

REHABILITATIVE SERVICES

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LIMITATIONS

Rehabilitative Mental Health Services

Rehabilitative mental health and substance use disorder services (hereinafter referred to as mental health services) are medically necessary services designed to promote the patient's mental health and restore the patient to the highest possible level of functioning. Services must be provided to or directed exclusively toward the treatment of the Medicaid individual.

Services and required supervision are provided in accordance with State law governing the applicable profession and in accordance with the profession's administrative rules as set forth by the Utah Department of Commerce and found at the Department of Administrative Services, Division of Administrative Rules: [www.Rules.utah.gov/publicat/code.htm](http://www.Rules.utah.gov/publicat/code.htm).

Services do not include room and board; services to residents of institutions for mental diseases; services covered elsewhere in the State Medicaid plan; educational, vocational and job training services; recreational and social activities; habilitation services and services provided to inmates of public institutions

Psychiatric Diagnostic Evaluation

Psychiatric diagnostic evaluations are conducted face-to-face with the patient for the purpose of identifying the patient's need for mental health services. In accordance with the HCPCS/Current Procedural Terminology (CPT) definition for psychiatric diagnostic evaluations, the evaluation is an integrated biopsychosocial assessment, and includes history, mental status and recommendations. Psychiatric diagnostic evaluation with medical services is an integrated biopsychosocial and medical assessment, including history, mental status, other physical examination elements as indicated, and recommendations. The evaluation may include communication with family or other sources, prescription of medications, and review and ordering of laboratory or other diagnostic studies. In certain circumstances one or more other informants (family members, guardians, or significant others) may be seen in lieu of the patient. The service includes assessments and reassessments if required. The service is coded in accordance with CPT coding for psychiatric diagnostic evaluation. If it is determined mental health services are medically necessary, a provider qualified to perform this service is responsible for the development of an individualized treatment plan. The qualified provider is also responsible to conduct reassessments/treatment plan reviews with the patient as clinically indicated to ensure the patient's treatment plan is current and accurately reflects the patient's rehabilitative goals and needed mental health services.

Qualified providers are (1) licensed mental health therapists under State law: physicians and surgeons or osteopathic physicians engaged in the practice of mental health therapy; psychologists qualified to engage in the practice of mental health therapy; certified psychology residents qualifying to engage in the practice of mental health therapy; clinical social workers, certified social workers and certified social worker interns, advanced practice registered nurses (APRNs) licensed either as a nurse specialist or a nurse practitioner with psychiatric mental health nursing specialty certification (and any other licensed advanced nursing categories as approved by the State's licensing division when practicing within the scope of their practice act and competency), marriage and family therapists; associate marriage and family therapists; clinical mental health counselors; and associate clinical mental health counselors; (2) individuals working within

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the scope of their certificate or license in accordance with State law: licensed APRNs formally working toward psychiatric mental health nursing specialty certification through enrollment in a specialized mental health education program or through completion of post-education clinical hours; and licensed APRN interns formally working toward psychiatric mental health specialty certification and accruing the required clinical hours for the specialty nursing certification (and any other licensed advanced nursing categories as approved by the State's licensing division when practicing within the scope of their practice act and competency), and (3) individuals exempted from licensure as a mental health therapist in accordance with State law: students engaged in activities constituting the practice of a regulated occupation or profession while in training in a recognized school approved by the State's licensing division under the supervision of qualified faculty, staff, or designee, and individuals employed as a psychologist by a state, county or municipal agency or other political subdivision of the state prior to July 1, 1981, and who subsequently have maintained employment as a psychologist in the same state, county, or municipal agency or other political subdivision while engaged in the performance of their official duties for that agency or political subdivision

When evaluations are conducted for the purpose of determining need for medication prescription only, these evaluations may be conducted by licensed physicians and surgeons or osteopathic physicians regardless of specialty; licensed APRNs and licensed APRN interns regardless of specialty when practicing within the scope of their practice act and competency, (and any other licensed advanced nursing categories as approved by the State's licensing division when practicing within the scope of their practice act and competency); and other practitioners licensed under State law when acting within the scope of their practice, most commonly a physician assistant when practicing under the delegation of services agreement required by the profession's practice act

Mental Health Assessment – Participating as part of a multi-disciplinary team, qualified providers of this service assist in the psychiatric diagnostic evaluation process defined under Psychiatric Diagnostic Evaluation by face-to-face contacts with the patient to (1) gather psychosocial information including information on the patient's strengths, weaknesses and needs, and historical, social, functional, psychiatric, or other information; and (2) assist the patient to identify treatment goals. The provider assists in the psychiatric diagnostic reassessment/treatment plan review process specified under Psychiatric Diagnostic Evaluation by gathering updated psychosocial information and updated information on treatment goals and by assisting the patient to identify additional treatment goals. Information also may be collected through in-person or telephonic interviews with family/guardians or other sources as necessary. The information obtained is provided to the qualified provider identified on page 1 or on page 2 above who will perform the psychiatric diagnostic evaluation assessment or reassessment

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### LIMITATIONS (Continued)

#### Rehabilitative Mental Health Services

Qualified providers are: licensed social service workers; licensed substance use disorder counselors, licensed registered nurses, licensed practical nurses, individuals working toward licensure as a social service worker under supervision of a licensed mental health therapist in accordance with State law; and registered nursing students engaged in activities constituting the practice of a regulated occupation or profession while in training, in a recognized school approved by the State's licensing division and individuals enrolled in a qualified substance use disorder education program, exempted from licensure and under the supervision of qualified faculty, staff, or designee in accordance with State law.

Although these providers may perform this service, under State law only individuals qualified to conduct psychiatric diagnostic evaluations may diagnose mental health disorders and prescribe rehabilitative mental health services

#### Psychological Testing

Psychological testing is performed face-to-face with the patient using standardized psychological tests appropriate to the patient's needs, with interpretation and report. Psychological testing is coded in accordance with the CPT coding for psychological testing.

Qualified providers are: licensed physicians and surgeons or osteopathic physicians engaged in the practice of mental health therapy, licensed psychologists, certified psychology residents qualifying to engage in the practice of mental health therapy, and individuals exempted from licensure in accordance with State law psychology students engaged in activities constituting the practice of a regulated occupation or profession while in training in a recognized school approved by the State's licensing division under the supervision of qualified faculty, staff, or designee, and individuals employed as a psychologist by a state, county or municipal agency or other political subdivision of the state prior to July 1, 1981, and who subsequently have maintained employment as a psychologist in the same state, county, or municipal agency or other political subdivision while engaged in the performance of their official duties for that agency or political subdivision.

#### Psychotherapy

In accordance with the CPT definition for psychotherapy, psychotherapy is the treatment of mental illness and behavioral disturbances in which the provider through definitive therapeutic communication, attempts to alleviate emotional disturbance, reverse or change maladaptive patterns of behavior and encourage personality growth and development so that the patient may be restored to his or her best possible functional level. Psychotherapy includes ongoing assessment and adjustment of psychotherapeutic interventions, and may include involvement of family and includes psychotherapy with patient and/or family member, family psychotherapy with patient present, family psychotherapy without patient present, group psychotherapy and multiple-family group psychotherapy. Psychotherapy services are coded in accordance with CPT coding for psychotherapy services.

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Rehabilitative Mental Health Services

Individual Psychotherapy

Individual psychotherapy means face-to-face interventions with the patient and/or family member, and is coded in accordance with CPT coding for psychotherapy with patient and/or family member.

