

## **Table of Contents**

**State/Territory Name: Kentucky**

**State Plan Amendment (SPA)#: 23-0003**

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 East 12th Street, Room 355  
Kansas City, Missouri 64106



Medicaid and CHIP Operations Group

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May 23, 2023

Ms. Lisa Lee  
Commissioner, Department for Medicaid Services  
Commonwealth of Kentucky  
Cabinet for Health and Human Services  
275 East Main Street, 6 West A  
Frankfort, KY 40601

Re: Kentucky State Plan Amendment (SPA) Transmittal Number 23-0003

Dear Commissioner Lee:

The Centers for Medicare & Medicaid Services (CMS) reviewed your Medicaid State Plan Amendment (SPA) submitted under transmittal number (TN) 23-0003. This amendment proposes to add Licensed Alcohol and Drug Counselor (LADC) as a new provider and create a Behavioral Health Associate (BHA) provider.

We conducted our review of your submittal according to statutory requirements in Title XIX of the Social Security Act. This letter is to inform you that KY Medicaid SPA 23-0003 was approved on May 15, 2023, with an effective date of January 1, 2023. Enclosed are copies of the CMS-179 summary form and approved SPA pages.

If you have any questions, please contact Keri Toback at 312-353-1754 or via email at [keri.toback@cms.hhs.gov](mailto:keri.toback@cms.hhs.gov).

Sincerely,



James G. Scott, Director  
Division of Program Operations

Enclosures

cc: Erin Bickers, KY DMS

**TRANSMITTAL AND NOTICE OF APPROVAL OF  
STATE PLAN MATERIAL  
FOR: CENTERS FOR MEDICARE & MEDICAID SERVICES**

1. TRANSMITTAL NUMBER <u>2 3</u> — <u>0 0 0 3</u>	2. STATE <u>KY</u>
3. PROGRAM IDENTIFICATION: TITLE OF THE SOCIAL SECURITY ACT <input checked="" type="radio"/> XIX <input type="radio"/> XXI	

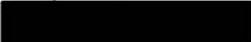
TO: CENTER DIRECTOR CENTERS FOR MEDICAID & CHIP SERVICES DEPARTMENT OF HEALTH AND HUMAN SERVICES	4. PROPOSED EFFECTIVE DATE <b>January 1, 2023</b>
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5. FEDERAL STATUTE/REGULATION CITATION	6. FEDERAL BUDGET IMPACT (Amounts in WHOLE dollars) a. FFY _____ \$ _____ b. FFY _____ \$ _____
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7. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT Att. 3.1-A Page 7.6.1(f); Att. 3.1-A Page 7.6.1(g); Att. 3.1-A Page 7.6.1(g)(1); Att. 3.1-A Page 7.6.1(jj); Att. 3.1-A Page 7.6.1(oo); Att. 3.1-A Page 7.6.1(z); Att. 3.1-B Page 31.5(f); Att. 3.1-B Page 31.5(g); Att. 3.1-B Page 31.5(g)(1); Att. 3.1-B Page 31.5(jj) Att. 3.1-B Page 31.5(oo) Att. 3.1-B Page 31.5(z) Att. 4.19-B Page 20.15 (1)(d)	8. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable)
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9. SUBJECT OF AMENDMENT Adding Licensed Alcohol and Drug Counselor (LADC) as a new provider and creating a Behavioral Health Associate (BHA) provider.
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10. GOVERNOR'S REVIEW (Check One) <input type="radio"/> GOVERNOR'S OFFICE REPORTED NO COMMENT <input type="radio"/> COMMENTS OF GOVERNOR'S OFFICE ENCLOSED <input type="radio"/> NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL <input checked="" type="radio"/> OTHER, AS SPECIFIED:
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11. SIGNATURE OF STATE AGENCY OFFICIAL 	15. RETURN TO Lisa Lee 275 E. Main St. Frankfort, KY 40601
12. TYPED NAME Lisa Lee	
13. TITLE Commissioner	
14. DATE SUBMITTED 3/31/2023	

