Revised Submission 12.19.12

(v) The following orthodontic procedures:

Orthodontic services to treat the most sever and handicapping malocclusions in a manner consistent with "Handicapping Malocclusion Assessment to Establish Treatment Priority," by J.A Salzmann, D.D., American Journal of Orthodontics, October 1968. Assessment of the most handicapping malocclusion is determined by the magnitude of the following variables: degree of malalignment, missing teeth, angle classification, overjet and overbite, openbite, and crossbite.

(b) Space management services when there is too little dental ridge to accommodate either the number of the size of teeth and if not corrected significant dental disease will result.

(c) Tooth guidance for a limited number of teeth or interceptive orthodontics is a payable service when extensive treatment is not required.

(6) *Diagnostic Services.* (As defined in 42 CFR 440.130(a)). Lead investigation services are covered in order to identify the sources of lead poisoning. These services must be provided by the Iowa Department of Public Health (DPH) or an agency certified by the Iowa Department of Public Health as an elevated blood level (EBL) investigation agency.

(7) *Rehabilitative services.* (As defined in 42 CFR 440.130(d)), not otherwise covered under this Item 4b, are covered as follows, except for children under 21 years of age for which medically necessary services are covered in accordance with the EPSDT provisions:

a. There has been an appropriately documented diagnosis of a mental disability by a physician or other licensed practitioner of the healing arts acting within the scope of his or her practice under State law.

b. The services are provided pursuant to an individualized plan of treatment for the individual receiving the services that the plan has been recommended by a physician or other licensed practitioner of the healing arts acting within the scope of his or her practice under State law. The plan must be:
   i. Consistent with the documented diagnosis of disability in (a) above;
   ii. Developed and documented in accordance with the standards of good medical practice; and
   iii. Time limited, or otherwise provide for periodic evaluation of the impact of the rehabilitative services provided under the plan to assure that the plan as implemented remains appropriate for the maximum reduction of the mental disability of the individual and the restoration of the individual to his or her best possible functional level.

Revised Submission 12.19.12

c. The rehabilitative services provided under the plan, which is described in (b) above, are appropriately documented by the rehabilitative services provider(s) in a manner which permits a physician or other licensed practitioner of the healing arts to determine that the plan as implemented remains appropriate for the maximum reduction of the mental disability of the individual and the restoration of the individual to his or her best possible functional level, and such a determination is periodically made and documented by a physician or other licensed practitioner of the healing arts.

d. *Behavioral Health Intervention Services,* Refer to Supplement 2 to Attachment 3.1-A, page 31f, Item 13d(6)

e. *Drug & Alcohol Services*, Refer to Supplement 2 to Attachment 3.1-A, page 31h, Item 13d(7)

(8) *Transportation Services*. (As defined in 42 CFR 440.170(a)). Non-emergency transportation in a vehicle specially equipped or staffed to accommodate the individual's special medical needs or who reside in an area in which school bus transportation is not provided but transportation is medically necessary for the individual. School based transportation is available on any day when the following two conditions are met.

1. On days when the child receives transportation to obtain a Medicaid covered service and;
2. Both the Medicaid covered service and the need for transportation are included in the child's IEP or IFSP if the child receives a Medicaid covered IDEA service at an off-site facility during the school day the cost of transportation from the school to the facility and back to the school is reimbursable in full, however no cost of transportation to and from the child's home and school is reimbursable.

(9) *Personal Care Services* as defined in 42 CFR 440.167 and further described in Section 4480 (Personal Care Services) of the State Medicaid Manual. This can be provided in the home or outside of the home. A physician or other licensed professional within the scope of his or her practice as defined by state law and regulation in accordance with a plan of care must authorize the services. The services must be provided by an adult who is able to perform the cares the member needs and who is not a member of the members' family. Providers of personal care include home health agencies and local education agencies.

4c. Family Planning Services do not include the treatment of infertility.