Family Psychotherapy with Patient Present

Family therapy with patient present means face-to-face interventions with family members and the identified patient with the goal of treating the patient's condition and improving the interaction between the patient and family members so that the patient and family may be restored to their best possible functional level. Family psychotherapy is coded in accordance with CPT coding for family psychotherapy with patient present.

Family Psychotherapy without Patient Present

Family therapy without patient present means face-to-face interventions with family members without the identified patient present with the goal of treating the patient's condition and improving the interaction between the patient and family members so that the patient and family may be restored to their best possible functional level. Family psychotherapy without patient present is performed in accordance with the CPT definition of psychotherapy and is coded in accordance with CPT coding for family psychotherapy without patient present.

Group Psychotherapy

Group psychotherapy means face-to-face interventions with two or more patients in a group setting where through interpersonal exchanges patients may be restored to their best possible functional level. Group psychotherapy is performed in accordance with the CPT definition of psychotherapy and is coded in accordance with CPT coding for group psychotherapy or multiple-family group psychotherapy.

Qualified providers of all psychotherapy services are: (1) licensed mental health therapists under State law; physicians and surgeons or osteopathic physicians engaged in the practice of mental health therapy; psychologists qualified to engage in the practice of mental health therapy; certified psychology residents qualifying to engage in the practice of mental health therapy; clinical social workers; certified social workers and certified social worker interns; advanced practice registered nurses (APRNs) licensed either as a nurse specialist or a nurse practitioner with psychiatric mental health nursing specialty certification (and any other licensed advanced nursing categories as approved by the State's licensing division when practicing within the scope of their practice act and competency); marriage and family therapists, associate marriage and family therapists, clinical mental health counselors; and associate clinical mental health counselors; (2) individuals working within the scope of their certificate or license in accordance with State law; licensed APRNs formally working toward psychiatric mental health nursing specialty certification through enrollment in a specialized mental health education program or through completion of post-education clinical hours; and licensed APRN interns formally working toward psychiatric mental health

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specialty certification and accruing the required clinical hours for the specialty nursing certification (and any other licensed advanced nursing categories as approved by the State's licensing division when practicing within the scope of their practice act and competency); and (3) individuals exempted from licensure as a mental health therapist in accordance with State law: students engaged in activities constituting the practice of a regulated occupation or profession while in training in a recognized school approved by the State's licensing division under the supervision of qualified faculty, staff, or designee, and individuals employed as a psychologist by a state, county, or municipal agency or other political subdivision of the state prior to July 1, 1981, and who subsequently have maintained employment as a psychologist in the same state, county, or municipal agency or other political subdivision while engaged in the performance of their official duties for that agency or political subdivision

Psychotherapy for Crisis

In accordance with the CPT definition for psychotherapy for crisis, this is a face-to-face service with the patient and/or family and includes an urgent assessment and history of a crisis state and disposition, psychotherapy to minimize the potential for psychological trauma, and mobilization of resources to defuse the crisis and restore safety, and implementation of psychotherapeutic interventions to minimize the potential for psychological trauma. The presenting problem is typically life threatening or complex and requires immediate attention to a patient in high distress. Providers may use CPT coding for this service if the crisis and interventions qualify for this coding. Qualified providers are the same as those who may perform psychotherapy services.

Psychotherapy with Evaluation and Management Services

Psychotherapy with evaluation and management services means psychotherapy with the patient and/or family member when performed with an evaluation and management service on the same day by the same provider. The psychotherapy service is coded in accordance with CPT coding for psychotherapy with patient and/or family member and the evaluation and management service is performed and coded in accordance with the CPT definitions and coding for evaluation and management services

Qualified providers are licensed physicians and surgeons or osteopathic physicians engaged in the practice of mental health therapy; licensed APRNs with psychiatric mental health nursing specialty certification; licensed APRNs formally working toward psychiatric mental health nursing specialty certification through enrollment in a specialized mental health education program or through completion of post-education clinical hours and licensed APRN interns formally working toward psychiatric mental health specialty certification and accruing the required clinical hours for the specialty nursing certification (and any other licensed advanced nursing categories as approved by the State's licensing division when practicing within the scope of their practice act and competency)

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LIMITATIONS (Continued)

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Pharmacologic Management

Pharmacologic management is provided face-to-face to a patient and/or family to address the patient's health issues and is provided and coded in accordance with the CPT definitions and coding for evaluation and management services.

Qualified providers are: licensed physicians and surgeons or osteopathic physicians regardless of specialty, licensed APRNs and licensed APRN interns regardless of specialty when practicing within the scope of their practice act and competency (and any other licensed advanced nursing categories as approved by the State's licensing division when practicing within the scope of their practice act and competency); and other practitioners licensed under State law who can perform the activities defined above when acting within the scope of his/her license, most commonly a licensed physician assistant when practicing under the delegation of services agreement required by their practice act.

Nurse Medication Management

Nurse medication management is provided face-to-face to a patient and/or family and includes reviewing/monitoring the patient's health issues, medication(s) and medication regimen, providing information, and administering medications as appropriate. The review of the patient's medications and medication regimen includes dosage, effect the medication(s) is having on the patient's symptoms, and side effects. The provision of appropriate information should address directions for proper and safe usage of medications

Qualified providers are: licensed registered nurses; licensed practical nurses; and registered nursing students engaged in activities constituting the practice of a regulated occupation or profession while in training in a recognized school approved by the State's licensing division exempted from licensure and under the supervision of qualified faculty, staff, or designee in accordance with State law.

Therapeutic Behavioral Services

Therapeutic behavioral services are provided face-to-face to an individual or a group and is coded when the service provided does not fully meet the definition of psychotherapy. Instead providers use behavioral interventions to assist patients with a specific identified behavior problem. The service may be provided to an individual or group

Qualified providers are: (1) licensed mental health therapists under State law: physicians and surgeons or osteopathic physicians engaged in the practice of mental health therapy, psychologists qualified to engage in the practice of mental health therapy; certified psychology residents qualifying to engage in the practice of mental health therapy; clinical social workers, certified social workers and certified social worker interns; advanced practice registered nurses (APRNs) licensed either as a nurse specialist or a nurse practitioner with psychiatric mental health nursing specialty certification (and any other licensed advanced nursing

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categories as approved by the State's licensing division when practicing within the scope of their practice act and competency); marriage and family therapists, associate marriage and family therapists, clinical mental health counselors; and associate clinical mental health counselors; (2) individuals working within the scope of their certificate or license in accordance with State law: licensed APRNs formally working toward psychiatric mental health nursing specialty certification through enrollment in a specialized mental health education program or through completion of post-education clinical hours; and licensed APRN interns formally working toward psychiatric mental health specialty certification and accruing the required clinical hours for the specialty nursing certification (and any other licensed advanced nursing categories as approved by the State's licensing division when practicing within the scope of their practice act and competency); and (3) individuals exempted from licensure as a mental health therapist in accordance with State law: students engaged in activities constituting the practice of a regulated occupation or profession while in training in a recognized school approved by the State's licensing division under the supervision of qualified faculty, staff, or designee, and individuals employed as a psychologist by a state, county or municipal agency or other political subdivision of the state prior to July 1, 1981, and who subsequently have maintained employment as a psychologist in the same state, county, or municipal agency or other political subdivision while engaged in the performance of their official duties for that agency or political subdivision. Licensed social service workers; licensed substance use disorder counselors, licensed registered nurses; individuals working toward licensure as a social service worker under supervision of a licensed mental health therapist in accordance with State law; and registered nursing students engaged in activities constituting the practice of a regulated occupation or profession while in training in a recognized school approved by the State's licensing division and individuals enrolled in a qualified substance use disorder education program exempted from licensure and under the supervision of qualified faculty, staff, or designee in accordance with State law, may also perform this service.

