifications in accordance with 42 CFR 440.110(c)(3) and acting within his or her scope of practice under Connecticut State Law.

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 referral for medical or other professional attention for the treatment of hearing;
- provision of treatment activities, such as language habilitation, auditory training, speech reading, hearing evaluation and speech conservation;
- counseling and guidance of children, parents and teachers regarding hearing loss; and
- determination of the child's need for individual or group amplification, selecting and fitting an appropriate aid and evaluation of the effectiveness of amplification.

State: CONNECTICUT

**AMOUNT, DURATION AND SCOPE OF SERVICES PROVIDED  
MEDICALLY NEEDY GROUP(S): ALL**

**3. Behavioral Health Services (Psychological & Counseling Services)**

Behavioral health services include diagnostic and treatment services involving mental, emotional or behavioral problems and disturbances and dysfunctions, or the diagnosis and treatment of substance abuse. Behavioral health services must be provided by a qualified provider who meets the requirements of 42 CFR Section 440.130, 440.60 or 42 CFR Section 440.50(a).

Behavioral health service providers include physicians, psychiatrists, advanced practice registered nurses (APRN), physician assistants, clinical psychologists, school psychologists, school social workers, licensed clinical social workers, professional counselors, alcohol and drug counselors, and marital and family therapists,.

Behavioral health services include, but are not limited to:

- a. mental health evaluations,
- b. psychological testing, the administering of psychological tests and other assessment procedures, interpreting of assessment results, obtaining, integrating and interpreting of information about a child behavior and conditions related to learning, planning and managing of a program of psychological services including psychological counseling for children and parents, and
- c. counseling services, such as individual, group or marital and family counseling or psychotherapy for the treatment of a mental, emotional, behavioral or substance abuse condition to alleviate the condition and encourage growth and development, as performed by qualified SBCH providers.

**4. Behavior Modification Services (Applied Behavior Analysis)**

**State: CONNECTICUT**

**AMOUNT, DURATION AND SCOPE OF SERVICES PROVIDED  
MEDICALLY NEEDY GROUP(S): ALL**

Behavioral modification services are a face-to-face service providing redirection and modeling of appropriate behaviors in order to enhance the student's functioning within their home or community. The service involves regularly scheduled interventions with the student and a qualified professional or paraprofessional. "Behavior Analysis" means the design, implementation and evaluation of environmental modifications, using behavioral stimuli and consequences, including the use of direct observation, measurement and functional analysis of the relationship between the environment and behavior, to produce socially significant improvement in human behavior.

Services are provided by qualified staff, under the supervision, of qualified clinical staff. Behavioral Modification must be listed on the IEP or the Section 504 plan with a planned frequency.

**Provider Qualifications**

Professionals with a M.A. or M.S. degree in psychology, special education, social work or behavior management or professionals who have a current licensure in clinical psychology or current certification as a Board Certified Behavioral Analyst (BCBA); Board Certified Assistant Behavior Analyst (BCaBA) working under supervision of a BCBA; Technicians working under the supervision of a BCBA.

**5. Clinical Diagnostic Laboratory Services**

Clinical diagnostic laboratory services include those services recommended in the IEP or the Section 504 plan such as simple diagnostic tests and procedures performed in the school. Clinical diagnostic laboratory services are provided by providers who meet the qualifications in accordance with 42 CFR 440.30 and 42 CFR 440.130 and acting within his or her scope of practice under Connecticut State Law.

Clinical diagnostic laboratory services include, but are not limited to:

- blood sugar by a finger stick,
- urine dipstick, and hematocrit.

State: CONNECTICUT

**AMOUNT, DURATION AND SCOPE OF SERVICES PROVIDED  
MEDICALLY NEEDY GROUP(S): ALL**

**6. Medical Services**

Medical services are provided by licensed physicians, physician assistant, or nurse practitioners who meet the qualifications in accordance with 42 CFR 440.50, 440.60 or 440.166 and acting within his or her scope of practice under Connecticut State Law. Medical services include those services provided under section 1905(a)(5), 1905(a)(6) and 1905(a)(28) of the Social Security Act.

Medical services include, but are not limited to:

- medical evaluations used to identify a child's health related needs as a part of the IEP process or the Section 504 plan process; and
- medically necessary EPSDT services including health care services, diagnostic services, treatments and other measures to correct and ameliorate physical defects, mental illnesses and other disabilities.

