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XXVIII. Services Provided by Local Health Departments.

- Services that are provided by local health departments shall be reimbursed 100% of the Medicare Physician Fee Schedule rate that is in effect as of January 1, 2014 and updated annually on January 1st. The Fee Schedule is located at http://www.chfs.ky.gov/NR/rdonlyres/AAF5A26B-D321-4D41-9AB0-8A49CF4BE3AB/0/Preventive2012FeeSchedule6WEB.pdf. Any codes on the aforementioned Fee Schedule that is not on the Medicare Fee Schedule will be reimbursed at the Medicaid developed Physician Fee Schedule, last updated on January 1, 2013, or Dental Fee Schedule, last updated on January 1, 2009, both of which are located at http://www.chfs.ky.gov/dms/fee.htm
- 2. Covered services shall be provided by a:
 - a. Physician;
 - b. Dentist;
 - c. Physician Assistant;
 - d. Public Health Dental Hygienist;
 - e. Advanced Registered Nurse Practitioner; or
 - f. Registered Nurse. A "registered nurse" is defined by state law as a person who is licensed in accordance with state law to engage in registered nursing practice. State law defines "registered nursing practice" as the performance of acts requiring substantial specialized knowledge, judgment, and nursing skill based upon the principles of psychological, biological, physical, and social sciences in the application of the nursing process in:
 - (1) The care, counsel, and health teaching of the ill, injured, or infirm;
 - (2) The maintenance of health or prevention of illness of others;
 - (3) The administration of medication and treatment as prescribed by a physician, physician assistant, dentist, or advanced registered nurse practitioner and as further authorized or limited by the Kentucky Board of Nursing, and which are consistent either with American Nurses' Association Standards of Practice or with Standards of Practice established by nationally accepted organizations of registered nurses. Components of medication administration include but are not limited to:
 - (a) Preparing and giving medications in the prescribed dosage, route, and frequency, including dispensing medications;
 - Observing, recording, and reporting desired effects, untoward reactions, and side effects of drug therapy;
 - (c) Intervening when emergency care is required as a result of drug therapy;
 - (d) Recognizing accepted prescribing limits and reporting deviations to the prescribing individual;
 - (e) Recognizing drug incompatibilities and reporting interactions or potential interactions to the prescribing individual; and
 - (f) Instructing an individual regarding medications;

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> The supervision, teaching of, and delegation to other personnel in the performance of (4) activities relating to nursing care; and

- The performance of other nursing acts which are authorized or limited by the (5) Kentucky Board of Nursing, and which are consistent either with American Nurses' Association Standards of Practice or with Standards of Practice established by nationally accepted organizations of registered nurses.
- 3. This methodology applies to the following services:
 - Early and periodic screening, diagnosis, and treatment (EPSDT) services which are described in Attachment 3.1-A, pages 7.1.2 - 7.1.4, 7.1.7, 7.1.8 and Attachment 3.1-B, pages 16-18, 20.1 and 20.2.
 - Pediatric services which include the following: b.
 - Diagnostic and nursing evaluation and management services;
 - Provision of all childhood immunizations as described by Attachment 3.1-A, page 9a (2) included in the Vaccines for Children (VFC) program. Providers will only be reimbursed the administration fee for vaccines provided under the VFC program. Provision of other immunizations to children as recommended by the CDC;
 - (3) Medications and other treatment procedures; and
 - (4) Follow-up nursing care.
 - Prenatal and related services Services provided or arranged in accordance with the c. standards developed for the prenatal program include the following:
 - (1) Pregnancy testing/confirmation;
 - (2) Contact visit counseling;
 - (3) Initial examination;
 - Subsequent monitoring visits; (4)
 - (5) Laboratory tests, as necessary;
 - (6) Individual counseling;
 - Hands voluntary home visitation program; (7)
 - (8) Initial infant assessment;
 - (9) Postpartum visit; and
 - (10)Family planning visit.
 - d. Services for individuals with chronic diseases such as:
 - Diagnostic evaluation and management services; (1)
 - Laboratory tests, as necessary; (2)
 - (3) Medications and other treatment procedures;
 - Individual counseling; and (4)
 - (5) Adult immunizations as recommended by the CDC.

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- e. Chronic disease services which are provided for the following:
 - (1) Diabetes;
 - Heart disease and stroke program;
 - Women's Cancer Screening program;
 - (2) (3) (4) Substance abuse prevention program;
 - (5) Tobacco prevention and cessation;
 - (6) (7)
 - Obesity; Arthritis/osteoarthritis;
 - (8) Depression;
 - (9) Oncology;
 - (10)Hemophilia;
 - (11)Sickle Cell;
 - Organ transplants; and (12)
 - Rare disease. (13)
- f. Family planning services are described in Attachment 3.1-A, page 7.1.9 and Attachment 3.1-B, page 20.3. These services include the following:
 - (1) Complete medical history;
 - Physical examination;
 - (2) (3) Laboratory and clinical test supplies; and
 - (4) Counseling and prescribed birth control methods to best suit the patient's needs.

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