

## **Table of Contents**

**State/Territory Name: Alabama**

**State Plan Amendment (SPA) #: 23-0004**

This file contains the following documents in the order listed:

- 1) Approval Letter
- 2) Summary Form (with 179-like data)
- 3) Approved SPA Pages

**DEPARTMENT OF HEALTH & HUMAN SERVICES**  
Centers for Medicare & Medicaid Services  
601 E. 12th St., Room 355  
Kansas City, Missouri 64106



Medicaid and CHIP Operations Group

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December 11, 2023

Stephanie McGee Azar, Commissioner  
Alabama Medicaid Agency  
501 Dexter Avenue  
Post Office Box 5624  
Montgomery, AL 36103-5624

Re: Alabama State Plan Amendment (SPA) 23-0004

Dear Commissioner Azar:

The Centers for Medicare & Medicaid Services (CMS) reviewed your Medicaid State Plan Amendment (SPA) submitted under transmittal number (TN) AL-23-0004. The purpose of this amendment is to update the requirements and qualifications needed to be a rehabilitative services provider.

We conducted our review of your submittal according to statutory requirements in Title XIX of the Social Security Act and implementing regulations Section 1905(a)(13)(C) and (29) of the Act. This letter is to inform you that Alabama Medicaid SPA 23-0004 was approved on December 8, 2023, with an effective date of October 1, 2023.

If you have any questions, please contact Rita E. Nimmons at (404) 562-7415 or via email at [Rita.Nimmons@cms.hhs.gov](mailto:Rita.Nimmons@cms.hhs.gov).

Sincerely,

A solid black rectangular box redacting the signature of Ruth A. Hughes.

Ruth A. Hughes, Acting Director  
Division of Program Operations

Enclosures

cc: Stephanie Lindsay

<b>TRANSMITTAL AND NOTICE OF APPROVAL OF STATE PLAN MATERIAL FOR: CENTERS FOR MEDICARE &amp; MEDICAID SERVICES</b>	1. TRANSMITTAL NUMBER <u>2 3 - 0 0 0 4</u>	2. STATE <u>AL</u>
	3. PROGRAM IDENTIFICATION: TITLE OF THE SOCIAL SECURITY ACT <input checked="" type="radio"/> XIX <input type="radio"/> XXI	
TO: CENTER DIRECTOR CENTERS FOR MEDICAID & CHIP SERVICES DEPARTMENT OF HEALTH AND HUMAN SERVICES	4. PROPOSED EFFECTIVE DATE <p style="text-align: center;">October 1, 2023</p>	
5. FEDERAL STATUTE/REGULATION CITATION <del>42 CFR Part 447</del> Section 1905(a)(13)(C) and (29) of the Act	6. FEDERAL BUDGET IMPACT (Amounts in WHOLE dollars) a. FFY <u>2024</u> \$ <u>0</u> b. FFY <u>2025</u> \$ <u>0</u>	
7. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT  See attached page	8. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (if Applicable)  See attached page	

9. SUBJECT OF AMENDMENT  
The purpose of this amendment is to update the requirements and qualifications needed to be a rehabilitative services provider.

10. GOVERNOR'S REVIEW (Check One)

GOVERNOR'S OFFICE REPORTED NO COMMENT                       OTHER, AS SPECIFIED: *Governor's designee on file via letter with CMS*

COMMENTS OF GOVERNOR'S OFFICE ENCLOSED

NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL

<div style="background-color: black; width: 100%; height: 20px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 20px; margin-bottom: 5px;"></div> Stephanie McGee Azar 13. TITLE Commissioner 14. DATE SUBMITTED 10/02/2023	15. RETURN TO Stephanie McGee Azar Commissioner Alabama Medicaid Agency 501 Dexter Avenue Post Office Box 5624 Montgomery, Alabama 36103-5624
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**FOR CMS USE ONLY**

16. DATE RECEIVED October 2, 2023	17. DATE APPROVED December 8, 2023
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**PLAN APPROVED - ONE COPY ATTACHED**