**7. Nursing Services**

Nursing services are services that are within the scope of practice and performed by a registered nurse or licensed practical nurse who meet the qualifications in accordance with 42 CFR 440.80 and 42 CFR 440.60 and acting within his or her scope of practice under Connecticut State Law.

Nursing services include, but are not limited to:

- health assessment and development of individualized health care plans;
- medical treatments and procedures including, but not limited to, suctioning, tracheotomy care, catheterization, toileting, ostomy management and care;
- administering and/or monitoring medication needed by the student during school hours;

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**AMOUNT, DURATION AND SCOPE OF SERVICES PROVIDED  
MEDICALLY NEEDY GROUP(S): ALL**

- consultation with licensed physicians, parents and staff regarding the effects of medications;
- monitoring of health status, for example, monitoring of shunt functioning or respiratory status; and
- individual health counseling and instruction and emergency interventions.

**8. Occupational Therapy**

Occupational therapy services are provided by or under the direction of providers who meet the qualifications in accordance with 42 CFR 440.110(b) and acting within his or her scope of practice under Connecticut State Law.

Occupational therapy services include:

- 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.

**9. Optometric Services**

Optometric services are provided by or under the direction of providers who meet the qualifications in accordance with 42 CFR 440.50(a), 440.60(a) or 440.166(a) and acting within his or her scope of practice under Connecticut State Law.

Optometric services include, but are not limited to:

- assessment for visual acuity, color blindness, near vision and strabismus; and
- diagnosis of abnormalities related to the eye and optic nerves.

State: CONNECTICUT

**AMOUNT, DURATION AND SCOPE OF SERVICES PROVIDED**  
**MEDICALLY NEEDY GROUP(S): ALL**

**10. Personal Care Services**

Personal care services consist of physical assistance with activities of daily living (ADLs) or instrumental activities of daily living (IADLs), as defined below. Personal care services must be authorized by a physician or nurse practitioner in order to be reimbursable under the SBCH Medicaid program. Personal Care services do not include skilled services that only a health professional may perform (e.g., home health aide services).

ADLs include the following:

1. Mobility: physically assisting a member who has a mobility impairment that prevents unassisted transferring, walking or use of prescribed durable medical equipment
2. Assistance with medications or other health-related needs: physically assisting a member to take medications prescribed by a physician that otherwise would be self-administered
3. Bathing/grooming: physically assisting a member with basic care such as bathing, personal hygiene, and grooming skills
4. Dressing or undressing: physically assisting a member to dress or undress
5. Passive range-of-motion exercises: physically assisting a member to perform range-of-motion exercises
6. Eating: physically assisting a member to eat. This can include assistance with tube-feeding and special nutritional and dietary needs.
7. Toileting: physically assisting a member with bowel and bladder needs

IADLs include the following:

1. Household services: Physically assisting with household management tasks that are incidental to the care of the member, including laundry, shopping, and housekeeping

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**AMOUNT, DURATION AND SCOPE OF SERVICES PROVIDED  
MEDICALLY NEEDY GROUP(S): ALL**

2. Meal preparation and clean-up: Physically assisting a member to prepare meals
3. Transportation: Accompanying the member to medical providers
4. Special Needs: Assisting the member with:
  - a. The care and maintenance of wheelchairs and adaptive devices;
  - b. Completing the paperwork required for receiving personal care services

**Provider Qualifications**

A person who provides personal care services cannot be a family member of the individual receiving services. A family member is defined as “the spouse of the member, the natural or adoptive parent, child or sibling of the person, the stepparent, stepchild, stepbrother, or stepsister of the person, grandparent or grandchild and their spouse, (section 1128 (j) of the social security act).

Personal care providers are not required to be licensed.

Services must be part of the IEP or 504 plan and must be prescribed by, referred by, recommended by, ordered by, provided under the direction of, or otherwise authorized in writing by a physician or nurse practitioner.

School-Based Medicaid providers must retain documentation related to such written requests for six years.

**11. Physical Therapy**

Physical therapy services are provided by or under the direction of providers who meet the qualifications in accordance with 42 CFR 440.110(a) and acting within his or her scope of practice under Connecticut State Law.

**State: CONNECTICUT**

**AMOUNT, DURATION AND SCOPE OF SERVICES PROVIDED  
MEDICALLY NEEDY GROUP(S): ALL**

Physical therapy services include:

- 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.

