CABINET FOR HEALTH AND FAMILY SERVICES
DEPARTMENT FOR MEDICAID SERVICES

Steven L. Beshear
Governor

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Audrey Tayse Haynes
Secretary

Lawrence Kissner
Commissioner

October 1, 2013

Jackie Glaze
Associate Regional Director
Centers for Medicare and Medicaid Services
61 Forsyth Street, SW, Suite 4T20
Atlanta, Georgia 30303-8909

RE: State Plan Amendment 13-022 - Substance Use Services

Dear Ms. Glaze:

Enclosed for your review and approval is Kentucky Title XIX State Plan Amendment No. 13-0022. The purpose of this State Plan Amendment is to establish benefits and reimbursement for substance use services.

The Public Notice will be submitted at a later date, but prior to the effective date of this SPA and prior to approval of this SPA.

Also, we have included the funding, tribal and maintenance of effort (MOE) questions below:

<u>Funding Questions:</u>

The following questions are being asked and should be answered in relation to all payments made to all providers under Attachment 4.19- D of your State plan.

Section 1903(a)(1) provides that Federal matching funds are only available for expenditures made by States for services under the approved State plan. Do providers receive and retain the total Medicaid expenditures claimed by the State (includes normal per diem, supplemental, enhanced payments, other) or is any portion of the payments returned to the State, local governmental entity, or any other intermediary organization? If providers are

required to return any portion of payments, please provide a full description of the repayment process. Include in your response a full description of the methodology for the return of any of the payments, a complete listing of providers that return a portion of their payments, the amount or percentage of payments that are returned and the disposition and use of the funds once they are returned to the State (i.e., general fund, medical services account, etc.)

DMS Response - the provider retains all funds

1. Section 1902(a)(2) provides that the lack of adequate funds from local sources will not result in lowering the amount, duration, scope, or quality of care and services available under the plan. Please describe how the state share of each type of Medicaid payment (normal per diem, supplemental, enhanced, other) is funded. Please describe whether the state share is from appropriations from the legislature to the Medicaid agency, through intergovernmental transfer agreements (IGTs), certified public expenditures (CPEs), provider taxes, or any other mechanism used by the state to provide state share. Note that, if the appropriation is not to the Medicaid agency, the source of the state share would necessarily be derived through either an IGT or CPE. In this case, please identify the agency to which the funds are appropriated. Please provide an estimate of total expenditure and State share amounts for each type of Medicaid payment. If any of the non-federal share is being provided using IGTs or CPEs, please fully describe the matching arrangement including when the state agency receives the transferred amounts from the local government entity transferring the funds. If CPEs are used, please describe the methodology used by the state to verify that the total expenditures being certified are eligible for Federal matching funds in accordance with 42 CFR 433.51(b). For any payment funded by CPEs or IGTs, please provide the following:
   (i) a complete list of the names of entities transferring or certifying funds;
   (ii) the operational nature of the entity (state, county, city, other);
   (iii) the total amounts transferred or certified by each entity;
   (iv) clarify whether the certifying or transferring entity has general taxing authority; and,
   (v) whether the certifying or transferring entity received appropriations (identify level of appropriations).

DMS Response - Not Applicable

2. Section 1902(a)(30) requires that payments for services be consistent with efficiency, economy, and quality of care. Section 1903(a)(1) provides for Federal financial participation to States for expenditures for services under an approved State plan. If supplemental or enhanced payments are made, please provide the total amount for each type of supplemental or enhanced payment made to each provider type.

DMS Response - Not Applicable

3. Please provide a detailed description of the methodology used by the state to estimate the upper payment limit (UPL) for each class of providers (State owned or operated, non-state government owned or operated, and privately owned or operated). Please provide a current (i.e. applicable to the current rate year) UPL demonstration.

   DMS Response - Not Applicable

4. Does any governmental provider receive payments that in the aggregate (normal per diem, supplemental, enhanced, other) exceed their reasonable costs of providing services? If payments exceed the cost of services, do you recoup the excess and return the Federal share of the excess to CMS on the quarterly expenditure report?

   DMS Response - Not Applicable

<u>Tribal questions:</u>

The following are questions related to Section 5006(e) of the Recovery Act (Public Law (P.L.) 111-5) requirement for Tribal Consultation, please provide responses to these questions.

a. Is the submittal of this State Plan likely to have a direct impact on Indians or Indian health programs (Indian Health Service, Tribal 638 Health Programs, Urban Indian Organizations).

b. If the submittal of this State Plan is not likely to have a direct impact on Indians or Indian health programs, please explain why not.

c. If the submittal of this State Plan is likely to have a direct impact on Indians or Indian health programs please respond to the following questions.
   1. How did the State consult with the Federally-recognized tribes and Indian health programs prior to submission of this SPA?

   2. If the tribes and Indian health programs were notified in writing, please provide a copy of the notification, the date it was sent and a list of the entities notified. In addition, please provide information about any concerns expressed by the tribes and/or Indian health providers and the outcome.
   3. If the consultation with the tribes and Indians health providers occurred in a meeting please provide a list of invitees, a list of attendees, the date the meeting took place and information about any concerns expressed by the tribes and/or Indian health providers and the outcome.

DMS Response - Not Applicable

Maintenance of Effort (MOE)

A. Under section 1902(gg) of the Social Security Act (the Act), as amended by the Affordable Care Act, as a condition of receiving any Federal payments under the Medicaid program during the MOE period indicated below, the State shall not have in effect any eligibility standards, methodologies, or procedures in its Medicaid program which are more restrictive than such eligibility provisions as in effect in its Medicaid program on March 10, 2010.

MOE Period

- Begins on: March 10, 2010, and
- Ends on: The date the Secretary of the Federal Department of Health and Human Services determines an Exchange established by a State under the provisions of section 1311 of the Affordable Care Act is fully operational.

Is KY in compliance with the conditions of the MOE provision of section 1902(gg) of the Act for continued funding under the Medicaid program?

DMS Response - Yes

B. Section 1905(y) and (z) of the Act provides for increased federal medical assistance percentages (FMAP) for expenditures made on or after January 1, 2014 for individuals determined eligible under section 1902(a)(10)(A)(i)(VIII) of the Act. Under section 1905(cc) of the Act, the increased FMAP under sections 1905(y) and (z) would not be available for States that require local political subdivisions to contribute amounts toward the non-Federal share of the State's expenditures at a greater percentage than would have been required on December 31, 2009.

Prior to January 1, 2014 States may potentially require contributions by local political subdivisions toward the non-Federal share of the States' expenditures at percentages greater than were required on December 31, 2009. However, because of the provisions of section 1905(cc) of the Act, it is important to determine and document/flag any SPAs/State plans which have such greater percentages prior to the January 1, 2014 date in order to anticipate potential violations and/or appropriate corrective actions by the States and the Federal government.

This SPA would [ ] / would not [X] violate these provisions, if they remained in effect on or after January 1, 2014.

C.Section 1905(aa) of the Act provides for a "disaster-recovery FMAP" increase effective no earlier than January 1, 2011. Under section 1905(cc) of the Act, the increased FMAP under section 1905(aa) of the Act is not available for States that require local political subdivisions to contribute amounts toward the non-Federal share of the State's expenditures at a greater percentage than would have been required on December 31, 2009.

This SPA would [ ] / would not [X] qualify for such increased federal financial participation (FFP) and is not in violation of this requirement.