18. EFFECTIVE DATE OF APPROVED MATERIAL October 1, 2023	19. SIGNATURE OF APPROVING OFFICIAL <div style="background-color: black; width: 100%; height: 20px;"></div>
20. TYPED NAME OF APPROVING OFFICIAL Ruth A. Hughes	21. TITLE OF APPROVING OFFICIAL Acting Director, Division of Program Operations

22. REMARKS

State requested a pen and ink change for box #5 on 12/6/23 via email to read:  
Section 1905(a)(13)(C) and (29) of the Act

State requested a pen and ink change for box #8 on 12/7/23 via email to read:  
Attachment 3.1-A Page 6.13f.5 (AL-23-0012)

7. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT	8. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable)
Attachment 3.1-A Page 6.13-1	Attachment 3.1-A Page 6.13-1 (AL-18-0007)
Attachment 3.1-A Page 6.13a	Attachment 3.1-A Page 6.13a (AL-18-0007)
Attachment 3.1-A Page 6.13a.2	Attachment 3.1-A Page 6.13a.2 (AL-18-0007)
Attachment 3.1-A Page 6.13a.4	Attachment 3.1-A Page 6.13a.4 (AL-18-0007)
Attachment 3.1-A Page 6.13a.6	Attachment 3.1-A Page 6.13a.6 (AL-18-0007)
Attachment 3.1-A Page 6.13b.1	Attachment 3.1-A Page 6.13b.1 (AL-18-0007)
Attachment 3.1-A Page 6.13d	Attachment 3.1-A Page 6.13d (AL-18-0007)
Attachment 3.1-A Page 6.13e.2	Attachment 3.1-A Page 6.13e.2 (AL-18-0007)
Attachment 3.1-A Page 6.13f.5	Attachment 3.1-A Page 6.13f.5 ( <del>AL-18-0007</del> ) (AL-23-0012)
Attachment 3.1-A Page 6.13f.6	Attachment 3.1-A Page 6.13f.6 (AL-18-0007)
Supplement 4 to Attachment 3.1-A Page 7	Supplement 4 to Attachment 3.1-A Page 7 (AL-21-0006)
Supplement 4 to Attachment 3.1-A Page 10	Supplement 4 to Attachment 3.1-A Page 10 (AL-21-0006)



13. **Other Diagnostic, screening, preventive, and rehabilitative services, i.e., other than those provided elsewhere in the plan. --- (Continued)**

13.d. **Rehabilitative services --- Continued**  
**Effective Date: 10/01/23**

2. For the provision of Substance Abuse Rehabilitative Services an entity:
  - Must be an organization that is currently certified by the Alabama Department of Mental Health (DMH) to provide alcohol and other drug treatment services; and
  - Must submit an application to and receive approval by DMH to provide Substance Abuse Rehabilitative Services under the Medicaid Rehabilitative Option program.
3. The Department of Human Resources (DHR), the Department of Youth Services (DYS), Department of Mental Health (DMH) for ASD and the Department of Children's Services (DCS) are eligible to be rehabilitative services providers for children under age 21 if they have demonstrated the capacity to provide an array of medically necessary services, either directly or through contract.  
Additionally, DHR may provide these services to adults in protective service status. At a minimum, this array includes the following:
  - Individual, group, and family counseling
  - Crisis intervention services
  - Consultation and education services
  - Case management services Assessment and evaluation
4. A provider must demonstrate the capacity to provide services off-site in a manner that assures the recipient's right to privacy and confidentiality and must demonstrate reasonable access to services as evidenced by service location(s), hours of operation, and coordination of services with other community resources.
5. A provider must ensure that Medicaid recipients receive quality services in a coordinated manner and have reasonable access to an adequate array of services delivered in a flexible manner to best meet their needs. Medicaid does not cover all services listed above, but the provider must have demonstrated the capacity to provide these services.

Services must be provided by practitioners who meet the following qualifications:

**Rehabilitative Services Professionals are defined as the following:**

- A psychologist licensed under Alabama law
- A professional counselor licensed under Alabama law
- An associate licensed counselor under Alabama law
- An independent Clinical social worker licensed under Alabama law
- A licensed master social worker
- A marriage and family therapist licensed under Alabama law
- A marriage and family therapist associate licensed under Alabama law
- A registered nurse licensed under Alabama law who has completed a master's degree in psychiatric nursing
- A Masters Level Clinician is an individual possessing a master's degree or above from a university or college with an accredited program for the respective degree in psychology, social work, counseling or other human service field areas and is under the
  - supervision of a master's level or above clinician with two years of postgraduate clinical experience.

