Cumulative Summary of Changes
LBHP Services Manual


Original Posting


Page 105, under Additional Service Criteria:

- Added in the second paragraph:
  - All services below have an initial authorization level of benefit. Services which exceed the limitation of the initial authorization must be approved for re-authorization prior to service delivery:
    - Admission evaluation is authorized for five evaluations per calendar year.
    - Individual therapy is authorized for 32 hours per calendar year.
    - Family therapy is authorized for 40 hours per calendar year.
    - Group therapy is authorized for 24 hours per calendar year.
    - Psychological testing is authorized for six hours per calendar year.

3. Version 2a: 1.15.12

Only format change to footer to update correct date and version number.


Page 16, Under Provider Qualifications:

- Eliminate quotation marks around the following sentence: “LPCs are limited to rendering or offering prevention, assessment, diagnosis and treatment of mental, emotional, behavioral, and addiction disorders requiring mental health counseling in accordance with scope of practice under state law found in La. Revised Statutes 37:1103 et seq.”

Page 18, Under Limitations/Exclusions:

- The sentence “LPC’s can diagnose, assess, treat, -------- as long as they comply with Act 320, which requires ongoing treatment and consultation with either an MD or medical psychologist, etc” has been eliminated.
- Added “Act 320 of Regular Legislative session of 2011,” in the last paragraph.

Page 19, Under Limitations/Exclusions:

- Change the first sentence to read: “Serious mental illness” means any of the following diagnoses:

Page 103, Under Limitations/Exclusions:

- In the 3rd paragraph, “LPC’s can diagnose, assess, treat, etc., as long as they comply with Act 320, which requires ongoing treatment and consultation with either an MD or medical psychologist, etc.” has been eliminated.
- In the last paragraph, added “Act 320 of Regular Legislative session of 2011.”
Page 104, Under Limitations/Exclusions:

- In the first full paragraph, “Serious mental illnesses as referenced in this section include, but are not limited to, the following:” has been replaced with the following sentence: “Serious mental illness” means any of the following diagnoses:

5. Version 4: 1.27.12

Page 10, Under Provider Qualifications/Direct Support Worker:

- Statement “To be included on the Direct Service Worker Registry” changed to “Not to be included on the Direct Service Work Registry.”


Page 104, Under Limitations/Exclusions

- Prior to statement regarding inpatient hospital visits, added statement: EXCLUSION for individuals in institutions: Individuals who reside in any institution are not eligible to receive any 1915i waiver services. They may only receive basic Medicaid State Plan services.


Pages 11, Under Respite Care Services Agency
Page 13, Under Provider Qualifications

- The web link to the Division of Administration (DOA) website for the register was corrected to: http://www.doa.la.gov/osr/reg/register.htm.


Page 105, Under Additional Service Criteria

- Changed the initial level of benefit to indicate 24 sessions of individual, family and group therapy combined allowed per calendar year per member without an initial authorization.
- Changed the limit of psychological testing to indicate that all psychological testing is preauthorized by the SMO.


Page 35, Staffing Guidelines for WAAs

- Revised the staffing guidelines for WAAs.


Page 101, Other Licensed Practitioner Outpatient Therapy, Limitations/Exclusions

- Revised reference to psychological testing to indicate that it would be prior authorized, which is consistent with all psychological testing in LBHP Services Manual.

Page 63, Revised Staffing Guidelines ASAM Level I: Outpatient:
- MD(s) on site as needed for management of psychiatric/medical needs. 24 hours on-call availability
- Psychologist – NA
- Nursing – On site as needed for management of psychiatric/medical needs. On-call availability, as needed
- Licensed or certified clinician or counselor with direct supervision – One FTE per 50 clients
- Clerical Support Staff – One to Three FTE day shift
- Care Coordinator - one FTE per 50 clients, and/or duties may be assumed by clinical staff
- Outreach worker/peer mentor – Strongly recommended

Page 65, Revised Staffing Guidelines Level II.1 Intensive Outpatient Treatment:
- MD(s) on site as needed for management of psychiatric/medical needs. 24 hours on-call availability
- Psychologist – NA
- Nursing – On site as needed for management of psychiatric/medical needs. On-call availability, as needed
- Licensed or certified clinician or counselor with direct supervision – One FTE per 25 clients
- Clerical Support Staff – One to Three FTE day shift
- Care Coordinator - one FTE per 50 clients, and/or duties may be assumed by clinical staff
- Outreach worker/peer mentor – Strongly recommended