5a. PHYSICIANS SERVICES

Iowa Medicaid will not cover the following services when rendered by a physician:

(a) Treatment of flat foot; and
(b) Routine foot care
(c) Acupuncture
(d) Cosmetic, reconstructive or plastic surgery where the primary purpose is to improve physical appearance or which is performed primarily for psychological purposes or which restores form but which does not correct or materially improve the bodily functions.
   i. Cosmetic, reconstructive or plastic surgery is covered under limited circumstances where such is for the purpose of correcting congenital anomalies; restoration of body form and/or function following

Revised 10.06.11

State/Territory: IOWA

(1) Iowa Medicaid Agency in its provider manual which manual manipulation is appropriate treatment.

An x-ray must document the primary regions of subluxation being treated. No x-ray is required for pregnant women and for children age 18 and younger. This x-ray is covered by Iowa Medicaid if it otherwise meets the requirements for a covered x-ray under Item 3 Attachment 3.1.1-A.

6d1. RESERVED

6d2. RESERVED

6d3. RESERVED

6d4. SERVICES OF HEARING AID DISPENSERS
Iowa Medicaid covers only those services of hearing aid dispensers related to hearing aids prescribed by a licensed audiologist or physician (M.D. or D.O.).

6d5a. PSYCHOLOGY
Psychology services must be recommended by a physician unless the psychologist is credentialed by the National Register of Health Service Providers in Psychology.

6d5b. SOCIAL WORKER PROVIDER
Iowa Medicaid covers services by a licensed social worker, within the scope of his or her license, when provided as part of a written plan of treatment. The services may also be provided by a Medicare certified home health agency.

6d6. BEHAVIORAL HEALTH PROVIDER
Iowa Medicaid covers services provided by a licensed marital and family therapist and licensed mental health counselor, within the scope of his or her license as part of a written plan of treatment. Iowa Medicaid covers services provided by a alcohol and drug counselor certified by the Iowa Board of Certification.

6d7. RESERVED

Revised Submission 1.3.13

State/Territory:

(4) The rehabilitative services are provided to, or directed exclusively toward the treatment of Medicaid eligible members.

(5) Services under Behavioral Health Intervention Services will be provided by staff who meet the following requirements: a) Community: Bachelor's degree in social science field with 1 year experience or 20 hours training in child mental health or non-social science field with 2 years' experience or 30 hours training in child mental health b) Residential: Bachelors in social science field or bachelors in non-social science field and 30 hours training in child mental health or AA degree and 1 year of child mental health experience or high school diploma/GED and 5 years of child mental health experience.

(6) Services under the Assertive Community Treatment (ACT) program.

(a) Circumstances when ACT is appropriate for members:

Assertive Community Treatment is comprehensive, integrated, and intensive outpatient services delivered in the community such as the consumer's home or residence and/or other community settings to a Medicaid eligible person from a multidisciplinary team. These services are directed toward the rehabilitation of behavioral/social/emotional deficits and/or amelioration of symptoms of mental disorder. Such services are directed to consumers with severe and persistent mental disorders (SPMI), and/or complex symptomatology which require multiple mental health and support services to reduce hospitalizations. Such services are active and rehabilitative in focus, and are initiated when there is a reasonable likelihood that such services will lead to specific, observable improvements in the client's functioning and assisting them in achieving community tenure. The ACT Team shall participate in all mental health services provided to consumers and provide 24 hour service for the psychiatric needs of the member. Each consumer shall have a written treatment plan containing the necessary psychiatric rehabilitation treatment and support services as well as a crisis plan. The plan shall include treatment objectives and outcomes, the expected frequency and duration of each service, where the services are provided, a work evaluation, and the schedule for updates of the plan.