**13. Other Diagnostic, screening, preventive, and rehabilitative services, i.e., other than those provided elsewhere in the plan. --- (Continued)**

**13.d. Rehabilitative services --- Continued**  
**Effective Date: 10/01/23**

- QSAP I (Substance Abuse): A Qualified Substance Abuse Professional I (QSAP I) shall consist of: (i) An individual licensed in the State of Alabama as a: (I) Professional Counselor, Graduate Level Social Worker, Psychiatric Clinical Nurse Specialist, Psychiatric Nurse Practitioner, Marriage and Family Therapist, Clinical Psychologist, Physician's Assistant, Physician; or (ii) An individual who: (I) Has a master's Degree or above from a nationally or regionally accredited university or college in psychology, social work, counseling, psychiatric nursing, or other behavioral health area with requisite course work equivalent to that of a degree in counseling, psychology, social work, or psychiatric nursing, and \*(II) Has successfully completed a clinical practicum or has six month's post master's clinical experience; and \*(III) Holds a substance abuse counselor certification credential from the Alabama Association of Addiction Counselors, National Association of Alcoholism and Drug Abuse Counselors, Alabama Alcohol and Drug Abuse Association, or International Certification and Reciprocity Consortium/Alcohol and Other Drug Abuse, Inc. which shall be obtained within thirty (30) months of date of hire.
- Professional Autism Services Specialist I (PASS I) shall consist of: (i) An individual licensed in the State of Alabama as a (I) Professional Counselor, Graduate Level Social Worker, Registered Nurse, Marriage and Family Therapist, Clinical Psychologist, Physician; or (ii) An individual who (I) Has a Master's Degree or above from a nationally or regionally accredited university or college in psychology, counseling, social work, or other behavioral health area with requisite course work equivalent to that degree in counseling, psychology, or social work.

**Other Eligible Service Providers:**

- A physician licensed under Alabama law.
- A physician assistant licensed under Alabama law and practicing within the guidelines as outlined by the Alabama Board of Medical Examiners .
- A Certified Registered Nurse Practitioner (CRNP) licensed under Alabama law practicing within the scope as defined by the Joint Committee of the Alabama Board of Nursing and the Alabama Board of Medical Examiners for Advanced Practice Nurses or a multistate licensure privilege.
- Qualified Mental Health Provider – Bachelor's – A person with a Bachelor's Degree in a human services field.
- Qualified Mental Health Provider – Non-Degreed – A person with a high school diploma or GED supervised by a Rehabilitative Services Professional or Registered Nurse (RN).
- A Pharmacist licensed under Alabama state law.
- A Registered Nurse licensed under Alabama state law or a multistate licensure privilege.
- A Practical Nurse licensed under Alabama state law or a multistate licensure privilege.
- Occupational Therapist licensed under Alabama state law.
- Speech Therapist licensed under Alabama state law.
- Certified Autism Support Specialist (CASS) -Non-Degreed- A person with a high school diploma or GED supervised by a Professional Autism Services Specialist I or a Professional Autism Services Specialist II.
- Professional Autism Services Specialist II (PASS II) – An individual who has a Bachelor of Arts or Bachelor of Science in a human services related field from an accredited college or university with a minimum of one-year experience working with individuals with disabilities, families and/or service coordination
- A Nursing Assistant certified pursuant to Alabama State Law.
- A Certified Medical Assistant certified through the American Association of Medical Assistants (AAMA) or the American Medical Technologists (AMT).
- Medication Assistant Certified (MAC) Worker – A person working under a Medication Assistance Supervising (MAS) nurse that meets the Alabama Board of Nursing requirements.
- A Mental Health Certified Youth Peer Specialist - Youth who has personal experience with children and adolescent's mental health, who is willing to share his/her personal experiences, who has at least a high school diploma or GED, and who has satisfactorily completed a Mental Health Youth Peer Specialist training program approved by the state. Certified Mental Health Peer Specialist must be supervised by a Rehabilitative Services Professional.