**FOR CMS USE ONLY**

16. DATE RECEIVED 03/31/2023	17. DATE APPROVED 05/15/2023
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**PLAN APPROVED - ONE COPY ATTACHED**

18. EFFECTIVE DATE OF APPROVED MATERIAL 01/01/2023	19. SIGNATURE OF APPROVING OFFICIAL 
20. TYPED NAME OF APPROVING OFFICIAL James G. Scott	21. TITLE OF APPROVING OFFICIAL Director, Division of Program Operations

22. REMARKS
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13. Other diagnostic, screening, preventive and, rehabilitative services, i.e., other than those provided elsewhere in this plan.

13d. Rehabilitative Services

A. Treatment Services for Substance Use Disorders and Mental Health Disorders

4. Rendering Providers

Service	LP	LPA/CP*	LPP/CP with autonomous functioning	LCSW	CSW*	LPCC	LPCA*	LPAT	LPATA*	LMFT	LMFTA*	MID	Psychiatrist	APRN	PA	LCADC	LCADCA *	LADC*	CADC*	BHA*	Peer Support*	SUD Peer Support*	Prevention Specialist*	CSA*	LBA	LABA*	RBT*	LO	CMHC	Provider Group
	A. Screening	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	❖					✓	✓	✓	✓	✓
B. Assessment	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	❖				✓	✓	✓	✓	✓	✓
C. Psychological Testing	✓	✓	✓																									✓	✓	✓
D. Crisis Intervention	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓							✓	✓		✓	✓	✓
E. Mobile Crisis	❖	❖	❖	❖	❖	❖	❖	❖	❖	❖	❖	❖	❖	❖	❖	❖	❖	❖	❖	❖	❖	❖	❖		❖	❖		✓	✓	
F. Residential Crisis Stabilization	❖	❖	❖	❖	❖	❖	❖	❖	❖	❖	❖	❖	❖	❖	❖	❖	❖	❖	❖			❖	❖		❖	❖		✓	✓	
G. Day Treatment	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	❖	✓	✓			✓	✓		✓	✓	✓
H. Peer Support																					❖	❖					✓	✓	✓	
I. Intensive Outpatient Program (IOP)	❖	❖	❖	❖	❖	❖	❖	❖	❖	❖	❖	❖	❖	❖	❖	❖	❖	❖	❖	❖	❖							✓	✓	✓
J. Individual Outpatient Therapy	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	❖					✓	✓		✓	✓	✓
K. Group Outpatient Therapy	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	❖					✓	✓		✓	✓	✓

13. Other diagnostic, screening, preventive and, rehabilitative services, i.e., other than those provided elsewhere in this plan.

13d. Rehabilitative Services

A. Treatment Services for Substance Use Disorders and Mental Health Disorders

4. Rendering Providers

Service	LP	LPA*	LPP or CP with autonomous functioning	LCSW	CSW*	LPCC	LPCA*	LPAT	LPATA*	LMFT	LMFTA*	MD	Psychiatrist	APRN	PA	LCADC	LCADCA*	LADC*	CADC*	BHA*	Peer Support*	SUD Peer Support*	Prevention Specialist*	CSA	LBA	LABA*	RBT*	LO	CMHC	Provider Group
A. Family Outpatient Therapy	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	❖								✓	✓	✓
B. Collateral Outpatient Therapy	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	❖					✓	✓		✓	✓	✓
C. Partial Hospitalizations	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆					◆	◆		✓	✓	
D. Service Planning	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	❖					✓	✓		✓	✓	✓
E. Residential Services for SUD (Substance use only)	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆			◆	◆					✓	✓	
F. SBIRT (Substance Use Only)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	❖			✓				✓	✓	✓	
G. Assertive Community Treatment (Mental Health Only)	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆						◆	◆		◆	◆	◆		✓	✓	
H. Comprehensive Community Support Services (Mental Health Only)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓					❖			✓				✓	✓	✓	

13. Other diagnostic, screening, preventive and, rehabilitative services, i.e., other than those provided elsewhere in this plan.

