LOUISIANA MEDICAID PROGRAM

ISSUED: 10/07/20 REPLACED: 07/01/20

CHAPTER 2: BEHAVIORAL HEALTH SERVICES SECTION: TABLE OF CONTENTS

PAGE(S) 8

BEHAVIORAL HEALTH SERVICES

TABLE OF CONTENTS

SUBJECT	SECTION
OVERVIEW	SECTION 2.0
PROVIDER REQUIREMENTS	SECTION 2.1
RESIDENTIAL SERVICES	SECTION 2.2
Therapeutic Group HomesComponentsProvider QualificationsAdditional Organizational RequirementsAgencyStaffing QualificationsAllowed Provider Types and SpecialtiesEligibility CriteriaService UtilizationService ExclusionsAllowed Mode(s) of DeliveryAdditional Service CriteriaTGH Cost Reporting Requirements	
Psychiatric Residential Treatment FacilitiesPlan of CareProvider QualificationsAgencyAdditional Organizational RequirementsStaffStaffingTreatment Model and Service DeliveryAllowed Provider Types and SpecialtiesEligibility CriteriaLimitations/Exclusions	

ISSUED:

CHAPTER 2:BEHAVIORAL HEALTH SERVICESSECTION:TABLE OF CONTENTS

PAGE(S) 8

10/07/20

OUTPATIENT SERVICES

SECTION 2.3

Behavioral Health Services in a Federally Qualified Health Center or Rural Health Center

Provider Qualifications Agency or Group Practice Allowed Provider Types and Specialties Eligibility Criteria Allowed Mode(s) of Delivery

Outpatient Therapy by Licensed Practitioners

Provider Qualifications Agency or Group Practice Allowed Provider Types and Specialties Eligibility Criteria Limitations/Exclusions Allowed Mode(s) of Delivery Additional Service Criteria Telehealth

Rehabilitation Services for Children, Adolescents, and Adults

Children and Adolescents Adults Service Delivery Assessment and Treatment Planning **Provider Responsibilities** Eligibility Criteria Service Utilization Additional Service Criteria Limitations/Exclusions Psychosocial Rehabilitation Components **Provider Qualifications** Agency Staff Staff Ratio(s) Allowed Provider Types and Specialties Allowed Mode(s) of Delivery **Crisis Intervention** Components **Provider Qualifications** Agency

10/07/20 07/01/20

CHAPTER 2:BEHAVIORAL HEALTH SERVICESSECTION:TABLE OF CONTENTS

PAGE(S) 8

Staff Allowed Provider Types and Specialties Service Utilization Eligibility Criteria Service Utilization Allowed Mode(s) of Delivery Additional Service Criteria **Crisis Stabilization** Components **Provider Qualifications** Agency Staff Allowed Provider Types and Specialties Limitations/Exclusions Service Utilization Allowed Mode(s) of Delivery **Community Psychiatric Support and Treatment** Components **Provider Qualifications** Agency Staff Allowed Provider Types and Specialties Limitations/Exclusions Allowed Mode(s) of Delivery Additional Service Criteria Staff Ratio(s)

ADDICTION SERVICES

SECTION 2.4

ASAM Levels Covered Provider Qualifications Agency Staff Allowed Provider Types and Specialties Eligibility Criteria Allowed Mode(s) of Delivery Additional Service Criteria ASAM Level 1 in an Outpatient Setting Admission Guidelines for ASAM Level 1 Additional Admission Guidelines for Outpatient Treatment Screening/Assessment/Treatment Plan Review Provider Qualifications

CHAPTER 2: BEHAVIORAL HEALTH SERVICES SECTION: TABLE OF CONTENTS

Agency
Staff
Staffing Requirements
Additional Staffing and Service Components
ASAM Level 2.1 Intensive Outpatient Treatment
Admission Guidelines for ASAM Level 2.1 Intensive Outpatient Treatment
Additional Admission Guidelines for Intensive Outpatient Treatment
Screening/Assessment/Treatment Plan Review
Provider Qualifications
Staffing Requirements
Additional Staffing and Service Components
ASAM Level 2-WM Ambulatory Withdrawal Management with Extended On-Site
Monitoring
Admission Guidelines for ASAM Level 2-WM Ambulatory Withdrawal
Management with Extended On-Site Monitoring
Screening/Assessment/Treatment Plan Review
Provider Qualifications
Staffing Requirements
Additional Staffing and Service Components
Allowed Provider Types and Specialties
Eligibility Criteria
Allowed Mode(s) of Delivery
Additional Service Criteria
ASAM Level 3.1: Clinically managed low-intensity residential treatment- Adolescent
Admission Guidelines
Screening, Assessment, and Treatment Plan Review
Provider Qualifications
Staffing Requirements
Additional Staffing and Service Components
ASAM Level 3.1: Clinically managed low-intensity residential treatment- Adults
Admission Guidelines
Screening, Assessment, and Treatment Plan Review
Provider Qualifications
Staffing Requirements
Additional Staffing and Service Components
ASAM Level 3.2-WM: Clinically managed residential social withdrawal management
Adolescent
Admission Guidelines
Emergency Admissions
Screening, Assessment, and Treatment Plan Review
Provider Qualifications
Staffing Requirements
Additional Staffing and Service Components

