STATE PLAN CHART

TYPE OF SERVICE	PROGRAM COVERAGE**	PRIOR AUTHORIZATION OR OTHER REQUIREMENTS*
15. Nursing Facility Level A - Intermediate Care Facility (ICF) (other than such services in an institution for mental disease)	Covered when patient is under the care of a physician who because of mental or physical conditions (above the level of board and care) requires out-of-home protective and supportive care living arrangements with 24-hour supervision and skilled nursing care on an ongoing intermittent basis. The patient must be visited by a physician at least every 60 days.	Prior authorization is required. The patient's physician must recertify patient's need for continued care every 60 days.
15a. ICF Services for Individuals with Intellectual Disabilities (ICF-/IID), ICF- /IID Habilitative (ICF-/IID H), or ICF-/IID-Nursing (ICF-/IID- N)	Covered only for individuals with intellectual disabilities or related conditions who require 24-hour personal care, habiltation, developmental, and supportive health services in a protected setting and who have a recurring but intermittent need for skilled nursing services. ICF/IID nursing services are for those who are medically fragile.	Prior authorization is required. The patient's physician must recertify patient's need for continued care on the same schedule as required for ICFs.
15.a.1. ICF Services for individuals with intellectual disabilities requiring continuous nursing (ICF/IID- CN)	ICF/IID-CN services include: IID-CN, Non-Ventilator Dependent Services (see Supplement 8 to Attachment 3.1- A for program coverage and detail) and IID-CN, Ventilator Dependent Services (see Supplement 8 to Attachment 3.1- A for program coverage and detail)	Prior authorization is required. The patient physician must recertify patient's need for continued care on the same schedule as required for ICFs.
15b. ICF services in a public institution for the mentally retarded or persons with related conditions	Covered only for individuals with intellectual disabilities or related conditions who require 24-hour personal care, habiltation, developmental, and supportive health services in a protected setting and who have a recurring but intermittent need for skilled nursing services. ICF/IID nursing services are for those who are medically fragile.	Prior authorization is required. The patient's physician must recertify patient's need for continued care on the same schedule as required for ICFs.

* Prior authorization is not required for emergency services. **Coverage is limited to medically necessary services.