

STATE OF LOUISIANA

AMOUNT, DURATION, AND SCOPE OF MEDICAL AND REMEDIAL CARE AND SERVICES PROVIDED

LIMITATION OF THE AMOUNT, DURATION AND SCOPE OF CERTAIN ITEMS OF PROVIDED
MEDICAL AND REMEDIAL CARE AND SERVICES ARE DESCRIBED AS FOLLOWS:

CITATION MEDICAL AND REMEDIAL
42 CFR CARE AND SERVICES
440.130 Item 13.d.

Other Diagnostic, Screening, Preventive, and
Rehabilitative Services, i.e., other than
those Provided Elsewhere in this Plan

I. Rehabilitation Clinic Services

- A. Upon PRIOR APPROVAL by the Prior Authorization Unit, Bureau of Health Services Financing, payment for rehabilitation services provided by Title XVIII certified public or private rehabilitation centers, or hospital outpatient rehabilitation units will be made in accordance with an established payment schedule. Rehabilitation Services include occupational therapy, physical therapy and speech, language and hearing therapy. Rehabilitation Services covered under Medicaid do not include the following:

- (1) Vocational or developmental evaluations, or
- (2) Voice evaluations or therapy. This includes instructions in use and hygiene of the voice as treatment for vocal cord nodules or hoarseness and related conditions, unless it is serious enough to interfere with normal speech.

TN#

89-28

Approval Date DEC - 2 1990

Effective Date

JUL - 1 1989

Supersedes

TN#

86-21

STATE <u>Louisiana</u>	A
DATE REC'D <u>SEP 29 1989</u>	
DATE APPV'D <u>DEC - 2 1990</u>	
DATE EFF <u>JUL - 1 1989</u>	
HCFA 179 <u>89-28</u>	

STATE OF LOUISIANA

AMOUNT, DURATION, AND SCOPE OF MEDICAL AND REMEDIAL CARE AND SERVICES PROVIDED

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CITATION MEDICAL AND REMEDIAL
42 CFR CARE AND SERVICES
440.130 Item 13.d. (Con't)

B. Approval will be based on specific criteria and conditions related to the medical recommendations for rehabilitation services and the plan of service proposed by the rehabilitation services provider. Plans for meeting the cost, if any, of transportation and boarding arrangements for the individual to secure the services must be part to the plan.

The Prior Authorization Unit shall recommend approval of rehabilitation plans for individuals who are likely to realize substantial gains in self-care, self-help or rehabilitation. Self-care and self-help are defined as the ability of the individual to take care of personal needs, e.g., eating, dressing, ability to walk, talk, or use devices unassisted. Rehabilitation is defined as a program to prevent further impairment of physical deformity and malfunction, and enable the individual to significantly increase his ability to require less care by others. Less care by others is defined as the ability of the client to use a minimum of assistance to take care of personal needs. Optimum utilization of the device will be an additional criteria when prosthesis training is involved. BHSF does not have a program for long term therapy or maintenance therapy.

TN# 89-28 Approval Date DEC - 2 1990 Effective Date JUL - 1 1989
Supersedes
TN# 86-21

STATE <u>Louisiana</u>	A
DATE REC'D <u>SEP 29 1989</u>	
DATE APPV'D <u>DEC - 2 1990</u>	
DATE EFF <u>JUL - 1 1989</u>	
HCFA 179 <u>89-28</u>	

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT
MEDICAL ASSISTANCE PROGRAM

Attachment 3.1-A
Item 13.d, Page 3

STATE OF LOUISIANA

AMOUNT DURATION AND SCOPE OF MEDICAL AND REMEDIAL CARE AND SERVICES
PROVIDED

LIMITATIONS ON THE AMOUNT, DURATION AND SCOPE OF CERTAIN ITEMS OF PROVIDED
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CITATION **Medical and Remedial**
42 CFR **Care and Services**
440.130 **Item 13.d**

Other resources such as Handicapped Children's Services, school therapy programs, and community resources should be considered.

C. The following conditions shall be met:

- 1) Referral for services has been made by a licensed physician and the Prior Authorization Unit, Bureau of Health Services Financing (BHSF) has a copy of his recommendations to the provider. The recommendation must include the diagnosis; date of accident or onset of illness, the address of the referring physician his specialty, if known, and the date of the referral.
- 2) The rehabilitation services provider has evaluated the client and a copy of the proposed plan of services includes Form RC-1 and the physician's statement of referral has been sent to State Office. BHSF will not pay for vocational or development evaluations or voice evaluations or voice therapy as specified in Item 13.d., I., A., above.
- 3) The Bureau of Health Services Financing, with the advice of the Prior Authorization Unit has approved the Plan.
- 4) The rehabilitation services provider has agreed to provide progress reports to State Office as recommended by the Prior Authorization Unit when the plan is approved.

[Exclusions]:

Effective for dates of service on or after February 1, 2013, The Department terminates the coverage of all rehabilitation clinic services to recipients 21 years of age and older.

A	
STATE	LOUISIANA
DATE REC'D	2-14-13
DATE APP'D	7-9-13
DATE EFF	2-1-13
ISS#	13-08

TN# 13-08 Approval Date 7-9-13 Effective Date

2-1-13

Supersedes

TN# 89-28

SUPERSEDES: TN- 89-28

STATE OF LOUISIANA

AMOUNT DURATION AND SCOPE OF MEDICAL AND REMEDIAL CARE AND SERVICES
PROVIDED

LIMITATIONS ON THE AMOUNT, DURATION AND SCOPE OF CERTAIN ITEMS OF PROVIDED
MEDICAL AND REMEDIAL CARE AND SERVICES ARE DESCRIBED BELOW:

CITATION

**42 CFR
440.130**

Medical and Remedial

**Care and Services
Item 13.d (cont'd.)**

RESERVED

TN# _____ Approval Date _____ Effective Date _____

Supersedes

TN# _____

STATE OF LOUISIANA

AMOUNT DURATION AND SCOPE OF MEDICAL AND REMEDIAL CARE AND SERVICES PROVIDED
LIMITATIONS ON THE AMOUNT, DURATION AND SCOPE OF CERTAIN ITEMS OF PROVIDED
MEDICAL AND REMEDIAL CARE AND SERVICES ARE DESCRIBED BELOW:

Children who are in need of SUD services shall be served within the context of the family and not as an isolated unit.