**13. Other Diagnostic, screening, preventive, and rehabilitative services, i.e., other than those provided elsewhere in the plan. --- (Continued)**

**13.d. Rehabilitative services --- Continued**  
**Effective Date: 10/01/23**

- QSAP II shall consist of: (i) An individual who: (I) Has a Bachelor's Degree from a nationally or regionally accredited university or college in psychology, social work, community, rehabilitation, or pastoral counseling, family therapy, or other behavioral health area that requires equivalent clinical course work, and (II) Is licensed in the State of Alabama as a Bachelor Level Social Worker; or (III) Has a Bachelor's Degree from a nationally or regionally accredited college or university in psychology, social work, community, rehabilitation, or pastoral counseling, family therapy, or other behavioral health area that requires equivalent clinical course work, and (IV) Holds a substance abuse counselor certification credential from the Alabama Association of Addiction Counselors, National Association of Alcoholism and Drug Abuse Counselors, Alabama Alcohol and Drug Abuse Association, or International Certification and Reciprocity Consortium or (V) Has a Bachelor's Degree from a nationally or regionally accredited university or college in psychology, social work, community, rehabilitation, or pastoral counseling, family therapy, or other behavioral health area that requires equivalent clinical course work, and (VI) obtains a substance use counselor certification credential from the Alabama Association of Addiction Counselors, National Association Drug Abuse Association, or International Certification and Reciprocity Consortium within 30 months of hire, and (VII) participates in ongoing weekly supervision from an assigned QSAP I that is documented and appropriately filed in their personnel file for auditing purposes until counselor certification is obtained.
- QSAP III shall consist of: (i) An individual who: (I) Has a Bachelor's Degree from a nationally or regionally accredited university or college in psychology, social work, community, rehabilitation, or pastoral counseling, family therapy, or other behavioral health area that requires equivalent clinical course work, and (II) Participates in ongoing supervision by a certified or licensed QSAP I for a minimum of one (1) hour individual per week until attainment of a substance abuse counselor certification credential from the Alabama Association of Addiction Counselors, National Association of Alcoholism and Drug Abuse Counselors, or Alabama Alcohol and Drug Abuse Association, or International Certification and Reciprocity Consortium/Alcohol and Other Drug Abuse, Inc. which shall be obtained within thirty (30) months of hire.
- Qualified Paraprofessionals (QPP) shall have the following minimum qualifications: (i) A high school diploma or equivalent, and (ii) One (1) year of work experience directly related to job responsibilities and (iii) Concurrent participation in clinical supervision by a licensed or certified QSAP I.
- Certified Recovery Support Specialist (CRSS) must meet the following minimum qualifications: (i) Certified by ADMH as a Certified Recovery Support Specialist (CRSS) within six (6) months of date of hire, (ii) and has 2 years verified lived experience and (iii) Concurrent participation in clinical supervision by a licensed or certified QSAP I.

**13. Other Diagnostic, screening, preventive, and rehabilitative services, i.e., other than those provided elsewhere in the plan. --- (Continued)**

**13.d. Rehabilitative services --- Continued**  
**Effective Date: 10/01/23**

- Social Service Caseworker- Bachelor's degree from an accredited\* college or university in a social science OR a Bachelor's degree from an accredited\* college or university with a degree in any major.

Covered Rehabilitative Behavior Health Services are as follows:

- (1) Intake evaluation - An initial clinical evaluation of the recipient's request for assistance, presenting psychological and social functioning status, physical and medical condition, need for additional evaluation and/or treatment, and appropriateness for treatment of mental health or substance use disorders.

Eligible Provider Type:

- Rehabilitative Services Professional (all types)
- Social Services Caseworker

Billing Unit: Episode

Max Unit Limitations: Unlimited

- (2) Medical Assessment and Treatment - Face-to-face contact with a recipient during which a qualified practitioner provides psychotherapy and/or medical management services. Services may include physical examinations, evaluation of co-morbid medical conditions, development or management of medication regimens, the provision of insight oriented, behavior modifying, supportive, or interactive psychotherapeutic services, or the provision of educational services related to management of a physical, mental health, or substance use disorder.