13d. Rehabilitative Services

A. Treatment Services for Substance Use Disorders and Mental Health Disorders

4. Rendering Providers

Service	Provider Group																													
	LP	LPA*	LPP or CP with autonomous functioning	LCSW	CSW*	LPCC	LPCA*	LPAT	LPATA*	LMFT	LMFTA*	MD	Psychiatrist	APRN	PA	LCADC	LCADCA*	LADC*	CADC*	BHA*	Peer Support*	SUD Peer Support*	Prevention Specialist*	CSA	LBA	LABA*	RBT*	LO	CMHC	Provider Group
A. Withdrawal Management	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	❖								✓	✓	✓
B. Medication Assisted Treatment (MAT)	❖	❖	❖	❖	❖	❖	❖	❖	❖	❖	❖	❖	❖	❖	❖	❖	❖	❖	❖	❖								✓	✓	✓
C. Applied Behavior Analysis (Mental Health Only)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓										✓	✓	✓	✓	✓	
D. Inpatient Chemical Dependency Treatment (Substance Use Only)	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆		◆	◆					✓	✓	

State: Kentucky

13. Other diagnostic, screening, preventive and, rehabilitative services, i.e., other than those provided elsewhere in this plan.

13d. Rehabilitative Services

A. Treatment Services for Substance Use Disorders and Mental Health Disorders

**9. Qualifications of Providers (continued)**

- l. Physician Assistant – Has graduated from a physician assistant or surgeon assistant program accredited by the Accreditation Review Commission on Education for Physician Assistants or its predecessor or successor agencies and has passed the certifying examination administered by the National Commission on Certification of Physician Assistants or its predecessor or successor agencies; or Possesses a current physician assistant certificate issued by the board prior to July 15, 2002.
- m. Psychiatrist – Licensed under the laws of Kentucky to practice medicine or osteopathy, or a medical officer of the government of the United States while engaged in the performance of official duties, who is certified or eligible to apply for certification by the American Board of Psychiatry and Neurology, Inc.
- n. KY Credentialed Peer Support Specialist – Kentucky regulation states that an applicant shall:
  - (1) Be eighteen (18) years of age or older;
  - (2) Have personal or family lived experience with mental health diagnosis and treatment (as specified by relevant peer support regulation);
  - (3) Have attained a high school diploma or general equivalency diploma (GED) certificate;
  - (3) Complete the relevant DBHDID peer specialist training program(s);
  - (4) Successfully complete the DBHDID peer specialist examination(s);
  - (5) Complete and maintain documentation of a minimum of six (6) hours of job related training or education in each subsequent year of employment; and
  - (6) Deliver services working under the supervision of a physician, a psychiatrist, an APRN, a PA, a LP, a LPP, a LPA, a LCSW, a LMFT, a LPCC, a CSW, a MFTA, a LPCA, a CADC, a LPAT, or a LPATA.
  - (7) Demonstrated the capacity to provide the core elements of peer support services for the behavioral health population being served, including the age range of the population being served.
- o. Licensed Alcohol and Drug Counselor (LADC): KRS 309.830 states that a Licensed Alcohol and Drug Counselor shall:
  - (1) Be at least eighteen (18) years of age.
  - (2) Have obtained from a regionally accredited college or university, or a college or university accredited by an agency recognized by the United States Department of Education, a thirty (30) hour master's degree in a human services field with clinical application.
  - (3) Meet all education, work experience, and supervision requirements of the International Certification and Reciprocity Consortium for the Alcohol and Drug Counselor, with the required supervision hours being under the direct supervision of: (a) A licensed alcohol and drug counselor who has at least two (2) years of post-licensure experience and has attended the board-sponsored supervision training; or (b) A licensed clinical alcohol and drug counselor who has at least twelve (12) months of post-licensure experience or who has attended the board-sponsored supervision training.
  - (4) Have passed a written examination that has been approved by the International Certification and Reciprocity Consortium.
  - (5) Live or work at least a majority of the time in Kentucky.
- p. Certified Alcohol and Drug Counselor (CADC): KRS 309.083 states that a Certified Alcohol and Drug Counselor shall:
  - (1) Be at least eighteen (18) years of age;
  - (2) Have obtained a baccalaureate degree;
  - (3) Have completed six thousand (6,000) hours of board-approved experience working with alcohol or drug dependent persons, three hundred (300) hours of which shall have been under the direct supervision of a certified alcohol and drug counselor who has at least two (2) years of post-certification experience; (4) Have completed at least two hundred seventy (270) classroom hours of board-approved curriculum;
  - (4) Have passed a written examination that has been approved by the International Certification Reciprocity Consortium on Alcoholism and Drug Abuse and an oral examination approved by the board;

