

State/Territory _____

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

15. a. Intermediate care facility services (other than such services in an institution for mental diseases) for persons determined in accordance with section 1902(a)(31)(A) of the Act, to be in need of such care.

Provided No limitations

With limitations* Not Provided:

b. Including such services in a public institution (or distinct part thereof) for the mentally retarded or persons with related conditions.

Provided No limitations

With limitations* Not Provided:

16. Inpatient psychiatric facility services for individuals under 22 years of age.

Provided No limitations

With limitations* Not Provided:

17. Nurse-midwife services

Provided No limitations

With limitations* Not Provided:

18. Hospice care (in accordance with section 1905(o) of the Act).

2302 Provided No limitations Provided in accordance with section
of the Affordable Care Act

With limitations* Not Provided:

*Description provided on attachment

TN No. _____ Approval Date _____ Effective Date _____
Supercedes _____
TN No. _____

State/Territory: _____

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

- c. Intermediate care facility services.**
// Provided // No limitation // With limitations*
- 15. a. Intermediate care facility services (other than such services in an institution for mental diseases) for persons determined in accordance with section 1902(a)(31)(A) of the Act, to be in need of such care.**
// Provided // No limitation // With limitations*
- b. Including such services in a public institution (or district part thereof) for the mentally retarded or persons with related conditions.**
// Provided // No limitation // With limitations*
- 16. Inpatient psychiatric facility services for individuals under 22 years of age.**
// Provided // No limitation // With limitations*
- 17. Nurse-midwife services.**
// Provided // No limitation // With limitations*
- 18. Hospice care (in accordance with section 1905(o) of the Act).**
// Provided // No limitation // Provided in accordance with section 2302 of the Affordable Care Act
// With limitations*

***Description provided on attachment-**

TN No. _____ **Approval Date** _____ **Effective Date** _____
Supercedes _____
TN No. _____