

April 26, 2021

Brian Zolynas
Division of Medicaid and Children's Health Operations
U.S. Department of Health & Human Services
Centers for Medicare & Medicaid Services
90 Seventh Street, Suite 5-300 (5W)
San Francisco, CA 94103-6707

RE: Arizona SPA #21-005, "Open Care" School Based Claiming Services

Dear Mr. Zolynas:

Enclosed is State Plan Amendment (SPA) #21-005, which expands coverage for school based services rendered to Medicaid enrolled student beneficiaries effective October 1, 2021. With this SPA, reimbursable services must be identified as medically necessary in an Individualized Education Program (IEP), Individualized Family Service Plan (IFSP), 504 Plan, other individualized health or behavioral health plan, or where medical necessity has been otherwise established.

The Public Comment period for this SPA was initiated by the AHCCCS Tribal Consultation which was held on February 13, 2020. The presentation is available at this link: https://www.azahcccs.gov/AmericanIndians/Downloads/Consultations/Meetings/2020/MASTERSlidedeckTC022020.pdf

If there are any questions about the enclosed SPA, please contact Ruben Soliz at ruben.soliz@azahcccs.gov or 602-417-4355.

Sincerely,

Dana Flannery Assistant Director

Arizona Health Care Cost Containment System (AHCCCS)

TRANSMITTAL AND NOTICE OF APPROVAL OF	1. TRANSMITTAL NUMBER:	2. STATE
STATE PLAN MATERIAL	21-005	Arizona
	21-003	Alizulia
FOR: HEALTH CARE FINANCING ADMINISTRATION		
	3. PROGRAM IDENTIFICATION: TITLE XIX OF THE SOCIAL SECURITY ACT (MEDICAID)	
TO: REGIONAL ADMINISTRATOR	4. PROPOSED EFFECTIVE DATE	
HEALTH CARE FINANCING ADMINISTRATION	October 1, 2021	
DEPARTMENT OF HEALTH AND HUMAN SERVICES	Getober 1, 2021	
5. TYPE OF PLAN MATERIAL (Check One):		
NEW STATE PLAN AMENDMENT TO BE CONS		X AMENDMENT
COMPLETE BLOCKS 6 THRU 10 IF THIS IS AN AME	1 "	ach amendment)
6. FEDERAL STATUTE/REGULATION CITATION:	7. FEDERAL BUDGET IMPACT:	
Sec. 1905(a) of the Social Security Act/42 CFR 440	a. FFY 2021 \$0	
	b. FFY 2022 \$14.1million	
8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT:	9. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION	
	OR ATTACHMENT (If Applicable):	
Attachment 3.1-A pp. 3-4	Attachment 3.1-A pp. 3-5(a)	
10. SUBJECT OF AMENDMENT:		
Expands Medicaid coverage for school-based services re	ndered to Medicaid enrolled st	adent beneficiaries.
11. GOVERNOR'S REVIEW (Check One):	OTHER ACCRECI	EIED
X GOVERNOR'S OFFICE REPORTED NO COMMENT COMMENTS OF GOVERNOR'S OFFICE ENCLOSED	OTHER, AS SPECI	FIED:
NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL		
12. SIGNATURE OF STATE AGENCY OFFICIAL:	16. RETURN TO:	
- 1	Dana Flannery	
	801 E. Jefferson, MD#4200	
a TV	Phoenix, AZ 85034	
13. TYPED NAME:		
Dana Flannery		
14. TITLE:		
Assistant Director		
15. DATE SUBMITTED:		
4/26/2021	PELCE LICE ONL V	
FOR REGIONAL OF 17. DATE RECEIVED:	18. DATE APPROVED:	
17. DATE RECEIVED.	18. DATE AFFROVED.	
PLAN APPROVED – ON	JE COPY ATTACHED	
19. EFFECTIVE DATE OF APPROVED MATERIAL:	20. SIGNATURE OF REGIONAL	OFFICIAL:
21. TYPED NAME:	22. TITLE:	
23. REMARKS:		