Page 68, Revised Staffing Guidelines Level III.1 Clinically Managed Low Intensity Residential Treatment – Adolescent:
- Physician (MD), medical director – NA
- PCP - NA
- Psychologist – NA
- Nursing – NA
- Psychiatric aide -2 FTE PA’s on all shifts. Ratio cannot exceed 1:8. Ratio must be 1:5 on therapy outings
- Activity/occupational therapist – NA

Page 69, Revised Staffing #3 - Level III.1 Clinically Managed Low Intensity Residential Treatment Adolescent:
- Changed ratio from 1:25 to 1:8

Page 70, Revised Staffing Guidelines Level III.1 Clinically Managed Low-Intensity Residential Treatment – Adult:
- Nursing – NA
- Psychiatric aid – I FTE PA on all shifts. Additional as needed

Page 71, Revised Staffing Guidelines Level III.2D Clinically Managed Residential Social Detoxification – Adolescent:
- Physician (MD), medical director – MD(s) on site as needed for management of psychiatric/medical needs. 24 hours on-call availability
- Psychologist - NA
- Nursing
- Psychiatric aid – Two FTE per shift, Not to exceed 1:10
Page 72, Revised Staffing #6 - Level III.2D Clinically Managed Residential Social Detoxification – Adolescent:
  - Changed from 1:25 to 1:16

Page 73, Revised Staffing Guidelines Level III.2D Clinically Managed Residential Social Detoxification – Adult:
  - Physician (MD), medical director – MD(s) on site as needed for management of psychiatric/medical needs. 24 hour on-call availability
  - Nursing
  - Psychiatric aide – PA

Page 76, Revised Staffing Guidelines Level III.3 Clinically Managed Medium Intensity Residential Treatment – Adult:
  - Physician (MD), medical director – MD(s) on site as needed for management of psychiatric/medical needs. 24 hours on-call availability
  - Nursing – one FTE (APRN/NP/RN), 24-hour on-call availability. Nursing availability on site whenever needed to meet professional nursing requirements
  - Licensed or certified clinician or counselor with direct supervision – one FTE per 12 clients
  - Psychiatric aid – One FTE PA on first, second and third shifts, additional as needed

Page 76 continued – Added the following language:
  a. Physicians, who are available 24 hours a day by telephone. (Or a PA, NP or APRN licensed as physician extenders may perform duties designated by physician).
  b. Licensed, certified or registered clinicians provide a planned regimen of 24-hour, professionally directed evaluation, care and treatment services for individuals and their families.
  c. An interdisciplinary team of appropriately trained clinicians, such as physicians, nurses, counselors, social workers and psychologists is available to assess and treat the individual and to obtain and interpret information regarding the patient’s needs. The number and disciplines of team members are appropriate to the range and severity of the individual’s problems.
  d. A counselor is available on site 40 hours per week to provide direct client care, utilizing the 12 core functions of substance use counseling and/or specific functions related to professional license. Caseloads not to exceed 12 clients.
  e. Qualified professional supervisor – Available for clinical supervision and by telephone for consultation.

Page 78, Revised Staffing Guidelines Level III.5 Clinically Managed High Intensity Residential Treatment – Adolescent:
  - Physician (MD), medical director – MD(s) on site as needed for management of psychiatric/medical needs. 24 hour on-call availability
  - PCP – NA
  - Psychologist – Available as needed
  - Nursing – one FTE (APRN/NP/RN) 24 hour on-call availability. Nursing availability on site whenever needed to meet professional nursing requirements
  - Psychiatric aid – Two FTE PAs on all shifts. Ratio cannot exceed 1:8 ratio. Ratio must be 1:5 on therapy outings
  - Activity/occupational therapist – Optional

Page 79, Revised Staffing Guidelines Level III.5 Clinically Managed High Intensity Residential Treatment – Adult:
• Physician (MD), medical director – MD(s) on site as needed for management of psychiatric/medical needs. 24 hour on-call availability
• PCP – NA
• Psychologist – Optional
• Nursing – One FTE Supervisory (APRN/NP/RN), 24 hour on-call availability. One FTE LPN on first and second shift. (APRN/NP/RN) on call availability during third shift
• Activity/occupational therapist – Optional

Page 80, - Added the following language:

Level III.5 Clinically Managed High Intensity Residential Treatment – Adult:

a. Physicians, who are available 24 hours a day by telephone. (Or a PA, NP or APRN licensed as physician extenders may perform duties designated by physician).

b. Licensed, certified or registered clinicians provide a planned regimen of 24-hour, professionally directed evaluation, care and treatment services for individuals and their families.

c. An interdisciplinary team of appropriately trained clinicians, such as physicians, nurses, counselors, social workers and psychologists is available to assess and treat the individual and to obtain and interpret information regarding the patient’s needs. The number and disciplines of team members are appropriate to the range and severity of the individual’s problems.

d. A counselor is available on site 40 hours per week to provide direct client care, utilizing the 12 core functions of substance use counseling and/or specific functions related to professional license. Caseloads not to exceed 12 clients.

e. Qualified professional supervisor – Available for clinical supervision and by telephone for consultation.

Page 82, Revised Staffing Guidelines Level III.7 Medically Monitored Intensive Residential Treatment – Adult:

• Physician (MD), medical director – MD(s) on site as needed for management of psychiatric/medical needs. 24 hour on-call availability
• PCP – N/A
• Nursing– One FTE Supervisory (APRN/NP/RN), 24 hour on-call availability. One FTE RN/LPN available on site, all shifts
• Psychiatric aid – Two PAs on first, second and third shifts, Additional as needed

Added the following language:

a. Physicians, who are available 24 hours a day by telephone. (Or a PA, NP or APRN licensed as physician extenders may perform duties designated by physician).

b. Licensed, certified or registered clinicians provide a planned regimen of 24-hour, professionally directed evaluation, care and treatment services for individuals and their families.

c. An interdisciplinary team of appropriately trained clinicians, such as physicians, nurses, counselors, social workers and psychologists is available to assess and treat the individual and to obtain and interpret information regarding the patient’s needs. The number and disciplines of team members are appropriate to the range and severity of the individual’s problems.

d. A counselor is available on site 40 hours per week to provide direct client care, utilizing the 12 core functions of substance use counseling and/or specific functions related to professional license. Caseloads not to exceed 12 clients.

e. Qualified professional supervisor – Available for clinical supervision and by telephone
for consultation.

Page 83, Revised Staffing Guidelines Level III.7D Medically Monitored Residential Detoxification – Adult:

- Physician (MD), medical director – MD(s) on site as needed for management of psychiatric/medical needs. 24 hour on-call availability
- PCP – NA
- Psychologist – NA
- Nursing – One FTE Supervisory (APRN/NP/RN), 24 hour on-call availability. Two FTE (NP/RN/LPN) on first and second shifts and one LPN on third shift
- Licensed or certified clinician or counselor with direct supervision – one clinician per 10 clients;
- Psychiatric aid – Two PAs on first, second shifts, and third shift. Additional as needed

Page 84, Deleted the following language: Level III.7D Medically Monitored Residential Detoxification – Adult:

- The level of nursing care is at a ratio of one nurse per every 15 individuals.

Page 87, Revised Staffing Guidelines Level IV D: Medically Managed Intensive Inpatient Addiction Disorder Treatment:

- Physician (MD), medical director – MD(s) on site as needed for management of psychiatric/medical needs. 24 hour on-call availability
- Nursing - One FTE Supervisory (APRN/NP/RN), 24 hour on-call availability. Three FTE (NP/RN/LPN) on all shifts or 1:6 ratio
- Psychiatric aid – Two PAs on all shifts or 1:10 ratio.

Revised Staffing #6. – Changed 15 individuals to 6 individuals

Page 92, Revised Staffing Guidelines Level III.7 Medically Monitored Intensive Residential Treatment – Adolescent:

- MD, medical director – MD(s) on site as needed for management of psychiatric/medical needs. 24 hour on-call availability
- Psychologist – As needed
- Nursing – One FTE Supervisory (APRN/NP/RN), 24 hour on-call availability. One FTE (RN/LPN) available on site 7a.m. – 11 p.m.
- Psychiatric aid – Two FTE PA’s on all shifts. Ratio cannot exceed 1:8. Ratio must be 1:3 on therapy outings
- Care coordinator – one FTE per day shift, and/or duties may be assumed by clinical staff