Psychosocial Rehabilitative Services

Psychosocial rehabilitative services are face-to-face services with an individual or a group and are designed to restore the patient to his or her maximum functional level through interventions such as cueing, modeling, and role-modeling of appropriate fundamental daily living and life skills. This service is aimed at maximizing the patient's basic daily living and life skills; increasing compliance with the patient's medication regimen as applicable; and reducing or eliminating symptomatology that interferes with the patient's functioning; in order to prevent the need for more restrictive levels of care such as inpatient hospitalization. Intensive psychosocial rehabilitative services may be coded when a ratio of no more than five patients per provider is maintained during a group service.

Qualified providers are: (1) licensed social service workers, (2) licensed substance use disorder counselors; (3) licensed registered nurses, (4) licensed practical nurses; (5) other trained individuals (but not including foster or proctor parents); and (6) individuals working toward licensure as a social service worker under supervision of a licensed mental health therapist in accordance with State law; and

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registered nursing students engaged in activities constituting the practice of a regulated occupation or profession while in training in a recognized school approved by the State's licensing division and individuals enrolled in a qualified substance use disorder education program exempted from licensure and under the supervision of qualified faculty, staff, or designee in accordance with State law. The individuals in (1)-(5) are the core service providers. The rate for this service is based on this core provider group

Other trained individuals are under the supervision of a licensed mental health therapist identified in (1) on this page below or a psychologist identified in (3) on this page below, or a licensed substance use disorder counselor identified in (2) on page 2e above when the service is provided to patients with substance use disorders. Other trained individuals receive training in areas including but not limited to administrative policies and procedures of the employing entity; emergency/crisis procedures, treatment planning, population(s) served, specific job responsibilities related to the patient population served, role and use of supervision, management of difficult behaviors, and medications and their role in treatment

In addition, the following providers may also provide this service (1) licensed mental health therapists under State law, physicians and surgeons or osteopathic physicians engaged in the practice of mental health therapy; psychologists qualified to engage in the practice of mental health therapy; certified psychology residents qualifying to engage in the practice of mental health therapy; clinical social workers; certified social workers and certified social worker interns; advanced practice registered nurses (APRNs) licensed either as a nurse specialist or a nurse practitioner with psychiatric mental health nursing specialty certification (and any other licensed advanced nursing categories as approved by the State's licensing division when practicing within the scope of their practice act and competency); and (3) individuals exempted from licensure as a mental health therapist in accordance with State law: students engaged in activities constituting the practice of a regulated occupation or profession while in training in a recognized school approved by the State's licensing division under the supervision of qualified faculty, staff, or designee, and individuals employed as a psychologist by a state, county or municipal agency or other political subdivision of the state prior to July 1, 1981, and who subsequently have maintained employment as a psychologist in the same state, county, or municipal agency or other political subdivision while engaged in the performance of their official duties for that agency or political subdivision. Licensed social service workers; licensed substance use disorder counselors; licensed registered nurses; individuals working toward licensure as a social service worker under supervision of a licensed mental health therapist in accordance with State law, and registered nursing students engaged in activities constituting the practice of a regulated occupation or profession while in training in a recognized school approved by the State's licensing division and individuals enrolled in a qualified substance use disorder education program exempted from licensure and under the supervision of qualified faculty, staff, or designee in accordance with State law, may also perform this service

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LIMITATIONS (Continued)

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Peer Support Services

Peer support services are provided for the primary purpose of assisting in the rehabilitation and recovery of individuals with mental health and/or substance use disorders. For children, peer support services are provided to their parents/legal guardians as appropriate to the child's age, and the services are directed exclusively toward the Medicaid-eligible child. Peer support services are provided face-to-face to an individual, a group of individuals or to parents/legal guardians. On occasion, it may be impossible to meet with the peer support specialist in which case a telephone contact with the client or his or her parent/legal guardian would be allowed.

Peer support groups are limited to a ratio of 1:8. Medicaid clients or parents/legal guardians of Medicaid-eligible children may participate in a maximum of four hours of peer support services a day.

Peer support services are designed to promote recovery. Peers offer a unique perspective that clients find credible; therefore, peer support specialists are in a position to build alliances and instill hope. Peer support specialists lend their unique insight into mental illness and what makes recovery possible.

Using their own recovery stories as a recovery tool, peer support specialists assist clients with creation of recovery goals and with goals in areas of employment, education, housing, community living, relationships and personal wellness. Peer support specialists also provide symptom monitoring, assist with symptom management, provide crisis prevention, and assist clients with recognition of health issues impacting them.

Peer support services must be recommended by an individual authorized under State law to perform psychiatric diagnostic evaluations and develop treatment plans. Peer support services are delivered in accordance with a written treatment/recovery plan. This plan is a comprehensive, holistic, individualized plan of care developed through a person-centered planning process. Patients lead and direct the design of their plans by identifying their own preferences and individualized measurable recovery goals. Treatment and recovery plans are reviewed by the patient and are updated to reflect the patient's progress and the patient's changing preferences, needs and goals.

To be eligible to qualify as a peer support services provider, individuals must be self-identified individuals at least 18 years of age. Individuals also are: (1) in recovery from a mental health and/or substance use disorder, (2) a parent of a child with a mental health and/or substance use disorder or (3) an adult who has or has had an ongoing and personal relationship with an individual with mental health and/or substance use disorder.

Qualified providers are certified peer support specialists. Qualified providers have successfully completed a peer support specialist training curriculum designed to give peer support specialists the competencies required to successfully perform peer support services. Curriculums are developed by the State of Utah, Department of Human Services, Division of Substance Abuse and Mental Health (DSAMH), in consultation with national

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experts in the field of peer support. Training is provided by DSAMH or a qualified individual or organization sanctioned by DSAMH. At the end of the training individuals must successfully pass a written examination. Successful individuals receive a written peer specialist certification from the DSAMH. Certified peer specialists also successfully complete any continuing education required by the DSAMH to maintain the certification.

The peer specialist training curriculum includes modules on stages of recovery, the role of peer support in the recovery process, using peers' recovery stories as a recovery tool, standards for peer support services, importance of beliefs that promote recovery; dynamics of change and the change process; how to facilitate recovery dialogue; effective active listening and questioning skills, dealing with crises; using dissatisfaction as an avenue for change, combating negative self-talk and facing fears, problem-solving; education on health issues impacting individual with mental illness; accomplishing recovery goals, peer specialist ethics and professional boundaries, including confidentiality and privacy, and documentation of services.

Certified peer specialists provide services under the supervision of one of the following: (1) a licensed mental health therapist under State law: a physician and surgeon or osteopathic physician engaged in the practice of mental health therapy, a psychologist qualified to engage in the practice of mental health therapy; a certified psychology resident; a clinical social worker, a certified social worker or certified social worker intern; an APRN licensed either as a nurse specialist or a nurse practitioner with psychiatric mental health nursing specialty certification (or any other licensed advanced nursing category as approved by the State's licensing division); a marriage and family therapist; an associate marriage and family therapist, a clinical mental health counselor; or an associate clinical mental health counselor; (2) an individual exempted from licensure as a mental health therapist in accordance with State law: an individual employed as a psychologist by a state, county or municipal agency or other political subdivision of the state prior to July 1, 1981, and who subsequently has maintained employment as a psychologist in the same state, county, or municipal agency or other political subdivision while engaged in the performance of his or her official duties for that agency or political subdivision; or (3) when peer support services are provided to individuals with substance use disorders, licensed substance use disorder counselors may supervise peer support specialists. Supervisors provide ongoing weekly individual and/or group supervision.