D. Does KY 13-004 comply with the requirements of section 1902(a)(37) of the Act regarding prompt payment of claims?

DMS Response - Yes

Any questions or correspondence relating to this SPA should be sent to Sharley Hughes.

Please let me know if you have any questions relating to this matter.

Sincerely,

Lawrence Kissner
Commissioner

LK/sjh

Enclosure

DEPARTMENT OF HEALTH AND HUMAN SERVICES
HEALTH CARE FINANCING ADMINISTRATION

FORM APPROVED
OMB NO. 0938-0193

TRANSMITTAL AND NOTICE OF APPROVAL OF STATE PLAN MATERIAL

FOR: HEALTH CARE FINANCING ADMINISTRATION

1. TRANSMITTAL NUMBER: 13-022

2. STATE: Kentucky

3. PROGRAM IDENTIFICATION: TITLE XIX OF THE SOCIAL SECURITY ACT (MEDICAID)

TO: REGIONAL ADMINISTRATOR
HEALTH CARE FINANCING ADMINISTRATION
DEPARTMENT OF HEALTH AND HUMAN SERVICES

4. PROPOSED EFFECTIVE DATE
January 1, 2014

5. TYPE OF PLAN MATERIAL *(Check One)*:

☐ NEW STATE PLAN ☐ AMENDMENT TO BE CONSIDERED AS NEW PLAN X AMENDMENT

COMPLETE BLOCKS 6 THRU 10 IF THIS IS AN AMENDMENT *(Separate Transmittal for each amendment)*

6. FEDERAL STATUTE/REGULATION CITATION:
Affordable Care Act

7. FEDERAL BUDGET IMPACT:
a. FFY 2014 $51.5M
b. FFY 2015 $68.6M

8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT:
Att. 3.1-A, Page 7.6.1 – 7.6.1(a)
Att. 3.1-A, Page 7.6.1(c) – 7.6.1(e)
Att. 3.1-A, Page 7.6.1(f) – 7.6.1(mm)
Att. 3.1-B, Page 31.5 – 31.5(a)
Att. 3.1-B, Page 31.5(c) – 31.5(e)
Att. 3.1-B, Page 31.5(f) – 31.5(mm)
Att. 4.19-B, Page 20.15

9. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT *(If Applicable)*:
Same
Same
Same
New
Same
Same
New
Same

10. SUBJECT OF AMENDMENT:
The purpose of this State Plan Amendment is to revise the State Plan to include substance abuse treatment and expand mental health and to provide reimbursement for such services

11. GOVERNOR'S REVIEW *(Check One)*:
☐ GOVERNOR'S OFFICE REPORTED NO COMMENT
☐ COMMENTS OF GOVERNOR'S OFFICE ENCLOSED
☐ NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL
X OTHER, AS SPECIFIED: Review delegated to Commissioner, Department for Medicaid Services

12. SIGNATURE OF STATE AGENCY OFFICIAL:

13. TYPED NAME: Lawrence Kissner

14. TITLE: Commissioner, Department for Medicaid Services

15. DATE SUBMITTED: 11/08/13

16. RETURN TO:
Department for Medicaid Services
275 East Main Street 6W-A
Frankfort, Kentucky 40621

FOR REGIONAL OFFICE USE ONLY

17. DATE RECEIVED:

18. DATE APPROVED:

PLAN APPROVED – ONE COPY ATTACHED

19. EFFECTIVE DATE OF APPROVED MATERIAL:

20. SIGNATURE OF REGIONAL OFFICIAL:

21. TYPED NAME:

22. TITLE:

23. REMARKS:

13. Other diagnostic, screening, preventive and, rehabilitative services, ie, other than those provided elsewhere in this plan.

Diagnostic, screening, preventive, and rehabilitative services are covered only when provided by mental health centers, primary care centers, and other qualified providers, licensed in accordance with applicable state laws and regulations. Reimbursement for services under this authority will not be made when delivered in a long-term care environment as such services are reimbursable as a routine cost to the institution.

13a. Diagnostic Services

Diagnostic Services are described under other sections of this State Plan.

13. Other diagnostic, screening, preventive and, rehabilitative services, ie. other than those provided elsewhere in this plan.

13b. Screening Services

Screening Services are described under other sections of this State Plan.

13. Other diagnostic, screening, preventive and, rehabilitative services, ie. other than those provided elsewhere in this plan.

13d. Rehabilitative Services

A. Community Mental Health Centers (CMHC)

CMHCs provide a comprehensive range of coordinated mental health rehabilitation services. Reimbursement is available for rehabilitation services provided by community mental health centers subject to the following:

1. Outpatient mental health services. Outpatient mental health services are mental health services that are provided to individuals, families, or groups of persons who are living in the community and require services on an intermittent basis for mental health conditions. The mental health rehabilitation services include diagnostic assessments, individual therapy, group therapy, family therapy, collateral therapy (for individuals under 21), therapeutic rehabilitation services, physical examinations, medication management therapy, and emergency/crisis intervention. Services are provided in accordance with a plan of treatment and may be provided in the recipient's home, work place, mental health facility, personal care home, emergency room or wherever urgently needed.
2. Inpatient mental health services. Inpatient mental health services are professional psychiatric services provided to a person in a local acute care hospital contracting with a community mental health center to provide such professional psychiatric services.

3. Medicaid will reimburse for community mental health rehabilitation services when provided to persons diagnosed with a mental health disorder when provided by qualified mental health professionals. The following limitations and conditions will apply:
   (a) Group therapy is limited to groups of twelve or fewer.
   (b) Individual therapy is limited to a maximum of three (3) hours a day.
   (c) Substance abuse services are only provided to pregnant and postpartum women.
   (d) Unless a diagnosis is made and documented in the medical record within three (3) visits, the service will not be covered.
   (e) An appropriate mental health diagnosis is required for coverage.

4. Professionals qualified to provide mental health rehabilitation services in the CMHCs include:
   (a) A board certified or board eligible psychiatrist.
   (b) A licensed psychologist.
   (c) A psychiatric nurse licensed in the state of Kentucky with one of the following combination of education and experience:
      i. Master of Science in Nursing with a specialty in psychiatric or mental health nursing. No experience required.
      ii. Bachelor of Science in Nursing and 1 year of experience in a mental health setting.

13d. Rehabilitative Services

iii. A graduate of a three-year educational program with 2 years of experience in a mental health setting.

iv. A graduate of a two-year educational program (Associate degree) with 3 years of experience in a mental health setting.

(d). A psychiatric social worker with a master's degree from an accredited school.

(e). A professional equivalent, through education in a mental health field and experience in a mental health setting, qualified to provide mental health services. Education and experience are as follows:

i. Bachelor's degree and 3 years of full-time supervised experience.

ii. Master's degree and 6 months of full-time supervised experience.

ii. Doctoral degree. No experience.

(f) The following professionals may provide services with appropriate supervision:

i. A mental health associate with a minimum of a Bachelors degree in psychology, sociology, social work, or human services under supervision of one of the above professionals;

ii. A certified psychologist or certified psychological practitioner under supervision of a licensed psychologist; and

iii. A physician under the supervision of a psychiatrist.

13. Other diagnostic, screening, preventive and rehabilitative services, i.e., other than those provided elsewhere in the plan

13d. Rehabilitative Services

B. Treatment Services for Substance Use Disorders

Substance use treatment services are available to all Medicaid beneficiaries who meet the medical necessity criteria for these services. Except where indicated, all services apply to both children and adults. Qualified providers may be approved individual practitioners, licensed or certified under state law, CMHCs, FQHCs, Primary Care Centers, RHCs, and other approved behavioral health agencies operating within the scope of their licensures.