**12. Respiratory Care Services**

Respiratory care services are provided by or under the direction of licensed respiratory care practitioners who meet the qualifications in accordance with 42 CFR 440.185 and acting within his or her scope of practice under Connecticut State Law.

Respiratory care services include, but are not limited to:

- therapeutic procedures to increase strength or endurance of respiratory muscles; and
- therapeutic procedures to improve respiratory function.

**13. Speech/Language**

Speech/Language services are provided by or under the direction of providers who meet the qualifications in accordance with 42 CFR 440.110(c)(1) & (2) and acting within his or her scope of practice under Connecticut State Law.

**State: CONNECTICUT**

**AMOUNT, DURATION AND SCOPE OF SERVICES PROVIDED  
MEDICALLY NEEDY GROUP(S): ALL**

Speech/Language therapy services include:

- 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.

**TN #16-014  
Supersedes  
TN # 10-018**

**Approval Date \_\_\_\_\_**

**Effective Date 07-01-2016**

State: CONNECTICUT

AMOUNT, DURATION AND SCOPE OF SERVICES PROVIDED  
CATEGORICALLY NEEDY GROUP(S): ALL

4.  
b. Nursing facility services (other than services in an institution for mental diseases) for individuals 21 years of age or older.

No Limitations

- c. EPSDT

Early and periodic screening, diagnostic, and treatment services (EPSDT) services are coverable under one or more of the service categories described in section 1905(r) of the Social Security Act. As required by section 1905 (r), any limitations specified in the State plan will be exceeded for individuals eligible under EPSDT based on a determination of medical necessity. This requirement also includes any services that are not otherwise covered or described in the State plan.

- b.1. EPSDT in School Based Child Health Service Setting:

School Based Child Health (SBCH) Services are early and periodic screening, diagnostic, and treatment services (EPSDT) services that are ordered or prescribed by a physician or other licensed practitioner, either as a member of the planning and placement team (PPT) and/or 504 team as applicable or by a qualified practitioner outside the PPT and/or 504 team as applicable, acting within his or her scope of practice under Connecticut State Law and listed in a recipient student's Individualized Education Plan (IEP) or in a 504 plan that are coverable under one or more of the service categories described in Section 1905(a)and Section 1905(r) of the Social Security Act.

Service providers shall be licensed or otherwise qualified under the applicable State practice act or comparable licensing criteria by the State Department of Public Health and shall meet applicable qualifications under 42 CFR 440.

**State: CONNECTICUT**

**AMOUNT, DURATION AND SCOPE OF SERVICES PROVIDED  
CATEGORICALLY NEEDY GROUP(S): ALL**

The following services are considered School Based Child Health services:

**14. Assessments**

Assessments are conducted to determine a child's health-related needs for purposes of the IEP or the Section 504 plan. Assessments are covered, as necessary, to assess or reassess the need for medical services in a child's treatment plan. Assessments are services provided under section 1905(a) the Social Security Act. Assessments shall be performed by a licensed practitioner who meets the qualifications in accordance with his or her scope of practice under Connecticut State Law.

Payment for the assessment costs is available under Medicaid once an individual's IEP or 504 Plan has been approved.

Assessment services include the identification and assessment of health-related needs for medical services for the purpose of determining educational recommendations.

**15. Audiology**

Audiology services are provided by providers who meet the qualifications in accordance with 42 CFR 440.110(c)(3) and acting within his or her scope of practice under Connecticut State Law.

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 referral for medical or other professional attention for the treatment of hearing;
- provision of treatment activities, such as language habilitation, auditory training, speech reading, hearing evaluation and speech conservation;
- counseling and guidance of children, parents and teachers regarding hearing loss; and
- determination of the child's need for individual or group amplification, selecting and fitting an appropriate aid and evaluation of the effectiveness of amplification.

State: CONNECTICUT

**AMOUNT, DURATION AND SCOPE OF SERVICES PROVIDED  
CATEGORICALLY NEEDY GROUP(S): ALL**

**3. Behavioral Health Services (Psychological & Counseling Services)**

Behavioral health services include diagnostic and treatment services involving mental, emotional or behavioral problems and disturbances and dysfunctions, or the diagnosis and treatment of substance abuse. Behavioral health services must be provided by a qualified provider who meets the requirements of 42 CFR Section 440.130, 440.60 or 42 CFR Section 440.50(a).