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Rehabilitative Mental Health Services

Rehabilitative mental health and substance use disorder services (hereinafter referred to as mental health services) are medically necessary services designed to promote the patient's mental health and restore the patient to the highest possible level of functioning. Services must be provided to or directed exclusively toward the treatment of the Medicaid individual.

Services and required supervision are provided in accordance with State law governing the applicable profession and in accordance with the profession's administrative rules as set forth by the Utah Department of Commerce and found at the Department of Administrative Services, Division of Administrative Rules. [www.Rules.utah.gov/publicat/code.htm](http://www.Rules.utah.gov/publicat/code.htm).

Services do not include room and board, services to residents of institutions for mental diseases, services covered elsewhere in the State Medicaid plan, educational, vocational and job training services, recreational and social activities, habilitation services and services provided to inmates of public institutions.

Psychiatric Diagnostic Evaluation

Psychiatric diagnostic evaluations are conducted face-to-face with the patient for the purpose of identifying the patient's need for mental health services. In accordance with the HCPCS/Current Procedural Terminology (CPT) definition for psychiatric diagnostic evaluations, the evaluation is an integrated biopsychosocial assessment, and includes history, mental status and recommendations. Psychiatric diagnostic evaluation with medical services is an integrated biopsychosocial and medical assessment, including history, mental status, other physical examination elements as indicated, and recommendations. The evaluation may include communication with family or other sources, prescription of medications, and review and ordering of laboratory or other diagnostic studies. In certain circumstances one or more other informants (family members, guardians, or significant others) may be seen in lieu of the patient. The service includes assessments and reassessments if required. The service is coded in accordance with CPT coding for psychiatric diagnostic evaluation. If it is determined mental health services are medically necessary, a provider qualified to perform this service is responsible for the development of an individualized treatment plan. The qualified provider is also responsible to conduct reassessments/treatment plan reviews with the patient as clinically indicated to ensure the patient's treatment plan is current and accurately reflects the patient's rehabilitative goals and needed mental health services.

Qualified providers are: (1) licensed mental health therapists under State law physicians and surgeons or osteopathic physicians engaged in the practice of mental health therapy, psychologists qualified to engage in the practice of mental health therapy, certified psychology residents qualifying to engage in the practice of mental health therapy, clinical social workers, certified social workers and certified social worker interns, advanced practice registered nurses (APRNs) licensed either as a nurse specialist or a nurse practitioner with psychiatric mental health nursing specialty certification (and any other licensed advanced nursing categories as approved by the State's licensing division when practicing within the scope of their practice act and competency), marriage and family therapists, associate marriage and family therapists, clinical mental health counselors, and associate clinical mental health counselors; (2) individuals working within

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the scope of their certificate or license in accordance with State law. licensed APRNs formally working toward psychiatric mental health nursing specialty certification through enrollment in a specialized mental health education program or through completion of post-education clinical hours; and licensed APRN interns formally working toward psychiatric mental health specialty certification and accruing the required clinical hours for the specialty nursing certification (and any other licensed advanced nursing categories as approved by the State's licensing division when practicing within the scope of their practice act and competency); and (3) individuals exempted from licensure as a mental health therapist in accordance with State law: students engaged in activities constituting the practice of a regulated occupation or profession while in training in a recognized school approved by the State's licensing division under the supervision of qualified faculty, staff, or designee, and individuals employed as a psychologist by a state, county or municipal agency or other political subdivision of the state prior to July 1, 1981, and who subsequently have maintained employment as a psychologist in the same state, county, or municipal agency or other political subdivision while engaged in the performance of their official duties for that agency or political subdivision

When evaluations are conducted for the purpose of determining need for medication prescription only, these evaluations may be conducted by licensed physicians and surgeons or osteopathic physicians regardless of specialty, licensed APRNs and licensed APRN interns regardless of specialty when practicing within the scope of their practice act and competency, (and any other licensed advanced nursing categories as approved by the State's licensing division when practicing within the scope of their practice act and competency), and other practitioners licensed under State law when acting within the scope of their practice, most commonly a physician assistant when practicing under the delegation of services agreement required by the profession's practice act.

Mental Health Assessment – Participating as part of a multi-disciplinary team, qualified providers of this service assist in the psychiatric diagnostic evaluation process defined under Psychiatric Diagnostic Evaluation by face-to-face contacts with the patient to: (1) gather psychosocial information including information on the patient's strengths, weaknesses and needs, and historical, social, functional, psychiatric, or other information and (2) assist the patient to identify treatment goals. The provider assists in the psychiatric diagnostic reassessment/treatment plan review process specified under Psychiatric Diagnostic Evaluation by gathering updated psychosocial information and updated information on treatment goals and by assisting the patient to identify additional treatment goals. Information also may be collected through in-person or telephonic interviews with family/guardians or other sources as necessary. The information obtained is provided to the qualified provider identified on page 1 or on page 2 above who will perform the psychiatric diagnostic evaluation assessment or reassessment.

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### LIMITATIONS (Continued)

#### Rehabilitative Mental Health Services

Qualified providers are: licensed social service workers; licensed substance use disorder counselors; licensed registered nurses, licensed practical nurses; individuals working toward licensure as a social service worker under supervision of a licensed mental health therapist in accordance with State law; and registered nursing students engaged in activities constituting the practice of a regulated occupation or profession while in training in a recognized school approved by the State's licensing division and individuals enrolled in a qualified substance use disorder education program exempted from licensure and under the supervision of qualified faculty, staff, or designee in accordance with State law.

Although these providers may perform this service, under State law only individuals qualified to conduct psychiatric diagnostic evaluations may diagnose mental health disorders and prescribe rehabilitative mental health services

#### Psychological Testing

Psychological testing is performed face-to-face with the patient using standardized psychological tests appropriate to the patient's needs, with interpretation and report. Psychological testing is coded in accordance with the CPT coding for psychological testing.

Qualified providers are: licensed physicians and surgeons or osteopathic physicians engaged in the practice of mental health therapy; licensed psychologists; certified psychology residents qualifying to engage in the practice of mental health therapy; and individuals exempted from licensure in accordance with State law psychology students engaged in activities constituting the practice of a regulated occupation or profession while in training in a recognized school approved by the State's licensing division under the supervision of qualified faculty, staff, or designee, and individuals employed as a psychologist by a state, county or municipal agency or other political subdivision of the state prior to July 1, 1981, and who subsequently have maintained employment as a psychologist in the same state, county, or municipal agency or other political subdivision while engaged in the performance of their official duties for that agency or political subdivision.

#### Psychotherapy

In accordance with the CPT definition for psychotherapy, psychotherapy is the treatment of mental illness and behavioral disturbances in which the provider through definitive therapeutic communication, attempts to alleviate emotional disturbance, reverse or change maladaptive patterns of behavior and encourage personality growth and development so that the patient may be restored to his or her best possible functional level. Psychotherapy includes ongoing assessment and adjustment of psychotherapeutic interventions, and may include involvement of family and includes psychotherapy with patient and/or family member, family psychotherapy with patient present, family psychotherapy without patient present, group psychotherapy and multiple-family group psychotherapy. Psychotherapy services are coded in accordance with CPT coding for psychotherapy services.