Rehabilitative substance use services are medical or remedial services that have been recommended by a physician or other licensed practitioner of the healing arts within the scope of their practice, under Kentucky State Law. The following services, as defined by the Kentucky Department for Medicaid Services, are considered Medicaid rehabilitative/substance use services:

1. Screening, Assessment and/or Evaluation

Eligible recipients will be screened with established protocol/survey instrument to determine if there are indicators of a mental health disorder, substance use disorder or co-occurring substance use and mental health disorder. Screening is to establish the need for an in-depth assessment by a trained professional.

Authorized Practitioners:

Agencies

- Community Mental Health Centers (CMHC)
- Psychiatric Hospital
- Hospital
- Rural Health Clinic (RHC/Federally Qualified Health Center (FQHC/Primary Care Center (PCC)
- Psychiatric Residential Treatment Facility (PRTF)
- Health Departments
- Commission for Children with Special Healthcare Needs

Rendering Individual Providers

- Licensed Psychologist
- Licensed Psychological Associate (LPA) under supervision *
- ARNP
- Licensed Clinical Social Worker
- Certified Social Worker, Master Level (CSW) under supervision *

13. Other diagnostic, screening, preventive and rehabilitative services, i.e., other than those provided elsewhere in the plan (cont.)

13d. Rehabilitative Services

B. Treatment Services for Substance Use Disorders

- Licensed Professional Clinical Counselor
- Licensed Professional Counselor Associate (LPCA) under supervision *
- Licensed Marriage and Family Therapist
- Licensed Marriage and Family Therapist Associate (LMFTA) under supervision *

Rendering Individual Providers (Cont.)

- Medical Doctor
- Physician Assistant *
- Psychiatrist
- Licensed Psychological Practitioner

* Billed through supervisor

Billing Individual Providers

- Licensed Psychologist
- ARNP
- Licensed Clinical Social Worker
- Licensed Professional Clinical Counselor
- Licensed Marriage and Family Therapist
- Medical Doctor
- Licensed Psychological Practitioner

2. Screening, Brief Intervention, and Referral to Treatment (SBIRT)

SBIRT is an evidence-based early intervention approach that targets individuals with non-dependent substance use to provide effective strategies for intervention prior to the need for more extensive or specialized treatment. SBIRT consists of three major components:

Screening – Assessing an individual for risky substance use behaviors using standardized screening tools;

Brief Intervention – Engaging a patient showing risky substance use behaviors in a short conversation, providing feedback and advice; and

Referral to Treatment – Provides a referral to brief therapy or additional treatment (e.g., case management) to patients who screen in need of additional services to address substance use.

13. Other diagnostic, screening, preventive and rehabilitative services, i.e., other than those provided elsewhere in the plan (cont.)

13d. Rehabilitative Services

B. Treatment Services for Substance Use Disorders

Authorized Practitioners:

Agencies

- Community Mental Health Centers (CMHC)
- Psychiatric Hospital
- Hospital
- Rural Health Clinic (RHC/Federally Qualified Health Center (FQHC/Primary Care Center (PCC)
- Psychiatric Residential Treatment Facility (PRTF)
- Health Departments
- Commission for Children with Special Healthcare Needs

Rendering Individual Providers

- Licensed Psychologist
- Licensed Psychological Associate (LPA) under supervision *
- ARNP
- Licensed Clinical Social Worker
- Certified Social Worker, Master Level (CSW) under supervision *
- Licensed Professional Clinical Counselor
- Licensed Professional Counselor Associate (LPCA) under supervision *
- Licensed Marriage and Family Therapist
- Licensed Marriage and Family Therapist Associate (LMFTA) under supervision *
- Medical Doctor
- Physician Assistant *
- Psychiatrist
- Licensed Psychological Practitioner

* Billed through supervisor

Billing Individual Providers

- Licensed Psychologist
- ARNP
- Licensed Clinical Social Worker
- Licensed Professional Clinical Counselor
- Licensed Marriage and Family Therapist
- Medical Doctor
- Licensed Psychological Practitioner

13. Other diagnostic, screening, preventive and rehabilitative services, i.e., other than those provided elsewhere in the plan (cont.)

13d. Rehabilitative Services

B. Treatment Services for Substance Use Disorders

3. Psychological Testing

Psychological testing for individuals with substance use disorders may include psychodiagnostic assessment of personality, psychopathology, emotionality, and/or intellectual abilities. Also includes interpretation and written report of testing results.

Authorized Practitioners:

Agencies

- Community Mental Health Centers (CMHC)
- Psychiatric Hospital
- Hospital
- Rural Health Clinic (RHC/Federally Qualified Health Center (FQHC/Primary Care Center (PCC)
- Psychiatric Residential Treatment Facility (PRTF)
- Health Departments
- Commission for Children with Special Healthcare Needs

Rendering Individual Providers

- Licensed Psychologist
- Licensed Psychological Practitioner
- Licensed Psychological Associate (LPA) under supervision *

* Billed through supervisor

4. Medication Management

Medication management is the monitoring of medication for appropriate use and optimal benefit for the client.

13. Other diagnostic, screening, preventive and rehabilitative services, i.e., other than those provided elsewhere in the plan (cont.)

13d. Rehabilitative Services

B. Treatment Services for Substance Use Disorders

Authorized Practitioners:

Agencies

- Community Mental Health Centers (CMHC)
- Psychiatric Hospital
- Hospital
- Rural Health Clinic (RHC/Federally Qualified Health Center (FQHC/Primary Care Center (PCC)
- Psychiatric Residential Treatment Facility (PRTF)
- Health Departments
- Commission for Children with Special Healthcare Needs

Individual Providers

- ARNP
- Medical Doctor
- Physician Assistant (billed through MD)
- Psychiatrist

5. Medication Assisted Treatment (MAT)

Any opioid addiction treatment that includes a U.S. Food and Drug Administration (FDA) approved medication for the detoxification or maintenance treatment of opioid addiction (e.g., methadone, levo-alpha acetyl methadol [LAAM], buprenorphine, buprenorphinenaloxone, naltrexone) along with counseling and other supports, including urine drug screen. Services may be provided in an Opiod Treatment Program (OTP), a medication unit affiliated with an OTP, or, with the exception of Methadone, a physician's office or another healthcare setting. Treatment includes comprehensive maintenance, medical maintenance, interim maintenance, detoxification, and medically supervised withdrawal. MAT increases the likelihood for cessation of illicit opioid use or of prescription opioid abuse. All MATs must comply with all state laws.

13. Other diagnostic, screening, preventive and rehabilitative services, i.e., other than those provided elsewhere in the plan (cont.)

13d. Rehabilitative Services

B. Treatment Services for Substance Use Disorders

Authorized Practitioners:

Agencies

- Community Mental Health Centers (CMHC)
- Rural Health Clinic (RHC/Federally Qualified Health Center (FQHC/Primary Care Center (PCC)
- Health Departments
- Commission for Children with Special Healthcare Needs

Individual Providers – must obtain specific certification to deliver this service.

- Medical Doctor
- Psychiatrist

6. Crisis Intervention

Crisis Intervention includes clinical intervention (office or clinic) and support services necessary to provide integrated crisis response, crisis stabilization interventions and crisis prevention activities for individuals with substance use disorders, or co-occurring mental health and substance use disorders.

