focus on the rapid physical stabilization of the consumer and entry into the appropriate level of care or treatment based upon the ASAM (American Society of Addiction Medicine) guidelines placement criteria. These services may be provided with traditional Outpatient, Intensive Outpatient, Day Treatment, or other ambulatory settings.

The severity of the individual's symptoms, level of supports needed, and the physician's authorization for the service will determine the setting, as well as the amount of nursing and physician supervision necessary during the withdrawal process. The individual may or may not require medication, and 24-housing services are not required. However, there is a contingency plan for "after hours" concerns/emergencies. Services are provided only by nursing or other staff under the direction of a physician. Provider qualifications to provide these services and staff competency are ensured by provider compliance with requirements and standards of the national accreditation Joint Commission on Accreditation for Healthcare Organizations (JCAHO), Council on Accreditation for Rehabilitation Facilities (CARF), Council on Accreditation of Services for Families and Children, Inc. (COA), Council on Quality Leadership (CQL), Department of Human Resources (DHR) certification (Compliance, Quality and Information Management System Section), and internal quality assurance programming. When indicated, providers and staff are required to meet all applicable licensure and certification requirements, hold a current license and adhere to scope of practice definitions of licensure boards.

Physician Assessment. A physician assessment is the provision of specialized medical and/or psychiatric services that will result in improved level of functioning or maintaining existing levels of functioning. The Physician Assessment is required at least within the initial 45 days of service with ongoing assessments/services provided as needed. The Physician Assessment provides a more broad assessment of the medical psychiatric treatment needs of the individual. The Physician Assessment is necessary to establish the medical necessity of services and confirm or alter the individual's diagnosis. The information provided by the Diagnostic/Functional Assessment is used by the physicians as an integral part of the assessment process which supports diagnostic and treatment decisions. Information gained during the Physician Assessment(s) is used by the physician to authorize/order rehabilitative services within approved practice guidelines, to provide, direct and supervise rehabilitative services for individuals in need of mental health and/or substance abuse services. A physician completes all physician assessments. The Diagnostic/Functional Assessment is performed by providers qualified to perform this function as determined through national accreditation Joint Commission on Accreditation for Healthcare Organizations (JCAHO), Council on Accreditation for Rehabilitation Facilities (CARF), Council on Accreditation of Services for Families and Children, Inc. (COA), Council on Quality Leadership (CDL), Department of Human Resources (DHR) certification, internal quality assurance processes, licensure and scope of practice requirements standards. When indicated, providers and staff are required to meet all applicable licensure and certification requirements, hold a current license and adhere to scope of practice definitions of licensure boards.

Nursing Assessment and Care. Nursing Assessment and Care is the face-to-face contact with a consumer to monitor, evaluate, assess, and/or carry out physicians' orders regarding the mental and/or psychological problems of a consumer. It includes providing special nursing assessments to observe, monitor and care for the physical, nutritional and psychological problems or crisis manifested in the course of the consumer's treatment, to assess consumers on medication to determine the need to continue medication and/or for a physician referral, to consult with the consumer's family and significant other about medical and nutritional issues, medication education of the consumer and family, and training for self administration of medication. Medication Administration is the giving or administering of oral or injectable medication. Medication administration includes the assessment of the consumer's physical and behavioral status with a specific focus on the response of the individual's systems to be targeted by the medication. The nurse monitors the individual for side effects related to the specific medication. The nurse's observations are reported to the physician and assist in overall medication management. Medication administration must have a physician's order and be administered by licensed medical personnel under the supervision of a physician. The service may include teaching the individual and/or family member or significant other about the medication(s), its expected actions, importance of compliance, and possible side effects and need to report. Provider qualifications to provide these services and staff competency are ensured by provider compliance with requirements and standards of the national accreditation Joint Commission on Accreditation for Healthcare Organizations (JCAHO), Council on Accreditation for Rehabilitation Facilities (CARF), Council on Accreditation of Services for Families and Children, Inc. (COA), Council on Quality Leadership (CQL), Department of Human Resources (DHR) certification (Compliance, Quality and Information Management System Section), and internal quality assurance programming. When indicated, providers and staff are required to meet all applicable licensure and certification requirements, hold a current license and adhere to scope of practice definitions of licensure boards.