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Individual Psychotherapy

Individual psychotherapy means face-to-face interventions with the patient and/or family member and is coded in accordance with CPT coding for psychotherapy with patient and/or family member

Family Psychotherapy with Patient Present

Family therapy with patient present means face-to-face interventions with family members and the identified patient with the goal of treating the patient's condition and improving the interaction between the patient and family members so that the patient and family may be restored to their best possible functional level. Family psychotherapy is coded in accordance with CPT coding for family psychotherapy with patient present

Family Psychotherapy without Patient Present

Family therapy without patient present means face-to-face interventions with family members without the identified patient present with the goal of treating the patient's condition and improving the interaction between the patient and family members so that the patient and family may be restored to their best possible functional level. Family psychotherapy without patient present is performed in accordance with the CPT definition of psychotherapy and is coded in accordance with CPT coding for family psychotherapy without patient present.

Group Psychotherapy

Group psychotherapy means face-to-face interventions with two or more patients in a group setting where through interpersonal exchanges patients may be restored to their best possible functional level. Group psychotherapy is performed in accordance with the CPT definition of psychotherapy and is coded in accordance with CPT coding for group psychotherapy or multiple-family group psychotherapy

Qualified providers of all psychotherapy services are: (1) licensed mental health therapists under State law; physicians and surgeons or osteopathic physicians engaged in the practice of mental health therapy; psychologists qualified to engage in the practice of mental health therapy; certified psychology residents qualifying to engage in the practice of mental health therapy; clinical social workers, certified social workers and certified social worker interns; advanced practice registered nurses (APRNs) licensed either as a nurse specialist or a nurse practitioner with psychiatric mental health nursing specialty certification (and any other licensed advanced nursing categories as approved by the State's licensing division when practicing within the scope of their practice act and competency), marriage and family therapists, associate marriage and family therapists; clinical mental health counselors; and associate clinical mental health counselors; (2) individuals working within the scope of their certificate or license in accordance with State law: licensed APRNs formally working toward psychiatric mental health nursing specialty certification through enrollment in a specialized mental health education program or through completion of post-education clinical hours; and licensed APRN interns formally working toward psychiatric mental health

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Effective Date 1-1-13

REHABILITATIVE SERVICES

LIMITATIONS (Continued)

Rehabilitative Mental Health Services

specialty certification and accruing the required clinical hours for the specialty nursing certification (and any other licensed advanced nursing categories as approved by the State's licensing division when practicing within the scope of their practice act and competency); and (3) individuals exempted from licensure as a mental health therapist in accordance with State law. students engaged in activities constituting the practice of a regulated occupation or profession while in training in a recognized school approved by the State's licensing division under the supervision of qualified faculty, staff, or designee, and individuals employed as a psychologist by a state, county or municipal agency or other political subdivision of the state prior to July 1, 1981, and who subsequently have maintained employment as a psychologist in the same state, county, or municipal agency or other political subdivision while engaged in the performance of their official duties for that agency or political subdivision.

Psychotherapy for Crisis

In accordance with the CPT definition for psychotherapy for crisis, this is a face-to-face service with the patient and/or family, and includes an urgent assessment and history of a crisis state and disposition, psychotherapy to minimize the potential for psychological trauma, and mobilization of resources to defuse the crisis and restore safety, and implementation of psychotherapeutic interventions to minimize the potential for psychological trauma. The presenting problem is typically life threatening or complex and requires immediate attention to a patient in high distress. Providers may use CPT coding for this service if the crisis and interventions qualify for this coding. Qualified providers are the same as those who may perform psychotherapy services.

Psychotherapy with Evaluation and Management Services

Psychotherapy with evaluation and management services means psychotherapy with the patient and/or family member when performed with an evaluation and management service on the same day by the same provider. The psychotherapy service is coded in accordance with CPT coding for psychotherapy with patient and/or family member, and the evaluation and management service is performed and coded in accordance with the CPT definitions and coding for evaluation and management services

Qualified providers are licensed physicians and surgeons or osteopathic physicians engaged in the practice of mental health therapy, licensed APRNs with psychiatric mental health nursing specialty certification, licensed APRNs formally working toward psychiatric mental health nursing specialty certification through enrollment in a specialized mental health education program or through completion of post-education clinical hours and licensed APRN interns formally working toward psychiatric mental health specialty certification and accruing the required clinical hours for the specialty nursing certification (and any other licensed advanced nursing categories as approved by the State's licensing division when practicing within the scope of their practice act and competency)

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REHABILITATIVE SERVICES

LIMITATIONS (Continued)

Rehabilitative Mental Health Services

Pharmacologic Management

Pharmacologic management is provided face-to-face to a patient and/or family to address the patient's health issues and is provided and coded in accordance with the CPT definitions and coding for evaluation and management services.

Qualified providers are: licensed physicians and surgeons or osteopathic physicians regardless of specialty, licensed APRNs and licensed APRN interns regardless of specialty when practicing within the scope of their practice act and competency (and any other licensed advanced nursing categories as approved by the State's licensing division when practicing within the scope of their practice act and competency), and other practitioners licensed under State law who can perform the activities defined above when acting within the scope of his/her license, most commonly a licensed physician assistant when practicing under the delegation of services agreement required by their practice act.

Nurse Medication Management

Nurse medication management is provided face-to-face to a patient and/or family and includes reviewing/monitoring the patient's health issues, medication(s) and medication regimen, providing information, and administering medications as appropriate. The review of the patient's medications and medication regimen includes dosage, effect the medication(s) is having on the patient's symptoms, and side effects. The provision of appropriate information should address directions for proper and safe usage of medications

Qualified providers are: licensed registered nurses, licensed practical nurses, and registered nursing students engaged in activities constituting the practice of a regulated occupation or profession while in training in a recognized school approved by the State's licensing division exempted from licensure and under the supervision of qualified faculty, staff, or designee in accordance with State law.

Therapeutic Behavioral Services

Therapeutic behavioral services are provided face-to-face to an individual or a group and is coded when the service provided does not fully meet the definition of psychotherapy. Instead providers use behavioral interventions to assist patients with a specific identified behavior problem. The service may be provided to an individual or group.