Services shall be:

- a. delivered in a culturally and linguistically competent manner;
- b. respectful of the individual receiving services;
- c. appropriate to individuals of diverse racial, ethnic, religious, sexual, gender identities, and other cultural and linguistic groups; and
- d. appropriate for age, development, and education.

Evidence-based practices require prior approval and fidelity reviews on an ongoing basis as determined necessary by the Department.

State: Louisiana
Date Received: 12-20-18
Date Approved: 3-11-19
Date Effective: 11-01-18
Transmittal Number: 18-0024

TN 18-0024 Approval Date 3-11-19 Effective Date 11-1-18
Supersedes
TN 15-0029

STATE OF LOUISIANA

AMOUNT DURATION AND SCOPE OF MEDICAL AND REMEDIAL CARE AND SERVICES PROVIDED
LIMITATIONS ON THE AMOUNT, DURATION AND SCOPE OF CERTAIN ITEMS OF PROVIDED
MEDICAL AND REMEDIAL CARE AND SERVICES ARE DESCRIBED BELOW:

CITATION
42 CFR 440.130(d)

Rehabilitation Services

State: Louisiana
Date Received: 12-20-18
Date Approved: 3-11-19
Date Effective: 11-01-18
Transmittal Number: 18-0024

This level provides care to patients whose withdrawal signs and symptoms are sufficiently severe to require 24-hour inpatient care. It may overlap with Level IV-D services (as a “step-down” service) in a specialty unit of an acute care general or psychiatric hospital. Twenty-four hour observation, monitoring and treatment are available.

Limitations:

These SUD services are provided as part of a comprehensive specialized psychiatric program available to all Medicaid eligible individuals with significant functional impairments resulting from an identified addiction diagnosis. Services must be medically necessary and must be recommended by a licensed mental health practitioner or physician, who is acting within the scope of his/her professional license and applicable state law, to promote the maximum reduction of symptoms and/or restoration of an individual to his/her best age-appropriate functional level according to an individualized treatment plan.

The activities included in the service must be intended to achieve identified treatment plan goals or objectives. The treatment plan should be developed in a person-centered manner with the active participation of the individual, family and providers and be based on the individual’s condition and the standards of practice for the provision of rehabilitative services. The treatment plan should identify the medical or remedial services intended to reduce the identified condition as well as the anticipated outcomes of the individual. The treatment plan must specify the frequency, amount and duration of services. The treatment plan must be signed by the licensed mental health practitioner or physician responsible for developing the plan with the participant (or authorized representative) also signing to note concurrence with the treatment plan.

The plan will specify a timeline for re-evaluation of the plan that is at least an annual redetermination. The reevaluation should involve the individual, family and providers and include a reevaluation of plan to determine whether services have contributed to meeting the stated goals. A new treatment plan should be developed if there is no measureable reduction of disability or restoration of functional level. The new plan should identify different rehabilitation strategies with revised goals and services. Providers must maintain medical records that include a copy of the treatment plan, the name of the individual, dates of services provided, nature, content and units of rehabilitation services provided, and progress made toward functional improvement and goals in the treatment plan.

TN 18-0024 Approval Date 3-11-19 Effective Date 11-1-18
Supersedes
TN 15-0029

STATE OF LOUISIANA

AMOUNT DURATION AND SCOPE OF MEDICAL AND REMEDIAL CARE AND SERVICES PROVIDED
LIMITATIONS ON THE AMOUNT, DURATION AND SCOPE OF CERTAIN ITEMS OF PROVIDED
MEDICAL AND REMEDIAL CARE AND SERVICES ARE DESCRIBED BELOW:

CITATION
42 CFR 440.130(d)

Rehabilitation Services

State: Louisiana
Date Received: 12-20-18
Date Approved: 3-11-19
Date Effective: 11-01-18
Transmittal Number: 18-0024

Exclusions

The following services shall be excluded:

1. Components that are not provided to, or directed exclusively toward the treatment of, the Medicaid eligible individual;
2. Services provided at a work site which are not directly related to treatment of the recipient's needs;
3. Any services or components of services of which the basic nature is to supplant housekeeping, homemaking, or basic services for the convenience of a person receiving covered services (including housekeeping, shopping, child care, and laundry services); and
4. Services provided in an institution for mental disease (IMD), unless provided through the Code of Federal Regulations "allowed in lieu of", or a U.S. Department of Health and Human Services, Centers for Medicare and Medicaid Services (CMS) approved waiver.
5. Room and board is excluded from any rates provided in a residential setting.

Unless otherwise specified, a unit of service is defined according to the Healthcare Common Procedure Coding System (HCPCS) approved code set.

Provider Qualifications

All services shall be delivered in accordance with federal and state laws and regulations, the provider manual, and other notices or directives issued by the Department. Anyone providing SUD services must be licensed in accordance with state laws and regulations, in addition to operating within their scope of practice license. Providers shall meet the provisions of the provider manual and the appropriate statutes.

