

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

7. Home Health Services (continued)

Medical supplies, equipment, and appliances are covered if they:

1. Are relevant to the beneficiary's plan of care;
2. Are medically necessary;
3. Primarily serve a medical purpose; and,
4. Are appropriate for use in the non-institutional setting where the beneficiary's normal life activities take place, other than a hospital, nursing facility, ICF/IID, or any setting in which payment is or could be made under Medicaid for inpatient service that include room and board.

The beneficiary's need for medical supplies, equipment, and appliances must be reviewed by the beneficiary's physician annually.

Medical equipment and appliances must be provided through qualified DME providers. Medical supplies may be provided through a qualified home health agency or DME provider.

Electronic Visit Verification (EVV) for Home Health Services

The State will comply with the Electronic Visit Verification System (EVV) requirements for home health services in accordance with the requirements of Section 12006 of the 21st Century Cures Act (the Cures Act).

NEW-08-01-2020-01-01-2024