

STATE COMMONWEALTH OF PENNSYLVANIA

INTER AGENCY AGREEMENT
FOR TITLE V AND TITLE XIX OF SOCIAL SECURITY ACT BETWEEN
DEPARTMENT OF HEALTH AND DEPARTMENT OF PUBLIC WELFARE
COMMONWEALTH OF PENNSYLVANIA

This AGREEMENT is entered into between the Department of Health, hereinafter referred to as "Health" and the Department of Public Welfare, hereinafter referred to as "Welfare".

WHEREAS, the State Plan for Medical Assistance provides for a written agreement with other state agencies involved in medical care and services;

WHEREAS, it is the desire and intention of the "Health" and "Welfare" Agencies to utilize fully and coordinate existing or new medical services and resources to provide comprehensive existing or new medical services and resources to provide comprehensive health services for needy persons by 1977.

Now, THEREFORE, the parties hereby mutually agree as follows:

1. Objectives, Services, and Responsibilities of Health
 - a. Continue to provide quality care for recipients of Maternal and Child Health and Crippled Children Services under Title V.
 - b. Coordinate and authorize Title V services for all persons including those eligible for Medical Assistance whether for inpatient or outpatient care.
 - c. Utilize Medical Assistance Title XIX funds to pay reasonable costs for inpatient hospital care rendered to Medical Assistance recipients for Cardiac, Cleft Palate, Hearing Conservation, Orthopedic, Cystic Fibrosis, and Neonatal Surgery Services. Plastic surgery for cosmetic purposes is excluded from Medical Assistance. Title V funds will be used to supplement Title XIX funds if Medical Assistance eligibility and benefits are exhausted.
 - d. Other medical services provided by Health through federal or state funds other than Title XIX:
 - (1) Orthopedic Services – 37 Monthly Clinics and 3 Bi-Annual Clinics.
 - (2) Children's Cardiac Services – 17 Clinics open twice a month.
 - (3) Congenital Heart Services – 17 Clinics open twice a month.
 - (4) Cystic Fibrosis Services – 6 Clinics
 - (5) Cleft Palate Plastic Surgery – 10 approved Clinics
 - (6) Neonatal Surgery – 3 Children's Hospitals

MAY 15 1974

STATE COMMONWEALTH OF PENNSYLVANIA

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- (7) Phenylketonuria Vesting Program
 - (8) Phenylketonuria Medical Supervision Program – 2 Clinics
 - (9) Speech and Hearing – 14 approved Speech and Training Centers
 - (10) School Health Services:
 - (a) Periodic Medical and Dental Examinations
 - (b) Vision and Hearing Screening
 - (c) Height and Weight Measurements
 - (d) Tuberculin Testing
 - (e) Maintenance of Medical and Dental Records of each child
 - (11) Child Health Conference Services for children up to 6 years of age including examinations, immunizations, parent counseling, and guidance.
 - (12) Amputee Services
 - (13) Cerebral Dysfunction – Diagnostic Services for needy children at selected Centers.
 - (14) Venereal Disease Clinics
 - (15) Tuberculosis – Inpatient and Outpatient

e. Health will assure that Medical Assistance recipients have freedom of choice of providers of care for services covered and paid by Title XIX funds, from the approved sources listed above.

f. Health will assure that providers will not discriminate against Medical Assistance recipients or other persons on account of race, color, sex, religious creed, ancestry, age, or national origin and that upon receipt of satisfactory evidence of such discrimination, Welfare will deny participation of such provider in the Medical Assistance Program.

g. Health will set and implement standards for medical facilities operated by that Department.

2. Objectives, Services, and Responsibilities of Welfare

In the relation of Medical Assistance, Title XIX, to Title V and other medical programs of Health, Welfare will be responsible for the following:

a. Determine recipient eligibility for Medical Assistance through the local County Boards of Assistance. Evidence of eligibility will be through the possession of an Identification Card which contains limitations of services if any.

b. Make payments under Title XIX to providers for services not rendered by or not available through facilities, services, or funds of Health and other public and private health agencies.

c. Make available the following medical services to eligible recipients. MAY 15 1974

STATE COMMONWEALTH OF PENNSYLVANIA

- (1) Inpatient hospital care up to 60 days per benefit period in a private general or psychiatric hospital.
- (2) Outpatient Clinic Services
- (3) Laboratory and X-ray
- (4) Skilled Public Nursing Home Care in County No. 63, Restoration Centers and Schools for Retarded.
- (5) Skilled Private Nursing Home Care up to 60 days
- (6) Physician Services in the Hospital, Home or Office.
- (7) Optometric Refractions without glasses.
- (8) Chiropractic Services.
- (9) Pediatric Services for Categorically needy only.
- (10) Visiting Nurse Associations or Home Health Agency Services.
- (11) Post-Hospital Home Care – 180 days after discharge.
- (12) Family Planning Services
- (13) Dental Services and Dentures for Categorically Needy and Oral Surgery for all recipients.
- (14) Remedial Eye Care for School Children and recipients with eye pathology.
- (15) Artificial Limbs and Prosthetics for Categorically Needy only.
- (16) Psychiatric Care
 - (a) Clinic Services
 - (b) Partial Hospitalization
- (17) Prescribed Drugs for Categorically Needy.
- (18) Correction of defects for children eligible for the School Medical Assistance Program.
- (19) Transportation Expenses to obtain medical services.
- (20) Other unduplicated services as added from time to time by Welfare to provide comprehensive health care by eligible persons by 1977.

d. Staff and offices of Welfare will cooperate fully with Health in providing medical care to Medical Assistance recipients and other needy persons. Welfare will refer to Health offices all eligible persons with the kinds of medical conditions covered by the Crippled Children's Program and other Programs available through Health.

e. Welfare will be the standards setting authority and will certify or license medical facilities participating in the Title XIX program.

STATE COMMONWEALTH OF PENNSYLVANIA

3. Joint Responsibilities of Health and Welfare

In order to effectively administer the medical services of both Departments, cooperative arrangements will be established for the following:

- a. Reciprocal Referral Services
- b. Exchange of Reports Service
- c. Coordination of plans for the individual recipient
- d. Joint evaluation of policies affecting the medical services of both Departments.
- e. Joint planning and evaluation of program changes that may be needed to achieve mutual goals.
- f. Joint evaluation of utilization review of Health services rendered to Medical Assistance recipients.

4. Liaison between the two Departments will be continuous. The Director of the Bureau of Special Health Services will be the liaison official for Health. The Director of the Bureau of Medical Assistance will be the liaison official for Welfare. Both Departments will be represented on the Medical Assistance Advisory Council.

STATE COMMONWEALTH OF PENNSYLVANIA

IN WITNESS WHEREOF, the parties have caused this AGREEMENT to be executed by their officials thereunto duly authorized.

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF PUBLIC WELFARE

[Handwritten Signature]
Secretary of Public Welfare

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COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF HEALTH

[Handwritten Signature]
Secretary of Health

APPROVED AS TO FORM AND
MANNER OF EXECUTION

[Handwritten Signature]
Secretary for
Welfare, Legal Counsel

[Handwritten Signature]
Health, Legal Counsel

NOTED:

[Handwritten Signature]
Comptroller of Health and Welfare