Services are provided by licensed and unlicensed professional staff, who are at least 18 years of age with a high school or equivalent diploma, according to their areas of competence as determined by degree, required levels of experience as defined by state law and regulations and departmentally approved guidelines. Anyone who is unlicensed providing addiction services must be registered with the Addictive Disorders Regulatory Authority and demonstrate competency as defined by LDH, state law (ACT 803 of the Regular Legislative Session 2004) and regulations. State regulations require supervision of unlicensed professionals by a qualified professional supervisor (QPS).

TN 18-0024 Approval Date 3-11-19 Effective Date 11-01-18
Supersedes
TN 15-0029

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Services

1. Alcohol and/or drug assessment;
2. Alcohol and/or drug services – Individual Session;
3. Alcohol and/or drug services - Group Session; and
4. Alcohol and/or drug services - Family Counseling.

Certified Addiction Counselor (CAC)

1. Possesses a bachelor's degree from an accredited institution of higher education. The degree shall be in a human services or behavioral science discipline, or such other discipline or disciplines as the department may deem appropriate;
2. Has met all of requirements of Louisiana Addictive Disorders Regulatory Authority (ADRA); and
3. Has demonstrated professional competence by passing a written and oral exam and conducting a case presentation.

CAC Service Provision

1. Alcohol and/or drug assessment;
2. Alcohol and/or drug services – Individual Session;
3. Alcohol and/or drug services - Group Session; and
4. Alcohol and/or drug services - Family Counseling

Registered Addiction Counselor (RAC)

1. Has met all of requirements of Louisiana Addictive Disorders Regulatory Authority (ADRA); and
2. Has demonstrated professional competence by passing a written and oral exam and conducting a case presentation.

RAC Service Provision

1. Alcohol and/or drug Assessment;
2. Alcohol and/or drug services – Individual Session;
3. Alcohol and/or drug services - Group Session; and
4. Alcohol and/or drug services - Family Counseling.

State: Louisiana
Date Received: 12-20-18
Date Approved: 3-11-19
Date Effective: 11-01-18
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TN 18-0024 Approval Date 3-11-19 Effective Date 11-01-18

Supersedes
TN None-New Page

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AMOUNT DURATION AND SCOPE OF MEDICAL AND REMEDIAL CARE AND SERVICES PROVIDED
LIMITATIONS ON THE AMOUNT, DURATION AND SCOPE OF CERTAIN ITEMS OF PROVIDED
MEDICAL AND REMEDIAL CARE AND SERVICES ARE DESCRIBED BELOW:

Treatment of Opioid Use Disorder in Opioid Treatment Programs

Citation

42 CFR 440.130(d)

The Medicaid program provides coverage for medically necessary medication-assisted treatment (MAT) delivered in opioid treatment programs, including but not limited to, methadone treatment, to all Medicaid-eligible adults and children with opioid use disorder (OUD).

Covered Services

The following services provided by opioid treatment programs shall be reimbursed under the Medicaid program:

- A. The administration and dispensing of medications; and
- B. Treatment phases 1 through 4:
 1. Initial treatment phase lasts from three to seven days. During this phase, the provider conducts orientation, provides individual counseling and develops the initial treatment plan for treatment of critical health or social issues.
 2. Early stabilization begins on the third to seventh day following initial treatment through 90 days in duration, whereas the provider:
 - a. Conducts weekly monitoring of the recipient's response to medication;
 - b. Provides at least four individual counseling sessions;
 - c. Revises the treatment plan within 30 days to include input by all disciplines, the recipient and significant others; and
 - d. Conducts random monthly drug screen tests.
 3. Maintenance treatment follows the end of early stabilization and lasts for an indefinite period of time. The provider shall:
 - a. Perform random monthly drug screen tests until the client has negative drug screen tests for 90 consecutive days as well as random testing for alcohol when indicated;

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- b. Thereafter, monthly testing to clients who are allowed six days of take-home doses, as well as random testing for alcohol when indicated;
 - c. Continuous evaluation by the nurse of the client's use of medication and treatment from the program and from other sources;
 - d. Documented reviews of the treatment plan every 90 days in the first two years of treatment by the treatment team; and
 - e. Documentation of response to treatment in a progress note at least every 30 days.
4. Medically supervised withdrawal from synthetic narcotic with continuing care (only when withdrawal is requested by the recipient). The provider shall:
- a. Decrease the dose of the synthetic narcotic to accomplish gradual, but complete withdrawal, as medically tolerated by recipient;
 - b. Provide counseling of the type and quantity based on medical necessity; and
 - c. Conduct discharge planning as appropriate.

The component services provided by the opioid treatment program must be recommended by a physician or LMHP, within the scope of his or her practice under state law.

Provider Qualifications

Services must be provided by an agency licensed by the Louisiana Department of Health as a behavioral health service provider – opioid treatment program. Opioid treatment programs must be accredited by an LDH approved accrediting body, certified by Substance Abuse and Mental Health Services Administration (SAMHSA) and hold a current and unrestricted Drug Enforcement Administration (DEA) registration. Providers will be subject to all applicable state and federal regulations and all opioid treatment program enabling legislation.

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Staffing Requirements

Individuals providing services must be licensed in accordance with state laws and regulations, in addition to operating within their scope of practice license.

The provider's opioid treatment program shall have the following staff:

Medical Director

The Medical Director shall be a licensed physician with a current, valid unrestricted license to practice in the state of Louisiana and provide the following services:

1. Decrease the dose to accomplish gradual, but complete withdrawal, only when requested by the recipient;
2. Provide medically approved and medically supervised assistance for withdrawal, only when requested by the recipient;
3. Participate in the documentation of reviews of treatment plan every 90 days in the first two years of treatment; and
4. Participate in discharge planning.