Authorized Practitioners:

Agencies

- Community Mental Health Centers (CMHC)
- Rural Health Clinic (RHC/Federally Qualified Health Center (FQHC/Primary Care Center (PCC)
- Health Departments
- Commission for Children with Special Healthcare Needs

13. Other diagnostic, screening, preventive and rehabilitative services, i.e., other than those provided elsewhere in the plan (cont.)

13d. Rehabilitative Services

B. Treatment Services for Substance Use Disorders

Rendering Individual Providers

- Licensed Psychologist
- Licensed Psychological Associate (LPA) under supervision *
- ARNP
- Licensed Clinical Social Worker
- Certified Social Worker, Master Level (CSW) under supervision *
- Licensed Professional Clinical Counselor
- Licensed Professional Counselor Associate (LPCA) under supervision *
- Licensed Marriage and Family Therapist
- Licensed Marriage and Family Therapist Associate (LMFTA) under supervision *
- Medical Doctor
- Physician Assistant *
- Psychiatrist
- Licensed Psychological Practitioner

* Billed through supervisor

Billing Individual Providers

- Licensed Psychologist
- ARNP
- Licensed Clinical Social Worker
- Licensed Professional Clinical Counselor
- Licensed Marriage and Family Therapist
- Medical Doctor
- Licensed Psychological Practitioner

13. Other diagnostic, screening, preventive and rehabilitative services, i.e., other than those provided elsewhere in the plan (cont.)

13d. Rehabilitative Services

B. Treatment Services for Substance Use Disorders

7. Mobile Crisis

Mobile Crisis services are available at all times, 24 hours a day, seven days a week, 365 days a year. Crisis response in home or community to provide an immediate evaluation, triage and access to acute behavioral health services including treatment and supports to effect symptom reduction, harm reduction or to safely transition persons in acute crises to appropriate crisis stabilization and detoxification supports or services.

Authorized Practitioners:

- Community Mental Health Centers (CMHC)
- Rural Health Clinic (RHC/Federally Qualified Health Center (FQHC/Primary Care Center (PCC)
- Health Departments
- Commission for Children with Special Healthcare Needs

8. Residential Crisis Stabilization

Crisis Stabilization Units are used when individuals in a behavioral health emergency cannot be safely accommodated within the community, are not in need of hospitalization but need overnight care. The purpose is to stabilize the individual, provide treatment for acute withdrawal and re-integrate them back into the community, or other appropriate treatment setting, in a timely fashion. These units provide a non-hospital residential setting and services 24-hours per day, seven days per week, 365 days a year.

Authorized Practitioners:

- Community Mental Health Centers (CMHC)

9. Day Treatment

Day Treatment is a non-residential, intensive treatment program designed for children/youth under the age of 21 who have an emotional disability, neurobiological and/or substance use disorders and who are at high risk of out-of-home placement due to behavioral health issues at school. Intensive coordination/linkage with schools and or other child serving agencies is included.

A day treatment service shall:

1 Consist of an organized, behavioral health program of treatment and rehabilitative services (substance use or co-occurring mental health and substance abuse disorders);

13. Other diagnostic, screening, preventive and rehabilitative services, i.e., other than those provided elsewhere in the plan (cont.)

13d. Rehabilitative Services

B. Treatment Services for Substance Use Disorders

2 Have unified policies and procedures approved by the local education authority and the provider of the day treatment service that shall address program philosophy, admission and discharge criteria, admission and discharge process, staff training and integrated case planning and include the following:

a Individual and group therapies;
b Behavior management and social skill training;
c Independent living skills training for recipients fourteen (14) years of age and older;
d Scheduled activities to promote parent or caregiver involvement and to empower the family to meet the recipient's needs; and
e Services designed to explore and link with community resources before discharge and to assist the recipient and family with transition to community services after discharge.

3 Be provided:

a In collaboration with the education services of the Local Education Authority (LEA) including those provided through IDEA and/or Section 504;
b On school days and during scheduled breaks;
c In coordination with the recipient's individual educational plan, if the recipient has an individual educational plan;
d Under the supervision of a licensed or certified behavioral health practitioner or a behavioral health practitioner under clinical supervision;
e With a linkage agreement with the LEA that specifies the responsibilities of the LEA and the day treatment provider.

Authorized Providers

Agencies

- Community Mental Health Centers (CMHC)

10. Case Management

Basic Case Management: Assist individuals with substance use disorders in accessing needed medical, social, educational and other services and supports. Contact occurs telephonically or in-person and may be beneficial for low-risk individuals and those in maintenance phases of treatment.

13. Other diagnostic, screening, preventive and rehabilitative services, i.e., other than those provided elsewhere in the plan (cont.)

13d. Rehabilitative Services

B. Treatment Services for Substance Use Disorders

Authorized Practitioners:

- Community Mental Health Centers (CMHC)
- Rural Health Clinic (RHC/Federally Qualified Health Center (FQHC/Primary Care Center (PCC)
- Health Departments
- Commission for Children with Special Healthcare Needs

Targeted Case Management

Targeted Case Management is a proactive, responsive, and continuous coordination of behavioral health services for an individual with complex behavioral health needs and/or multi-agency involvement. . Targeted case managers are responsible for identifying and implementing support strategies, accessing community resources, and assisting and advocating for individuals and their families in gaining access to needed medical, social, educational and other services in order to remain in recovery and in the community. Case managers are responsible for facilitating, linking, monitoring, and advocating for recipients and their families to ensure that multiple services are delivered in a coordinated and therapeutic manner. Targeted case management should be assessment-driven, accessible, client-centered and family-focused to meet the goals of treatment outcomes, and be provided in the most cost-effective setting with the needs of the individual and family dictating the types of services provided. Targeted case managers have specialized knowledge of human behavior, as well as thorough knowledge of the philosophy of various therapeutic approaches. They are able to provide accurate assessments, create and coordinate service plans, provide ongoing evaluation and know when and how to intervene to ensure the client's care is coordinated and effective.

Authorized Practitioners:

- Community Mental Health Centers (CMHC)
- Rural Health Clinic (RHC/Federally Qualified Health Center (FQHC/Primary Care Center (PCC)
- Health Departments
- Commission for Children with Special Healthcare Needs

13. Other diagnostic, screening, preventive and rehabilitative services, i.e., other than those provided elsewhere in the plan (cont.)

13d. Rehabilitative Services

B. Treatment Services for Substance Use Disorders

11. Intensive Case Management

Intensive Case Management assists targeted individuals with substance use disorders who have other complicating co-occurring physical and behavioral health disorders and/or multi-agency involvement (pregnant, court involved, physical health conditions).

This service includes identifying and implementing support strategies, accessing community resources and assisting individuals eligible under the plan in gaining access to needed medical, social, educational and other services in order to assist individuals in remaining in recovery and in the community.

Case management should be assessment-driven, accessible, client-centered and family-focused to meet the goals of treatment outcomes, and be provided in the most cost-effective setting with the needs of the individual and family (if applicable) dictating the types of services provided. Case managers have specialized knowledge of human behavior, as well as thorough knowledge of the philosophy of various therapeutic approaches and multiple health systems. They are able to provide accurate assessments, create and coordinate service plans, provide ongoing evaluation and know when and how to intervene to ensure the client's care is coordinated and effective.

