

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT
MEDICAL ASSISTANCE PROGRAM

State/Territory: _____

SECTION 3 – SERVICES: GENERAL PROVISIONS

3.1 Amount, Duration, and Scope of Services

Medicaid is provided in accordance with the requirements of sections 1902(a), 1902(e), 1903(i), 1905(a), 1905(p), 1905(r), 1905(s), 1906, 1915, 1916, 1920, 1925, 1929, and 1933 of the Act; section 245A(h) of the Immigration and Nationality Act; and 42 CFR Parts 431, 440, 441, 442, and 483.

B. Medically Needy

The following identifies the medical and remedial service covered for medically needy groups, specifies all limitations on the amount, durations and scope of those services.

- Medically Needy not covered.**
- The same amount, duration and scope of services covered for the Medically Needy as the Categorically Needy.**
- The amount, duration and scope of services covered for the Medically Needy are different than the services covered for the Categorically Needy.***

(If the State attests “The amount, duration and scope of services covered for the Medically Needy are different than the services covered for the Categorically Needy” then a text box, with header, appears for the State to supply information.)

Instructions:

The State must provide a description of the service(s) it plans to cover for the Medically Needy. The description will include the specific differences in service(s) between the Categorically Needy group(s), as identified in 3.1(A)(1-32), and the Medically Needy group(s).

Supersedes TN No _____
Revision:

Attachment 3.1-B
Page
OMB No:

TN #
Supersedes TN#

Approval Date_____
Effective Date_____