State: Kentucky

13. Other diagnostic, screening, preventive and, rehabilitative services, i.e., other than those provided elsewhere in this plan.

13d. Rehabilitative Services

A. Treatment Services for Substance Use Disorders and Mental Health Disorders

**9. Qualifications of Providers (continued)**

- w. Licensed Assistant Behavior Analyst: KRS 319C.080 states that a Licensed Assistant Behavior Analyst shall:
- (1) Have met the education requirements of the Board Certified Assistant Behavior Analyst (BCaBA) standards, has passed the BCaBA examination, and is credentialed as an assistant behavior analyst by the certification board;
  - (2) Maintain active status and fulfills all requirements for renewal and recertification with the certification board as a Board Certified Assistant Behavior Analyst;
  - (3) Conduct his professional activities in accordance with accepted standards as required by administrative regulations promulgated by the board in accordance with KRS 319C.050(1);
  - (4) Comply with all applicable administrative regulations promulgated by the board; and
  - (5) Be supervised by a certified behavior analyst in a manner consistent with the certification board requirements for supervision of Board Certified Assistant Behavior Analysts.
- x. Registered Behavioral Technician (RBT) shall meet the following requirements provided by the Behavior Analyst Certification Board (BACB):
- (1) Be at least 18 years of age
  - (2) Have a minimum educational requirement of a high school diploma or the equivalent
  - (3) Complete a 40-hour training program approved by the Behavior Analyst Certification Board conducted by BACB certificants.
  - (4) Pass the Registered Behavioral Technician Competency Assessment administered by a BACB certificant.
  - (5) Pass the Registered Behavioral Technician exam provided by the Behavior Analyst Certification Board
- y. Certified Psychologist with autonomous functioning: KRS 319.056 states a Certified Psychologist with autonomous functioning shall be:
- (1) A person currently authorized to use the title "certified psychologist with autonomous functioning" may continue to function with that title or may choose to permanently change this title to "licensed psychological practitioner" and notify the board of this choice. The board shall issue a license at the time of renewal to the credential holder with the title of choice.
- z. Behavioral Health Associate shall meet the following requirements:  
An individual with a minimum of a Bachelor of Arts or Sciences degree in a human service field who is matriculating towards a master's degree or working toward a specialized credential in the field of mental health or substance use disorder.

State: Kentucky

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**8. Community Mental Health Centers (CMHC) (continued)**

