

State Plan Under Title XIX of the Social Security Act  
State: California

**NON-INSTITUTIONAL SERVICES**

The following is a list of the non-institutional services set forth in Section 1905(a) of the Social Security Act that are reimbursed using the methodology set forth in Attachment 4.19-B, page 1, paragraph C. The numbering of the list below is taken from the list provided in Attachment 3.1-A entitled, Amount, Duration, and Scope of Medical and Remedial Care and Services Provided to the Categorically Needy:

- 2.a. Outpatient hospital services, including durable medical equipment as described in Attachment 4.19-B, pages 3a-3f, other than the supplemental payment reimbursement methodologies for hospital outpatient services that are identified and described in Attachment 4.19-B, pages 46-50; Attachment 4.19-B, pages 51-51c; Attachment 4.19-B, pages 81-83; Attachment 4.19-B, pages 84-86, Supplement 14 Attachment 4.19-B , Supplement 22 Attachment 4.19-, Supplement 24 Attachment 4.19- and Supplement 35 Attachment 4.19- to Attachment 4.19-B
3. Other Laboratory and X-Ray Services
- 4.b. Early and periodic screening, diagnostic and treatment services, which include services for Pediatric Day Health Centers, 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 and for individuals eligible pursuant to Att. 2.2-A, B, if this eligibility option is elected by the State.
  - 4.c.1 Family planning-related services provided under the above State Eligibility Option.
- 5.a. Physicians' services, billed separately, whether furnished in the office, the patient's home, a hospital, a nursing facility, or provided anywhere else necessary.
6. Medical care and any other type of remedial care recognized under State law, furnished by licensed practitioners within the scope of their practice as defined by State law, as referenced in Attachment 3.1-A and 3.1-B.
  - a. Podiatrists' services.

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- c. Chiropractors' services.
- d. Other practitioners' services.
  - Licensed Pharmacist Services are reimbursed at 85 percent of the current fee schedule for physician services. Payment for Licensed Pharmacist Services does not include dispensing services outlined in Supplement 2 to Attachment 4.19-B.
- 7. Home health services.
  - c.2. Durable medical equipment reimbursed as described in Attachment 4.19-B, pages 3a-3f.
- 9. Clinic services, other than those specific clinic services that are identified and described in Supplements 5, 9 and 10 to Attachment 4.19-B.
- 11. Physical therapy and related services.
  - a. Physical therapy.
  - b. Occupational therapy.
  - c. Services for individuals with speech, hearing, and language disorders (provided by or under the supervision of a speech pathologist or audiologist).
- 12. Prosthetic devices; hearing aids; and eyeglasses prescribed by a physician skilled in diseases of the eye or by an optometrist.
  - c. Prosthetic devices and hearing aids.
  - d. Eye glasses.
- 13. Other preventive services, i.e., other than those provided elsewhere in the plan, as referenced in Attachment 3.1-A and 3.1-B. Excludes substance abuse services provided under Drug Medi-Cal.
  - c. Preventive services.
- 17. Nurse-midwife services.

State Plan Under Title XIX of the Social Security Act State:  
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18. Hospice care.
20. Extended services for pregnant women.
  - a. Pregnancy-related and postpartum services for a 60-day period after the pregnancy ends and any remaining days in the month in which the 60<sup>th</sup> day fall.
  - b. Services for any other medical conditions that may complicate pregnancy.
21. Ambulatory prenatal care for pregnant woman furnished during a presumptive eligibility period by an eligible provider.
23. Certified pediatric or family nurse practitioners' services.
24. Any other medical care and any other type of remedial care recognized under State law, specified by the Secretary.
  - a. Transportation.
  - e. Emergency outpatient hospital services.