- vi. Eye exams and prescriptive lenses.
- vii. Outpatient occupational and speech therapy. The duration, scope and frequency of each therapeutic modality shall be authorized as part of a treatment plan.
- viii. Medically necessary services provided by a licensed Naturopathic Physician within their scope of practice as defined in state law in accordance with 42 CFR 440.60
 - ix. The AHCCCS Administration, in accordance with the signed Intergovernmental Agreement between AHCCCS and the Arizona Department of Education, shall provide direct Medicaid reimbursement for certain Medicaid services provided by a participating Local Education Agency (LEA). A LEA is a public school district, a charter school not sponsored by a school district and the Arizona School for the Deaf and Blind. Beginning in January 2001, AHCCCS will reimburse LEAs on an interim fee for service basis for a defined set of Medicaid covered services with dates of service on or after July 1, 2000. Effective with dates of service on or after July 1, 2011, LEAs will be reimbursed on a cost basis. The medically necessary Medicaid services must be provided by a qualified school based provider to students who are Title XIX eligible and eligible for school health and school based services pursuant to the Individuals with Disabilities Education Act (IDEA), Part B. Providers shall be registered in accordance with AHCCCS policies. AHCCCS health plans and ALTCS program contractors will continue to provide medically necessary services to all Title XIX members enrolled with AHCCCS and a health plan or program contractor.
 - ix. AHCCCS Administration, in accordance with the signed Intergovernmental Agreement between AHCCCS and the Arizona Department of Education, shall provide direct Medicaid reimbursement for certain Medicaid services provided by a participating Local Education Agency (LEA). A LEA is a public school district, a charter school not sponsored by a school district and the Arizona School for the Deaf and Blind. Medicaid 1905(a) benefits can be furnished to Medicaid enrolled student beneficiaries that require medical or mental/behavioral health services identified as medically necessary in an Individualized Education Program (IEP), Individualized Family Service Plan (IFSP), 504 Plan, other individualized health or behavioral health plan, or where medical necessity has been otherwise established.

Furthermore, any 1905(a) benefit/service covered in the community can be performed in a school-based setting. Services in a school-based setting must be performed by qualified practitioners as set forth in the State Plan for the services they are providing and shall meet applicable qualifications under 42 CFR Part 440 and/ or Arizona state law. All enrolled recipients must be allowed the freedom of choice to receive services from any willing and qualified practitioner. Beneficiaries shall receive services delivered in the least restrictive environment consistent with the nature of the specific service(s) and the physical and mental condition of the client. Participation by Medicaid -eligible recipients is optional. Providers shall be registered in accordance with AHCCCS policies. AHCCCS health plans and ALTCS program contractors will continue to provide medically necessary services to all Title XIX members enrolled with AHCCCS and a health plan or program contractor.

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Reimbursable Services

Medicaid covered services will only be reimbursable for persons who are at least three years of age and less than 21 years of age and who have been determined eligible for Title XIX and IDEA, Part B services. Those members age 21 to age 22 who are eligible for Medicaid services provided under IDEA are covered within the same service limitations that apply to all eligible AHCCCS members age 21 and older. The following Medicaid services will be eligible for reimbursement:

The reimbursement methodology for services provided under section 4(b)(viii) are detailed in Attachment 4.19-B of the State Plan. Medicaid covered services under section 4(b)(viii) will only be reimbursable for persons who are at least three years of age and less than 21 years of age and who have a documented medical need as described above. Those members age 21 to age 22 who are enrolled in Medicaid services are covered within the same service limitations that apply to all eligible AHCCCS members age 21 and older.

In addition to any service limitations detailed in 1905(a) or as otherwise detailed in Attachment 4.19-B, the following limitations are applicable to services provided by participating LEA under this section:

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x.articipating LEA under this section:

A. Assessment, Diagnosis and Evaluation services.

Services:

Assessment, diagnosis and evaluation services, including testing, are services used to determine IDEA eligibility or to obtain information on the individual for purposes of identifying or modifying the health related services on the IEP. These services are not covered if they are performed for educational purposes (e.g. academic testing or are provided to an individual who as the result of the assessment and evaluation is determined not to be eligible under IDEA).

Providers:

These services are covered in accordance with the requirements in 42 CFR § 440.130. Services must be performed by qualified AHCCCS providers as set forth in this State Plan Amendment and who provide these services as part of their respective area of practice (e.g., psychologists providing a behavioral health evaluation).

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B. Outpatient Speech, Occupational and Physical Therapy Services.

Services:

Outpatient speech, occupational and physical therapy services include individual and group therapy (e.g., neuromuscular re-education, wheel chair management, aural rehabilitation). Speech services are those necessary to diagnose, evaluate, treat, and provide for amelioration activities for specific speech, language and hearing disorders. Occupational therapy services are those services provided to improve, develop, or restore functions impaired or lost through illness, injury, or deprivation. Physical therapy services are those services provided for the purpose of preventing or alleviating movement dysfunction and related functional problems.

