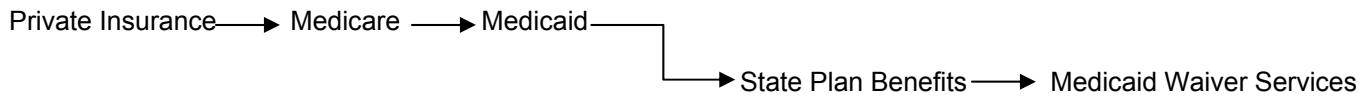


❖ **Medicaid Payment Continuum:**



❖ **Mandatory and Optional State Plan Medicaid Services**

History

Title XIX of the Social Security Act (the Medicaid program) was enacted in 1965 with a mandatory core package of inpatient and outpatient hospital, laboratory and X-ray, skilled nursing facility and physician services. Ohio began its Medicaid program in 1968. At the federal level, significant changes have been made to the Medicaid program since its inception, including these additions and exceptions:

- Early and Periodic Screening, Diagnosis and Treatment (EPSDT) was added in 1967.
- The option to cover ICFs/MR was added in 1971.
- Home and Community Based Services (HCBS) waiver and managed care waivers were introduced in 1981.
- The requirement to cover Federally Qualified Health Center (FQHC) services was added in 1989.
- Drug rebates and hospice coverage followed in 1990, and preferred drug lists in 1993.
- The Affordable Care Act (ACA), passed in 2010, provided that children may receive curative treatment for a terminal illness even if they do receive hospice services.

Overview

The Medicaid benefit package consists of two federally-defined groups of services: mandatory services and optional services. States must provide mandatory services as a condition of participation in the Medicaid program, but they may offer optional services at their discretion. For children under 21 years of age, even services that are optional for adults are mandatory if they are found to be medically necessary as a result of a screening conducted under the EPSDT provisions of federal law. In Ohio, EPSDT is known as Healthchek. Home and community-based waiver services are the only true optional services for children under 21.

For individuals of all ages, four key principles apply to services, mandatory and optional, available under the Medicaid program: (1) Sufficiency- Services must be available in an amount, scope and duration sufficient to achieve their purpose. (2) Comparability- Services must be comparable within eligibility groups. (3) Statewideness- Services must be available across the state. (4) Freedom of choice- Individuals must be able to choose freely from among participation providers.

Exceptions to some or any of these principles can occur through a Medicaid waiver or a Medicaid managed care plan. States are allowed to limit services on the basis of medical necessity and amount of utilization.

Common State Plan Medicaid Services:

- Pharmacy
 - Prescription drugs
- Hospital and Related Services
 - Outpatient hospital
- Long-Term Care
 - Home health
 - Private duty nursing
 - Hospice
- Rehabilitation and Supports
 - Durable Medical Equipment (DME)
 - Prosthetics/Orthotics
 - Physical therapy
 - Occupational therapy
 - Speech/language pathology
- Primary Care Services
 - Physician services
 - Pediatric/Family Nurse Practitioner services
 - Federally Qualified Health Center (FQHC)
 - Rural Health Clinic (RHC)
- Mental and Behavioral Health
 - Community mental health services
 - Independent psychologist services
- Ancillary Services
 - Transportation
 - Laboratory and X-ray
 - Podiatrist
 - Chiropractor
 - Dentist
 - Optometrist/Ophthalmologist
 - Audiology

Service	Mandatory	Optional	When Optional, does Ohio offer?
Prescription drugs	Yes, for individuals <21 yrs	Yes, for individuals ≥ 21 yrs	Yes, regardless of age
Outpatient hospital	Yes	No	N/A
Home health	Yes	No	N/A
Private duty nursing	Yes, for individuals <21 yrs	Yes, for individuals ≥ 21 yrs	Yes, regardless of age
DME	Yes	No	N/A
Prosthetics/Orthotics	Yes, for individuals <21 yrs	Yes, for individuals ≥ 21 yrs	Yes, regardless of age
Physical/Occupational therapy	Yes, for individuals <21 yrs	Yes, for individuals ≥ 21 yrs	Yes, regardless of age
Physician services	Yes	No	N/A
Pediatric/Family Nurse Practitioner services	Yes	No	N/A
Community mental health services	Yes, for individuals <21 yrs	Yes, for individuals ≥ 21 yrs	Yes, regardless of age
Independent psychologist services	Yes, for individuals <21 yrs	Yes, for individuals ≥ 21 yrs	Yes, regardless of age
Transportation	Yes, for medical transport (e.g., ambulance)	Yes, for non-medical transport (e.g., to/from medical appointments)	Yes, non-medical transport is through CDJFS
Laboratory and X-ray	Yes	No	N/A
Podiatrist	Yes, for individuals <21 yrs	Yes, for individuals ≥ 21 yrs	Yes, regardless of age
Chiropractor	Yes, for individuals <21 yrs	Yes, for individuals ≥ 21 yrs	Yes, regardless of age
Dentist	Yes, for medical/surgical services, and other services for individuals <21 yrs	Yes, for certain services for individuals ≥ 21 yrs	Yes, regardless of age
Optometrist/Ophthalmologist	Yes, for medical/surgical services, and exams/eyeglasses for individuals <21 yrs	Yes, for exams and eyeglasses for individuals ≥ 21 yrs	Yes, regardless of age
Audiology	Yes, for individuals <21 yrs	Yes, for individuals ≥ 21 yrs	Yes, regardless of age

Resources:

County Department of Job and Family Services (CDJFS) Directory

http://jfs.ohio.gov/county/County_Directory.pdf

Medicaid Managed Care Plans

<http://jfs.ohio.gov/OHP/bmhc/index.stm>

General Medicaid Information

<http://jfs.ohio.gov/OHP/consumer.stm>

Medicaid Consumer Hotline: 1-800-324-8680