

**OTHER OUTPATIENT PROVIDERS
SUBJECT TO PROVIDER PAYMENT REDUCTIONS**

The providers and services included in this Supplement are subject to the payment reductions described on pages 3.1-3.4 of Attachment 4.19-B when billed to the Department by the provider who rendered the service. The services are described in Attachment 3.1-A entitled, "Amount Duration and Scope of Medical and Remedial Care and Service Provided to the Categorically Needy".

Provider Type	Allowable Services	Limitations on Attachment 3.1-A	
Assistive Device and Sick Room Supply Dealers (Durable Medical Equipment)	Durable Medical Equipment	7c.2	Page 14
	Medical Supplies	7c.1	Page 13
	Eye Appliances	12d	Page 18
	Hearing Aids	7c.3	Page 14
Audiologists	Audiological Services	2a	Page 2
	Speech Pathology Services	2a	Page 2
	Hearing Aids	7c.3	Page 14
Blood Banks	Blood and Blood Derivatives	2a	Page 2
Certified Nurse Midwife	Nurse Midwife Services	17	Page 22
	Family Planning Services	4c	Page 9d
	Laboratory Services	3	Page 4
	Extended Services for Pregnant Women	20	Page 24
Chiropractors	Chiropractic Services	6c	Page 11
Certified Nurse Practitioner, Certified Nurse Practitioner Family, and Certified Nurse Practitioner Pediatric	Certified Pediatric or Family Nurse Practitioner Services	23	
	Family Planning Services	4c	Page 9d
	Laboratory Services	3	Page 4
	Extended Services for Pregnant Women	20	Page 24
Clinical Laboratories	Laboratory and Pathology Services	3	Page 4
	Radiology/Nuclear Medicine Services	3	Page 4
Group Certified Nurse Practitioner, Group Certified Nurse Practitioner Family, and Group Certified Nurse Practitioner Pediatric	Certified Pediatric or Family Nurse Practitioner Services	23	
	Family Planning Services	4c	Page 9d
	Laboratory Services	3	Page 4
	Extended Services for Pregnant Women	20	Page 24
Fabricating Optical Laboratory/ Prison Industry Authority	Lenses and Frames	12d	See Eyeglasses and Other Eye Appliances Page 18
Dispensing Opticians	Eye Appliances	12d	Page 18

TN No. 08-009B1
Supersedes
TN No. N/A

Approval Date: OCT 27 2011

Effective Date: _____

Hearing Aid Dispensers	Hearing Aids	7c.3	Page 14
	Audiological Services	2a	Page 2
Nurse Anesthetists	Nurse Anesthetists Services	6d.2	Page 11B
	Laboratory Services	3	Page 4
Occupational Therapists	Occupational Therapy	11	Page 16
Orthotists	Orthotic Appliances	12c	Page 18
	Medical Supplies	7c.1	Page 13
	Durable Medical Equipment	7c.2	Page 14
Physical Therapists	Physical Therapy	11	Page 16
Podiatrists	Podiatry	6a	Page 10b
	Laboratory Services	3	Page 4
	Durable Medical Equipment	7c.2	Page 14
	Orthotic Appliances	12c	Page 18
Portable X-Ray	Radiology/Nuclear Medicine Services	3	Page 4
Prosthetists	Prosthetic Appliances	12c	Page 18
	Medical Supplies	7c.1	Page 13
	Durable Medical Equipment	7c.2	Page 14
	Orthotic Appliances	12c	Page 18
Psychologists	Psychology Services	6d.1	Page 11A
Certified Acupuncturist	Acupuncture Services	6d3	Page 12
Genetic Disease Testing	Expanded Alpha Feto-Protein Screening Services	3	See Laboratory Services Page 4
Speech Therapists	Speech Pathology Services	11	Page 16
	Audiological Services	2a	Page 2
Certified Hospice Service	Hospice Services	18	Page 22
Outpatient Heroin Detoxification Center	Outpatient Heroin Detox. Services	13d.3	Page 19
Respiratory Care Practitioners	Respiratory Care Practitioner Services	22	
Health Access Program	Extended Services for Pregnant Women	20	Page 24
	Outpatient Clinic Services	2a, 9	Page(s) 2 and 15
Group Respiratory Care Practitioners	Respiratory Care Practitioner Services	22	
Individual Nurse Providers	EPSDT Supplemental Services	4b	Page 9a
California Children's Services/Genetically Handicapped Person Program (CCS/GHPP) Non-Institutional	CCS/GHPP Services Including Physicians, Clinic and Case Management Services	5a, 9	See Physician and Clinic Services Page(s) 9d and 15
Licensed Midwife (LMW)	Physician and Clinic Services Related to Obstetrics, Gynecology, and Maternal Care Services	5a, 9	See Physician and Clinic Services Page(s) 9d and 15

TN No. 08-009B1
Supersedes
TN No. N/A

Approval Date: OCT 27 2011

Effective Date: _____