Improving Access to Preventive Services for Eligible Adults in Medicaid

**Summary:** The current Medicaid State option to provide other diagnostic, screening, preventive, and rehabilitation services would be expanded to include: (1) any clinical preventive service recommended with a grade of A or B by the U.S. Preventive Services Task Force, (2) with respect to adults, immunizations recommended by the Advisory Committee on Immunization Practices (ACIP) and their administration, and (3) any medical or remedial services recommended by a physician or other licensed practitioner of the healing arts within the scope of their practice under State law, for the maximum reduction of physical or mental disability and restoration of an individual to the best possible functional level. States that elect to cover these additional services outlined by the U.S. Preventive Services Task Force and vaccines (but not any medical or remedial services), and also prohibit cost-sharing for such services and vaccines, would receive an increased Federal medical assistance percentage (FMAP) of one percentage point for these services.

**Next steps:**
- January 1, 2013 – Provision goes into effect.

**Additional information:**

**Long summary:**
**Sec. 4106. Improving access to preventive services for eligible adults in Medicaid.** The current Medicaid State option to provide other diagnostic, screening, preventive, and rehabilitation services would be expanded to include: (1) any clinical preventive service recommended with a grade of A or B by the U.S. Preventive Services Task Force, (2) with respect to adults, immunizations recommended by the Advisory Committee on Immunization Practices (ACIP) and their administration, and (3) any medical or remedial services recommended by a physician or other licensed practitioner of the healing arts within the scope of their practice under State law, for the maximum reduction of physical or mental disability and restoration of an individual to the best possible functional level. States that elect to cover these additional services outlined by the U.S.
Preventive Services Task Force and vaccines (but not any medical or remedial services), and also prohibit cost-sharing for such services and vaccines, and for comprehensive tobacco cessation services for pregnant women (as outlined in sec. 4107) would receive an increased Federal medical assistance percentage (FMAP) of one percentage point for these services. For the Medicaid population newly eligible in 2014, the specified FMAP applies.

**Effective date.** The effective date is January 1, 2013.

**Legislative text:**

SEC. 4106. IMPROVING ACCESS TO PREVENTIVE SERVICES FOR ELIGIBLE ADULTS IN MEDICAID.

(a) **Clarification of inclusion of services.**—Section 1905(a)(13) of the Social Security Act (42 U.S.C. 1396d(a)(13)) is amended to read as follows:

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''(13) other diagnostic, screening, preventive, and rehabilitative services, including—
''(A) any clinical preventive services that are assigned a grade of A or B by the United States Preventive Services Task Force;
''(B) with respect to an adult individual, approved vaccines recommended by the Advisory Committee on Immunization Practices (an advisory committee established by the Secretary, acting through the Director of the Centers for Disease Control and Prevention) and their administration; and
''(C) any medical or remedial services (provided in a facility, a home, or other setting) recommended by a physician or other licensed practitioner of the healing arts within the scope of their practice under State law, for the maximum reduction of physical or mental disability and restoration of an individual to the best possible functional level;''.
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(b) **Increased FMAP.**—Section 1905(b) of the Social Security Act (42 U.S.C. 1396d(b)), as amended by sections 2001(a)(3)(A) and 2004(c)(1), is amended in the first sentence—

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(1) by striking '', and (4)'' and inserting '', (4)''; and
(2) by inserting before the period the following: '', and (5) in the case of a State that provides medical assistance for services and vaccines described in subparagraphs (A) and (B) of subsection (a)(13), and prohibits cost-sharing for such services and vaccines, the Federal medical assistance percentage, as determined under this subsection and subsection (y) (without regard to paragraph (1)(C) of such subsection), shall be increased by 1 percentage point with respect to medical assistance for such services and vaccines and for items and services described in subsection (a)(4)(D)''.
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(c) **Effective date.**—The amendments made under this section shall take effect on January 1, 2013.