May 24, 2018

Stephen P. Miller, Commissioner
Department for Medicaid Services
275 East Main Street, 6WA
Frankfort, KY 40621-0001

Re: Kentucky State Plan Amendment 18-0002

Dear Mr. Miller:

We have reviewed the proposed Kentucky state plan amendment, KY 18-0002, which was submitted to the Centers for Medicare & Medicaid Services (CMS) on April 20, 2018. This amendment revises the limits for physical, occupational, and speech therapy services to twenty (20) visits per therapy for rehabilitative services and twenty (20) visits for habilitative services.

Based on the information provided, the Medicaid State Plan Amendment KY 18-0002 was approved on May 24, 2018. The effective date of this amendment is July 1, 2018. We are enclosing the approved HCFA-179 and a copy of the new state plan pages.

If you have any additional questions, please contact Melanie Benning at (404) 562-7414 or Melanie.Benning@cms.hhs.gov.

Sincerely,

Davida Kimble
Acting Associate Regional Administrator
Division of Medicaid & Children’s Health Operations

Enclosures
The purpose of this SPA is to change the soft limit of 20 visits combined for rehabilitative and rehabilitative to 20 visits for each for physical, occupational, and speech therapies.
7. D. **Physical therapy, occupational therapy, or speech pathology and audiology services provided by a home health agency or medical rehabilitation facility**

Physical therapy, occupational therapy, speech pathology services, or speech/hearing/language therapy services provided by a home health agency must be ordered by a physician, be prior authorized, and provided in accordance with an approved plan of treatment, which shall be developed by the appropriate qualified therapist and physician.

Occupational therapy, physical therapy and speech pathology services and speech/hearing/language therapy are limited to twenty (20) visits per calendar year, per member, per type of therapy. **There is a twenty (20) visit limit for rehabilitative and a twenty visit limit for habilitative services. Additional visits may be granted based on medical necessity for both the rehabilitative and habilitative 20 visit limit.**

Audiology services are not provided under this component. Physical therapy, occupational therapy, speech pathology, or speech/hearing/language therapy services **provided by a medical rehabilitation facility** are not provided under this component.

**Qualification of Providers**

Providers performing physical, occupational or speech therapy must meet requirements defined in 42 C.F.R. 484.4. A qualified physical therapist assistant, occupational therapist assistant or speech therapy assistant must be under the direct supervision of a qualified physical, occupational or speech therapist.
11. Physical Therapy and Related Services – Other than Therapy Services Provided by Home Health Agencies for Rehabilitative and Habilitative Services

C. Limitations

There is a limit of twenty (20) visits per calendar year combined for inpatient and outpatient physical therapy.

There is a limit of twenty (20) visits per calendar year combined for inpatient and outpatient occupational therapy.

There is a limit of twenty (20) visits per calendar year combined for inpatient and outpatient speech therapy.

There is a twenty (20) visit limit for rehabilitative and a twenty visit limit for habilitative services per type of therapy. If medical necessity requires additional visits, the provider must request additional visits via prior authorization guidelines in effect for recipient. This includes both the rehabilitative and habilitative 20 visit limit, as well as the inpatient and outpatient limits.
AMOUNT, DURATION, AND SCOPE OF MEDICAL AND REMEDIAL CARE AND SERVICES PROVIDED TO THE MEDICALLY NEEDY

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