The ACT program is for persons who need a consistent team of professionals to provide care in the community and have a validated diagnosis consistent with a serious and persistent mental illness. Diagnosis of primary substance disorder, developmental disability, or organic disorders are excluded. Level of stability (must meet 1 or 2, and all of 3, 4, and 5):

Revised Submission 12.19.12

State/Territory:

1. A pattern of repeated treatment failures with at least two hospitalizations within the previous 24 months.
2. The client is in need of multiple and/or combined mental health and basic living supports to prevent need for more intrusive level of care.
3. Risk to self, others, or property is considered to be low (although without treatment or support the client's potential risk in these areas may be increased).
4. The client is medically stable and does not require a level of care that includes more intensive medical monitoring.
5. The client lives independently in the community or demonstrates a capacity to live independently and transform from a dependent residential setting to independent living.

Degree of impairment (must meet 1 and 2 and may meet 3):

1. Client does not have the resources or skills necessary to maintain an adequate level of functioning in the home environment without assistance or support and exhibits impairments arising from a psychiatric disorder which compromises his/her judgment, impulse control and/or cognitive perceptual abilities.
2. Social/interpersonal/familial: Client exhibits significant impairment in social, interpersonal or familial functioning arising from a psychiatric disorder which indicates a need for assertive treatment to stabilize or reverse the condition.
3. Vocational/educational: Client exhibits impairment in occupation or educational functioning arising from a psychiatric disorder which indicates a need for counseling, training or rehabilitation services or support to stabilize or reverse the condition.

(b) Available services under the ACT program:

1. Evaluation and medication management: Providing a comprehensive mental health evaluation. Medication management consists of a professional with medical training (psychiatrist/ARNP/PA) prescribing medications and managing the process to respond to client complaints/symptoms. The psychiatric registered nurse assists in this management by contact with the client on medications and their effect on the clients' complaints/symptoms. Provider types providing this service are: psychiatrist, registered nurse, and ARNP/PA.
2. Integrated therapy and counseling for mental health and substance abuse: Direct counseling for treatment of mental health and substance abuse symptoms. Provider types providing this service are: psychiatrist, licensed mental health professional, ARNP/PA.
3. Skill teaching: Side by side demonstration and observation of daily living tasks. Provider types providing this service are: registered nurse, licensed mental health professional, psychologist, substance abuse counselor, peer specialist, community support specialist, and ARNP/PA

Revised Submission 12.19.12

State/Territory:

4. Community support: The ACT team will deliver services that are recovery and rehabilitative focused. These services consist of:

   a. Personal and home skill training services to assist the member to restore skills for self-directedness and coping with the living situation.

   b. Community skills training services to assist the person in restoring a positive level of participation in the community and maximizing utilization of appropriate socialization skills and personal coping skills. Provider types providing this service are: licensed mental health professional, psychologist, substance abuse counselor, peer specialist, community support specialist, and ARNP/PA.

5. Medication monitoring services designed to control symptoms of mental illness, asking questions of the client and making observations concerning medication compliance and access to medications as well as assuring appointments are kept and day-to-day functioning is assessed. Provider types providing this service are: psychiatric nurses and other team members under the supervision of psychiatrist/nurse.

6. Care management is provided by ACT staff for treatment and service plan coordination. Development of an individualized treatment and service plan including personalized goals and outcomes developed by the ACT team to diagnosis, treat, and rehabilitate the client's medical symptoms and remedial functional impairments. The care management includes assessments, referrals, follow-up, and monitoring, in addition to assisting members in gaining access to necessary medical, social, educational, and other services. Care management includes the assessing the member in coordination with other ACT team members to determine service needs by collecting relevant historical information through member records and gathering other information from relevant professionals and natural supports. The care management will develop a specific care plan based on the assessment of needs, including goals and actions to address the needed medical, social, educational, and other necessary services. The care management will also make referrals to services and related activities to assist the member with their assessed needs, monitor and perform follow up activities necessary to ensure the plan is carried out and the member has access to necessary services within the framework of the ACT team. This can include monitoring contacts with providers, family members, natural supports, and others. Last the ACT team will hold daily team meetings to coordinate each client's care with other members of the team.