Authorized Practitioners:

- Community Mental Health Centers (CMHC)
- Rural Health Clinic (RHC/Federally Qualified Health Center (FQHC/Primary Care Center (PCC)
- Health Departments
- Commission for Children with Special Healthcare Needs

12. Peer Support

Peer Support is social and emotional support that is provided by persons having a behavioral health condition to others sharing a similar behavioral health condition in order to bring about a desired social or personal change. It is an evidence based practice. Peer Support Services are structured and scheduled non-clinical but therapeutic activities with individual clients or groups provided by a self-identified consumer or parent /family member of a child/youth consumer of behavioral health services who has been trained and certified in accordance with state regulations. Services should promote socialization, recovery, self-advocacy, preservation and enhancement of community living skills for the client.

13. Other diagnostic, screening, preventive and rehabilitative services, i.e., other than those provided elsewhere in the plan (cont.)

13d. Rehabilitative Services

B. Treatment Services for Substance Use Disorders

Authorized Practitioners:

- Community Mental Health Centers (CMHC)
- Rural Health Clinic (RHC/Federally Qualified Health Center (FQHC/Primary Care Center (PCC)

13. Brief Treatment

Brief Treatment is a short series of outpatient visits (approximately 2-6) that may be called "brief solution focused therapy" or "brief therapy" with a focus on a specific problem and direct intervention (solution-based rather than problem-oriented).

Authorized Practitioners:

Agencies

- Community Mental Health Centers (CMHC)
- Rural Health Clinic (RHC/Federally Qualified Health Center (FQHC/Primary Care Center (PCC)
- Health Departments
- Commission for Children with Special Healthcare Needs

Rendering Individual Providers

- Licensed Psychologist
- Licensed Psychological Associate (LPA) under supervision *
- ARNP
- Licensed Clinical Social Worker
- Certified Social Worker, Master Level (CSW) under supervision *
- Licensed Professional Clinical Counselor
- Licensed Professional Counselor Associate (LPCA) under supervision *
- Licensed Marriage and Family Therapist
- Licensed Marriage and Family Therapist Associate (LMFTA) under supervision *
- Medical Doctor
- Physician Assistant *
- Psychiatrist
- Licensed Psychological Practitioner

* Billed through supervisor

13. Other diagnostic, screening, preventive and rehabilitative services, i.e., other than those provided elsewhere in the plan (cont.)

13d. Rehabilitative Services

B. Treatment Services for Substance Use Disorders

Billing Individual Providers

- Licensed Psychologist
- ARNP
- Licensed Clinical Social Worker
- Licensed Professional Clinical Counselor
- Licensed Marriage and Family Therapist
- Medical Doctor
- Licensed Psychological Practitioner

14. Parent Training

Parent Training represents a therapeutic approach in which parents are taught fetal and child development and/or how to increase desirable child behavior, reduce children's misbehavior, improve parent-child interactions and attachment, and bring about a healthy family atmosphere. Sessions may be conducted with an individual parent or with groups of parents.

Authorized Practitioners

Agencies

- Community Mental Health Centers (CMHC)
- Psychiatric Hospital
- Hospital
- Rural Health Clinic (RHC/Federally Qualified Health Center (FQHC/Primary Care Center (PCC)
- Psychiatric Residential Treatment Facility (PRTF)
- Health Department
- Commission for Children with Special Healthcare Needs

Rendering Individual Providers

- Licensed Psychologist
- Licensed Psychological Associate (LPA) under supervision *
- ARNP
- Licensed Clinical Social Worker
- Certified Social Worker, Master Level (CSW) under supervision *
- Licensed Professional Clinical Counselor

13. Other diagnostic, screening, preventive and rehabilitative services, i.e., other than those provided elsewhere in the plan (cont.)

13d. Rehabilitative Services

B. Treatment Services for Substance Use Disorders

- Licensed Professional Counselor Associate (LPCA) under supervision *
- Licensed Marriage and Family Therapist
- Licensed Marriage and Family Therapist Associate (LMFTA) under supervision *
- Medical Doctor
- Physician Assistant *
- Psychiatrist
- Licensed Psychological Practitioner

* Billed through supervisor

Billing Individual Providers

- Licensed Psychologist
- ARNP
- Licensed Clinical Social Worker
- Licensed Professional Clinical Counselor
- Licensed Marriage and Family Therapist
- Medical Doctor
- Licensed Psychological Practitioner

15. Wellness Recovery Support/Crisis Planning

Wellness Recovery Support/Crisis Planning services are primarily delivered as a team approach, including education about disorders and recovery, teaching coping, symptom and stress reduction skills, facilitation of crisis and relapse prevention plans, with focus on wellness management techniques. This service is appropriate for any individual who may be at varying points on the continuum of recovery who is facing situations that put them at risk of resuming substance use or impaired wellness.

Authorized Practitioners

Agencies

- Community Mental Health Centers (CMHC)
- Psychiatric Hospital
- Hospital
- Rural Health Clinic (RHC/Federally Qualified Health Center (FQHC/Primary Care Center (PCC)
- Psychiatric Residential Treatment Facility (PRTF)
- Health Department
- Commission for Children with Special Healthcare Needs

13. Other diagnostic, screening, preventive and rehabilitative services, i.e., other than those provided elsewhere in the plan (cont.)

13d. Rehabilitative Services

B. Treatment Services for Substance Use Disorders

Rendering Individual Providers

- Licensed Psychologist
- Licensed Psychological Associate (LPA) under supervision *
- ARNP
- Licensed Clinical Social Worker
- Certified Social Worker, Master Level (CSW) under supervision *
- Licensed Professional Clinical Counselor
- Licensed Professional Counselor Associate (LPCA) under supervision *
- Licensed Marriage and Family Therapist
- Licensed Marriage and Family Therapist Associate (LMFTA) under supervision *
- Medical Doctor
- Physician Assistant *
- Psychiatrist
- Licensed Psychological Practitioner

* Billed through supervisor

Billing Individual Providers

- Licensed Psychologist
- ARNP
- Licensed Clinical Social Worker
- Licensed Professional Clinical Counselor
- Licensed Marriage and Family Therapist
- Medical Doctor
- Licensed Psychological Practitioner

16. Intensive Outpatient Program (IOP)

Intensive Outpatient Program is an alternative to inpatient hospitalization or partial hospitalization for mental health and/or substance use disorders. An intensive outpatient program must offer a multi-modal, multi-disciplinary structured outpatient treatment program that is significantly more intensive than outpatient psychotherapy and medication management.

IOP services must be provided at least three (3) hours per day and at least three (3) days per week.

13. Other diagnostic, screening, preventive and rehabilitative services, i.e., other than those provided elsewhere in the plan (cont.)

13d. Rehabilitative Services

B. Treatment Services for Substance Use Disorders

Programming must include individual therapy, group therapy, and family therapy unless contraindicated, face to face crisis services, and psychoeducation.

All treatment plans must be individualized, focusing on stabilization and transition to community based outpatient treatment and/or supports.

Authorized Practitioners

Agencies

- Community Mental Health Centers (CMHC)
- Rural Health Clinic (RHC/Federally Qualified Health Center (FQHC/Primary Care Center (PCC)
- Health Departments
- Commission for Children with Special Healthcare Needs

17. Individual, Group, Family and Collateral Outpatient Therapies

Outpatient Treatment is a class of services provided to promote health and wellbeing and recovery from behavioral health disorders. Outpatient Treatment varies in the types and intensity of services offered.