Eligible Provider Type:

- Physician
- Physician Assistant
- Licensed Certified Registered Nurse Practitioner (CRNP)

Billing Unit: 15 minutes

Maximum Units: 6 per day, 52 per year



**Other Diagnostic, screening, preventive, and rehabilitative services, i.e., other than those provided elsewhere in the plan. --- (Continued)**

**13.d. Rehabilitative services --- Continued**

**Effective Date: 10/01/23**

- (4) Crisis intervention - Immediate emergency intervention with a recipient, or the recipient's collateral\* (in person or by telephone) to ameliorate a maladaptive emotional/behavioral reaction by the recipient. Service is designed to resolve crisis and develop symptomatic relief, increase knowledge of resources to assist in mitigating a future crisis, and facilitate return to pre-crisis routine functioning. Interventions include a brief, situational assessment; verbal interventions to de-escalate the crisis; assistance in immediate crisis resolution; mobilization of natural and formal support systems; and referral to alternate services at the appropriate level.

Eligible Provider Type:

- Rehabilitative Services Professional (all types)
- Licensed Registered Nurse
- Licensed Practical Nurse
- Certified Nursing Assistant
- Certified Medical Assistant
- Qualified Mental Health Provider – Bachelor's
- Social Service Caseworker
- Certified Mental Health Peer Specialist (Youth, Peer, and Parent)
- QSAP II
- QSAP III
- Certified Recovery Support Specialist (CRSS)
- PASS I
- PASS II

Billing Unit: 15 minutes

Maximum Units: 20 per day, 7,300 per calendar year

- (5) Individual Counseling – The utilization of professional skills by a qualified practitioner to assist a recipient in a face-to-face, one-to-one psychotherapeutic encounter in achieving specific objectives of treatment or care for a mental health and/or a substance use disorder. Services are generally directed toward alleviating maladaptive functioning and emotional disturbances relative to a mental health and/or substance use disorder, and restoration of the individual to a level of functioning capable of supporting and sustaining recovery. Individual Counseling may consist of insight oriented, behavior modifying, supportive, or interactive psychotherapeutic services.

Eligible Provider Type:

- Rehabilitative Services Professional (all types)
- QSAP II

Billing Unit: 1 unit/per hour

Maximum Units: 1 per day, 52 per year

**13. Other Diagnostic, screening, preventive, and rehabilitative services, i.e., other than those provided elsewhere in the plan. --- (Continued)**

**13.d. Rehabilitative services --- Continued**

**Effective 10/01/23**

Billing Unit/Maximum Unit:

MI: Billing Unit: 1 episode per recipient = minimum of 60 minutes

Maximum Units:

1 episode per day, 104 per year

SA: Billing Unit: 1 episode per recipient = minimum of 90 minutes

Maximum Units: 1 episode per day, 104 per year

- (8) Medication Administration - Administration of oral or injectable medication under the direction of a physician, physician assistant, or certified registered nurse practitioner.

Eligible Provider Type:

- Licensed Registered Nurse
- Licensed Practical Nurse
- Certified Medical Assistant
- MAC Worker

Billing Unit: Episode

Maximum Units: 3 per day

- (9) Medication Monitoring - Face-to-face contact with a recipient for the purpose of reviewing medication efficacy, monitoring compliance with dosage instructions, educating the recipient and collateral\* of the expected effect of specified medication, and/or identifying needed changes in the medication regimen.