Pharmacist or Dispensing Physician

Pharmacist or Dispensing Physician shall have a current, valid unrestricted license to practice in the state of Louisiana and provide the following services:

1. Dispense all medications;
2. Work collaboratively with the Medical Director to decrease the dose to accomplish gradual, but complete withdrawal, only when requested by the recipient;
3. Contribute to the development of the initial treatment plan;
4. Contribute to the documentation for the treatment plan review every 90 days in the first two years of treatment; and
5. Document response to treatment in progress notes at least every 30 days.

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Opioid Treatment Program (OTP) Practitioner

The OTP practitioner shall be a physician, APRN, nurse practitioner, or physician assistant. The OTP Practitioner shall have a current, valid unrestricted license to practice in the state of Louisiana and provide the following services:

1. Prescribe medications;
2. Monitor the client's response to medications;
3. Evaluate the client's use of medication and treatment from the program and other sources;
4. Contribute to the development of the initial treatment plan;
5. Contribute to the documentation regarding the response to treatment for treatment plan reviews;
6. Contribute to the documentation for the treatment plan review every 90 days in the first two years of treatment;
7. Conduct drug screens; and
8. Participate in discharge planning.

Nursing Staff

Nursing staff shall have a current, valid and unrestricted nursing license in the State of Louisiana and provide the following services:

1. Administer medications;
2. Monitor the client's response to medications;
3. Evaluate the client's use of medication and treatment from the program and other sources;
4. Document response to treatment in progress notes at least every 30 days;
5. Contribute to documentation for the treatment plan review every 90 days in the first two years of treatment;
6. Conduct drug screens; and
7. Participate in discharge planning.

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Licensed Mental Health Professionals

Licensed Mental Health Professionals (LMHPs) as defined below shall have a current, valid and unrestricted license in the State of Louisiana. LMHPs include the following individuals licensed to practice independently:

1. Medical Psychologists;
2. Licensed Psychologists;
3. Licensed Clinical Social Workers (LCSWs);
4. Licensed Professional Counselors (LPCs);
5. Licensed Marriage and Family Therapists (LMFTs);
6. Licensed Addiction Counselors (LACs); and
7. Advanced Practice Registered Nurses (APRN) (must be a nurse practitioner specialist in Adult Psychiatric & Mental Health, and Family Psychiatric & Mental Health or a Certified Nurse Specialist in Psychosocial, Gerontological Psychiatric Mental Health, Adult Psychiatric and Mental Health, and Child-Adolescent Mental Health and may practice to the extent that services are within the APRN's scope of practice).

Licensed Mental Health Professionals provide the following services:

1. Conduct orientation;
2. Develop the initial plan for treatment;
3. Revise treatment to include input by all disciplines, recipients and significant others;
4. Provide individual counseling;
5. Contribute to the development as well as document the initial treatment plan;
6. Document response to treatment in progress notes at least every 30 days;
7. Contribute to the development as well as document reviews of treatment plan every 90 days in the first two years of treatment by the treatment team; and
8. Conduct in discharge planning as appropriate.

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Unlicensed Professionals

Unlicensed professionals (UPs) of addiction services must meet at least one of the following qualifications:

1. Masters Prepared Behavioral Health Professional that has not obtained full licensure privileges and is participating in ongoing professional supervision;
2. Certified Addiction Counselor (CAC) registered with the Addictive Disorders Regulatory Authority (ADRA);
3. Registered Addiction Counselor (RAC) registered with ADRA; or
4. Counselor-in-training (CIT) registered with ADRA.

Unlicensed professionals perform the following services under the supervision of a physician or LMHP:

1. Participate in conducting orientation;
2. Participate in discharge planning as appropriate; and
3. Provide support to the treatment team where applicable, while only providing assistance allowable under the auspices of and pursuant to the scope of the individual's license.

Community Health Worker Services

Community health worker services must be recommended by a licensed provider to promote the maximum reduction of physical or mental disability and restoration of beneficiaries to their best possible functional level. Ordering practitioners are limited to licensed physician, a licensed advanced practice registered nurse (APRN) or a licensed PA with an established clinical relationship with the beneficiary.

Effective for dates of service on or after January 1, 2022, the Medicaid program shall cover services rendered to beneficiaries by qualified Community Health Workers (CHW).

A. Provider Qualifications

A qualified CHW is an individual who:

1. Has completed state-recognized training curricula approved by the Louisiana Community Health Worker Workforce Coalition; or
2. Has 3,000 hours of documented work experience as a CHW.

B. Covered Services

1. Health promotion and coaching. This can include assessment and screening for health-related social needs, setting goals and creating an action plan, on-site observation of beneficiaries' living situations, and providing information and/or coaching in an individual or group setting.

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2. Care planning with the beneficiary and their healthcare team as part of a person-centered approach to improve health by meeting a beneficiary's situational health needs and health-related social needs, including time-limited episodes of instability and ongoing secondary and tertiary prevention, is essential to this care delivery.
3. Health system navigation and resource coordination services, including helping to engage, re-engage, or ensure patient follow-up in primary care; routine preventive care; adherence to treatment plans; and/or self-management of chronic conditions.

C. Coverage Limitations

1. Services will only be covered up to two hours per day and ten hours per month, per beneficiary. This limit may be exceeded based on medical necessity.
2. Group services are limited to eight unique beneficiaries at one time.

The following services are not covered:

1. Insurance enrollment and insurance navigator assistance;
2. Case management; and
3. Directly providing transportation for a beneficiary to and from services.

Services must be ordered by a physician, advanced practice registered nurse (APRN), or physician assistant (PA) with an established clinical relationship with the beneficiary. Services must be rendered under the general supervision of a physician, APRN, or PA.

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MEDICAL AND REMEDIAL CARE AND SERVICES DESCRIBED AS FOLLOWS:

CITATION **Rehabilitation Health Services**
42 CFR 440.130 (d)

Adult Mental Health Services

The Medicaid program provides coverage under the Medicaid State Plan for mental health services rendered to adults with mental health disorders. The mental health services rendered to adults shall be necessary to reduce the disability resulting from mental illness and to restore the individual to their best possible functioning level in the community.

