

State of Vermont**Department of Vermont Health Access**

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Agency of Human Services

Please find the enclosed table in response to the request from the Senate Committee on Health & Welfare for information from the Department of Vermont Health Access regarding limits to Medicaid covered services that can be exceeded with prior authorization. Please note that this does not represent the entire list of Medicaid covered services or all services with prior authorizations.



Services	Limits that can be exceeded with Prior Authorization
FQHC Services	5 visits/month; 1 visit/day
Physician Services - Home & Office	5 visits/month
Physician Services - Nursing Facility	1 visit/week
Physician Services - Hospital	1 admission visit per patient per diagnosis per month and up to 1 visit per day for acute care
Pediatric or Family Nurse Practitioners	Same as physician services for home & office, nursing home, and hospital
Chiropractic Services	10 visits/year
Inpatient Hospital	Concurrent authorization on 13th day of care
Substance Abuse Services - Outpatient	10 visits/year
Urine Drug Test	8 tests/months
Rehab: Substance Abuse Residential Detoxification	7 days per acute episode
Rehab: Substance Abuse Residential Post Detox	30 days/year
Rehab: Substance Abuse Non-Residential Professional	90 hours/episode
PT/OT/ST (non-inpatient) under age 21	8 visits/year of one therapy type
PT/OT/ST (non-inpatient) over age 21	30 visits/year of any therapy type combined (there are exceptions for 5 medical conditions)
Home Health PT/OT/ST	4-month limit
Home Health Aide	100 hours/month
Hearing Aids	1 every 3 years
Nursing Facility under age 21	1-year limit
Durable Medical Equipment (DME)	Numerous quantity/PA limits*
Medical Supplies	Numerous quantity/PA limits**
Prosthetic Devices	Numerous PA limits***; 2 Medicaid-approved shoes/year
Face-to-Face Tobacco Cessation Counseling	16 visits/year
Routine Eye Exam	1 exam every 2 years
Diagnostic Eye Exam	1 exam every 2 years
Eyeglasses under age 6	One pair of frames every year (or one new lens per eye per year; one fitting/year)
Eyeglasses age 6 to under age 21	One pair of frames every 2 years (one new lens per eye per 2 years; one fitting per two years)
Applied Behavior Analysis	BCBA: 4 hours/week; BCaBA: 4 hours/week; BT: 15 hours/week
Dental Cleaning	1 visit/6 months
<p>*Coverage for many DME items is limited to one per 5 years for normal wear and tear (ex. walkers, crutches, canes, shower/bath devices, blood glucose monitors, external infusion pumps); compression garments are limited to a max of 3 types of garment per limb per year (365 days).</p>	
<p>**Medical supplies dispensed in 2-month time periods.</p>	
<p>***Prosthetic devices expected to be usable for <u>at least</u> duration recommended by manufacturer. Most prefabricated devices have reasonable useful lifetime of at least 1-3 years. Custom devices expected to have a reasonable useful lifetime of at least 3 years. PA required for excess quantity.</p>	