State/Territory: <u>Tennessee</u>

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

4.a.	Nursing facility sindividuals 21 year	·		n an instit	ution fo	or mental	diseases)) for
	Provided:	[] 1	No Limitations		[X] W	ith limitati	ons*	
4.b.	Early and periodic screening, diagnostic and treatment services for individuals under 21 years of age, and treatment of conditions found.*							
4.c.	Family planning services and supplies for individuals of child-bearing age.							
	Provided:	[X]	No limitations		[] Wit	h limitatio	ns*	
4.d.	Tobacco Cessation	Counseling Serv	vices for Pregnar	nt Women				
	1) Face-to-Face 7	obacco Cessatio	n Counseling Se	rvices prov	ided (by):		
	[X](i) By or under	supervision of a	physician;					
	∐(ii) By any other under State law a tobacco cessation s	nd who is auth						
	(iii) Any other health care professional legally authorized to provide tobacco cessation services under State law <i>and</i> who is specifically <i>designated</i> by the Secretary in regulations. (None are designated at this time; this item is reserved for future use.)							
	2) Face-to-Face Women	Tobacco Cessat	ion Counseling	Services	Benefit	Package	for Preg	gnant
	Provided:	[X] No limita	ations	[] With	limitatic	ons*		
*Descri _l	ption provided on att	achment.						
TN No.	<u>11-010B</u>							
Suparca	dos	Annuarial Da	to 04 26 12			Effective I	Data 7/1/1	1 1

TN No. <u>11-010B</u> Supersedes TN No. <u>93-15</u> State/Territory: <u>Tennessee</u>

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

5.a	Physicians' services whether furnished in the office, the patient's home, a hospital, a nursing facility or elsewhere.							
	Provided:	[]	No limitations	[X]	With limitations*			
b.	Medical and surgical services furnished by a dentist (in accordance with section 1905(a)(5)(B) of the Act).							
	Provided:	[]	No limitations	[X]	With limitations*			
 Medical care and any other type of remedial care recognized under State law, fur licensed practitioners within the scope of their practice as defined by State law. 								
a.	Podiatrists' services							
	Provided:	[]	No limitations	[X]	With limitations*			
Descr	ription provided on attach	ment.						

TN No. 11-010B Supersedes TN No. NEW State: Tennessee

AMOUNT, DURATION AND SCOPE OF SERVICES PROVIDED MEDICALLY NEEDY GROUP(S): Children Under 21, Pregnant Women

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4.d.	T	obacco Cessatio	on Counseli	ng Se	ervices for Pregna	ant Women				
		Face-to-Face Tobacco Cessation Counseling Services provided (by):								
	[[X] (i) By or under supervision of a physician;								
	u	[](ii) By any other health care professional who is legally authorized to furnish such services under State law and who is authorized to provide Medicaid coverable services <i>other</i> than tobacco cessation services; or								
	(iii) Any other health care professional legally authorized to provide tobacco cessation servi under State law <i>and</i> who is specifically <i>designated</i> by the Secretary in regulations. (None designated at this time; this item is reserved for future use.)									
) Face-to-Face Vomen	Tobacco	Cess	ation Counselin	g Services	Bene	efit Package	for I	'regnant
	P	rovided:	[X] N	o limi	itations	[] With	ı limita	ations*		
5	.a.	Physicians' se nursing facility			furnished in the	ne office, t	he pat	tient's home,	a hos	spital, a
		Provided:		[]	No limitations		[X]	With limitat	ions*	
1	b.	Medical and 1905(a)(5)(B)			ces furnished b	y a denti	st (in	accordance	with	section
		Provided:		[]	No limitations		[X]	With limitat	tions*	
Descrip	otion	provided on atta	achment.							
TN No.	. 11	-010B								_

TN No. 11-010B Supersedes TN No. 93-15