

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State Nebraska

LIMITATIONS – SERVICES FOR INDIVIDUALS WITH SPEECH, HEARING, AND
LANGUAGE DISORDERS

To be covered by Nebraska Medicaid speech pathology and audiology services must be prescribed by a licensed physician or licensed nurse practitioner and performed by a licensed speech pathologist or audiologist in accordance with 42 CFR §440.110. The speech pathologist or audiologist must be in constant attendance. The services must meet at least one of the following conditions:

1. The services must be an evaluation;
2. The services must be restorative speech pathology with a medically appropriate expectation that the patient's condition will improve significantly within a reasonable period of time; or
3. The services must have been recommended in a Department-approved individual program plan (IPP); or
4. The services must be necessary for an individual with an augmentative communication device.

Nebraska Medicaid covers speech pathology and audiology services when the following conditions are met:

1. The services must be prescribed by a physician or licensed nurse practitioner;
2. The services must be performed by, or under the supervision of, a licensed speech pathologist or audiologist;
3. The services must be restorative; and
4. There must be a medically appropriate expectation that the patient's condition will improve significantly in a reasonable period of time or the services are recommended in a Department-approved individual program plan (IPP).

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Nebraska Medicaid does not cover speech pathology and audiology services when the expected restoration potential is insignificant in relation to the extent and duration of the services required to achieve the potential.

Exception: Nebraska Medicaid covers speech pathology and audiology services for EPSDT eligibles when the following conditions are met:

1. The services must be prescribed by a physician (Exception: Audiology screening services for EPSDT eligibles do not require a physician's prescription);
2. The services must be performed by, or under the supervision of, a licensed speech pathologist or audiologist; and
3. There is a medically appropriate expectation that the patient's condition will improve significantly in a reasonable period of time or the services are recommended in a Department-approved individual program plan (IPP).

For clients age 21 and older, Nebraska Medicaid covers a combined total of 60 therapy sessions per fiscal year (physical therapy, occupational therapy, and speech therapy. All limits may be exceeded based on medical necessity.

LIMITATIONS – HEARING AIDS

To be covered by the Nebraska Medical Assistance Program, hearing aids, hearing aid repairs, hearing aid rental, assistive listening devices, and other hearing aid services must be prescribed by a physician and meet medical necessity criteria.

For clients age 20 and younger, Nebraska Medicaid covers hearing aids when required by medical necessity.

For clients age 21 and older, Nebraska Medicaid covers hearing aids limited to not more than one aid per ear every four years and then only when required by medical necessity.

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Nebraska Medicaid requires a complete audiogram (pure tone, air bone, masking, speech) for a hearing aid or assistive listening device, and a Form DM-5H "Physician's Report on Hearing Loss" to be filled out by the examining physician and either the examiner or the hearing aid dispenser.

Nebraska Medicaid requires that a client be evaluated by an E.N.T. when any of the following criteria is met:

1. The client has a conductive hearing loss;
2. The client has a unilateral hearing loss; or
3. The client is age 16 or younger.

Nebraska Medicaid covers standard in-the-ear, behind the ear, in the ear canal (ITC), completely in the canal (CIC), or body hearing aids. Bone conduction aids will be approved with Ear, Nose and Throat (E.N.T.) Specialist approval.

Nebraska Medicaid covers hearing aid batteries.

Exception: Nebraska Medicaid does not cover hearing aid batteries for residents of a nursing facility except with the initial fitting

Nebraska Medicaid does not cover accessories which are for convenience and not medically necessary.

Telehealth: Speech pathology and audiology services are covered when provided via telehealth technologies subject to the limitations as set forth in state regulations, as amended. Services requiring "hands on" professional care, such as hearing aid fittings, are excluded.

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