Authorized Practitioners

Agencies

- Community Mental Health Centers (CMHC)
- Psychiatric Hospital
- Hospital
- Rural Health Clinic (RHC/Federally Qualified Health Center (FQHC/Primary Care Center (PCC)
- Psychiatric Residential Treatment Facility (PRTF)
- Health Departments
- Commission for Children with Special Healthcare Needs

13. Other diagnostic, screening, preventive and rehabilitative services, i.e., other than those provided elsewhere in the plan (cont.)

13d. Rehabilitative Services

B. Treatment Services for Substance Use Disorders

Rendering Individual Providers

- Licensed Psychologist
- Licensed Psychological Associate (LPA) under supervision *
- ARNP
- Licensed Clinical Social Worker
- Certified Social Worker, Master Level (CSW) under supervision *
- Licensed Professional Clinical Counselor
- Licensed Professional Counselor Associate (LPCA) under supervision *
- Licensed Marriage and Family Therapist
- Licensed Marriage and Family Therapist Associate (LMFTA) under supervision *
- Medical Doctor
- Physician Assistant *
- Psychiatrist
- Licensed Psychological Practitioner

* Billed through supervisor

Billing Individual Providers

- Licensed Psychologist
- ARNP
- Licensed Clinical Social Worker
- Licensed Professional Clinical Counselor
- Licensed Marriage and Family Therapist
- Medical Doctor
- Licensed Psychological Practitioner

18. Partial Hospitalization

Partial Hospitalization is a short-term, intensive treatment program for individuals experiencing significant impairment to daily functioning due to substance use disorders, or co-occurring mental health and substance use disorders. May be provided to adults or youth and may be combined with educational or vocational instruction. Admission criteria is based on an inability to adequately treat the client through outpatient/intensive outpatient services. The program will consist of individual, group, family therapies and medication management.

13. Other diagnostic, screening, preventive and rehabilitative services, i.e., other than those provided elsewhere in the plan (cont.)

13d. Rehabilitative Services

B. Treatment Services for Substance Use Disorders

Authorized Practitioners

Agencies

- Community Mental Health Centers (CMHC)
- Psychiatric Hospital

19. Residential Services for Substance Use Disorders (SUDS)

Residential treatment (24 hour/day) that may be short or long term for the purposes of providing intensive treatment and skills building, in a structured and supportive environment, to assist individuals to obtain abstinence and enter into alcohol/drug addiction recovery. Individuals must have been assessed and meet criteria for approval of residential services, utilizing a nationally recognized assessment tool (e.g., American Society of Addiction Medicine (ASAM) as approved by the KDBHDID.

Residential treatment services shall be based on individual need and may include:

- Psychological testing
- Assessment
- Detoxification
- Treatment Planning
- Independent Living Skills
- Individual Counseling
- Group Counseling
- Family Counseling
- Disease Management and Wellness Education
- Psychiatric Evaluation
- Medication Management
- Orientation to Self-help Groups

Service provision must be in accordance with KY licensure for procedures and standards for persons and agencies operating nonmedical/non-hospital based alcohol and others drug abuse treatment programs and the individually credentialed personnel as outlined in the state law. (908 KAR 1:370)

13. Other diagnostic, screening, preventive and rehabilitative services, i.e., other than those provided elsewhere in the plan (cont.)

13d. Rehabilitative Services

C. Treatment Services for Mental Health Disorders

Mental health services are available to all Medicaid beneficiaries who meet the medical necessity criteria for these services. Except where indicated, all services apply to both children and adults. Qualified providers may be approved individual practitioners, licensed or certified under state law, CMHCs, FQHCs, Primary Care Centers, RHCs and other behavioral health agencies operating within the scope of their licensures.

Rehabilitative mental health services are medical or remedial services that have been recommended by a physician or other licensed practitioner of the healing arts within the scope of their practice, under Kentucky State Law. The following services, as defined by the Kentucky Department for Medicaid Services, are considered Medicaid rehabilitative/mental health services:

1. Screening, Assessment and/or Evaluation

Eligible Medicaid recipients will be screened with established protocol/survey instrument to determine if there are indicators of a mental health disorder, substance use disorder or co-occurring substance use and mental health disorders. Screening is to establish the need for an in-depth assessment by a trained professional.

Authorized Practitioners

Agencies

- Community Mental Health Centers (CMHC)
- Psychiatric Hospital
- Hospital
- Rural Health Clinic (RHC/Federally Qualified Health Center (FQHC/Primary Care Center (PCC)
- Psychiatric Residential Treatment Facility (PRTF)
- Health Departments
- Commission for Children with Special Healthcare Needs

Rendering Individual Providers

- Licensed Psychologist
- Licensed Psychological Associate (LPA) under supervision *
- ARNP
- Licensed Clinical Social Worker

13. Other diagnostic, screening, preventive and rehabilitative services, i.e., other than those provided elsewhere in the plan (cont.)

13d. Rehabilitative Services

C. Treatment Services for Mental Health Disorders

- Certified Social Worker, Master Level (CSW) under supervision *
- Licensed Professional Clinical Counselor
- Licensed Professional Counselor Associate (LPCA) under supervision *
- Licensed Marriage and Family Therapist
- Licensed Marriage and Family Therapist Associate (LMFTA) under supervision *
- Medical Doctor
- Physician Assistant *
- Psychiatrist
- Licensed Psychological Practitioner

* billed through supervisor

Billing Individual Providers

- Licensed Psychologist
- ARNP
- Licensed Clinical Social Worker
- Licensed Professional Clinical Counselor
- Licensed Marriage and Family Therapist
- Medical Doctor
- Licensed Psychological Practitioner

2. Psychological Testing

Psychological testing for individuals with mental health disorders may include psychodiagnostic assessment of personality, psychopathology, emotionality, and/or intellectual abilities. Also includes interpretation and written report of testing results.

13. Other diagnostic, screening, preventive and rehabilitative services, i.e., other than those provided elsewhere in the plan (cont.)

13d. Rehabilitative Services

C. Treatment Services for Mental Health Disorders

Authorized Practitioners

Agencies

- Community Mental Health Centers (CMHC)
- Psychiatric Hospital
- Hospital
- Rural Health Clinic (RHC/Federally Qualified Health Center (FQHC/Primary Care Center (PCC)
- Psychiatric Residential Treatment Facility (PRTF)
- Health Departments
- Commission for Children with Special Healthcare Needs

Individual Providers

- Licensed Psychologist
- Licensed Psychological Practitioner

3. Medication Management

Medication management is the monitoring of medication for appropriate use and optimal benefit for the client.

Authorized Practitioners

Agencies

- Community Mental Health Centers (CMHC)
- Psychiatric Hospital
- Hospital
- Rural Health Clinic (RHC/Federally Qualified Health Center (FQHC/Primary Care Center (PCC)
- Psychiatric Residential Treatment Facility (PRTF)
- Health Departments
- Commission for Children with Special Healthcare Needs

13. Other diagnostic, screening, preventive and rehabilitative services, i.e., other than those provided elsewhere in the plan (cont.)

13d. Rehabilitative Services

C. Treatment Services for Mental Health Disorders

Individual Providers

- ARNP
- Medical Doctor
- Psychiatrist

4. Crisis Intervention

Crisis Intervention includes clinical intervention (office or clinic) and support services necessary to provide integrated crisis response, crisis stabilization interventions and crisis prevention activities for individuals with mental health disorders or co-occurring mental health and substance use disorders.