Eligible Provider Type:

- Rehabilitative Services Professional (all types)
- Qualified Mental Health Provider – Bachelor's
- QSAP II
- QSAP III
- Licensed Registered Nurse
- Licensed Practical Nurse
- Pharmacist
- Certified Nursing Assistant
- Certified Medical Assistant

Billing Unit: 15 minutes

Maximum Units: 2 per day, 52 per year

**13. Other Diagnostic, screening, preventive, and rehabilitative services, i.e., other than those provided elsewhere in the plan. --(Continued)**

**13.d. Rehabilitative services --- Continued**  
**Effective Date: 10/01/23**

- (14) Treatment Plan Review - Review and/or revision of a recipient's individualized mental health and/or substance use disorder treatment plan by a qualified practitioner who is not routinely directly involved in providing services to the recipient. This review will evaluate the recipient's progress toward treatment objectives, the appropriateness of services provided, and the need for continued participation in treatment. This service does not include those activities or costs associated with direct interaction between a recipient and his/her primary therapist regarding the recipient's treatment plan. That interaction shall be billed through an alternative service such as individual counseling.

Eligible Provider Type:

- Physician
- Physician Assistant
- Certified Registered Nurse Practitioner (CRNP)
- Rehabilitative Services Professional
- Service Supervisor
- Senior Social Work Supervisor
- PASS I or PASS II

Billing Unit: 15 minutes

Maximum Units: 1 event with up to 2 units every 6 months, 4 per year

- (15) Mental Health Care Coordination – Services to assist an identified Medicaid recipient to receive coordinated mental health services from external agencies, providers or independent practitioners. Key service functions include written or oral interaction in a clinical capacity in order to assist another provider in addressing the specific rehabilitative needs of the recipient, as well as to support continuation of care for the recipient in another setting.

Eligible Provider Type:

- Rehabilitative Services Professional (all types)
- Licensed Registered Nurse
- Licensed Practical Nurse
- Certified Nursing Assistant
- Certified Medical Assistant
- Qualified Mental Health Provider – Bachelor's
- Social Service Caseworker
- PASS I or PASS II
- CASS-Non-Degreed

Billing Unit: 15 minutes

Maximum Units: 24 per day, 312 per year



**Other Diagnostic, screening, preventive, and rehabilitative services, i.e., other than those provided elsewhere in the plan. --- (Continued)**

**13.d. Rehabilitative services --- Continued**

**Effective Date: 10/01/23**

- (17) Child and Adolescent In-Home Intervention – Structured, consistent, strength-based therapeutic intervention provided by a team for a child or youth with a serious emotional disturbance (SED) and his or her family for the purpose of treating the child’s or youth’s behavioral health needs. In-Home Intervention also addresses the family’s ability to provide effective support for the child or youth, and enhances the family’s capacity to improve the child’s or youth’s functioning in the home and community. Services are directed towards the identified youth and his or her behavioral health needs and goals as identified in the treatment plan or positive-behavior support plan are developed by a qualified behavioral clinician where appropriate. Services include therapeutic and rehabilitative interventions, including counseling and crisis intervention services, with the individual and family to correct or ameliorate symptoms of mental health conditions and to reduce the likelihood of the need for more intensive or restrictive services. These services are delivered in the family’s home or other community setting and promote a family-based focus in order to evaluate the nature of the difficulties, defuse behavioral health crises, intervene to reduce the likelihood of a recurrence, ensure linkage to needed community services and resources, and improve the individual child’s/adolescent’s ability to self-recognize and self-manage behavioral health issues, as well as the parents’ or responsible caregivers’ skills to care for their child’s or youth’s mental health conditions. The In-Home Intervention team provides crisis services to children and youth served by the team.

Eligible Provider Type:

In-home intervention for mental illness recipients are provided by a two-person team minimally composed of the following:

- A rehabilitative services professional staff (all types) AND either
  - A Qualified Mental Health Provider – Bachelor’s or
  - Certified Mental Health Peer Specialist - Youth

All team members must successfully complete an approved Child and Adolescent In-Home Intervention - training program.

Billing Unit: One day

Maximum Units: One per day, 140 per year

- (18) Mental Health and Substance Use Disorders Assessment Update – A structured interview process that functions to evaluate a recipient’s present level of functioning and/or presenting needs. The assessment is used to establish additional or modify existing diagnoses, establish new or additional rehabilitation service goals, assess progress toward goals, and/or to determine the need for continued care, transfer, or discharge.