Qualifying individuals, 21 years of age and older who are enrolled in Healthy Louisiana, shall be eligible to receive the following medically necessary adult mental health services:

1. Therapeutic services;
2. Mental health rehabilitation (MHR) services, including community psychiatric support and treatment (CPST), psychosocial rehabilitation (PSR), crisis intervention (CI) services, assertive community treatment (ACT),
3. Peer Support Services;
4. Crisis Stabilization; and
5. Mobile Crisis Response Services

All services must be recommended by a physician or licensed mental health professional, within the scope of his or her practice under State law.

Licensed Mental Health Professionals

Licensed mental health professionals (LMHPs) are individuals licensed in the State of Louisiana to diagnose and treat mental illness or substance use disorders. LMHPs include the following individuals who are licensed to practice independently:

1. Medical Psychologists;
2. Licensed Psychologists;
3. Licensed Clinical Social Workers (LCSWs);
4. Licensed Professional Counselors (LPCs);
5. Licensed Marriage and Family Therapists (LMFTs);
6. Licensed Addiction Counselors (LACs); and
7. Advanced Practice Registered Nurses (APRN) (must be a nurse practitioner specialist in Adult Psychiatric & Mental Health, and Family Psychiatric & Mental Health or a Certified Nurse Specialist in Psychosocial, Gerontological Psychiatric Mental Health, Adult Psychiatric and Mental Health, and Child-Adolescent Mental Health and may practice to the extent that services are within the APRN's scope of practice).

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MEDICAL AND REMEDIAL CARE AND SERVICES DESCRIBED AS FOLLOWS:

Exclusions

The following shall be excluded from Medicaid reimbursement:

1. Components that are not provided to, or directed exclusively toward the treatment of, the Medicaid eligible individual;
2. Services provided at a work site which are job tasks oriented and not directly related to the treatment of the recipient's needs; and
3. Any services, or components in which the basic nature of the service(s) are to supplant housekeeping, homemaking, or basic services for the convenience of an individual receiving services.

Service Descriptions

1. **Therapeutic Services:** Individualized therapeutic interventions including assessment, medication management, individual, family, and group therapy, and psychological testing.

Provider Qualifications

Therapeutic services may be provided by a licensed mental health professional (LMHP), provisionally licensed professional counselor (PLPC), provisionally licensed marriage and family therapist (PLMFT), or licensed master social worker (LMSW) in good standing in the state of Louisiana to practice within the scope of all applicable state laws, practice acts, and the practitioner's professional license. PLPCs, PLMFTs, and LMSWs shall be supervised in accordance with requirements established by the practitioner's professional licensing board. Any licensed practitioner providing behavioral health services shall operate within the scope of practice of their license.

2. **Community Psychiatric Support and Treatment (CPST):** A comprehensive service which focuses on reducing the disability resulting from mental illness, restoring functional skills of daily living, building natural supports, and achieving identified person-centered goals or objectives through counseling, clinical psycho-education, and ongoing monitoring needs as set forth in the individualized treatment plan. Services must be provided in locations that meet the needs of the persons served.

The assessment and treatment planning components of CPST must be rendered by an LMHP.

Provider Qualifications

To qualify as a CPST agency, the agency must be licensed as a behavioral health service provider by the Louisiana Department of Health (LDH) and must obtain a preliminary accreditation or be fully accredited by the Commission on Accreditation of Rehabilitation Facilities (CARF), the Council on Accreditation (COA), or The Joint Commission (TJC). Individuals rendering CPST services must operate under an agency license.

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CPST services shall be rendered by one of the following:

1. Licensed Mental Health Professionals (LMHP)
2. Provisionally Licensed Professional Counselor (PLPC)
3. Provisionally Licensed Marriage and Family Therapist (PLMFT)
4. Licensed Master Social Worker (LMSW)
5. Certified Social Worker (CSW)
6. Psychology intern from an American Psychological Association approved internship program

All CPST practitioners, except LMHPs, must deliver services under regularly scheduled supervision in accordance with requirements established by the practitioner's professional licensing board.

- 3. Psychosocial Rehabilitation Services (PSR):** Services that are designed to assist the individual with compensating for, or eliminating functional deficits and interpersonal and/or environmental barriers associated with their mental illness through skill restoration to restore and rehabilitate social and interpersonal skills and daily living skills.

Activities included must be intended to achieve the identified goals or objectives as set forth in the individualized treatment plan. The intent of psychosocial rehabilitation is to restore the fullest possible integration of the individual as an active and productive member of his or her family, community, and/or culture with the least amount of ongoing professional intervention. PSR is a face-to-face intervention provided individually or in a group setting. Most contacts occur in community locations where the person lives, works, attends school, and/or socializes.

Provider Qualifications

To qualify as a PSR agency, the agency must be licensed as a behavioral health service provider by LDH and must obtain a preliminary accreditation or be fully accredited by the Commission on Accreditation of Rehabilitation Facilities (CARF), the Council on Accreditation (COA), or The Joint Commission (TJC). Individuals rendering PSR services must operate under an agency license.

Any individual rendering PSR services for a licensed and accredited provider agency must meet the following qualifications:

1. Possess a bachelor's degree from an accredited university or college in the field of counseling, social work, psychology, sociology, rehabilitation services, special education, early childhood education,

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secondary education, family and consumer sciences, criminal justice, or human growth and development; or any bachelor's degree from an accredited university or college with a minor in counseling, social work, sociology, or psychology; or

2. Be 21 years of age or older as of January 1, 2022, have a high school diploma or equivalency, and have been continuously employed by a PSR agency since prior to January 1, 2019.