7. Crisis response: ACT crisis response service includes direct assessment and treatment of urgent/crisis symptoms in the community. Provider types providing this service are: registered nurse, licensed mental health professional, substance abuse counselor, community support specialist, and ARNP/PA. The psychiatrist and licensed mental health professionals (e.g., registered nurse, licensed mental health professional, substance abuse counselor, and ARNP/PA) provide the assessment. The ARNP/PA's are optional but can perform functions similar to the psychiatrist. The team is responsible for the development of the treatment plan. Crisis response team requires a combination of the provider types listed. Treatment of urgent/crisis symptoms in the community can be provided by all team members. Case management is a team function rather than a staff position. All team members can perform crisis response services under the supervision of the psychiatrist. The psychiatrist may provide supervision in person or on the telephone.

8. Work-related services: Assisting client in managing mental health symptoms as they relate to job performance. Collaborating with client to look for areas of the job which may cause symptoms to increase and create strategies to manage these situations. Restore skills toward placement such as individual work-related behavioral management. Providing supports to maintain employment such as crisis intervention related to employment and skills for coping with employment demands. Assisting in use of skills such as communication skills, problem solving, and safety. Restoring personal skills such as time management and appropriate grooming for employment. Provider types providing this service are: registered nurse, licensed mental health professional, psychologist, substance abuse counselor, community support specialist, case manager, and ARNP/PA.

(c) Providers of ACT services. All provider types are clinically supervised by the psychiatrist.

1. Psychiatrist: An MD or DO board eligible with SPMI experience who is responsible for clinical supervision of the team. Licensure per 653 Iowa Administrative Code Chapter 9 and certified by the American Board of Psychiatry and Neurology.

2. Registered nurse: Registered in Iowa with serious and persistent mental illness (SPMI) experience. Licensure per 655 Iowa Administrative Code Chapter 3.

3. Licensed mental health professional: Licensed in Iowa with SPMI experience Master's level. Licensure according to 441 Iowa Administrative Code Chapter 24, Mental Health Professional. This person is usually the team leader, responsible for administrative supervision.

4. Psychologist: Licensed in Iowa having experience with persons with SPMI. Licensure per 645 Iowa Administrative Code 240.

5. Substance abuse counselor: Iowa or national certification as substance abuse counselor and three years substance abuse experience required. Iowa certification per 641 Iowa Administrative Code 155.21(8)i.

Revised Submission 12.19.12

State/Territory:

6. Peer specialist: Certified peer specialists are self-identified consumers who are in recovery from mental illness and/or substance use disorders and will work under the supervision of a competent mental health professional including all licensed professionals. Peer specialists provide specific support within the overall clinical treatment plan developed by the ACT team. They demonstrate the ability to support the recovery of others from mental illness and/or substance use disorders by meeting all the requirements of the "Peer Support Training Academy" requiring 30 hours of training and passing the exam.
7. Community support specialist: BA/BS in human services (sociology, social work, counseling, psychology or human services) with SPMI experience.
8. Case manager: BA/BS in human services with SPMI experience. Meets the qualifications of "qualified case managers and supervisors" in 441 Iowa Administrative Code Chapter 24.
9. Advanced registered nurse practitioner/physician assistant (ARNP/PA): Licensed in their area of practice and experience with SPMI. Licensure of advanced registered nurses per 655 Iowa Administrative Code Chapter 7. Licensure of physician assistants per 645 Iowa Administrative Code Chapter 326.

Revised Submission 12.19.12

State/Territory:

(6) Behavioral Health Intervention Services (BHIS)

(a) Services under Behavioral Health Intervention Services (BHIS) are 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 within the scope of their practice under State law. The services must be medically necessary and be:
   i. Consistent with the diagnosis and treatment of the member's condition and specific to an impairment,
   ii. Required to meet the medical needs of the member
   iii. In accordance with the standards of evidence-based medical practice.
   iv. The services are designed to address the symptoms and psychological needs of persons with a psychological disorder for maximum reduction of mental health impairment and restoration of a member to the best possible functional level.
   v. Services are directed exclusively to the treatment of the Medicaid-eligible individual.

