

CREDENTIALING AND RE-CREDENTIALING OF PROVIDERS AND CLINICAL STAFF

The MCO shall provide information to the State's provider management contractor on contracted providers in accordance with the **MCO System Companion Guide**.

See the *Resources* section for a link to the Louisiana Standardized Credentialing Application.

Specialized Behavioral Health Providers

Prior to contracting via a provider agreement or single case agreement (SCA), or prior to reimbursing for specialized behavioral health services (SBHS), the MCO shall credential providers to ensure provider facilities, organizations, and staff meet all qualifications and requirements established by LDH policy, including, but not limited to, the Behavioral Health Services Provider Manual chapter of the **Medicaid Provider Services Manual**, state and federal laws, and rules and regulations for all specialized behavioral health providers. MCO credentialing files on providers shall include verification ~~of that the providers meeting~~ said requirements. MCO credentialing files shall include MCO verification that PRTF and TGH Program Descriptions meet all required elements as noted in the Medicaid Behavioral Health Services Provider Manual, and are approved by the MCO as part of the credentialing or re-credentialing process or whenever changes are made. This shall include that agencies offering mental health rehabilitation services (CPST, PSR, and/or CI), Assertive Community Treatment (ACT), Crisis Response Services (MCR, CBCS, BHCC, and/or CS), PRTFs, TGHs, SUD residential addiction treatment facilities, and Opioid Treatment Programs supply proof of accreditation by an LDH approved accrediting body, which shall be made part of the agency's credentialing file with the MCO. Agencies, facilities or organizations not accredited at the time of credentialing shall supply proof that they applied for accreditation and paid the initial application fee. Agencies must present proof of full accreditation within the required timeframe established by LDH policy, including, but not limited to, the Behavioral Health Services Provider Manual chapter of the **Medicaid Services Manual**. Specialized behavioral health provider types required to be accredited by rule, regulation, state or federal law, or waiver or State Plan Amendment (SPA) prior to contracting or prior to receiving Medicaid reimbursement, shall have proof of accreditation on file with the MCO prior to receiving reimbursement from the MCO. LDH approved national accrediting bodies include:

- ❖ The Council on Accreditation (COA);
- ❖ The Commission on Accreditation of Rehabilitation Facilities (CARF); or
- ❖ The Joint Commission (TJC).

Prior to subcontracting via a provider agreement or single case agreement (SCA), or prior to reimbursing for specialized behavioral health services (SBHS), the MCO shall credential providers to ensure they meet requirements of the Behavioral Health Services Provider Manual chapter of the **Medicaid Services Manual**, inclusive of, but not limited to, holding required licensure and accreditation. The MCO shall credential Certified Peer Support Specialists and rendering providers of MHR services to ensure they meet requirements established by state and federal law, regulation, waivers, SPA and the Medicaid Behavioral Health Services Provider Manual prior to entering into provider agreements or reimbursing providers for peer support or MHR services.

Specialty PRTF

The Medicaid Behavioral Health Services Provider Manual added additional standards to be met by a Specialty PRTF serving youth with co-occurring behavioral health and developmental disability needs. The Specialty PRTF must detail the provider's specific strategies to meet the additional standards, including standards for the Specialty PRTF's admissions and exclusions policy, assessment and treatment planning, team qualifications, and training plan, in the "Specialty PRTF Program Description" that must be submitted for OBH approval. Following OBH approval of the "Specialty PRTF Program Description," the MCO shall include this program description as an addendum to the MCO's provider contract with the Specialty PRTF provider. Once the OBH-approved "Specialty PRTF Program Description" is added to the MCO contract with the Specialty PRTF, the MCO shall then reimburse the Specialty PRTF at the Specialty PRTF rate as shown on the LA Medicaid SBHS fee schedule.

The MCO shall reference the provider's admissions and exclusions policy from the approved Specialty PRTF Program Description when referring MCO members to this Specialty PRTF for treatment; when the MCO appropriately seeks admission for an MCO member of a youth who meets the criteria in the Specialty PRTF's admissions and exclusions policy, the Specialty PRTF is expected to admit the youth pending bed availability. The MCO may grant an exception from the PRTF's approved admissions and exclusions policy on a case-by-case basis at the request of the Specialty PRTF; exceptions may be granted by the MCO following review with the MCO behavioral health medical director and/or consultation with the OCDD Resource Center.