Mental health rehabilitation specialists rendering PSR services may be licensed or unlicensed behavioral health specialists meeting state requirements to provide PSR services. All MHR specialists who are not licensed must receive regularly scheduled clinical supervision from a person meeting the qualifications of an LMHP with experience regarding this specialized mental health service.

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- 4. Crisis Intervention Services:** Services that are provided to a person who is experiencing a psychiatric crisis, designed to interrupt and/or ameliorate a crisis experience including a preliminary assessment, immediate crisis resolution and de-escalation, and referral and linkage to appropriate community services to avoid more restrictive levels of treatment. The goal of crisis intervention is symptom reduction, stabilization, and restoration to a previous level of functioning. All activities must occur within the context of a potential or actual psychiatric crisis. Crisis Intervention is a face-to-face intervention and can occur in a variety of locations where the person lives, works, attends school, and/or socializes.

Provider Qualifications

CI services may be provided by an agency licensed to provide behavioral health services. Agencies providing CI services must be fully accredited or have applied for accreditation by an accrediting organization approved by the Department prior to providing CI services. Agencies are allowed to render CI services prior to attaining full accreditation; however, agencies must have applied for full accreditation by an accrediting organization approved by the Department, and must attain full accreditation status within 18 months of the initial accreditation application date. Agencies must maintain continuous, uninterrupted accreditation.

Individuals rendering CI services must operate under an agency licensed to provide mental health services. At minimum, individuals rendering CI services must be at least 20 years old and have an associate's degree in social work, counseling, psychology or a related human services field, or two years of equivalent education and/or experience working in the human services field. The provider must be at least three years older than an individual under the age of 18.

Credentialed peer support specialists with the above qualifications may provide CI services.

- 5. Assertive Community Treatment Services (ACT):**

ACT is a community-based rehabilitative service for individuals with severe mental illness to support recovery through the restoration of functional daily living skills, to build strengths, to increase independence, develop social connections and leisure opportunities, and reduce the symptoms of their illness.

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Services are coordinated by a team to connect individuals with other community-based supports. The team is comprised of a team leader, a board certified or board-eligible psychiatrist, two nurses (at least one RN), one other licensed mental health professional, one substance use service provider and one peer specialist. Other levels of staffing may be approved by the Department as long as they operate under licensure and supervision appropriate to their role.

Services include, but are not limited to:

- a. Needs assessment, crisis assessment and intervention, and individualized care plan development;
- b. Symptom management;
- c. Individual counseling;
- d. Medication administration, monitoring, education;
- e. Skills restoration to enable self-care, daily life management, e.g. household maintenance, food preparation, nutrition and health; to function in appropriate social and interpersonal relationships and to participate in community based activities, including but not limited to, leisure and employment as indicated in the individualized plan of care;
- f. Peer support providing expertise about symptom management and the recovery process, peer counseling to ACT recipients with their families, as well as other rehabilitation and support functions based on their own life experience with mental illness and/or substance use disorders, as coordinated within the context of a comprehensive, individualized plan of care;
- g. Ongoing evaluation for relapse prevention, harm reduction, anger and stress management;
- h. Referral and linkage to other agency supports, if needed for services including substance use disorders treatment; and
- i. Monitoring and following-up to determine if psychiatric, substance use, mental health support and health related services are being delivered, as set forth in the care plan, adequacy of services in the plan and changes, needs or status of the individual.

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Provider Qualifications

ACT services may be provided by an agency licensed to provide behavioral health services. Agencies providing ACT services must be accredited or have applied for accreditation by an accrediting organization approved by the Department prior to providing ACT services. Agencies are allowed to render ACT services prior to attaining full accreditation; however, agencies must have applied for full accreditation prior to rendering ACT services and must attain a full accreditation status within 18 months of the initial accreditation application date. Agencies must maintain continuous, uninterrupted accreditation.

ACT Team Leader: A full time licensed mental health professional who must have administrative and clinical skills.

Licensed Psychiatrist: Must be board certified or board eligible.

Psychiatric Nurses (one of which must be a registered nurse (RN): Nurses who have experience in carrying out medical functioning activities such as basic health and medical assessment, education, coordination of health care, psychiatric medical assessment and treatment, and administration of psychotropic medication administration.

Licensed Mental Health Professional: A fully licensed practitioner able to practice independent of supervision, i.e., medical psychologist, licensed psychologist, licensed clinical social worker, licensed professional counselor, licensed marriage and family therapist, or licensed addiction counselor.

Substance Use Specialist: Must have a minimum of one year specialized substance use training or supervised experience.

Peer Specialist: A person who self-identified as being in recovery from mental illness and/or substance use disorders who has successfully completed required training and credentialing requirements through the Office of Behavioral Health as a peer specialist. This includes ongoing completion of continuing education requirements consistent with Louisiana requirements for Peer Support. The peer specialist functions as a fully integrated team member providing expertise about symptom management and the recovery process, promotes a team culture that maximizes recipient choice and self-determination, provides peer counseling to ACT recipients and families and carries out other rehabilitation and support functions.

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6. Peer Support Services

Peer support services (PSS) are an evidence-based behavioral health service that consists of a qualified peer support provider, who assists members with their recovery from mental illness and/or substance use. PSS are behavioral health rehabilitative services to reduce the disabling effects of an illness or disability and restore the beneficiary to the best possible functional level in the community. PSS are coordinated as part of a person-centered, goal-oriented treatment plan. PSS are face-to-face interventions with the member. Most contacts occur in community locations where the member lives, works, attends school and/or socializes.

Provider Qualifications

Peer support services must be provided under the administrative oversight of licensed and accredited local governing entities (LGEs) or certified Permanent Supportive Housing (PSH) agencies. LGEs and PSH agencies must meet state and federal requirements for providing PSS.