Eligible Provider Type:

- Rehabilitative Services Professional (all types)

**Other Diagnostic, screening, preventive, and rehabilitative services, i.e.,  
other than those provided elsewhere in the plan. --- (Continued)**

**13.d. Rehabilitative services --- Continued**  
**Effective Date: 10/01/2023**

(27) Nursing Assessment and Care – Nursing Assessment and Care services are contacts with an individual to monitor, evaluate, assess, establish nursing goals, and/or carry out physicians' orders regarding treatment and rehabilitation of the physical and/or behavioral health conditions of an individual as specified in the individualized recovery plan. It includes providing special nursing assessments to observe, monitor and care for physical, nutritional and psychological issues or crises manifested in the course of the individual's treatment; to assess and monitor individual's response to medication to determine the need to continue medication and/or for a physician referral for a medication review; assessing and monitoring an individual's medical and other health issues that are either directly related to the mental health or substance related disorder, or to the treatment of the disorder (e.g. diabetes, cardiac and/or blood pressure issues, substance withdrawal symptoms, weight gain and fluid retention, seizures, etc.); venipuncture required to monitor and assess mental health, substance disorders or directly related conditions, and to monitor side effects of psychotropic medication; consultation with the individual's family and/or significant others for the benefit of the client about medical and nutritional issues; to determine biological, psychological, and social factors which impact the individual's physical health and to subsequently promote wellness and healthy behavior and provide medication education and medication self-administration training to the individual and family.

Eligible Provider Type:

- Licensed Registered Nurse
- Licensed Practical Nurse
- Certified Nursing Assistant
- Certified Medical Assistant
- MAC Worker (operating within their scope of practice)

Billing Unit: 15 minutes

Maximum Units: 6 units per day in a specialized level of care; 1,496 units per year

(28) Outpatient Detoxification – Face-to-face interactions with a recipient for the purpose of medically managing mild to moderate withdrawal symptoms from alcohol and/or other drugs in an ambulatory setting. Services are provided in regularly scheduled sessions under a defined set of policies, procedures, and medical protocols by authorized medical personnel.

Eligible Provider Type:

- Rehabilitative Services Professional (all types)
- QSAP II
- QSAP III
- Certified Recovery Support Specialist (CRSS)
- QPP, with specialized training
- Licensed Registered Nurse
- Licensed Practical Nurse



**Other Diagnostic, screening, preventive, and rehabilitative services, i.e., other than those provided elsewhere in the plan. --- (Continued)**

**13.d. Rehabilitative services --- Continued**

**Effective Date: 10/01/23**

Billing Unit: 1 day;

Maximum Units: 100 days per year

- (29) Therapeutic Mentoring\* – Therapeutic Mentoring Services provide a structured one on one intervention to a child or youth and their families that is designed to ameliorate behavioral health-related conditions that prevent age-appropriate social functioning. This service includes supporting and preparing the child or youth in age-appropriate behaviors by restoring daily living, social and communication skills that have been adversely impacted by a behavioral health condition. These services must be delivered according to an individualized treatment plan and progress towards meeting the identified goals must be monitored and communicated regularly to the clinician so that the treatment plan can be modified as necessary. Therapeutic mentoring may take place in a variety of settings including the home, or other community settings. The therapeutic mentor does not provide social, educational, recreational or vocational services.

Component Services:

- Basic Living Skills
- Social Skills Training
- Coping Skills Training
- Assessment
- Plan Review
- Progress Reporting
- Transition Planning

Eligible Provider Type:

- Rehabilitative Services Professional (all types)
- Social Service Caseworker
- Licensed Registered Nurse
- Qualified Mental Health Provider – Bachelor’s
- Qualified Mental Health Provider – Non-Degreed
- PASS I or PASS II
- CASS – Non-degreed

Billing Unit: 15 minutes

Maximum Units: 416 per year (416 units per year for individual and 416 units per year for group)

8 units (unit = 15 minutes) per day, individual

8 units (unit = 15 minutes) per day, group

- (30) Behavioral Health Placement Assessment – A structured face-to-face interview process conducted by a qualified professional for the purpose of identifying a recipient’s presenting strengths and needs and establishing a corresponding recommendation for placement in an appropriate level of care. This process may incorporate determination of the appropriateness of admission/commitment to a state psychiatric hospital or a local inpatient psychiatric unit.