Page 93, Added the following language: Level III.7 Medically Monitored Intensive Residential Treatment – Adolescent:

a. Physicians, who are available 24 hours a day by telephone. (Or a PA, NP or APRN licensed as physician extenders may perform duties designated by physician).

b. Licensed, certified or registered clinicians provide a planned regimen of 24-hour, professionally directed evaluation, care and treatment services for individuals and their families.

c. An interdisciplinary team of appropriately trained clinicians, such as physicians, nurses, counselors, social workers and psychologists is available to assess and treat the individual and to obtain and interpret information regarding the patient’s needs. The number and disciplines of team members are appropriate to the range and severity of the individual’s problems.

d. A counselor is available on site 40 hours per week

e. Qualified professional supervisor – Available for clinical supervision and by telephone
for consultation.

f. Qualified professional – Available 40 hours per week. to provide direct client care, utilizing the 12 core functions of substance use counseling and/or specific functions related to professional license. Caseloads not to exceed 10 clients.

Page 94, Revised Staffing Guidelines: Level III.7D Medically Monitored Residential Detoxification – Adolescent:

- Physician (MD) - MD(s) on site as needed for management of psychiatric and/medical needs. MD(s) availability on call 24/7.
- Psychologist – Available As Needed
- Nurse (NP/RN or LPN) – 1 FTE Supervisory APRN/NP/RN, on call 24/7; 2FTE NP/RN/LPN on 1st and 2nd shifts and 1 LPN 3rd shift 1:8 Ratio
- Psychiatric aid – Two PAs on first, second, and third shift. Not to exceed 1:10 ratio.
- Revised Staffing #2 - Physicians, who are available 24 hours a day by telephone.

12. Version 8: 12.26.12:

- Removed all references to rural health clinics (RHCs) from document. RHCs are not included in the LBHP. Added statement on page 109 directing user where to submit RHC claims.
- Updated LPC scope of practice references to reflect most recent statutory changes per ACT 636 of the 2012 regular session of the LA legislature.
- Removed commentary from bullet points on page 115.
- Added notations where appropriate that indicates that the use of certified peer support specialists are permitted and/or recommended.
- Revised pagination on TOC.

LBHP Service Manual Codes

- Version 1: 12.29.12
  
  Original Posting

- Version 2: 1.30.12
  
  Case Conference Tab
  - Added Unit Cost of $10 to CPT codes 99367 and 99368 (flat rate)

- Version 3: 2.15.12
  - Tab #16: ‘OLP Continued’: Rates and Comments were added for codes 99201 – 99499.

- Version 4: 3.13.12
  - Tab #17: ‘Other Licensed Practitioner’: Codes 96102, 96103, 96119, and 96120 were added to the schedule with associated rates.
  - Tab #11 added, ‘Non Medical Group Home’ with codes, descriptions, and rates.
  - Tab#12 added, ‘Therapeutic Foster Care’ with codes, descriptions, and rates.

- Version 4.1: 4.17.12
• Tab #11: ‘Non-Medical Group Home’: Changed HCPCS code from T1015 to T2048 BH.
• Tab #12: ‘Therapeutic Foster Care’: Changed HCPCS code from T1015 to S5145.

• Version 5: 5.4.12
  • Tab #2: ‘Youth Support and Training’: Added group modifier to HCPCS code H0038 with description and rates

• Version 6: 10.2.12
  • Reduction in FFS rates by 1.44% to reflect state Medicaid budget cuts as of 7.1.12

• Version 7: 12.26.12
  • Tab #17: ‘Other Licensed Providers’: Added GC Modifier: GC=Service provided by unlicensed psychology intern or post-doc under direct supervision of licensed psychologist/medical psychologist. Billed at the psychologist rate for the CPT code.
  • Tab #14: ‘Hospital’: Added MPs and APRNs to the indicated hospital codes and note to indicate that reimbursement rate is 80% of the indicated physician rate.
  • Tab #2: ‘Youth Support and Training’: Added comment that indicates the code and modifier to be used by FSO staff when attending CFT meetings.
  • Tab #17: ‘Other Licensed Providers’: Added comments that indicate the codes to be used by LMHPs when attending CFT meetings.
  • Tab #14: ‘Hospital’: Added MPs, APRNs, Psychologists/Neuropsychologists, to indicated impatient codes with notation of fee relative to listed physician fee and with qualification for use by provider.
  • Tab #13: Added ‘BA or above’ to HN modifier.