LOUISIANA MEDICAID PROGRAM

ISSUED: REPLACED: 10/07/20 07/01/20

CHAPTER 2: BEHAVIORAL HEALTH SERVICES SECTION: TABLE OF CONTENTS

PAGE(S) 8

Minimum Standards of Practice
ASAM Level 32WM: Clinically managed residential social withdrawal management
Adults
Admission Guidelines
Emergency Admissions
Screening, Assessment, and Treatment Plan Review
Provider Qualifications
Staffing Requirements
Additional Staffing and Service Components
Minimum Standards of Practice
ASAM Level 3.3: Clinically managed population specific high intensity residential
treatment- Adult
Admission Guidelines
Screening, Assessment, and Treatment Plan Review
Provider Qualifications
Staffing Requirements
Additional Staffing and Service Components
Minimum Standards of Practice
Women with Dependent Children Program
ASAM Level 3.5: Clinically managed medium intensity residential treatment –
Adolescent
Admission Guidelines
Screening, Assessment, and Treatment Plan Review
Provider Qualifications
Staffing Requirements
Additional Staffing and Service Components
ASAM Level 3.5: Clinically managed high intensity residential treatment- Adult
Admission Guidelines
Screening, Assessment, and Treatment Plan Review
Provider Qualifications
Staffing Requirements
Additional Staffing and Service Components
ASAM Level 3.7: Medically monitored high intensity inpatient treatment- Adult
Admission Guidelines
Emergency Admission
Screening, Assessment, and Treatment Plan Review
Provider Qualifications
Staffing Requirements
Additional Staffing and Service Components
ASAM Level 3.7: Medically monitored intensive inpatient treatment – Adolescent
Admission Guidelines
Emergency Admission
Screening, Assessment, and Treatment Plan Review

10/07/20 07/01/20

CHAPTER 2: BEHAVIORAL HEALTH SERVICES SECTION: TABLE OF CONTENTS

Pro	vider Qualifications
Stat	fing Requirements
Ado	litional Staffing and Service Components
ASAM Lev	vel 3.7-WM: Medically monitored inpatient withdrawal management- Adult
	nission Guidelines
Em	ergency Admissions
	cening, Assessment, and Treatment Plan Review
	vider Qualifications
	fing Requirements
	litional Staffing and Service Components
Mir	nimum Standards of Practice
ASAM Lev	vel 4-WM: Medically managed intensive inpatient withdrawal management
	nission Guidelines
Scr	eening, Assessment, and Treatment Plan Review
Pro	vider Qualifications
Stat	fing Requirements
Ado	litional Staffing and Service Components
Mir	imum Standards of Practice
Sett	ings
Opioid Tre	atment Programs (OTPs)
Cor	nponents
	Screening
	Physician Examination
	Alcohol and Drug Assessment and Referrals
	Treatment Planning Process
	Treatment Services
Elig	gibility Criteria
Clie	ent Records
Add	litional Provider Responsibilities
Pro	vider Qualifications
	Agency
	Staff
Stat	fing Requirements
	Medical Director
	Pharmacist or Dispensing Physician
	Clinical Supervisor
	Physician or APRN
	Nursing Staff
	Licensed Mental Health Professional (LMHP)
	Unlicensed professionals (UPs)
	Staff Ratios
	Allowed Provider Types and Specialties
	Allowed Modes of Delivery

CHAPTER 2: BEHAVIORAL HEALTH SERVICES

SECTION: TABLE OF CONTENTS

COORDINATED SYSTEM OF CARE

Services Service Limitations Eligibility Parent Support and Training Components **Provider Qualifications** Family Support Organization (FSO) Parent Support Specialist Parent Support Supervisor Allowed Provider Types and Specialties Limitations and Exclusions Allowed Mode(s) of Delivery Additional Service Criteria Youth Support and Training Components **Provider Qualifications** Family Support Organization (FSO) Youth Support Specialist Youth Support Supervisor Allowed Provider Types and Specialties Limitations and Exclusions Allowed Mode(s) of Delivery Additional Service Criteria

RECORD KEEPING

Components of Record Keeping Retention of Records Confidentiality and Protection of Records Review by State and Federal Agencies Member Records Organization of Records, Record Entries and Corrections Service/Progress Notes Progress Summaries Discharge Summary for Transfers and Closures

FORMS AND LINKS

GLOSSARY AND ACRONYMS

PAGE(S) 8

SECTION 2.5

SECTION 2.6

APPENDIX B

APPENDIX A

10/07/20 07/01/20

ISSUED:

REPLACED:

LOUISIANA MEDICAID PROGRAM

10/07/20 07/01/20

CHAPTER 2: BEHAVIORAL HEALTH SERVICES SECTION: TABLE OF CONTENTS

PAGE(S) 8	3
-----------	---

MEDICAID MEDICAL NECESSITY AND EPSDT EXCEPTIONS	APPENDIX C
CURRICULUM/EQUIVALENCY STANDARDS	APPENDIX D
EVIDENCE BASED PRACTICES (EBPs) POLICY:	
ASSERTIVE COMMUNITY TREATMENT	APPENDIX E-1
FUNTIONAL FAMILY THERAPY (FFT) AND FUNCTIONA THERAPY – CHILD WELFARE (FFT-CCW)	L APPENDIX E-2
HOMEBUILDERS	APPENDIX E-3
MULTI-SYSTEMIC THERAPY	APPENDIX E-4
CHILD/PARENT PSYCHOTHERAPY	APPENDIX E-5
PARENT/CHILD INTERACTION THERAPY	APPENDIX E-6
PRESCHOOL PTSD TREATMENT AND YOUTH PTSD TREATMENT	APPENDIX E-7
EVIDENCED BASED PRACTICES (EBPs) POLICY – TRIPLE P- STANDARD LEVEL 4	APPENDIX E-8
EVIDENCED BASED PRACTICES (EBPs) POLICY – TF-CBT	APPENDIX E-9
EVIDENCED BASED PRACTICES (EBPs) POLICY – EMDR THERAPY	APPENDIX E-10
CSoC WRAPAROUND	APPENDIX F
STANDARDIZED ASSESSMENTS FOR MEMBERS RECEIVING CPST AND PSR	APPENDIX G