Qualified providers are: (1) licensed mental health therapists under State law: physicians and surgeons or osteopathic physicians engaged in the practice of mental health therapy; psychologists qualified to engage in the practice of mental health therapy; certified psychology residents qualifying to engage in the practice of mental health therapy, clinical social workers; certified social workers and certified social worker interns, advanced practice registered nurses (APRNs) licensed either as a nurse specialist or a nurse practitioner with psychiatric mental health nursing specialty certification (and any other licensed advanced nursing

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REHABILITATIVE SERVICES

LIMITATIONS (Continued)

Rehabilitative Mental Health Services

categories as approved by the State's licensing division when practicing within the scope of their practice act and competency); marriage and family therapists; associate marriage and family therapists; clinical mental health counselors; and associate clinical mental health counselors; (2) individuals working within the scope of their certificate or license in accordance with State law: licensed APRNs formally working toward psychiatric mental health nursing specialty certification through enrollment in a specialized mental health education program or through completion of post-education clinical hours; and licensed APRN interns formally working toward psychiatric mental health specialty certification and accruing the required clinical hours for the specialty nursing certification (and any other licensed advanced nursing categories as approved by the State's licensing division when practicing within the scope of their practice act and competency), and (3) individuals exempted from licensure as a mental health therapist in accordance with State law: students engaged in activities constituting the practice of a regulated occupation or profession while in training in a recognized school approved by the State's licensing division under the supervision of qualified faculty, staff, or designee; and individuals employed as a psychologist by a state, county or municipal agency or other political subdivision of the state prior to July 1, 1981; and who subsequently have maintained employment as a psychologist in the same state, county, or municipal agency or other political subdivision while engaged in the performance of their official duties for that agency or political subdivision. Licensed social service workers; licensed substance use disorder counselors; licensed registered nurses; individuals working toward licensure as a social service worker under supervision of a licensed mental health therapist in accordance with State law; and registered nursing students engaged in activities constituting the practice of a regulated occupation or profession while in training in a recognized school approved by the State's licensing division and individuals enrolled in a qualified substance use disorder education program exempted from licensure and under the supervision of qualified faculty, staff, or designee in accordance with State law; may also perform this service.

Psychosocial Rehabilitative Services

Psychosocial rehabilitative services are face-to-face services with an individual or a group and are designed to restore the patient to his or her maximum functional level through interventions such as cueing, modeling, and role-modeling of appropriate fundamental daily living and life skills. This service is aimed at maximizing the patient's basic daily living and life skills, increasing compliance with the patient's medication regimen as applicable, and reducing or eliminating symptomatology that interferes with the patient's functioning, in order to prevent the need for more restrictive levels of care such as inpatient hospitalization. Intensive psychosocial rehabilitative services may be coded when a ratio of no more than five patients per provider is maintained during a group service

Qualified providers are (1) licensed social service workers; (2) licensed substance use disorder counselors; (3) licensed registered nurses; (4) licensed practical nurses; (5) other trained individuals (but not including foster or proctor parents); and (6) individuals working toward licensure as a social service worker under supervision of a licensed mental health therapist in accordance with State law; and

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REHABILITATIVE SERVICES

LIMITATIONS (Continued)

Rehabilitative Mental Health Services

registered nursing students engaged in activities constituting the practice of a regulated occupation or profession while in training in a recognized school approved by the State's licensing division and individuals enrolled in a qualified substance use disorder education program exempted from licensure and under the supervision of qualified faculty, staff, or designee in accordance with State law. The individuals in (1)-(5) are the core service providers. The rate for this service is based on this core provider group.

Other trained individuals are under the supervision of a licensed mental health therapist identified in (1) on this page below or a psychologist identified in (3) on this page below; or a licensed substance use disorder counselor identified in (2) on page 2e above when the service is provided to patients with substance use disorders. Other trained individuals receive training in areas including but not limited to administrative policies and procedures of the employing entity, emergency/crisis procedures, treatment planning, population(s) served, specific job responsibilities related to the patient population served, role and use of supervision, management of difficult behaviors, and medications and their role in treatment.

In addition, the following providers may also provide this service: (1) licensed mental health therapists under State law: physicians and surgeons or osteopathic physicians engaged in the practice of mental health therapy; psychologists qualified to engage in the practice of mental health therapy; certified psychology residents qualifying to engage in the practice of mental health therapy; clinical social workers, certified social workers and certified social worker interns; advanced practice registered nurses (APRNs) licensed either as a nurse specialist or a nurse practitioner with psychiatric mental health nursing specialty certification (and any other licensed advanced nursing categories as approved by the State's licensing division when practicing within the scope of their practice act and competency); and (3) individuals exempted from licensure as a mental health therapist in accordance with State law: students engaged in activities constituting the practice of a regulated occupation or profession while in training in a recognized school approved by the State's licensing division under the supervision of qualified faculty, staff, or designee, and individuals employed as a psychologist by a state, county or municipal agency or other political subdivision of the state prior to July 1, 1981, and who subsequently have maintained employment as a psychologist in the same state, county, or municipal agency or other political subdivision while engaged in the performance of their official duties for that agency or political subdivision. Licensed social service workers; licensed substance use disorder counselors; licensed registered nurses; individuals working toward licensure as a social service worker under supervision of a licensed mental health therapist in accordance with State law, and registered nursing students engaged in activities constituting the practice of a regulated occupation or profession while in training in a recognized school approved by the State's licensing division and individuals enrolled in a qualified substance use disorder education program exempted from licensure and under the supervision of qualified faculty, staff, or designee in accordance with State law, may also perform this service.

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Effective Date 1-1-13

REHABILITATIVE SERVICES

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LIMITATIONS (Continued)

Rehabilitative Mental Health Services

Peer Support Services

Peer support services are provided for the primary purpose of assisting in the rehabilitation and recovery of individuals with mental health and/or substance use disorders. For children, peer support services are provided to their parents/legal guardians as appropriate to the child's age, and the services are directed exclusively toward the Medicaid-eligible child. Peer support services are provided face-to-face to an individual, a group of individuals or to parents/legal guardians. On occasion, it may be impossible to meet with the peer support specialist in which case a telephone contact with the client or his or her parent/legal guardian would be allowed.

Peer support groups are limited to a ratio of 1:8. Medicaid clients or parents/legal guardians of Medicaid-eligible children may participate in a maximum of four hours of peer support services a day.

Peer support services are designed to promote recovery. Peers offer a unique perspective that clients find credible, therefore, peer support specialists are in a position to build alliances and instill hope. Peer support specialists lend their unique insight into mental illness and what makes recovery possible.

Using their own recovery stories as a recovery tool, peer support specialists assist clients with creation of recovery goals and with goals in areas of employment, education, housing, community living, relationships and personal wellness. Peer support specialists also provide symptom monitoring, assist with symptom management, provide crisis prevention, and assist clients with recognition of health issues impacting them.

Peer support services must be recommended by an individual authorized under State law to perform psychiatric diagnostic evaluations and develop treatment plans. Peer support services are delivered in accordance with a written treatment/recovery plan. This plan is a comprehensive, holistic, individualized plan of care developed through a person-centered planning process. Patients lead and direct the design of their plans by identifying their own preferences and individualized measurable recovery goals. Treatment and recovery plans are reviewed by the patient and are updated to reflect the patient's progress and the patient's changing preferences, needs and goals.

To be eligible to qualify as a peer support services provider, individuals must be self-identified individuals at least 18 years of age. Individuals also are (1) in recovery from a mental health and/or substance use disorder, (2) a parent of a child with a mental health and/or substance use disorder or (3) an adult who has or has had an ongoing and personal relationship with an individual with mental health and/or substance use disorder.

Qualified providers are certified peer support specialists. Qualified providers have successfully completed a peer support specialist training curriculum designed to give peer support specialists the competencies required to successfully perform peer support services. Curricula are developed by the State of Utah, Department of Human Services, Division of Substance Abuse and Mental Health (DSAMH), in consultation with national

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T.N. # 13-003

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REHABILITATIVE SERVICES (Continued)

LIMITATIONS (Continued)

Rehabilitative Mental Health Services

experts in the field of peer support. Training is provided by DSAMH or a qualified individual or organization sanctioned by DSAMH. At the end of the training individuals must successfully pass a written examination. Successful individuals receive a written peer specialist certification from the DSAMH. Certified peer specialists also successfully complete any continuing education required by the DSAMH to maintain the certification.