Behavioral health service providers include physicians, psychiatrists, advanced practice registered nurses (APRN), physician assistants, clinical psychologists, school psychologists, school social workers, licensed clinical social workers, professional counselors, alcohol and drug counselors, and marital and family therapists,.

Behavioral health services include, but are not limited to:

- a. mental health evaluations,
- b. psychological testing, the administering of psychological tests and other assessment procedures, interpreting of assessment results, obtaining, integrating and interpreting of information about a child behavior and conditions related to learning, planning and managing of a program of psychological services including psychological counseling for children and parents, and
- c. counseling services, such as individual, group or marital and family counseling or psychotherapy for the treatment of a mental, emotional, behavioral or substance abuse condition to alleviate the condition and encourage growth and development, as performed by qualified SBCH providers.

**4. Behavior Modification Services (Applied Behavior Analysis)**

**State: CONNECTICUT**

**AMOUNT, DURATION AND SCOPE OF SERVICES PROVIDED  
CATEGORICALLY NEEDY GROUP(S): ALL**

Behavioral modification services are a face-to-face service providing redirection and modeling of appropriate behaviors in order to enhance the student's functioning within their home or community. The service involves regularly scheduled interventions with the student and a qualified professional or paraprofessional. "Behavior Analysis" means the design, implementation and evaluation of environmental modifications, using behavioral stimuli and consequences, including the use of direct observation, measurement and functional analysis of the relationship between the environment and behavior, to produce socially significant improvement in human behavior.

Services are provided by qualified staff, under the supervision, of qualified clinical staff. Behavioral Modification must be listed on the IEP or the Section 504 plan with a planned frequency.

**Provider Qualifications**

Professionals with a M.A. or M.S. degree in psychology, special education, social work or behavior management or professionals who have a current licensure in clinical psychology or current certification as a Board Certified Behavioral Analyst (BCBA); Board Certified Assistant Behavior Analyst (BCaBA) working under supervision of a BCBA; Technicians working under the supervision of a BCBA.

**5. Clinical Diagnostic Laboratory Services**

Clinical diagnostic laboratory services include those services recommended in the IEP or the Section 504 plan such as simple diagnostic tests and procedures performed in the school. Clinical diagnostic laboratory services are provided by providers who meet the qualifications in accordance with 42 CFR 440.30 and 42 CFR 440.130 and acting within his or her scope of practice under Connecticut State Law.

Clinical diagnostic laboratory services include, but are not limited to:

- blood sugar by a finger stick,
- urine dipstick, and hematocrit.

**State: CONNECTICUT**

**AMOUNT, DURATION AND SCOPE OF SERVICES PROVIDED  
CATEGORICALLY NEEDY GROUP(S): ALL**

**6. Medical Services**

Medical services are provided by licensed physicians, physician assistant, or nurse practitioners who meet the qualifications in accordance with 42 CFR 440.50, 440.60 or 440.166 and acting within his or her scope of practice under Connecticut State Law. Medical services include those services provided under section 1905(a)(5), 1905(a)(6) and 1905(a)(28) of the Social Security Act.

Medical services include, but are not limited to:

- medical evaluations used to identify a child's health related needs as a part of the IEP process or the Section 504 plan process; and
- medically necessary EPSDT services including health care services, diagnostic services, treatments and other measures to correct and ameliorate physical defects, mental illnesses and other disabilities.

**7. Nursing Services**

Nursing services are services that are within the scope of practice and performed by a registered nurse or licensed practical nurse who meet the qualifications in accordance with 42 CFR 440.80 and 42 CFR 440.60 and acting within his or her scope of practice under Connecticut State Law.

Nursing services include, but are not limited to:

- health assessment and development of individualized health care plans;
- medical treatments and procedures including, but not limited to, suctioning, tracheotomy care, catheterization, toileting, ostomy management and care;
- administering and/or monitoring medication needed by the student during school hours;

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**AMOUNT, DURATION AND SCOPE OF SERVICES PROVIDED  
CATEGORICALLY NEEDY GROUP(S): ALL**

- consultation with licensed physicians, parents and staff regarding the effects of medications;
- monitoring of health status, for example, monitoring of shunt functioning or respiratory status; and
- individual health counseling and instruction and emergency interventions.