- A professional equivalent, employed by a CMHC as of, or prior to January 17, 2018 through education in a behavioral health field and experience in a behavioral health setting, qualified to provide behavioral health services. Professional equivalents may include practitioners obtaining experience to qualify for licensure in their behavioral health profession or individuals with a bachelor's degree or greater, with experience in behavioral health. Education and experience are as follows:
  - i. Bachelor's degree and three (3) years of full-time supervised experience.
  - ii. Master's degree and six (6) months of full-time supervised experience.
  - iii. Doctoral degree. No experience.
- The following professionals may provide services with appropriate supervision:
  - i. A behavioral health associate;
  - ii. A licensed psychological associate;
  - iii. A licensed professional counselor associate;
  - iv. A certified social worker, Master Level;
  - v. A marriage and family therapy associate;
  - vi. A physician assistant working under the supervision of a physician;
  - vii. A certified or registered Peer Support Specialist working under the supervision of a physician, a psychiatrist, an APRN, a PA, a LP, a LPP, a LCSW, a LMFT, a LPCC, a LCADCA, a LADC (for substance use only), a psychiatric nurse, or a LPAT;
  - viii. A certified alcohol and drug counselor (CADC) working under the supervision of a physician, a psychiatrist, an APRN, a PA, a LP, a LPP, a LCSW, a LMFT, a LPCC, LCADC, or a LPAT, with three (3) years of inpatient or outpatient clinical experience in psychiatric social work and currently employed by a hospital or forensic psychiatric facility licensed by the Commonwealth or a psychiatric unit of a general hospital or a private agency or company engaged in the provision of mental health services or a regional community mental health center;
  - ix. A community support associate who is working under the supervision of a physician, a psychiatrist, an APRN, a PA, a LP, a LPP, a LCSW, a LMFT, a LPCC, a psychiatric nurse, or a LPAT;

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Service	LP	LPA/CP*	LPP/CP with autonomous functioning	LCSW	CSW*	LPCC	LPCA*	LPAT	LPATA*	LMFT	LMFT*	MD	Psychiatrist	APRN	PA	LCADC	LCADCA*	LADC*	CADC*	Peer Support*	SU Peer Support*	Prevention Specialist*	CSA*	LBA	LABA*	RBT*	LO	CMHC	Provider Group	BHA*
A. Screening	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓					✓	✓	✓	✓	✓	✓	♦
B. Assessment	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓					✓	✓	✓	✓	✓	✓	♦
C. Psychological Testing	✓	✓	✓																							✓	✓	✓		
D. Crisis Intervention	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓					✓	✓	✓	✓	✓	✓	♦
E. Mobile Crisis	♦	♦	♦	♦	♦	♦	♦	♦	♦	♦	♦	♦	♦	♦	♦	♦	♦	♦	♦	♦	♦	♦		♦	♦		✓	✓		♦
F. Residential Crisis Stabilization	♦	♦	♦	♦	♦	♦	♦	♦	♦	♦	♦	♦	♦	♦	♦	♦	♦	♦	♦	♦	♦	♦		♦	♦		✓	✓		♦
G. Day Treatment	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓					✓	✓	✓	✓	✓	✓	♦
H. Peer Support Services																				❖	❖					✓	✓	✓		
I. Intensive Outpatient Program (IOP)	❖	❖	❖	❖	❖	❖	❖	❖	❖	❖	❖	❖	❖	❖	❖	❖	❖	❖	❖	❖						✓	✓	✓	✓	♦
J. Individual Outpatient Therapy	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓							✓	✓	✓	✓	♦
K. Group Outpatient Therapy	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓							✓	✓	✓	✓	♦
L. Family Outpatient Therapy	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓							✓	✓	✓	✓	♦
M. Collateral Outpatient Therapy	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	♦						✓	✓	✓	✓	♦
N. Partial Hospitalization	♦	♦	♦	♦	♦	♦	♦	♦	♦	♦	♦	♦	♦	♦	♦	♦	♦	♦	♦	♦				♦	♦		✓	✓		♦

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L. Family Outpatient Therapy	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	❖								✓	✓	✓	
M. Collateral Outpatient Therapy	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	◆	❖					✓	✓		✓	✓	✓	
N. Partial Hospitalizations	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆					◆	◆		✓	✓	
O. Service Planning	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	❖					✓	✓		✓	✓	✓	
P. Residential Services for SUD (Substance use only)	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆		◆	◆					✓	✓		
Q. SBIRT (Substance Use Only)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	❖			✓				✓	✓	✓		
R. Assertive Community Treatment (Mental Health Only)	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆						◆	◆		◆	◆	◆		✓	✓		
S. Comprehensive Community Support Services (Mental Health Only)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓					❖				✓			✓	✓	✓		