The peer specialist training curriculum includes modules on stages of recovery, the role of peer support in the recovery process, using peers' recovery stories as a recovery tool; standards for peer support services; importance of beliefs that promote recovery; dynamics of change and the change process; how to facilitate recovery dialogue; effective active listening and questioning skills; dealing with crises, using dissatisfaction as an avenue for change, combating negative self-talk and facing fears, problem-solving, education on health issues impacting individual with mental illness; accomplishing recovery goals; peer specialist ethics and professional boundaries, including confidentiality and privacy; and documentation of services.

Certified peer specialists provide services under the supervision of one of the following: (1) a licensed mental health therapist under State law: a physician and surgeon or osteopathic physician engaged in the practice of mental health therapy; a psychologist qualified to engage in the practice of mental health therapy, a certified psychology resident, a clinical social worker, a certified social worker or certified social worker intern; an APRN licensed either as a nurse specialist or a nurse practitioner with psychiatric mental health nursing specialty certification (or any other licensed advanced nursing category as approved by the State's licensing division); a marriage and family therapist, an associate marriage and family therapist, a clinical mental health counselor; or an associate clinical mental health counselor; (2) an individual exempted from licensure as a mental health therapist in accordance with State law: an individual employed as a psychologist by a state, county or municipal agency or other political subdivision of the state prior to July 1, 1981, and who subsequently has maintained employment as a psychologist in the same state, county, or municipal agency or other political subdivision while engaged in the performance of his or her official duties for that agency or political subdivision; or (3) when peer support services are provided to individuals with substance use disorders, licensed substance use disorder counselors may supervise peer support specialists. Supervisors provide ongoing weekly individual and/or group supervision.

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Effective Date 1-1-13

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REHABILITATIVE MENTAL HEALTH SERVICES

This payment plan covers rehabilitative mental health services. Rehabilitative mental health services are paid using a uniform fee schedule. Services are defined by HCPCS codes and prices using a fixed fee schedule. Payments are made to providers on a fee-for-service basis for defined units of service. The state-developed fee schedule rates are the same for both governmental and non-governmental providers.

The agency's fee schedule rates for mental health services were set as of January 1, 2013, and are effective for services provided on or after that date. Fee schedule payments are based on the established fee schedule unless a lower amount is billed. All rates are published at <http://health.utah.gov/medicaid/>.

To ensure continued access to specialized psychiatric pharmacologic management, when physicians and other qualified prescribers allowed under state law include the CG modifier with evaluation and management code 99213, 99214, 99308, 99309, 99310, 99348 or 99349, then the fee in effect for psychiatric pharmacologic management, procedure code 90862, on December 31, 2012, is used to determine payment. The methodology is not applied if the evaluation and management service is billed with any add-on procedure codes allowed by Current Procedural Terminology (CPT) coding for evaluation and management services.

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Effective Date 1-1-13

## Region 8 SPA Clearance Form

<b>State:</b>	<b>Document Number:</b>	<b>RO Lead Analyst:</b>	<b>Central Office Lead Analyst(s):</b>
Utah	UT-13-003	Sophia Hinojosa	Walch/Resler

<b>Subject Of Request:</b>	<b>Fiscal Impact:</b>	2013	\$0	2014	\$0		
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This SPA is amending the Medicaid State Plan to include rehabilitative mental health services, rehabilitative substance use disorder services, rehabilitative mental health and substance use disorder services for individuals eligible for Medicaid under EPSDT, and peer support services, in one section, whereas currently they are in four separate sections of the State Plan.

DMHF will also eliminate the Attachment 4.19-B sections that are no longer necessary due to the consolidation. DMHF will amend the remaining Attachment 4.19-B sections to remove outdated language, and to address the deletion of the Current Procedural Terminology (CPT) code for psychiatric pharmacologic management that is effective January 1, 2013, due to changes published in the 2013 edition of the CPT manual. Pending CMS approval of this amendment, providers may be paid for select established patient evaluation and management (E&M) codes at the rate that was in effect for psychiatric pharmacologic management on December 31, 2012.

<b>Affected Sections/Pages:</b>	<b>Effective Date:</b>
3.1-A/3.1-B, pgs 1, 2, 2a, 2b, 2c, 2d, 2e, 2f, 2g, and 2h of att. #13; 4.19-B pgs 9 and 29d Remove w/o replacement: 3.1-A/3.1-B, pgs 4, 4a, 8, and 8a of att #13, pgs 7, 8, and 8a - 8g of att #4b	01/01/13

<b>Date of Public Notice:</b>	12/15/12	<b>P.N. Method:</b>	Utah State Bulletin, Vol 2012, #24	<b>Tribal Consult:</b>	09/07/12
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Target	Action	Soft Date	Hard Date
Received:	SPA Received via SPA Email Box		01/24/2013
25th Day:	SEA updated with description information		02/18/2013
30th Day:	Pending Report to Penny Thompson		02/23/2013
45-76th Days:	Formal RAI letter sent if necessary (target 60th day)	03/10/2013	04/10/2013
50th Day:	CO: Disapproval package prepared and submitted		03/15/2013
60th-76th Day:	SEA data updated and marked Pending-Concurrence	03/25/2013	04/10/2013
90th Day:	Final Due Date		04/24/2013

<b>PCA:</b>	<b>PCA Released:</b>	<b>Disposition:</b>	<b>Closing Date:</b>	<b>RAI Requested</b>	<b>RAI Expires:</b>	<b>RAI Rec'd</b>	<b>New 90th Day:</b>
3/19							

Date:	Task done by SPC:	Date:	Task done by SPC:
01/24/2013	New item entered into SEA	/	File LaserFiched
01/24/2013	File to Analyst (hard copy and electronic)		Hard Copy Filed
01/24/2013	Electronic file sent to Central Office		SEA Updated
			Approval package to State/Web/CO

**Approval Signatures**

Action	Lead Analyst/Date	PMB Mgr/Date	ARA/Date	SPC/Date
RAI Letter Sent	N/A	N/A	N/A	N/A
Pending Concurrence	Jensen 3/19	MARCHIONI 3/19	N/A	Jurner 3/19
Disposition Letter	Jurner 3/21	N/A	Jurner 3/21	Jurner 3/21
SPA Released	N/A	N/A	Jurner 3/21	Jurner 3/21

**Notes/Comments:**

**Jensen, Laurie (CMS/CMCHO)**

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**From:** Walch, Kathleen M. (CMS/CMCS)  
**Sent:** Tuesday, March 19, 2013 1:59 PM  
**To:** Strecker, Betty L (CMS/WC); Smilow, Alexandra (CMS/CMCS); Jensen, Laurie (CMS/CMCHO); Cieslicki, Mary E. (CMS/CMCS); Fuller, Oscar A. (CMS/WC)  
**Cc:** Burch Mack, Rebecca M.(CMS/CMCHO); Hinojosa, Sophia A. (CMS/WC); Mikow, Asher S (CMS/CMCS)  
**Subject:** RE: UT 13-003

Hi Betty,

We are clearing UT 13-003 regarding reimbursement. We do not have any additional questions.