Authorized Practitioners

Agencies

- Community Mental Health Centers (CMHC)
- Rural Health Clinic (RHC/Federally Qualified Health Center (FQHC/Primary Care Center (PCC)
- Health Departments
- Commission for Children with Special Healthcare Needs

Rendering Individual Providers

- Licensed Psychologist
- Licensed Psychological Associate (LPA) under supervision *
- ARNP
- Licensed Clinical Social Worker
- Certified Social Worker, Master Level (CSW) under supervision *
- Licensed Professional Clinical Counselor
- Licensed Professional Counselor Associate (LPCA) under supervision *
- Licensed Marriage and Family Therapist
- Licensed Marriage and Family Therapist Associate (LMFTA) under supervision *
- Medical Doctor
- Physician Assistant *
- Psychiatrist
- Licensed Psychological Practitioner

* Billed through supervisor

13. Other diagnostic, screening, preventive and rehabilitative services, i.e., other than those provided elsewhere in the plan (cont.)

13d. Rehabilitative Services

C. Treatment Services for Mental Health Disorders

Billing Individual Providers

- Licensed Psychologist
- ARNP
- Licensed Clinical Social Worker
- Licensed Professional Clinical Counselor
- Licensed Marriage and Family Therapist
- Medical Doctor
- Licensed Psychological Practitioner

5. Mobile Crisis

Mobile Crisis services are available at all times, 24 hours a day, seven (7) days a week, 365 days a year. Crisis response in home or community to provide an immediate evaluation, triage and access to acute mental health services including treatment and supports to effect symptom reduction, harm reduction, or to safely transition persons in acute crises to appropriate crisis stabilization and support services.

Authorized Practitioners

Agencies

- Community Mental Health Centers (CMHC)
- Rural Health Clinic (RHC/Federally Qualified Health Center (FQHC/Primary Care Center (PCC)
- Health Departments
- Commission for Children with Special Healthcare Needs

6. Residential Crisis Stabilization

Crisis Stabilization Units are utilized when individuals in a behavioral health emergency cannot be safely accommodated within the community and are not in need of hospitalization but need overnight care. The purpose is to stabilize the individual and re-integrate them back into the community or other appropriate treatment setting, in a timely fashion. These units provide a non-hospital residential setting and services 24-hours per day, 7 days per week, 365 days a year.

Agencies

- Community Mental Health Centers (CMHC)

13. Other diagnostic, screening, preventive and rehabilitative services, i.e., other than those provided elsewhere in the plan (cont.)

13d. Rehabilitative Services

C. Treatment Services for Mental Health Disorders

7. Assertive Community Treatment (ACT)

Assertive Community Treatment is a team-based, multi-disciplinary approach to the provision of treatment, rehabilitation and support. ACT is an evidence-based practice for adults who experience the most serious problems living independently in the community.

Authorized Practitioners

Agencies

- Community Mental Health Centers (CMHC)
- Health Departments
- Commission for Children with Special Healthcare Needs

8. Day Treatment

Day Treatment is a non-residential, intensive treatment program designed for children/youth under the age of 21 who have an emotional disability, neurobiological and/or substance use disorder and who are at high risk of out-of-home placement due to behavioral health issues at school. Intensive coordination/linkage with schools and or other child serving agencies is included.

A day treatment service shall:

1 Consist of an organized, behavioral health program of treatment and rehabilitative services (mental health or co-occurring mental health and substance abuse);
2 Have unified policies and procedures approved by the local education authority and the provider of the day treatment service that shall address program philosophy, admission and discharge criteria, admission and discharge process, staff training and integrated case planning and include the following:
   a Individual and group therapies;
   b Behavior management and social skill training;
   c Independent living skills training for recipients fourteen (14) years of age and older;
   d Scheduled activities to promote parent or caregiver involvement and to empower the family to meet the recipient's needs; and
   e Services designed to explore and link with community resources before discharge and to assist the recipient and family with transition to community services after discharge.

13. Other diagnostic, screening, preventive and rehabilitative services, i.e., other than those provided elsewhere in the plan (cont.)

13d. Rehabilitative Services

C. Treatment Services for Mental Health Disorders

3 Be provided:

a In collaboration with the education services of the Local Education Authority (LEA) including those provided through IDEA and/or Section 504
b On school days and during scheduled breaks;
c In coordination with the recipient's individual educational plan, if the recipient has an individual educational plan;
d Under the supervision of a licensed or certified behavioral health practitioner or a behavioral health practitioner under clinical supervision;
e With a linkage agreement with the LEA authority that specifies the responsibilities of the LEA and the day treatment provider.

Authorized Practitioners

Agencies

- Community Mental Health Centers (CMHC)

9. Case Management

Basic Case Management: Assist individuals with mental health disorders in accessing needed medical, social, educational and other services and supports. Contact occurs telephonically or in-person and may be beneficial for low-risk individuals and those in recovery phase of treatment.

Authorized Practitioners

Agencies

- Community Mental Health Centers (CMHC)
- Rural Health Clinic (RHC/Federally Qualified Health Center (FQHC/Primary Care Center (PCC)
- Local Health Departments
- Commission for Children with Special Healthcare Needs

13. Other diagnostic, screening, preventive and rehabilitative services, i.e., other than those provided elsewhere in the plan (cont.)

13d. Rehabilitative Services

C. Treatment Services for Mental Health Disorders

Targeted Case Management - Targeted Case Management is a proactive, responsive, and continuous coordination of behavioral health services for an individual with complex behavioral health needs and/or multi-agency involvement. Targeted case managers are responsible for identifying and implementing support strategies, accessing community resources, and assisting and advocating for individuals and their families in gaining access to needed medical, social, educational and other services in order to remain in recovery and in the community. Case managers are responsible for facilitating, linking, monitoring, and advocating for recipients and their families to ensure that multiple services are delivered in a coordinated and therapeutic manner. Targeted case management should be assessment-driven, accessible, client-centered and family-focused to meet the goals of treatment outcomes, and be provided in the most cost-effective setting with the needs of the individual and family dictating the types of services provided. Targeted case managers have specialized knowledge of human behavior, as well as thorough knowledge of the philosophy of various therapeutic approaches. They are able to provide accurate assessments, create and coordinate service plans, provide ongoing evaluation and know when and how to intervene to ensure the client's care is coordinated and effective.

Authorized Practitioners

Agencies

- Community Mental Health Centers (CMHC)
- Rural Health Clinic (RHC/Federally Qualified Health Center (FQHC/Primary Care Center (PCC)
- Health Departments
- Commission for Children with Special Healthcare Needs

Intensive Case Management - Intensive Case Management assists targeted individuals with mental health disorders who have other complicating co-occurring physical and behavioral health disorders and/or multi-agency involvement (pregnant, court involved, physical health conditions).

This service includes identifying and implementing support strategies, accessing community resources and assisting individuals eligible under the plan in gaining access to needed medical, social, educational and other services in order to assist individuals in remaining in recovery and in the community.

13. Other diagnostic, screening, preventive and rehabilitative services, i.e., other than those provided elsewhere in the plan (cont.)

13d. Rehabilitative Services

C. Treatment Services for Mental Health Disorders

Case management should be assessment-driven, accessible, client-centered and family-focused to meet the goals of treatment outcomes, and be provided in the most cost-effective setting with the needs of the individual and family (if applicable) dictating the types of services provided. Case managers have specialized knowledge of human behavior, as well as thorough knowledge of the philosophy of various therapeutic approaches and multiple health systems. They are able to provide accurate assessments, create and coordinate service plans, provide ongoing evaluation and know when and how to intervene to ensure the client's care is coordinated and effective.

