

Center for Medicaid, CHIP and Survey & Certification

CMCS Informational Bulletin

DATE: June 16, 2011

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Director

SUBJECT: State Option to Enroll Tuberculosis (TB) Infected Individuals into the Medicaid Program

This Informational Bulletin reminds States about the option that is available to extend Medicaid eligibility to low-income individuals infected with tuberculosis (TB), with Federal financial participation. This option was made available by the Omnibus Budget Reconciliation Act of 1993 (OBRA '93). At the time this provision was enacted, there had been a resurgence of TB across the country, particularly multi-drug resistant TB.

Although U.S. incidence of both drug susceptible and drug resistant TB has declined since the 1990s, TB remains an important public health concern both in the U.S. and globally. In 2010, The Centers for Disease Control and Prevention (CDC) reported 11,181 cases of TB disease in the U.S. The continued concern is that because TB is transmitted through the air, individuals with untreated TB disease can spread it to others. For every person with TB disease, CDC estimates that another 10 need to be evaluated because they may have unknowingly contracted the disease. The good news is that TB is curable with antibiotic treatment. Medicaid coverage can help ensure that individuals, including those who are not otherwise Medicaid-eligible, can receive treatment that can help improve their health and limit the spread of the disease.

The CDC provides Federal funding to State and local health departments for TB diagnosis, case management, contact investigations, surveillance, education, and outreach, but provides very limited support for TB treatment or prescription drugs. In these tough budgetary times, electing Medicaid coverage for TB-related services would provide Federal support for States to help cover the cost of curative and life-saving TB drugs, as well as prevent the further spread of TB into the community.

The CMS and CDC are encouraging States to consider this coverage opportunity and to work with their counterparts in public health agencies to achieve the common goal of eliminating TB.

Background

As noted above, OBRA '93 gave States the option to extend Medicaid eligibility to low-income individuals infected with TB who are not otherwise eligible for Medicaid. These TB-infected individuals must have income and resources which do not exceed the maximum amount of income and resources for disabled individuals in a mandatory group eligible for Medicaid.

For 2011, the income standard is \$1,433 a month for an individual (159 percent of Federal Poverty Level (FPL)) and \$2,107 a month for a couple (234 percent of FPL). The resource standard is \$2,000 for an individual and \$3,000 for a couple.

States that elect this option provide certain outpatient services related to the TB infection, including prescribed drugs; physician, outpatient hospital, rural health center and Federally qualified health center services; laboratory and X-ray services including services to confirm the presence of infection; clinic services; targeted case management services; and services designed to encourage completion of regimens of prescribed drugs, including services to directly observe the intake of prescribed drugs (also known as Directly Observed Therapy (DOT)), although room and board costs are excluded. Case management and DOT, as well as other services, can help promote compliance with treatment regimens. Prevention and early intervention related to TB treatment can avert much more extensive service needs that might emerge if the disease is allowed to progress.

The TB coverage option offers States a means to ensure that TB infected individuals obtain treatment and to reduce the likelihood of transmission. To help States complete a Medicaid State Plan Amendment (SPA) to elect this option, we have attached instructions and a “pre-print” page for use in completing the SPA request. Questions regarding the TB option may be directed to Jerry Zelinger, M.D., Technical Director, Division of Benefits and Coverage at gerald.zelinger@cms.hhs.gov or (410) 786-5929.

We hope you will find this information helpful.

Attachment 1

Completing the State Plan Amendment Preprint Templates

States electing to enroll TB-infected individuals into the Medicaid program under this option should complete the attached templates describing the eligibility and coverage parameters under the Medicaid State plan.

Eligibility

- Complete the Eligibility preprint Attachment 2.2-A, page 21, item 18. The State should simply “check the box” to indicate its intent to elect the option.
- As referenced in item 18 above, also submit Supplement 14 to Attachment 2.6-A, page 1.

