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## **Table of Contents**

**State/Territory Name:** Idaho

**State Plan Amendment (SPA) #:** 11-014

This file contains the following documents in the order listed:

- 1) Approval Letter
- 2) CMS 179 Form/Summary Form(with 179-like data)
- 3) Approved SPA



Region 10  
2201 Sixth Avenue, MS/RX 43  
Seattle, Washington 98121

**APR 19 2012**

Richard Armstrong, Director  
Department of Health and Welfare  
Towers Building – Tenth Floor  
Post Office Box 83720  
Boise, Idaho 83720-0036

**RE: Idaho State Plan Amendment (SPA) Transmittal Number 11-014**

Dear Mr. Armstrong:

The Centers for Medicare & Medicaid Services (CMS) Seattle Regional Office has completed its review of Idaho's State Plan Amendment (SPA) Transmittal Number 11-014. Under this SPA, Idaho is reducing the number of hours of psychosocial rehabilitation that an adult enrolled in the Enhanced Benefit Benchmark plan or in Medicare-Medicaid Coordinated Benchmark plan may receive per week from five hours to four hours. The state requested this reduction in response to legislation. The state review of claims data showed that the majority of individuals utilizing this service receive less than 5 hours of it per week. The proposed effective date for this amendment is July 1, 2011.

We are approving this SPA with an effective date of July 1, 2011 and have included the approved state plan pages with this letter. The State assures that the financial requirements and treatment limitations applied to mental health service benefits proposed by this SPA and provided under either the Enhanced Benefit Benchmark plan or the Medicare-Medicaid Coordinated Benchmark plan are no more restrictive than the predominant treatment limitations and financial requirements that are applied to substantially all medical and surgical benefits provided by these benchmark benefit plans; and that there are no separate cost sharing requirements that apply only to mental health or substance use disorder benefits provided by this benchmark benefit plan.

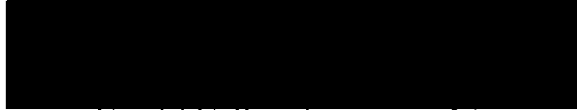
With regard to Medicaid services required under Early and Periodic Screening Diagnosis and Treatment program, the approved SPA pages include assurances that individuals in the Enhanced Benefit Benchmark plan or the Medicare-Medicaid Coordinated Benchmark plan who are under age twenty-one (21) may receive additional services if determined to be medically necessary and prior authorized by the Department.

APR 19 2012

Page 2 - Richard Armstrong, Director

If you have any additional questions or require any further assistance, please contact me, or have your staff contact Tania Seto at (206) 615-2343 or [Tania.Seto@cms.hhs.gov](mailto:Tania.Seto@cms.hhs.gov).

Sincerely,



Carol J.C. Peverly  
Associate Regional Administrator  
Division of Medicaid and Children's Health  
Operations

<b>TRANSMITTAL AND NOTICE OF APPROVAL OF STATE PLAN MATERIAL</b>	1. TRANSMITTAL NUMBER: <b>11-014</b>	2. STATE <b>IDAHO</b>
	3. PROGRAM IDENTIFICATION: TITLE XIX OF THE SOCIAL SECURITY ACT (MEDICAID)	
FOR: HEALTH CARE FINANCING ADMINISTRATION		4. PROPOSED EFFECTIVE DATE <b>July 1, 2011</b>
TO: REGIONAL ADMINISTRATOR HEALTH CARE FINANCING ADMINISTRATION DEPARTMENT OF HEALTH AND HUMAN SERVICES		

5. TYPE OF PLAN MATERIAL (Check One):

NEW STATE PLAN       AMENDMENT TO BE CONSIDERED AS NEW PLAN       AMENDMENT

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

6. FEDERAL STATUTE/REGULATION CITATION: 1905(a)(6), 1905(a)(12) and 2110(a)(24) of the Social Security Act	7. FEDERAL BUDGET IMPACT: FFY 2012 - (\$2,270,000) (\$1,702,500) (P&I) FFY 2011 - (\$567,500) (P&I)
8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT: Attachment 3.1-C, Enhanced Benchmark Benefit, page 31a Attachment 3.1-C, Medicare/Medicaid Coordinated Benchmark Benefit, page 15a	9. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable): Attachment 3.1-C, Enhanced Benchmark Benefit, page 31a Attachment 3.1-C, Medicare/Medicaid Coordinated Benchmark Benefit, page 15a

10. SUBJECT OF AMENDMENT:  
These changes are being made to comply with 2011 Idaho Legislative direction in House Bill 260. This change is a reduction in adult psychosocial rehabilitation (PSR) service hours.