An individual providing Peer Support Services must successfully complete an OBH-approved peer training program prior to providing peer support services. Training provides the Peer Support Specialist with a basic set of competencies necessary to perform the peer support function. The Peer Support Specialist must also complete a minimum of ten (10) Continuing Education Units (CEU) per calendar year.

Credentialed Peer Support Specialists (CPSS) must have lived experience with a mental illness and/or substance use challenge or condition and must be at least 21 years of age. A CPSS must have at least twelve (12) months of continuous recovery, which is demonstrated by a lifestyle and decisions supporting an individual's overall wellness and recovery. CPSS must receive regularly scheduled clinical supervision from a Peer Supervisor. The Peer Supervisor must be either a Licensed Mental Health Professional (LMHP) or be supervised by an LMHP. Peer Supervisors must have the practice-specific education, experience, training, and credentials to coordinate an array of behavioral health services, and shall complete the required OBH-approved Peer Supervisor Training.

7. Crisis Stabilization

Crisis Stabilization (CS) is a short-term bed-based crisis treatment and support service for members who have received a lower level of crisis services and are at risk of hospitalization or institutionalization, including nursing home placement.

CS is utilized when additional crisis supports are necessary to stabilize the crisis and ensure community tenure in instances in which more intensive inpatient psychiatric care is not warranted or when the member's needs are better met at this level.

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This service is designed to ameliorate a psychiatric crisis and/or reduce acute symptoms of mental illness and to provide crisis relief, resolution, and intensive supportive resources for adults who need temporary twenty-four (24) hours a day, seven (7) days a week support and is not intended to be a housing placement.

Services are provided in an organized bed-based non-medical setting, delivered by appropriately trained staff that provide safe twenty-four (24) hour crisis relieving/resolving intervention and support, medication management, observation, peer support, and care coordination in a supervised environment where the member is served.

Crisis relieving/resolving intervention and support includes problem behavior analysis as well as emotional and behavioral management, with the individual, with a focus on restoring skills and improving daily functional living skills. The primary focus is on implementing social, interpersonal, and self-care goals in order to restore stability. Licensed Mental Health Professionals (LMHPs), unlicensed professionals, and peer support specialists can provide this service.

Medication Management are goal-oriented interactions to assess the appropriateness of medications in an individual's treatment through periodically evaluating and re-evaluating the efficacy of the prescribed medications and providing ongoing management of a medication regimen within the context of an individual's treatment plan. Authorized licensed prescribers can provide this service.

Observation is the action or process of observing someone carefully, in order to gain information. LMHPs, unlicensed professionals, and peer support specialists can provide this service.

Care coordination includes the following activities:

1. Coordinating the transfer to alternate levels of care within 24 hours when warranted;
2. Coordinating contact through a warm handoff with the member's Managed Care Organization (MCO) to link the member with no current behavioral health provider and/or primary medical care provider to outpatient services as indicated;
3. Coordinating contact through a warm handoff with the member's existing or new behavioral health provider; and

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4. Providing any member records to the existing or new behavioral health provider or to another crisis service to assist with continuing care upon referral.

LMHPs, unlicensed professionals, and peer support specialists can provide this service.

Provider Qualifications

CS services may be provided by an agency licensed to provide behavioral health services. Agencies providing CS services must be fully accredited by or have applied for accreditation from the Commission on Accreditation of Rehabilitation Facilities (CARF), the Council on Accreditation (COA), or The Joint Commission (TJC) prior to providing CS services. Agencies are allowed to render CS services prior to attaining full accreditation; however, agencies must have applied for full accreditation, and must attain full accreditation status within 18 months of the initial accreditation application date. Agencies must maintain continuous, uninterrupted accreditation.

Staffing Requirements

Crisis stabilization facilities or agencies shall comply with core staffing requirements within the scope of practice of the license required to practice in the state of Louisiana.

Crisis stabilization service providers shall have the following staff:

Authorized Licensed Prescriber

The Authorized Licensed Prescriber shall be a physician licensed in the state of Louisiana with expertise in managing psychiatric and medical conditions or a psychiatric and mental health nurse practitioner who has an unrestricted license and prescriptive authority and has a licensed physician on call at all times to be available for consultation. The Authorized Licensed Prescriber is responsible for managing the psychiatric and medical care of the clients and must be on call at all times to be available for consultation.

Licensed Mental Health Professionals

Licensed Mental Health Professionals (LMHPs) shall have a current, valid and unrestricted license in the State of Louisiana. LMHPs shall have at least one year of qualifying experience in direct care to clients with behavioral health diagnoses. A sufficient number of LMHPs shall be maintained to meet the needs of the members, with at least one LMHP on duty during hours of operation.

Nursing Staff

Nursing Staff shall have a valid current nursing license in the State of Louisiana with at least one year qualifying experience in providing direct care to clients with a behavioral health diagnosis and at least one year qualifying experience providing direct care to medical/surgical inpatients. At least one RN shall be on duty at the CRC during hours of operation.

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Unlicensed Professionals

Unlicensed Professionals rendering Crisis Stabilization services must meet the following requirements:

1. Be at least twenty-four (24) years old; and
2. Possess a minimum of bachelor's degree (preferred) OR an associate's degree and two (2) years of work experience in the human services field.

Credentialed Peer Support Specialist (CPSS)

A CPSS must meet the staff qualifications as outlined in the Peer Support Service section. CPSS must receive regularly scheduled clinical supervision from a Peer Supervisor. The Peer Supervisor must be either a Licensed Mental Health Professional (LMHP) or be supervised by an LMHP. Peer Supervisors must have the practice-specific education, experience, training, and credentials to coordinate an array of behavioral health services, and shall complete the required OBH-approved Peer Supervisor Training.