(b) BHIS behavioral health intervention services are community intervention services that focus on
   1)Addressing the mental and functional disabilities that negatively affect a member's integration and stability in the community and quality of life.
   2)Improving or managing a member's health and well-being related to the member's impairment and
   3) Increasing a member's ability to manage mental health symptoms.

(c) The service is not covered for beneficiaries who are in an acute care or psychiatric hospital, a long-term care facility, or a psychiatric medical institution for children.

(d) The focus of the intervention is to improve the member's health and well-being using cognitive, behavioral, or social interventions designed to ameliorate diagnosis-related issues.

(e) Limits on service are based on the medical necessity of the member.

(f) The agencies that can provide BHIS services are organizations that are credentialed as:
   i. Other Mental Health Provider or Community Mental Health Center, or
   ii. National accredited provider for mental health rehabilitative skill-based interventions by the Joint Commission, Council on Accreditation, or Commission on Accreditation of Rehabilitation facilities, or
   iii. Licensed residential group care, or
   iv. Licensed Psychiatric Medical Institution for Children, or
   v. Other organizations that participate in a site visit and meet minimum credentialing standards

(g) Supervision of the community BHIS services will be provided for 4 hours per month by a licensed, master's level prepared mental health practitioner and residential BHIS will be provided for 4 hours per month by a licensed, masters level prepared mental health practitioner or a person with a bachelor's degree and five years or more of child mental health service experience. Licensed mental health practitioners include licensed social workers, martial and family therapists, mental health counselors, psychologist, ARNPs and physicians.

Revised Submission 12.19.12

State/Territory:

BHIS Practitioners	Minimum Level of Education / Degree / Experience Required	License / Certification Required	Clinical Supervision
Practitioners rendering Behavioral Intervention Services, Crisis Services, and Community Intervention Services abide by the same requirements	Bachelor's degree in social sciences field, or Bachelor's degree in non-social science field plus 30 hours in child mental health training or AA degree in social sciences field plus one year experience in child mental health services or High school diploma or GED plus a minimum of five years of child mental health experience	None	Licensed, Masters level prepared mental health practitioner (e.g. licensed social workers, marital & family therapists, mental health counselors, psychologists, ARNPs, and physicians) or Bachelor's degree with five years or more of child mental health service experience.

Revised Submission 12,19,12

State/Territory: IOWA

BHIS Service	Services Description	Qualified Rendering Practitioners
Behavioral Intervention services (includes individual, group, and family services.)	Services designed to modify the psychological, behavioral, emotional, cognitive, and social factors impacting a member's functioning. Interventions may address the following skills for effective functioning: cognitive flexibility, communication, conflict resolution, emotional regulation, interpersonal relationship, problem-solving, and social skills. The intervention may be provided in an individual, family, or group format.	See prior table
Crisis Intervention services	Focused intervention and rapid stabilization of acute symptoms of mental illness or emotional distress. The services shall be designed to de-escalate situations in which a risk to self, others, or property exists.	See prior table
Community Intervention Services	Service 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 individual's ability to live and participate in the community.	See prior table

(7). *Drug & alcohol services*. The services include mental health assessment (Assess client's current situation, determine client's immediate needs, screen for physical, medical, and co-occurring disorders, and develop a comprehensive written summary), counseling, and intervention (The focus of the counseling or intervention is to improve the patients' health and well-being utilizing cognitive, behavioral, social and or psychophysiological procedures.) Services are provided by a person certified by the nongovernmental Iowa board of substance abuse certification as an alcohol and drug counselor. Practitioner qualifications are referenced in Iowa Administrative Code 641-155. Qualifications include a high school diploma or general education diploma and 150 clock hours of training in the alcohol and drug counselor knowledge and skill competencies. One and a half years full-time (or 3,000 clock hours) of supervised experience is required.