Intensive Day Treatment. Intensive Day Treatment provides for the stabilization of psychiatric impairments with time limited, intensive, clinical service by a multi-disciplinary team in a clinical setting. This outpatient services includes medication administration. Candidates for these services have adequate natural/community support systems and do not have behavioral health issues, which are imminently dangerous. The level of care for each consumer should include services available at least 20 hours per week. The maximum allowed service in a day is 5 hours and does not include any residential, room or board supports. Weekend services may be provided to meet the needs of consumers requiring crisis stabilization. Services include physician and nursing services available on a daily basis. Mandatory services include medical services, family contact, group counseling, nursing services, medical management and continuing care planning. Available services include family counseling as related to the specific needs/supports of the consumer, individual counseling, and education/training as it pertains to the alleviation of identified behavioral health problems. Provider

qualifications to provide these services and staff competency are ensured by provider compliance with requirements and standards of the national accreditation (Joint Commission on Accreditation for Healthcare Organizations (JCAHO), Council on Accreditation for Rehabilitation Facilities (CARF), Council on Accreditation of Services for Family and Children, Inc. (COA), Council on Quality Leadership (CQL), Department of Human Resources (DHR) certification (Compliance, Quality and Information Management System Section), and internal quality assurance programming. When indicated, providers and staff are required to meet all applicable licensure and certification requirements, hold a current license and adhere to scope of practice definitions of licensure boards.

Substance Abuse Intensive Outpatient Services. This service is a time-limited treatment service for people who require structure and support to achieve and sustain recovery. The following types of services may be included in the intensive outpatient program: didactic presentations on addiction and recovery; individual and group counseling; family counseling; regular urine drug screening; and community and social support system strategies. Family counseling as provided within these services must be consistent with the requirements outlined in Family Outpatient services. Provider qualifications to provide these services and staff competency are ensured by provider compliance with requirements and standards of the national accreditation (Joint Commission on Accreditation for Healthcare Organizations (JCAHO), Council on Accreditation for Rehabilitation Facilities (CARF), Council on Accreditation of Services for Family and Children, Inc. (COA), Council on Quality Leadership (CQL), Department of Human Resources (DHR) certification (Compliance, Quality and Information Management System Section), and internal quality assurance programming. When indicated, providers and staff are required to meet all applicable licensure and certification requirements, hold a current license and adhere to scope of practice definitions of licensure boards.

Day Treatment. This service is an intensive, structured clinical program for individuals who require integrated therapies and other supportive mental health services and who have restricted functioning on a day-to-day basis. The integrated therapies or coordinated supportive mental health services is a highly structured continuing stabilization program that is designed to provide a bridge between acute setting services and less intense rehabilitative services. Day treatment assists individuals in beginning the recovery and rehabilitation process. Diagnostic, medical, psychiatric, psychological and adjunctive treatment approaches are used within a structured setting. These services most often occur in group settings. Provider qualifications to provide these services and staff competency are ensured by provider compliance with requirements and standards of the national accreditation Joint Commission on Accreditation for Healthcare Organizations (JCAHO), Council on Accreditation for Rehabilitation Facilities (CARF), Council on Accreditation of Services for Family and Children, Inc. (COA), Council on Quality Leadership (CQL), Department of Human Resources (DHR) certification (Compliance, Quality and Information Management System Section), and internal quality assurance

programming. When indicated, providers and staff are required to meet all applicable licensure and certification requirements, hold a current license and adhere to scope of practice definitions of licensure boards.

Day Support. This service focuses on training designed to assist the consumer in the acquisition, retention or improvement of self-help, socialization and adaptive skills which takes place in a structured environment with adequate staff support. These services provide less costly step-down service as an alternative to or following Day Treatment Services. Individuals appropriate for these services do not meet the admission criteria for day treatment. Providing a lower level of intensity this structured program assists consumers to attain his/her maximum functioning level and is coordinated with other services on the Individual Service Plan (ISP). Day support services may be used to reinforce skills or knowledge acquired in more intensive level services. Services may be offered on an individual or group setting. Provider qualifications to provide these services and staff competency are ensured by provider compliance with requirements and standards of the national accreditation Joint Commission on Accreditation for Healthcare Organizations (JCAHO), Council on Accreditation for Rehabilitation Facilities (CARF), Council on Accreditation of Services for Family and Children, Inc. (COA), Council on Quality Leadership (CQL), Department of Human Resources (DHR) certification (Compliance, Quality and Information Management System Section), and internal quality assurance programming. When indicated, providers and staff are required to meet all applicable licensure and certification requirements, hold a current license and adhere to scope of practice definitions of licensure boards.

