



Medicaid Enterprise
Department of Human Services

For Human Services use only:
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Employees' Manual, Title 8
Medicaid Appendix

April 16, 2010

REMEDIAL SERVICES MANUAL TRANSMITTAL NO. 10-1

ISSUED BY: Division of Medical Services, Iowa Department of Human Services

SUBJECT: **Remedial Services Manual**, pages 3, 4, 5, and 11, revised.

Summary

The remedial services manual is revised to provide that the licensed practitioner of the healing arts shall complete a standardized measurement tool for each member during the remedial services assessment or reassessment process. The results of this standardized measurement tool must be submitted to the prior authorization unit with the order and remedial services implementation plan.

Date Effective

March 22, 2010

Material Superseded

Remove the following pages from Chapter III of the **Remedial Services Manual** and destroy them:

<u>Page</u>	<u>Date</u>
3	July 1, 2008
4, 5	November 1, 2006
11	August 1, 2007

Additional Information

The provider manual can be found at:

www.ime.state.ia.us/providers

If you do not have Internet access, you may request a paper copy of this manual transmittal by sending a written request to:

Iowa Medicaid Enterprise Provider Services Unit
PO Box 36450
Des Moines, IA 50315

Include your Medicaid provider number, name, address, provider type, and the general letter number of the transmittal that you are requesting (found at the top right corner of the transmittal).

If any portion of this manual is not clear, please direct your inquiries to the Iowa Medicaid Enterprise Provider Services Unit.



Qualified practitioners currently include providers credentialed in the Iowa Plan network as physicians, advanced registered nurse practitioners, psychologists (PhD or PsyD), independent social workers, marital and family therapists, and mental health counselors.

Master's level psychologists and social workers may be included if they practice under clinical supervision in a community mental health center or have received an exception to be included in the Iowa Plan network.

2. Need for Service

A licensed practitioner of the healing arts (see [Diagnosis](#) for qualifications) must:

- ◆ Assess the member and develop a treatment plan indicating the member's need for remedial services related to the member's psychological disorder.
- ◆ Complete a standardized outcome tool during assessment and reassessments and provide the results to the RSP provider. The same tool must be administered to a member throughout the RSP services.
- ◆ Reexamine the member at least every six months (or more frequently if conditions warrant) to:
 - Evaluate the member's progress and
 - Review and approve the member's continued need for remedial services related to the member's continued diagnosis of psychological disorder.

The treatment plan will be provided to remedial services providers to use as a basis for a remedial services implementation plan. (See [Remedial Services Implementation Plan](#).)

If the member becomes ineligible for Medicaid or enters a long-term institutional placement (PMIC, MHI, etc.), ISIS end-dates the current authorization for remedial services.

If remedial services remain appropriate upon a member's discharge from a medical institution, a licensed practitioner of the healing arts, working with the discharge planner, shall develop a new order. The practitioner completing the order may be a part of the discharge planning team or be from the medical institution.



This order, the results of the standardized measurement tool, and a new remedial services implementation plan should be submitted to the IME Medical Services Unit to authorize services upon the member's discharge from the medical institution. (See [Service Authorization](#).)

C. COVERED SERVICES

Remedial services are skill-building interventions that ameliorate behaviors and symptoms associated with a psychological disorder that has been assessed and diagnosed by a licensed practitioner of the healing arts.

Remedial services address mental and functional disabilities that negatively affect a member's integration and stability in the community, quality of life, and reduce or manage the behaviors that interfere with the member's ability to function.

Services must be designed to reduce or eliminate the symptoms or behaviors resulting from the member's psychological disorder that prevent the member from functioning at the member's best possible functional level.

The focus of the intervention is to improve the member's health and well-being using cognitive, behavioral, social, or psychophysiological procedures designed to ameliorate specific diagnosis-related problems

Services are covered and payable only for Medicaid members meeting the criteria under [MEMBERS ELIGIBLE TO RECEIVE SERVICES](#) under an approved remedial services implementation plan. (See [Service Authorization](#).)

Separate services are covered for adults (ages 18 and over) and for children (from birth through age 20). Members who are 18, 19, or 20 years old may access either the services for adults or the services for children, based on the licensed practitioner's assessment of the member's service need.

1. Services for Adults

Remedial services provided under Iowa Medicaid to members who are 18 years of age or older include the following two billable services:

- ◆ **Skills training and development** (billing code H2014)

Skill training and development includes interventions to enhance independent living, social and communication skills that minimize or eliminate psychological barriers to a member's ability to manage symptoms associated with a psychological disorder effectively and maximize the member's ability to live and participate in the community.



Interventions may include the following skills for effective functioning with family, peers, and community: Communication skills, conflict resolution skills, problem-solving skills, social skills, interpersonal relationship skills, and employment-related skills. The unit of service is 15 minutes.

◆ **Rehabilitation program** (billing code H2001)

A rehabilitation program includes interventions to enhance independent living, social, and communication skills that minimize or eliminate psychological barriers to a member's ability to effectively managing symptoms associated with a psychological disorder and maximizes the member's ability to live and participate in the community.

Interventions may include the following skills for effective functioning with family, peers and community: Communication skills, conflict resolution skills, problem solving skills, social skills, interpersonal relationship skills and employment related skills. The unit of service is a half day.

Services may be provided only to individuals, and not groups. Services may be provided to adults while they are in a group setting such as a day program, but the services must be individualized and provided directly to the member.

2. **Services for Children**

Remedial services are provided to members who are under 21 years of age and their families to restore the members' mental health function to the level of other children of that age and ability.

The child must have the capability to learn the behavior. The services are designed to restore mental health functioning that the child lost or never achieved because of interference in the normal maturational and learning process due to individual or parental dysfunction.

These services do not address preventive, habilitative (services that are designed to assist individuals in acquiring skills that they never had, as well as associated training to acquire self-help, socialization, and adaptive skills necessary to reside successfully in a home or community setting), vocational, or educational needs of children.

The services must be directed toward the child. Services directed at a family member such as a parent, to meet the protective, supportive, or preventive needs of a child are not covered remedial services.



- ◆ The goals and objectives are measurable and time-limited.
- ◆ The treatment results are specified.

3. Service Authorization

The remedial services provider must submit the remedial services implementation plan to the IME Medical Services unit for prior authorization. A copy of the licensed practitioner's order and results of the standardized tool must also be submitted at this time, but is not prior authorized by the IME.

Submit plans and practitioners' orders and results of the standardized tool:

- ◆ By mail to: Iowa Medicaid Enterprise-Medical Services Unit
PO Box 36478
Des Moines, IA 50315
- ◆ By fax to: 515-725-0931

The IME Medical Services Unit will respond (authorize, deny, or request additional information) to the plan within two business days, based on the criteria outlined under [Remedial Services Implementation Plan](#).

When the remedial services implementation plan is authorized, IME Medical Services Unit enters the plan and the number of units of services approved into the Individualized Services Information System (ISIS).

Remedial service implementation plans will be authorized for up to six months' duration. Before the authorization expires, the licensed practitioner of the healing arts may re-evaluate the member to determine if additional remedial services are medically necessary to restore functioning or to prevent deterioration.

4. Documentation

Providers must maintain the medical records for five years from the date of service as evidence that the services provided were:

- ◆ Medically necessary;
- ◆ Consistent with the diagnosis of the member's condition; and
- ◆ Consistent with professionally recognized standards of care.