Eligible Provider Type:

- Rehabilitative Services Professional (all types)
- Licensed registered nurse

Billing Unit: 30 minutes

Maximum Units: 4 units/day; 16 units/year



State of Alabama

1905(a)(29) Medication-Assisted Treatment (MAT)

Amount, Duration, and Scope of Medical and Remedial Care Services Provided to the Categorically Needy (continued)

Bachelor Level Social Worker; or (III) Has a Bachelor's Degree from a nationally or regionally accredited college or university in psychology, social work, community-rehabilitation, pastoral counseling, family therapy, or other behavioral health area that requires equivalent clinical course work, and (IV) Holds a substance abuse counselor certification credential from the Alabama Association of Addiction Counselors, National Association of Alcoholism and Drug Abuse Counselors, Alabama Alcohol and Drug Abuse Association, or International Certification and Reciprocity Consortium. or (V) Has a Bachelor's Degree from a nationally or regionally accredited university or college in psychology, social work, community, rehabilitation, or pastoral counseling, family therapy, or other behavioral health area that requires equivalent clinical course work, and (VI) obtains a substance use counselor certification credential from the Alabama Association of Addiction Counselors, National Association of Drug Abuse Association, or International Certification and Reciprocity Consortium within 30 months of hire, and (VII) participates in ongoing weekly supervision from an assigned QSAP I that is documented and appropriately filed in their personnel file for auditing purposes until counselor certification is obtained.

- **QSAP III** shall consist of: (i) An individual who: (I) Has a Bachelor's Degree from a nationally or regionally accredited university or college in psychology, social work, community-rehabilitation, pastoral counseling, family therapy, or other behavioral health area that requires equivalent clinical course work, and (II) Participates in ongoing supervision by a certified or licensed QSAP I for a minimum of one (1) hour individual per week until attainment of a substance abuse counselor certification credential from the Alabama Association of Addiction Counselors, National Association of Alcoholism and Drug Abuse Counselors, or Alabama Alcohol and Drug Abuse Association, or International Certification and Reciprocity Consortium/Alcohol and Other Drug Abuse, Inc. which shall be obtained within thirty (30) months of hire; Psychoeducational Services.
- Certified Recovery Support Specialist (CRSS) must meet the following minimum qualifications: (i) Certified by ADMH as a Certified Recovery Support Specialist (CRSS) within six (6) months of date of hire, (ii) and has 2 years verified lived experience and (iii) Concurrent participation in clinical supervision by a licensed or certified QSAP I; Peer Support Services.

i. Utilization Controls

State of Alabama

**1905(a)(29) Medication-Assisted Treatment (MAT)**

Amount, Duration, and Scope of Medical and Remedial Care Services Provided to the Categorically Needy  
(continued)

Treatment Plan Review

*Billing Unit:* 15 minutes  
*Maximum Units:* 1 event with up to 2 units every 6 months, 4 per year (for DMH-MI providers)  
1 event with up to 2 units every 6 months, 4 per year (for DMH-SASD providers)  
*Billing Restrictions:* None

Mental Health and Opioid Use Disorders Update

*Billing Unit:* 15 minutes  
*Maximum Units:* 8 units per day, 56 units per year  
*Billing Restrictions:* May not be billed in combination with Intake Evaluation (90791)

Psychoeducational Services

*Billing Unit:* 15 minutes  
*Maximum Units:* 416 units per year  
*8 per day for services provided to an individual recipient's family*  
*8 per day for services provided to a group of recipients' families*  
*Billing Restrictions:* May not be billed in combination with Medication Administration (H0020), Outpatient Detoxification – Ambulatory Detoxification With Extended On-Site Monitoring (II-D) (H0013), Outpatient Detoxification – Ambulatory Detoxification Without Extended On-Site Monitoring (I-D) (H0014) and H0035-HF Partial Hospitalization.

Medication Administration

*Billing Unit:* One day  
*Maximum Units:* 365 per year for H0020 (oral Methadone, Buprenorphine). 1 per month for J2315 (injectable Vivitrol)

Peer Support Services

*Billing Unit:* 15 minutes