Providers:

These services are covered in accordance with the requirements in 42 CFR § 440.110. Services may be provided by:

- State-licensed occupational therapists and certified occupational therapy assistants;
- State-licensed physical therapists and licensed physical therapy assistants;

 State-licensed speech-language pathologists and licensed speech-language pathologist assistants. In addition, persons who have a Provisional Speech and Language Impaired Certificate must be supervised by an American Speech and Language Hearing Association-certified pathologist

All licensed occupational therapy assistants, physical therapy assistants, and speech language pathologist assistants must operate "under the direction of" or "supervised by" a state-licensed therapist/pathologist in accordance with Arizona Administrative Code or Arizona Revised Statute as identified:

- Licensed Speech Therapy Assistants, A.R.S. 36-1940.04
- Licensed Occupational Therapy Assistants, A.A.C. R4-43-401
- Licensed Physical Therapy Assistants, A.A.C. R4-24-303A

C. Nursing Services.

Services:

Nursing services include direct nursing care services as identified in the IEP such as catheterization, suctioning and medication management. Services considered observational or stand by in nature are not covered. In addition, nurses can provide personal care services. Personal care services are a range of human assistance services provided to persons with disabilities and chronic conditions, which enables them to accomplish tasks that they would normally do for themselves if they did not have a disability. Personal care services include assistance to eligible members in meeting essential personal physical needs, such as dressing, toileting, transfers, positioning, mobility, grooming, use of assistive device, and feeding.

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Providers:

These services are covered in accordance with the requirements in 42 CFR § 440.60 and 42 CFR § 440.167. Services may be provided by:

- State-licensed Registered Nurses; or
- Licensed Practical Nurses

D. Transportation Services.

Services:

Transportation services will be provided in compliance with CMS policy and will be paid for when an eligible member's need for special transportation is specified in the IEP. These services will only be reimbursed for the same day in which the member obtains another Medicaid covered reimbursable service through the LEA. Transportation services are not covered if the eligible member is transported on a school bus with other non-IDEA eligible students who are attending school.

Providers:

These services are covered in accordance with the requirements in 42 CFR § 441.62. LEAs serve as transportation providers and must meet the same provider qualifications as all AHCCCS Medicaid transportation providers (e.g., proof of insurance and appropriate transportation license of drivers).

E. Behavioral Health Services.

Services:

Medically necessary services are health care, diagnostic services, treatments and other measures to identify, correct or ameliorate any disability and/or chronic condition. Services are provided as health and behavior interventions to identify the psychological, behavioral, emotional, cognitive, and social factors important to the prevention, treatment, or management of physical and mental health problems. Behavioral health services include individual/group therapy and counseling.

Providers:

These services are covered in accordance with the requirements in 42 CFR § 440.60 and 42 CFR § 440.50. Services may be provided by:

- State licensed psychiatrists;
- State licensed Ph.D. psychologists;
- Arizona Board of Behavioral Health Examiners licensed marriage and family therapists (LMFT), licensed professional counselors (LPC), and licensed clinical—social workers (LCSW); all of whom must have current licensure by the Arizona Board of Behavioral Health Examiners as a LCSW, LPC or LMFT, or if outside Arizona, be

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licensed or certified to practice independently by the local regulatory authority.

F.—Personal Care Services.

Services:

Personal care services are a range of human assistance services provided to persons with disabilities and chronic conditions, which enables them to accomplish tasks that they would normally do for themselves if they did not have a disability. Personal care services include assistance to eligible members in meeting essential personal physical needs, such as dressing, toileting, transfers, positioning, mobility, grooming, use of assistive device, and feeding.

Providers:

These services are covered in accordance with the requirements in 42 CFR § 440.167. All licensed and qualified personnel may authorize personal care services contained within the IEP/service plan. Services may be provided by:

• School based health attendants certified by the LEA in general care, to include first aid and CPR.

A.

Definition:

Personal care services are available to a Medicaid-enrolled beneficiary under the age of 21 or enrolled in the ALTCS program for whom the services are medically necessary and documented in an IEP/IFSP, other medical plans of care, or other service plan approved by the state.

Services:

Personal care services are a range of human assistance services provided to persons with disabilities and chronic conditions, which enables them to accomplish tasks that they would normally do for themselves if they did not have a disability. Assistance may be in the form of hands on assistance or cueing so that the person performs the task by him/herself.

Providers:

Personal care services must be provided by a qualified provider in accordance with 42 CFR § 440. 167.

G. Audiological Services.

Services:

Audiology services include testing and evaluating hearing impaired children that may or may not be

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improved by medication or surgical treatment. In accordance with Arizona Administrative Code, R9-22-213, annual audiological assessments will be provided to students with disabilities. These billable assessments are separate from the screenings offered to the general student population.

Providers:

These services are covered in accordance with the requirements in 42 CFR § 440.110 (c)(3). Services may be provided by:

Arizona Department of Health Services (ADHS)-Licensed Audiologist.

H.B. Specialized Transportation

Definition:

Specialized transportation services are available to a Medicaid-enrolled beneficiary under the age of 22 for whom the transportation services are medically necessary and documented in an IEP/IFSP.

Services:

Services must be provided on the same date of service that a Medicaid covered service, required by the student's IEP/ IFSP, is received. Transportation must be on a specially adapted school bus to and/or from the location where the Medicaid service is received.

All specialized transportation services provided must be documented in a transportation bus logs.

Providers:

Transportation services include direct services personnel, e.g. bus drivers, aides etc. employed or contracted by the LEA.

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