

CHAPTER 2: BEHAVIORAL HEALTH SERVICES**REVISION HISTORY LOG**

Revised/ Issued Date	Section	Section Title	Number of Page (s)	Reason for Revision
10/01/24	Section 2.3	Outpatient Services – Outpatient Therapy by Licensed Practitioners	8	Revisions made to update Provider Qualifications and Billing criteria.
10/01/24	Appendix E-5	Evidence Based Practices (EBPs) – Child Parent Psychotherapy	9	Revisions made to update Allowed Provider Types and Specialties criteria.
10/01/24	Appendix E-6	Evidence Based Practices (EBPs) – Parent Child Interaction Therapy	9	Revisions made to update Allowed Provider Types and Specialties criteria.
10/01/24	Appendix E-7	Evidence Based Practices (EBPs) – Preschool PTSD Treatment and Youth PTSD Treatment	8	Revisions made to update Allowed Provider Types and Specialties criteria.
10/01/24	Appendix E-8	Evidence Based Practices (EBPs) – Triple P Positive Parenting Program	8	Revisions made to update Allowed Provider Types and Specialties criteria.

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10/01/24	Appendix E-9	Evidence Based Practices (EBPs) – Trauma-Focused Cognitive Behavioral Therapy	10	Revisions made to update Allowed Provider Types and Specialties criteria.
10/01/24	Appendix E-10	Evidence Based Practices (EBPs) – Eye Movement Desensitization and Reprocessing (EDMR) Therapy	12	Revisions made to update Allowed Provider Types and Specialties criteria.
10/01/24	Appendix E-11	Evidence Based Practices (EBPs) – Dialectical Behavioral Therapy (DBT)	17	Revisions made to update Allowed Provider Types and Specialties criteria.