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8. Mobile Crisis Response

Mobile Crisis Response (MCR) services are an initial or emergent crisis response intended to provide relief, resolution and intervention through crisis supports and services during the first phase of a crisis in the community. The main objectives of MCR services are to provide rapid response, individual assessment and crisis resolution by trained professionals and paraprofessionals in situations that involve individuals who are presumed or known to have a mental health condition. MCR is a face-to-face (in person), time-limited service provided to a member who is experiencing a mental health or substance use disorders crisis until the member experiences sufficient relief/resolution and the member can remain in the community and return to existing services or be linked to alternative behavioral health services, which may include higher levels of treatment like inpatient psychiatric hospitalization.

MCR services shall be furnished by a two-person multidisciplinary mobile crisis team that includes one licensed professional who is capable of conducting an assessment of the individual and one unlicensed professional or peer support specialist. Both team members shall be actively involved in the crisis response.

MCR services are available twenty-four (24) hours a day, seven (7) days a week. MCR services will be provided in a timely manner and, where appropriate, provide screening and assessment; stabilization and de-escalation; and coordination with, and referrals to, health, social, and other services and supports as needed. Services are provided where the member is located, including community-based settings or in emergency departments. Services provided in emergency departments, hospitals, or other facility settings will not be eligible for enhanced FMAP under Section 1947 of Title XIX of the Social Security Act, which was created by Section 9813 of the American Rescue Plan Act of 2021.

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Provider Qualifications

MCR services may be provided by an agency licensed to provide behavioral health services. Agencies providing MCR services must be fully accredited by or have applied for accreditation from the Commission on Accreditation of Rehabilitation Facilities (CARF), the Council on Accreditation (COA), or The Joint Commission (TJC) prior to providing MCR services. Agencies are allowed to render MCR services prior to attaining full accreditation; however, agencies must have applied for full accreditation, and must attain full accreditation status within 18 months of the initial accreditation application date. Agencies must maintain continuous, uninterrupted accreditation.

MCR agencies must maintain relationships with relevant community partners, including but not limited to local governing entities (LGEs), medical and behavioral health providers, primary care providers, emergency responders and law enforcement, local and parish governments, community health centers, crisis respite centers, and managed care organizations. MCR agencies will maintain the privacy and confidentiality of patient information consistent with Federal and State requirements.

Staffing Requirements

MCR agencies shall comply with core staffing requirements within the scope of practice of the license required for the facility or agency to practice in the state of Louisiana.

The provider's MCR service shall have the following staff:

Licensed Professionals

Licensed professionals that possess a current, valid and unrestricted license in the State of Louisiana and are qualified to conduct assessments, in accordance with the professional's permitted scope of practice.

Licensed professionals include the following:

1. Licensed Mental Health Professional (LMHPs);
2. Provisionally Licensed Professional Counselor (PLPC);
3. Provisionally Licensed Marriage and Family Therapist (PLMFT); and
4. Licensed Master Social Worker (LMSW).

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Unlicensed Professionals

Unlicensed professionals of MCR services must meet the following requirements:

1. Be at least twenty-four (24) years old; and
2. Possess a minimum of a bachelor's degree (preferred) OR an associate's degree and two (2) years of work experience in the human services field.

Peer Support Specialist (PSS)

A PSS must have lived experience with mental illness and/or substance use disorders and must successfully complete a required peer training and credentialing program approved by the Office of Behavioral Health. This includes ongoing completion of continuing education requirements consistent with Louisiana requirements for peer support. A peer support specialist must receive regularly scheduled clinical supervision from a Peer Supervisor. The Peer Supervisor must be a Licensed Mental Health Professional (LMHP) or be supervised by an LMHP. Peer Supervisors must have the practice-specific education, experience, training, and credentials to coordinate an array of behavioral health services, and shall complete the required OBH-approved Peer Supervisor Training.

Individuals providing MCR services must be trained in trauma-informed care, de-escalation strategies, and harm reduction prior to rendering services.

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Service Delivery

- A. All mental health services must be medically necessary. The medical necessity for services shall be determined by an LMHP or physician who is acting within the scope of their professional license and applicable state law.
- B. All services shall be delivered in accordance with federal and state laws and regulations, the provider manual, and other notices or directives issued by the Department. The provider shall create and maintain documents to substantiate that all requirements are met.
- C. Each provider of adult mental health services shall enter into a contract with one or more of the managed care organizations in order to receive reimbursement for Medicaid covered services.
- D. There shall be recipient involvement throughout the planning and delivery of services.
 - 1. Services shall be
 - a. delivered in a culturally and linguistically competent manner; and
 - b. respectful of the individual receiving services.
 - 2. Services shall be appropriate to individuals of diverse racial, ethnic, religious, sexual, and gender identities and other cultural and linguistic groups. Services shall be appropriate for:
 - a. age;
 - b. development; and
 - c. education.
- E. Anyone providing adult mental health services must operate within their scope of practice license.
- F. Fidelity reviews must be conducted for evidenced based practices on an ongoing basis as determined necessary by the Department.
- G. Services may be provided in the community or in the individual's place of residence as outlined in the treatment plan. Services shall not be provided at an institution for mental disease (IMD).

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Assessments

For mental health rehabilitation, each enrollee shall be assessed, at least annually, by a LMHP and shall have a treatment plan developed for CPST, PSR and ACT based on that assessment.

Treatment Plan

Treatment plans shall:

1. be based on the assessed needs of the member;
2. be developed by a LMHP or physician in collaboration with direct care staff, the member, family and natural supports; and
3. contain goals and interventions targeting areas of risk and need identified in the assessment.

The individualized treatment plan shall be developed and reviewed in accordance with the criteria and frequency established by the Department, and in accordance with the provider manual and other notices or directives issued by the Department,