
METHODS AND STANDARDS OF ESTABLISHING PAYMENT RATES - OTHER
MEDICAL CARE (Continued)

4. c. Family Planning Services

Family planning services are reimbursed in accordance with the methods and standards described within this State Plan for each specific service.

5. Physician's Services

Payment for a service rendered by a physician (M.D. or D.O.) will be made at the lower of the actual charge for the service or the Medicaid rate on file.

6. a. Podiatrist's Services

Payment is made at the lower of the actual charge or the Medicaid rate on file.

b. Optometrist's Services

Payment is made at the lower of the actual charge or the Medicaid rate on file.

c. Chiropractors

Payment is made at the lower of the actual charge or the Medicaid rate on file.

d. Other Practitioners Services

Payment is made at the lower of the actual charge or the Medicaid rate on file.

Nurse practitioner services are reimbursed at the lower of the actual charge or the Medicaid rate on file for a physician providing the same service.

e. High-Tech Nursing Services

Payment is made at the lower of the actual charge or the Medicaid rate on file.

f. Licensed Lay Midwives

Payment is made at the lower of the actual charge or ninety percent of the Medicaid rate for a physician performing the same service.

METHODS AND STANDARDS OF ESTABLISHING PAYMENT RATES - OTHER
MEDICAL CARE (Continued)

7. Home Health Services

Payment for home health care services is made at the lower of the actual charge or the Medicaid reimbursement rate on file.

8. Private Duty Nursing

Payment is made at the lower of the actual charge or the Medicaid rate on file.

9. Clinic Services

- a. Payment for clinic services other than a mental health clinic is made at the lower of the actual charge or the Medicaid rate on file for the service provided.
- b. Payment for mental health clinic services is made at the lower of the actual charge or the Medicaid rate on file.
- c. Payment for comprehensive service clinics is made at an all-inclusive encounter rate with no more than one encounter per day.

10. Dental Services

Payment for dental services is made at the lower of the actual charge for the services or the Medicaid rate on file.

11. Physical Therapy and Related Services

For outpatient hospital services and home health agency services payment is made in accordance with methods and standards as contained in ATTACHMENT 4.19-B, item 2.a. and item 7. Certified Rehabilitation Agencies will be paid an interim payment subject to an annual cost settlement in accordance with Title XVIII principals.

12 a. Prescribed Drugs

- “Multiple Source” drugs are paid at the lowest of the amount charged, the average wholesale price plus a dispensing fee or the upper limit determined by the state (Estimated Acquisition Cost) derived from the upper limit established by HCFA plus a dispensing fee, or the Vermont Maximum Acquisition fee established by the state plus a dispensing fee.
- “Other Drugs” are paid at the lower of the amount charged or the average wholesale price less 11.9 percent plus a dispensing fee.
- “Physician Certified as Brand Necessary” are paid at the lower of the amount charged or the average wholesale price less 11.9 percent plus a dispensing fee.
- Payment for compounded prescriptions is made at the lower of the amount charged at the average wholesale price on file plus a compounding fee plus a dispensing fee.

Effective July 1, 2005, the dispensing fee for all fills and refills will be:

- a. \$4.75 for Vermont pharmacies, and
- b. \$3.65 for out-of-state pharmacies

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