Coverage

Note that a State electing to extend eligibility to this TB-infected group must cover the following TB-related services (i.e., prescribed drugs; physician, outpatient hospital, rural health center and Federally qualified health center services; laboratory and X-ray services including services to confirm the presence of infection; and clinic services) to the same extent as these services, which are identified at section 1905(a) of the Social Security Act are otherwise covered/available to other categorically needy individuals under the State plan but only if the service is related to diagnosis, treatment or management of the eligible individual’s TB. The services described at 1902(z)(2)(E-F) (Targeted Case Management and Directly Observed Therapy (DOT)), which are designed to encourage patients to complete their drug regimens, are optional services and can be covered in addition to the services described in 1902(z)(2)(A-D). If the State wants to cover services in E and F they would elect these service(s) in item 19.a and or 19.b of the coverage preprint.

- On the Coverage preprint Attachment 3.1-A, page 8, item 19.a, the State should indicate whether targeted case management for TB-infected individuals will be provided/covered. If provided/covered, the State should also indicate in a narrative attachment to Attachment 3.1-A (i.e., Supplement 1) whether these services will be covered for just those TB-infected individuals who are eligible under the State option to enroll TB-infected individuals into the Medicaid program (1902(a)(10)(A)(ii)(XII)) or will more broadly cover targeted case management services for TB-infected individuals in other categorically needy groups as well. The State should describe the nature of the targeted case management services they propose to cover along with any limitations. (Please note that item 19.a of the preprint refers to targeted case management as a discrete Medicaid service, and is not necessarily limited to individuals with TB.)
- For item 19.b, Attachment 3.1-A, page 8, the State should indicate whether it will cover DOT services as described in 1902(z)(2)(F) for TB-infected individuals and include a narrative that describes the nature of these services. Note that DOT is described more fully in the latest TB Treatment Guidelines (2003) accessible at this website: <http://www.cdc.gov/mmwr/preview/mmwrhtml/rr5211a1.htm>

Attachment 2

Revision:

ATTACHMENT 2.2-A
Page 21

State: _____

Agency	Citation(s)	Groups Covered
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B. Optional Groups Other Than the Medically Needy (Continued)

Children who are born after September 30, 1983 and who have attained 6 years of age but have not attained age 19*

- ___ 7 years of age; or
- ___ 8 years of age.

*A mandatory coverage group under OBRA 1990.

1902(a)(10)(A)(ii)
(X) and 1902(m)
(1) and (3) of
The Act

___ 17. Individuals--

a. Who are 65 years of age or older or are disabled, as determined under section 1614(a)(3) of the Act. Both aged and disabled individuals are covered under this eligibility group.

a. Whose income does not exceed the income level (established at an amount up to 100 percent of the Federal income poverty level) specified in Supplement 1 to ATTACHMENT 2.6-A for a family of the same size; and

b. Whose resources do not exceed the maximum amount allowed under SSI, or under the State's medically needy program as specified in ATTACHMENT 2.6-A.

1902(a)(10)(A)(ii)
(XII) and 1902(z)
of the Act

___ 18. Individuals not described in section 1902(a)(10)(A)(i) of the Act who are infected with tuberculosis whose income and resources do not exceed the maximum amounts described in Supplement 14 to ATTACHMENT 2.6-A.

TN No: _____
Supersedes TN No.
_____Revision:

Approval Date _____

Effective Date

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: _____

INCOME AND RESOURCE REQUIREMENTS FOR
TUBERCULOSIS (TB) INFECTED INDIVIDUALS

For TB infected individuals under section 1902(z)(1) of the act, the income and resource eligibility levels are as follows:

1. Income: The SSI breakeven point for earned income.
2. Resources: The SSI resource standard.

TN No. _____ Approval Date _____ Effective Date _____
Supersedes TN No.

State: _____

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

19. Case management services and Tuberculosis related services

- a. Case management services as defined in, and to the group specified in, Supplement 1 to Attachment 3.1-A (in accordance with section 1905(a)(19) or section 1915(g) of the Act).

___ Provided: ___ With limitations ___ Not provided.

- b. Special tuberculosis (TB) related services under section 1902(z)(2)(F) of the Act.

___ Provided: ___ With limitations* ___ Not provided.