Thanks

Kathy

Kathleen Walch BSN, RN | Division of Reimbursement and State Financing | Financial Management Group | Center for Medicaid and CHIP Services | Centers for Medicare & Medicaid Services  
410-786-7970 | [kathleen.walch@cms.hhs.gov](mailto:kathleen.walch@cms.hhs.gov)

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**From:** Strecker, Betty L. (CMS/WC)  
**Sent:** Thursday, March 14, 2013 10:04 AM  
**To:** Smilow, Alexandra (CMS/CMCS); Jensen, Laurie (CMS/CMCHO); Walch, Kathleen M. (CMS/CMCS); Cieslicki, Mary E. (CMS/CMCS); Fuller, Oscar A. (CMS/WC)  
**Cc:** Burch Mack, Rebecca M.(CMS/CMCHO); Hinojosa, Sophia A. (CMS/WC)  
**Subject:** RE: UT 13-003

Thanks Ali! Betty

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**From:** Smilow, Alexandra (CMS/CMCS)  
**Sent:** Thursday, March 14, 2013 8:27 AM  
**To:** Jensen, Laurie (CMS/CMCHO); Walch, Kathleen M. (CMS/CMCS); Cieslicki, Mary E. (CMS/CMCS); Fuller, Oscar A. (CMS/WC)  
**Cc:** Strecker, Betty L. (CMS/WC); Burch Mack, Rebecca M.(CMS/CMCHO); Hinojosa, Sophia A. (CMS/WC)  
**Subject:** RE: UT 13-003

I do not have any additional questions either and clear for coverage. Thanks!

Ali Smilow  
Health Insurance Specialist  
Division of Benefits and Coverage  
Disabled and Elderly Health Programs Group  
Center for Medicaid, CHIP, and Survey & Certification  
Centers for Medicare and Medicaid Services  
(p) 410-786-0790  
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**From:** Jensen, Laurie (CMS/CMCHO)

**Sent:** Wednesday, March 13, 2013 3:01 PM

**To:** Walch, Kathleen M. (CMS/CMCS); Cieslicki, Mary E. (CMS/CMCS); Smilow, Alexandra (CMS/CMCS); Fuller, Oscar A. (CMS/WC)

**Cc:** Strecker, Betty L. (CMS/WC); Burch Mack, Rebecca M.(CMS/CMCHO); Hinojosa, Sophia A. (CMS/WC)

**Subject:** UT 13-003

Hi Everyone, Utah has provided the amended pages to the SPA and responses to the questions we sent. Betty and I do not have any further questions. Please review what they have provided and let us know if you are satisfied with the responses and that you recommend for UT 13-003 to be approved. Thanks Laurie

**Laurie Jensen**

Health Insurance Specialist

Denver Regional Office

1600 Broadway Suite 700 Denver, CO 80202

Phone: 303-844-7126



**Jensen, Laurie (CMS/CMCHO)**

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**From:** Smilow, Alexandra (CMS/CMCS)  
**Sent:** Thursday, March 14, 2013 7:27 AM  
**To:** Jensen, Laurie (CMS/CMCHO); Walsh, Kathleen M. (CMS/CMCS); Cieslicki, Mary E. (CMS/CMCS); Fuller, Oscar A. (CMS/WC)  
**Cc:** Strecker, Betty L. (CMS/WC); Burch Mack, Rebecca M. (CMS/CMCHO); Hinojosa, Sophia A. (CMS/WC)  
**Subject:** RE: UT 13-003

I do not have any additional questions either and clear for coverage. Thanks!

Ali Smilow  
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**From:** Jensen, Laurie (CMS/CMCHO)  
**Sent:** Wednesday, March 13, 2013 3:01 PM  
**To:** Walsh, Kathleen M. (CMS/CMCS); Cieslicki, Mary E. (CMS/CMCS); Smilow, Alexandra (CMS/CMCS); Fuller, Oscar A. (CMS/WC)  
**Cc:** Strecker, Betty L. (CMS/WC); Burch Mack, Rebecca M. (CMS/CMCHO); Hinojosa, Sophia A. (CMS/WC)  
**Subject:** UT 13-003

Hi Everyone, Utah has provided the amended pages to the SPA and responses to the questions we sent. Betty and I do not have any further questions. Please review what they have provided and let us know if you are satisfied with the responses and that you recommend for UT 13-003 to be approved. Thanks Laurie

**Laurie Jensen**  
Health Insurance Specialist  
Denver Regional Office  
1600 Broadway Suite 700 Denver, CO 80202  
Phone: 303-844-7126

**CMS Informal Questions/Comments**  
**SPA: UT-13-003 Rehabilitative Mental Health Services**  
**Date 03/06/2013**

CMS is requesting the State to respond to the following questions/comments related to our review of Utah State Plan Amendment (SPA) 13-003:

**General**

1. Throughout the rehabilitation section, the state indicates that services are provided in accordance with CPT definition. Please provide a service description for each of the components of rehabilitative services. The state can choose to keep the current CPT reference in the state plan or remove it.

**State's response:** We have provided a service description for each service. We have revised the descriptions to state 'in accordance with the CPT definition of [the name of service]...' and then state the definition and that the service is coded in accordance with CPT coding for that service

2. Attachment 4.19 B, page 25: There is a small typo in the first line of the second paragraph; it appears that the word "are" was intended instead of "re". Please correct.

**State's response:** This was corrected, and page 25 was resubmitted to the CMS mail box on 2/14/13.

**Qualified Providers**

3. Are individuals who are unlicensed or exempted from licensure, working under the direction or supervision of a licensed or certified provider? Please include this language on the plan page.

**State's response:** Yes, they work under the direction and supervision of a licensed provider. This language has been included on the plan pages.

4. Please clarify the qualifications of "interns" and confirm that the Utah State code allows interns to provide these services.

**State's response:** The Utah Code specifically references students and interns as classifications exempted from licensure. However, after the call with CMS on 3/5/13, staff again discussed this section of the Utah Code with the State's licensing division. State staff was told that the provision regarding students exempted from licensure would be the applicable provision for mental health services, rather than the provision regarding internships. As stated on the call, students are required to do internships as part of their educational program. As a result of the direction from the State's licensing division, the State has removed the reference to individuals in an internship as being exempted from licensure since the provision regarding student exemption from licensure suffices for mental health services. All applicable plan pages have been revised accordingly.

5. CMS prefers that states avoid using incorporation by reference within the State plan, as when State statutes or laws are modified it can affect with State Plan without the knowledge of CMS. Please remove the references to the Title 58 of Utah's Code and replace with more specific language describing the supervision of these professionals.

**State's response:** The State has removed the reference to the Utah Code and as per the recommendation during the conference call, has replaced that with 'State law' and has further described the supervision requirements.

### Services

6. Service language varies between 3.1-A and B and 4.19 B, please be consistent with services language, please amend and replace the applicable pages.

**State's response:** On the 4.19-B plan page, the State has updated the heading and the first sentence to just reference mental health services.

7. Face-to-Face requirements: Language addressing face-to-face contact was removed from Mental Health Assessment, Psychotherapy, Pharmacologic Management and Psychosocial Rehabilitative services. Please confirm whether is intentional or an oversight. If it is an oversight please amend and replace the applicable pages.

**State's response:** The State has added 'face-to-face' for all services where it had not been included.

### Peer Support Services:

8. Are individuals who are in recovery from substance use also eligible to qualify as a peer support provider? The state has only identified individuals in recovery from mental illness as eligible providers. However, the state has indicated that the purpose of peer support services is to assist individuals with mental health **and/or** substance use disorders.

**State's response:** Yes, that was an oversight. The State has corrected this. At the same time, the State has revised the wording to be consistent regarding provider qualifications for all three groups of providers. The qualifications now state 'mental health or substance use disorder' for all three groups of providers.