**8. Occupational Therapy**

Occupational therapy services are provided by or under the direction of providers who meet the qualifications in accordance with 42 CFR 440.110(b) and acting within his or her scope of practice under Connecticut State Law.

Occupational therapy services include:

- 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.

**9. Optometric Services**

Optometric services are provided by or under the direction of providers who meet the qualifications in accordance with 42 CFR 440.50(a), 440.60(a) or 440.166(a) and acting within his or her scope of practice under Connecticut State Law.

Optometric services include, but are not limited to:

- assessment for visual acuity, color blindness, near vision and strabismus; and
- diagnosis of abnormalities related to the eye and optic nerves.

**State: CONNECTICUT**

**AMOUNT, DURATION AND SCOPE OF SERVICES PROVIDED  
CATEGORICALLY NEEDY GROUP(S): ALL**

**10. Personal Care Services**

Personal care services consist of physical assistance with activities of daily living (ADLs) or instrumental activities of daily living (IADLs), as defined below. Personal care services must be authorized by a physician or nurse practitioner in order to be reimbursable under the SBCH Medicaid program. Personal Care services do not include skilled services

that only a health professional may perform (e.g., home health aide services).

ADLs include the following:

1. Mobility: physically assisting a member who has a mobility impairment that prevents unassisted transferring, walking or use of prescribed durable medical equipment
2. Assistance with medications or other health-related needs: physically assisting a member to take medications prescribed by a physician that otherwise would be self-administered
3. Bathing/grooming: physically assisting a member with basic care such as bathing, personal hygiene, and grooming skills
4. Dressing or undressing: physically assisting a member to dress or undress
5. Passive range-of-motion exercises: physically assisting a member to perform range-of-motion exercises
6. Eating: physically assisting a member to eat. This can include assistance with tube-feeding and special nutritional and dietary needs.
7. Toileting: physically assisting a member with bowel and bladder needs

IADLs include the following:

1. Household services: Physically assisting with household management tasks that are incidental to the care of the member, including laundry, shopping, and housekeeping

**State: CONNECTICUT**

**AMOUNT, DURATION AND SCOPE OF SERVICES PROVIDED  
CATEGORICALLY NEEDY GROUP(S): ALL**

2. Meal preparation and clean-up: Physically assisting a member to prepare meals
3. Transportation: Accompanying the member to medical providers
4. Special Needs: Assisting the member with:
  - a. The care and maintenance of wheelchairs and adaptive devices;
  - b. Completing the paperwork required for receiving personal care services

**Provider Qualifications**

A person who provides personal care services cannot be a family member of the individual receiving services. A family member is defined as “the spouse of the member, the natural or adoptive parent, child or sibling of the person, the stepparent, stepchild, stepbrother, or stepsister of the person, grandparent or grandchild and their spouse, (section 1128 (j) of the social security act). Personal care providers are not required to be licensed.

Services must be part of the IEP or 504 plan and must be prescribed by, referred by, recommended by, ordered by, provided under the direction of, or otherwise authorized in writing by a physician or nurse practitioner.

School-Based Medicaid providers must retain documentation related to such written requests for six years.

**11. Physical Therapy**

Physical therapy services are provided by or under the direction of providers who meet the qualifications in accordance with 42 CFR 440.110(a) and acting within his or her scope of practice under Connecticut State Law.

**State: CONNECTICUT**

**AMOUNT, DURATION AND SCOPE OF SERVICES PROVIDED  
CATEGORICALLY NEEDY GROUP(S): ALL**

Physical therapy services include:

- 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.

**12. Respiratory Care Services**

Respiratory care services are provided by or under the direction of licensed respiratory care practitioners who meet the qualifications in accordance with 42 CFR 440.185 and acting within his or her scope of practice under Connecticut State Law.

Respiratory care services include, but are not limited to:

- therapeutic procedures to increase strength or endurance of respiratory muscles; and
- therapeutic procedures to improve respiratory function.

**13. Speech/Language**

Speech/Language services are provided by or under the direction of providers who meet the qualifications in accordance with 42 CFR 440.110(c)(1) & (2) and acting within his or her scope of practice under Connecticut State Law.

**State: CONNECTICUT**

**AMOUNT, DURATION AND SCOPE OF SERVICES PROVIDED  
CATEGORICALLY NEEDY GROUP(S): ALL**

Speech/Language therapy services include:

- 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.

**TN #16-014  
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