Peer Support. This service provides structured, scheduled activities that promote socialization, recovery, self-advocacy, development of natural supports, and maintenance of community living skills, under the direct supervision of a Mental Health Professional (MHP). Consumers actively participate in decision-making and program operation. Services are directed toward achievement of specific goals defined by the individual and specified in the Individual Service Plan (ISP), authorized by a physician, and delivered in a facility maintained by the enrolled provider with adequate clinical staff support. These services are ordered by the Physician as "medically necessary". The services are provided under the direct supervision of a Mental Health Professional. The interpersonal interactions and activities within the program are directed, supervised, guided and facilitated by the Mental Health Professional (MHP) in such a way as to create the therapeutic community or milieu effect required to achieve individual treatment goals within a controlled environment. This concept is similar to the manner in which the staff leader in group therapy sessions or therapeutic community setting utilize the interactions of the group members to achieve the desired individual therapy goals. Provider qualifications to provide these services and staff competency are ensured by provider compliance with requirements and standards of the national accreditation (Joint Commission on Accreditation for Healthcare Organizations (JCAHO). CARF – formerly an acronym for Council on Accreditation for Rehabilitation Facilities, Council on Accreditation of Services for Family and Children, Inc. (COA), or Council on Quality

Leadership (CQL), Department of Human Resources (DHR) certification (Compliance, Quality and Information Management System Section), and internal quality assurance programming. When indicated, providers and staff are required to meet all applicable licensure and certification requirements, hold a current license and adhere to scope of practice definitions of licensure boards.

EPSDT Services

The following services will be available, in addition to those noted above, to EPSDT eligible children.

Occupational Therapy. Occupational Therapy is a therapeutic activity to provide training in the development or use of physical and mental capacities, and the development or maintenance of skills for self-care and daily living skills. Occupational Therapy is available to EPSDT eligible consumers who will derive on added coordination and continuity of care benefit from the opportunity to receive all eligible therapies at one site. Provider qualifications coincide with 42 CFR 440.110.

Physical Therapy. Physical Therapy is the application of specialized treatments such as natural forces, heat, exercise and certain mechanical devices necessary to further develop or maintain essential basic skills. Physical Therapy is available to EPSDT eligible consumers who will derive on added coordination and continuity of care benefit from the opportunity to receive all eligible therapies at one site. Provider qualifications coincide with 42 CFR 440.110.

Speech and Hearing Therapies. Speech and Hearing Therapies are the provision of treatments designed to improve speech and hearing defects that interfere with the consumer's overall ability to function. Speech and hearing therapies are available to EPSDT eligible consumers who will derive on added coordination and continuity of care benefit from the opportunity to receive all eligible therapies at one site. Provider qualifications coincide with 42 CFR 440.110.

Activity Therapy. Activity Therapy are interventions that are goal-oriented and specifically designed to restore or maintain the functional abilities of individuals in need of mental health and substance abuse/alcohol abuse services who have cognitive, emotional, social or physical impairments. Modalities used may include therapeutic recreational activities, which are determined to be medically necessary by the physician, and are matched with the individual consumer's needs, strengths and preferences. The benefits which children and adolescents in need of mental health and substance abuse/alcohol abuse services might receive from this service may include: improvement in interpersonal relationships and social skills, heightened attention and concentration, improved ability to use leisure time, improved ability to identify and articulate feelings, reduction of anxiety and tension, distraction from negative symptoms of behavioral health problems, decreased aggressive behaviors, and strengthening of social/natural

community supports. Provider qualifications to provide these services and staff competency are ensured by provider compliance with requirements and standards of the national accreditation (Joint Commission on Accreditation for Healthcare Organizations (JCAHO). CARF – formerly an acronym for Council on Accreditation for Rehabilitation Facilities, Council on Accreditation of Services for Family and Children, Inc. (COA), or Council on Quality Leadership (CQL), Department of Human Resources certification (Compliance, Quality and Information Management System Section), and internal quality assurance programming. When indicated, providers and staff are required to meet all applicable licensure and certification requirements, hold a current license and adhere to scope of practice definitions of licensure boards.

Day Treatment for Children and Adolescents with Severe Emotional Disturbances. This is a specialized after-school, weekend or summer set of services including counseling (individual, group, family), consumer education, skill and socialization training which focuses on the amelioration of functional and behavioral deficits. Child and Adolescent Day Services are available to EPSDT eligible recipients. Medical necessity criteria for these services reflect special treatment approaches designed for EPSDT eligible consumers requiring mental health and substance abuse/alcohol abuse treatment. Family counseling focuses on the needs and problems of the consumer and how to assist the consumer in the resolution of the consumer's identified problems. Goals of the service are directed toward the amelioration of functional and behavioral deficits (i.e. stabilization of psychiatric concerns) which the child or adolescent may be experiencing as a result of a mental health and/or substance abuse/alcohol abuse problem. Skill building may involve teaching a child with aggressive behavior how to behave more assertively and to listen more actively. Treatment is time-limited, intensive, and provided by an inter-disciplinary team. Provider qualifications to provide these services and staff competency are ensured by provider compliance with requirements and standards of the national accreditation (Joint Commission on Accreditation for Healthcare Organizations (JCAHO), Council on Accreditation for Rehabilitation Facilities (CARF), Council on Accreditation of Services for Family and Children, Inc. (COA), Council on Quality Leadership (CQL), Department of Human Resources (DHR) certification (Compliance, Quality and Information Management System Section), and internal quality assurance programming. When indicated, providers and staff are required to meet all applicable licensure and certification requirements, hold a current license and adhere to scope of practice definitions of licensure boards.

