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State/Territory Name: OH

State Plan Amendment (SPA) #: 13-014

This file contains the following documents in the order listed:

- 1) Approval Letter
- 2) CMS 179 Form/Summary Form (with 179-like data)
- 3) Approved SPA Pages

June 11, 2015

John B. McCarthy, Director
Ohio Department of Medicaid
P.O. Box 182709
50 West Town Street, Suite 400
Columbus, Ohio 43218

RE: TN 13-014

Dear Mr. McCarthy:

Enclosed for your records is an approved copy of the following State Plan Amendment (SPA):

Transmittal #13-014 - Psychologists' services: Coverage and limitations
 - Effective Date: January 1, 2014

If you have any questions, please have a member of your staff contact Christine Davidson at (312) 886-3642 or by email at christine.davidson@cms.hhs.gov.

Sincerely,

/s/ Alan Freund, acting

Ruth A. Hughes
Associate Regional Administrator
Division of Medicaid and Children's Health Operations

Enclosure

cc: Carolyn Brewer, ODM
Sarah Curtin, ODM
Becky Jackson, ODM
Greg Niehoff, ODM

TRANSMITTAL AND NOTICE OF APPROVAL OF STATE PLAN MATERIAL	1. TRANSMITTAL NUMBER: 13 -014 (Revised)	2. STATE OHIO
	3. PROGRAM IDENTIFICATION: TITLE XIX OF THE SOCIAL SECURITY ACT (MEDICAID)	
FOR: CENTERS FOR MEDICARE AND MEDICAID SERVICES	4. PROPOSED EFFECTIVE DATE January 1, 2014	
TO: REGIONAL ADMINISTRATOR CENTERS FOR MEDICARE & MEDICAID SERVICES DEPARTMENT OF HEALTH AND HUMAN SERVICES		

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: Sections 1905(a)(6) of the Social Security Act 42 CFR 440.60	7. FEDERAL BUDGET IMPACT: a. FFY 2013 \$ 0 thousands b. FFY 2014 \$ 0 thousands
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8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT: Attachment 3.1-A Item 6-d-2, Page 1 of 1	9. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable): Attachment 3.1-A Item 6, page 5 and 6 of 6 (TN 07-018)
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10. SUBJECT OF AMENDMENT:
Psychologists' services: Coverage and limitations

11. GOVERNOR'S REVIEW (Check One):

GOVERNOR'S OFFICE REPORTED NO COMMENT OTHER, AS SPECIFIED:
 COMMENTS OF GOVERNOR'S OFFICE ENCLOSED The State Medicaid Director is the Governor's designee
 NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL

12. SIGNATURE OF STATE AGENCY OFFICIAL: 	16. RETURN TO: Becky Jackson The Ohio Department of Medicaid P.O. BOX 182709 Columbus, Ohio 43218
13. TYPED NAME: John B. McCarthy	
14. TITLE: STATE MEDICAID DIRECTOR	
15. DATE SUBMITTED: 9/30/2013	

FOR REGIONAL OFFICE USE ONLY	
17. DATE RECEIVED: 9/30/13	18. DATE APPROVED: 6/11/15
PLAN APPROVED - ONE COPY ATTACHED	
19. EFFECTIVE DATE OF APPROVED MATERIAL: 1/1/14	20. SIGNATURE OF REGIONAL OFFICIAL: S
21. TYPED NAME: Alan Freund	22. TITLE: Acting Associate Regional Administrator
23. REMARKS:	

6. Medical care and any other types of remedial care recognized under state law furnished by licensed practitioners within the scope of their practice as defined by State law.

d. Other practitioners' services.

2. Psychologists' services, including services of doctoral-level psychology interns who are completing required internships and who provide services under the general supervision of the psychologist responsible for the patient's care.

Psychologists' services are covered by Ohio Medicaid in accordance with 42 CFR § 440.60.

Psychologists' services are provided consistent with the scope of practice as defined under State law.

Services determined by the department as not medically necessary will not be covered.

Limitations:

1. Psychological testing is limited to a maximum of eight hours per twelve-month period per recipient in a non-hospital setting.
2. Therapeutic visits and diagnostic interview examinations in excess of a combined 25 dates of service per recipient in a 12-month period in a non-hospital setting are not covered.
3. Diagnostic interview examinations will be limited to one per recipient per 12-month period and may not be billed on the same date of services as a therapeutic visit.
4. The following services are not covered:
 - a. Sensitivity training, encounter groups or workshops;
 - b. Sexual competency training;
 - c. Marathons and retreats for mental disorders; and
 - d. Education testing and diagnosis.

Additional psychologists' services beyond the established limits may be allowed when medically necessary and approved through the prior authorization process.

Beneficiaries younger than age twenty-one can access psychologists' services without limitation when such services are medically necessary.

TN: 13-014

Supersedes:

TN: 07-018

Approval Date 6/11/15

Effective Date 01/01/2014