Authorized Practitioners

Agencies

- Community Mental Health Centers (CMHC)
- Rural Health Clinic (RHC/Federally Qualified Health Center (FQHC/Primary Care Center (PCC)
- Health Departments
- Commission for Children with Special Healthcare Needs

10. Peer Support

Peer Support is social and emotional support that is provided by persons having a behavioral health condition to others sharing a similar behavioral health condition in order to bring about a desired social or personal change. It is an evidence based practice. Peer Support Services are structured and scheduled non-clinical but therapeutic activities with individual clients or groups provided by a self-identified consumer or parent /family member of a child/youth consumer of behavioral health services who has been trained and certified in accordance with state regulations. Services should promote socialization, recovery, self-advocacy, preservation and enhancement of community living skills for the client.

Authorized Practitioners

Agencies

- Community Mental Health Centers (CMHC)
- Rural Health Clinic (RHC/Federally Qualified Health Center (FQHC/Primary Care Center (PCC)

13. Other diagnostic, screening, preventive and rehabilitative services, i.e., other than those provided elsewhere in the plan (cont.)

13d. Rehabilitative Services

C. Treatment Services for Mental Health Disorders

11. Brief Treatment

Brief treatment is a short series of outpatient visits (approximately 2-6) that may be called "brief solution focused therapy" or "brief therapy" with a focus on a specific problem and direct intervention (Solution-based rather than problem-oriented).

Authorized Practitioners

Agencies

- Community Mental Health Centers (CMHC)
- Rural Health Clinic (RHC/Federally Qualified Health Center (FQHC/Primary Care Center (PCC)
- Health Departments
- Commission for Children with Special Healthcare Needs

Rendering Individual Providers

- Licensed Psychologist
- Licensed Psychological Associate (LPA) under supervision *
- ARNP
- Licensed Clinical Social Worker
- Certified Social Worker, Master Level (CSW) under supervision *
- Licensed Professional Clinical Counselor
- Licensed Professional Counselor Associate (LPCA) under supervision *
- Licensed Marriage and Family Therapist
- Licensed Marriage and Family Therapist Associate (LMFTA) under supervision *
- Medical Doctor
- Physician Assistant *
- Psychiatrist
- Licensed Psychological Practitioner

* Billed through supervisor

13. Other diagnostic, screening, preventive and rehabilitative services, i.e., other than those provided elsewhere in the plan (cont.)

13d. Rehabilitative Services

C. Treatment Services for Mental Health Disorders

Billing Individual Providers

- Licensed Psychologist
- ARNP
- Licensed Clinical Social Worker
- Licensed Professional Clinical Counselor
- Licensed Marriage and Family Therapist
- Medical Doctor
- Licensed Psychological Practitioner

12. Parent Training

Parent Training represents a therapeutic approach in which parents are taught how to increase desirable child behavior, reduce children's misbehavior, improve parent-child interactions, and bring about a healthy family atmosphere. Sessions may be conducted with an individual parent or with groups of parents.

Authorized Practitioners

Agencies

- Community Mental Health Centers (CMHC)
- Psychiatric Hospital
- Hospital
- Rural Health Clinic (RHC/Federally Qualified Health Center (FQHC/Primary Care Center (PCC)
- Psychiatric Residential Treatment Facility (PRTF)
- Health Departments
- Commission for Children with Special Healthcare Needs

Rendering Individual Providers

- Licensed Psychologist
- Licensed Psychological Associate (LPA) under supervision *
- ARNP
- Licensed Clinical Social Worker
- Certified Social Worker, Master Level (CSW) under supervision *
- Licensed Professional Clinical Counselor

13. Other diagnostic, screening, preventive and rehabilitative services, i.e., other than those provided elsewhere in the plan (cont.)

13d. Rehabilitative Services

C. Treatment Services for Mental Health Disorders

- Licensed Professional Counselor Associate (LPCA) under supervision *
- Licensed Marriage and Family Therapist
- Licensed Marriage and Family Therapist Associate (LMFTA) under supervision *
- Medical Doctor
- Physician Assistant *
- Psychiatrist
- Licensed Psychological Practitioner

* Billed through supervisor

Billing Individual Providers

- Licensed Psychologist
- ARNP
- Licensed Clinical Social Worker
- Licensed Professional Clinical Counselor
- Licensed Marriage and Family Therapist
- Medical Doctor
- Licensed Psychological Practitioner

13. Wellness Recovery Support/Crisis Planning

Wellness Recovery Support/Crisis Planning services are primarily delivered as a team approach, including education about disorders and recovery, teaching coping, symptom and stress reduction skills, facilitation of crisis and relapse prevention plans, with focus on wellness management techniques. This service is appropriate for any individual who may be at varying points on the continuum of recovery who is facing situations that put them at risk of resuming substance use or impaired wellness.

Wellness Recovery Support/Crisis Planning services are primarily delivered as a team approach, including education about disorders and recovery, teaching coping, symptom and stress reduction skills, facilitation of crisis and relapse prevention plans, with focus on wellness management techniques.

13. Other diagnostic, screening, preventive and rehabilitative services, i.e., other than those provided elsewhere in the plan (cont.)

13d. Rehabilitative Services

C. Treatment Services for Mental Health Disorders

Authorized Practitioners

Agencies

- Community Mental Health Centers (CMHC)
- Psychiatric Hospital
- Hospital
- Rural Health Clinic (RHC/Federally Qualified Health Center (FQHC/Primary Care Center (PCC)
- Psychiatric Residential Treatment Facility (PRTF)
- Health Departments
- Commission for Children with Special Healthcare Needs

Rendering Individual Providers

- Licensed Psychologist
- Licensed Psychological Associate (LPA) under supervision *
- ARNP
- Licensed Clinical Social Worker
- Certified Social Worker, Master Level (CSW) under supervision *
- Licensed Professional Clinical Counselor
- Licensed Professional Counselor Associate (LPCA) under supervision *
- Licensed Marriage and Family Therapist
- Licensed Marriage and Family Therapist Associate (LMFTA) under supervision *
- Medical Doctor
- Physician Assistant *
- Psychiatrist
- Licensed Psychological Practitioner

* Billed through supervisor

13. Other diagnostic, screening, preventive and rehabilitative services, i.e., other than those provided elsewhere in the plan (cont.)

13d. Rehabilitative Services

C. Treatment Services for Mental Health Disorders

Billing Individual Providers

- Licensed Psychologist
- ARNP
- Licensed Clinical Social Worker
- Licensed Professional Clinical Counselor
- Licensed Marriage and Family Therapist
- Medical Doctor
- Licensed Psychological Practitioner

14. **Intensive Outpatient Program (IOP)**

Intensive Outpatient Program is an alternative to inpatient hospitalization or partial hospitalization for behavioral health disorders. An intensive outpatient program must offer a multi-modal, multi-disciplinary structured outpatient treatment program that is significantly more intensive than outpatient psychotherapy and medication management.

IOP services must be provided at least three (3) hours per day and at least 3 days per week.

Programming must include individual therapy, group therapy, and family therapy unless contraindicated, face to face crisis services, and psychoeducation.

All treatment plans must be individualized, focusing on stabilization and transition to community based outpatient treatment and/or supports.

Authorized Practitioners

Agencies

- Community Mental Health Centers (CMHC)
- Psychiatric Hospital
- Rural Health Clinic (RHC/Federally Qualified Health Center (FQHC/Primary Care Center (PCC)
- Health Departments
- Commission for Children with Special Healthcare Needs