Child and Adolescent Day Supports. This service provides support to children and adolescents whose primary goals are the development, maintenance, and enhancement of the level of functioning. These services are offered as a "step-down" or less intensive Child and Adolescent Day Treatment Services. The program goals are to achieve further stabilization and amelioration of functional and behavioral deficits, which prevent achievement of age appropriate functioning and community living. Parent education and training is intended to assist and support the EPSDT eligible consumer's Individual Service Plan (ISP) goals. Parent education and training may include instruction on how

to appropriately manage and respond to the consumer's behavioral symptoms or how to monitor and report the consumer's response to medication(s) and understand the possible side effects. Provider qualifications to provide these services and staff competency are ensured by provider compliance with requirements and standards of the national accreditation (Joint Commission on Accreditation for Healthcare Organizations (JCAHO). Council on Accreditation for Rehabilitation Facilities (CARF). Council on Accreditation of Services for Family and Children, Inc. (COA), Council on Quality Leadership (CQL), Department of Human Resources (DHR) certification (Compliance, Quality and Information Management System Section), and internal quality assurance programming. When indicated, providers and staff are required to meet all applicable licensure and certification requirements, hold a current license and adhere to scope of practice definitions of licensure boards.

Substance Abuse Adolescent Day Treatment. This service involves a structured day or evening treatment program providing essential education and treatment components while allowing the consumers to apply their newly acquired skills within "real world" environments. Substance Abuse Adolescent Day Treatment is available to EPSDT eligible recipients. Medical necessity criteria for these services reflect special treatment approaches designed for EPSDT eligible consumers requiring mental health and substance abuse/alcohol abuse treatment. Skill building, consumer education and socialization training may be considered as treatment measures. Treatment is time-limited, intensive and provided by an interdisciplinary team. Provider qualifications to provide these services and staff competency are ensured by provider compliance with requirements and standards of the national accreditation (Joint Commission on Accreditation for Healthcare Organizations (JCAHO), Council on Accreditation for Rehabilitation Facilities (CARF), Council on Accreditation of Services for Family and Children, Inc. (COA), Council on Quality Leadership (CQL), Department of Human Resources (DHR) certification (Compliance, Quality and Information Management System Section), and internal quality assurance programming. When indicated, providers and staff are required to meet all applicable licensure and certification requirements, hold a current license and adhere to scope of practice definitions of licensure boards.

Limitations

The covered services are available only to Medicaid eligible recipients with a written service plan, which contains medically necessary services recommended by a physician.

All services to adults must be delivered in the clinic setting, with the exception of Out of Clinic Crisis Management Services and Peer Support.

Prior approval is required for services beyond Initial Authorization limits.

Prior Approval

Each service has an initial authorization for level of benefit. Services which exceed the limitations of the initial authorization listed below, must be approved for re-authorization prior to service delivery. A unit of service is defined as 15 minutes unless otherwise specified.

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

15.a. Intermediate care facility services (other than such services in an institution for mental diseases) for persons determined, in accordance with section 1902(a)(31)(A) of the Act, to be in need of such care.

/X/ Provided: / / No limitations /X/ With limitations*

/ / Not provided.

b. Including such services in a public instititution (or distinct part thereof) for the mentally retarded or persons with related conditions.

/X/ Provided: / / No limitations /X/ With limitations*

/ / Not provided.

16. Inpatient psychiatric facility services for individuals under 22 years of age.

/ / Provided: / / No limitations / / With limitations*

/X/ Not provided.

17. Nurse-midwife services.

/X/ Provided: / / No limitations /X/ With limitations*

/ / Not provided.

18. Hospice care (in accordance with section 1905(o) of the Act).

/X/ Provided: / / No limitations /X/ With limitations*

/ / Not provided.

*Description provided on attachment.

15.a. INTERMEDIATE CARE FACILITY SERVICES (ICF)

Prior to admission to an ICF, evaluation is provided for each patient. Independent professional review is performed periodically to determine:

the need for continued placement at this level of care;

the adequacy, appropriateness and quality of services received;

the feasibility of meeting the recipient's health and rehabilitative needs through alternative arrangements.

15.b. INTERMEDIATE CARE FACILITY SERVICES FOR THE MENTALLY RETARDED (ICF-MR)

Prior to admission to an ICF-MR, evaluation is provided for each patient. Independent professional review is performed periodically to determine:

the need for continued placement at this level of care;

the adequacy, appropriateness and quality of services received;

the feasibility of meeting the recipient's health and rehabilitative needs through alternative arrangements;

whether the recipient is receiving active treatment for mental retardation or related mental conditions.