11. GOVERNOR'S REVIEW (Check One):

GOVERNOR'S OFFICE REPORTED NO COMMENT       OTHER, AS SPECIFIED:  
 COMMENTS OF GOVERNOR'S OFFICE ENCLOSED  
 NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL

13. TYPED NAME:  
LESLIE M. CLEMENT

14. TITLE:  
Deputy Director

15. DATE SUBMITTED: 9/27/2011

16. RETURN TO:

Paul J. Leary, Administrator  
Idaho Department of Health and Welfare  
Division of Medicaid  
PO Box 83720  
Boise ID 83720-0009

FOR REGIONAL OFFICE USE ONLY	
17. DATE RECEIVED: September 27, 2011	18. DATE APPROVED: April 19, 2012
PLAN APPROVED - ONE COPY ATTACHED	
19. EFFECTIVE DATE OF APPROVED MATERIAL: July 1, 2011	20. SIGNATURE OF REGIONAL OFFICIAL: 
21. TYPED NAME: Carol J.C. Pevery	22. TITLE: Associate Regional Administrator Division of Medicaid and Children's Health Operations
23. REMARKS: 12/20/2011 - Pen & Ink changes authorized by the State (block 7)	

**MEDICARE/MEDICAID COORDINATED PLAN**  
**(For Elders and/or Individuals Who are Dually Eligible for Medicare and Medicaid)**  
**BENCHMARK BENEFIT PACKAGE**

- PSR individual and group skill training or community reintegration services are limited to five (5) hours per week in any combination for eligible participants up to twenty-one (21) years of age. For participants aged twenty-one (21) years of age or older, services are limited to four (4) hours weekly in any combination of PSR individual or group skill training or community reintegration.

Individuals under twenty-one (21) years of age pursuant to EPSDT may receive additional services if determined to be medically and prior authorized by the Department.

**Excluded services.** The following services are excluded PSR services:

- Treatment services rendered to recipients residing in inpatient medical facilities including nursing facilities or hospitals
- Recreational therapy and activities that are primarily recreational or social in nature
- Employment/job specific interventions, job training, job placement, job coaching
- Staff performance of household tasks or medication drops
- Treatment of other individuals (such as family members)
- Services that are primarily available through service coordination (case management)
- The provision of transportation services and staff time to transport
- Services to an inmate of a public institution

**ENHANCED PLAN**  
**(For Individuals with Disabilities, Including Elders, or Special Health Needs)**  
**BENCHMARK BENEFIT PACKAGE**

**3.K.3 Psychosocial Rehabilitative Services (PSR)**

**Psychosocial Rehabilitation (PSR) services.** PSR services are services provided to reduce to a minimum a participant's mental disability and restore the participant to the highest possible functional level within the community by the use of skill building tasks and the encouragement of more independent functioning. These services include:

- Evaluation and diagnostic services
- Psychological and neuropsychological testing
- Individual, group and family psychotherapy services
- Community crisis support services
- Individual and group skill training or community reintegration services

**Provider Qualifications.** PSR services can be provided by agencies who employ licensed, qualified professionals who must have at a minimum, one of the following qualifications:

- Psychiatrist
- Physician or practitioner of the healing arts
- Psychologist or psychologist extender
- Social Worker (Masters, Clinical, Licensed)
- Clinical Professional Counselor
- Professional Counselor
- Marriage & Family Therapist (Associate Marriage & Family Therapist)
- Certified psychiatric nurse
- Professional Nurse (RN)
- Occupational Therapist
- PSR Specialist - must have a BA as listed in Dept. rule. PSR specialists are not licensed; they are required to obtain PSR Specialist Certification in accordance with USPRO requirements by 2012. Reference IDAPA 16.03.10.131.03.

**Limitations.** The following service limitations apply to The Enhanced Benchmark Benefit Package covered under the State Plan, unless otherwise authorized by the Department:

- A combination of any evaluation or diagnostic services is limited to a maximum of four (4) hours in a calendar year.
- Individual, family and group psychotherapy services are limited to a maximum of twenty-four (24) hours in a calendar year.
- Community crisis support services are limited to a maximum of seven (7) consecutive days and must receive prior authorization from the Department.
- PSR individual and group skill training or community reintegration services are limited to five (5) hours per week in any combination for eligible participants up to twenty-one (21) years of age. For participants aged twenty-one (21) years of age or older, services are limited to four (4) hours weekly in any combination of PSR individual or group skill training or community reintegration.
- Psychological and neuropsychological testing services are limited to two (2) computer administered testing sessions and four (4) assessments per calendar year.
- Individuals under twenty-one (21) years of age pursuant to EPSDT, may receive additional services if determined to be medically necessary and prior authorized by the Department.

**Excluded services.** The following services are not covered as a PSR Service:

Treatment services rendered to recipients residing in inpatient medical facilities including nursing facilities or hospitals

Recreational therapy and activities that are primarily recreational or social in nature

Employment/job specific interventions, job training, job placement, job coaching

Staff performance of household tasks or medication drops

Treatment of other individuals (such as family members)

Services that are primarily available through service coordination (case management)

The provision of transportation services and staff time to transport

Services to an inmate of a public institution