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A. Treatment Services for Substance Use Disorders and Mental Health Disorders

4. Rendering Providers

Service	LP	LPA*	LPP or CP with autonomous functioning	LCSW	CSW*	LPCC	LPCA*	LPAT	LPATA*	LMFT	LMFTA*	MD	Psychiatrist	APRN	PA	LCADC	LCADCA*	LADC*	CADC*	BHA*	Peer Support*	SUD Peer Support*	Prevention Specialist*	CSA	LBA	LABA*	RBT*	LO	CMHC	Provider Group
T. Withdrawal Management	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	❖								✓	✓	✓
U. Medication Assisted Treatment (MAT)	❖	❖	❖	❖	❖	❖	❖	❖	❖	❖	❖	❖	❖	❖	❖	❖	❖	❖	❖	❖								✓	✓	✓
V. Applied Behavior Analysis (Mental Health Only)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓										✓	✓	✓	✓	✓	
W. Inpatient Chemical Dependency Treatment (Substance Use Only)	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆		◆						✓	✓	

State: Kentucky

13. Other diagnostic, screening, preventive and, rehabilitative services, i.e., other than those provided elsewhere in this plan.

13d. Rehabilitative Services

A. Treatment Services for Substance Use Disorders and Mental Health Disorders

**9. Qualifications of Providers (continued)**

- l. Physician Assistant – Has graduated from a physician assistant or surgeon assistant program accredited by the Accreditation Review Commission on Education for Physician Assistants or its predecessor or successor agencies and has passed the certifying examination administered by the National Commission on Certification of Physician Assistants or its predecessor or successor agencies; or Possesses a current physician assistant certificate issued by the board prior to July 15, 2002.
- m. Psychiatrist – Licensed under the laws of Kentucky to practice medicine or osteopathy, or a medical officer of the government of the United States while engaged in the performance of official duties, who is certified or eligible to apply for certification by the American Board of Psychiatry and Neurology, Inc.
- n. KY Credentialed Peer Support Specialist – Kentucky regulation states that an applicant shall:
  - (1) Be eighteen (18) years of age or older;
  - (2) Have personal or family lived experience with mental health diagnosis and treatment (as specified by relevant peer support regulation);
  - (3) Have attained a high school diploma or general equivalency diploma (GED) certificate;
  - (3) Complete the relevant DBHDID peer specialist training program(s);
  - (4) Successfully complete the DBHDID peer specialist examination(s);
  - (5) Complete and maintain documentation of a minimum of six (6) hours of job related training or education in each subsequent year of employment; and
  - (6) Deliver services working under the supervision of a physician, a psychiatrist, an APRN, a PA, a LP, a LPP, a LPA, a LCSW, a LMFT, a LPCC, a CSW, a MFTA, a LPCA, a CADC, a LPAT, or a LPATA.
  - (7) Demonstrated the capacity to provide the core elements of peer support services for the behavioral health population being served, including the age range of the population being served.
- o. Licensed Alcohol and Drug Counselor (LADC): KRS 309.830 states that a Licensed Alcohol and Drug Counselor shall:
  - (1) Be at least eighteen (18) years of age.
  - (2) Have obtained from a regionally accredited college or university, or a college or university accredited by an agency recognized by the United States Department of Education, a thirty (30) hour master's degree in a human services field with clinical application.
  - (3) Meet all education, work experience, and supervision requirements of the International Certification and Reciprocity Consortium for the Alcohol and Drug Counselor, with the required supervision hours being under the direct supervision of a: (a) A licensed alcohol and drug counselor who has at least two (2) years of post-licensure experience and has attended the board-sponsored supervision training; or (b) A licensed clinical alcohol and drug counselor who has at least twelve (12) months of post-licensure experience or who has attended the board-sponsored supervision training.
  - (4) Have passed a written examination that has been approved by the International Certification and Reciprocity Consortium.
  - (5) Live or work at least a majority of the time in Kentucky.
- p. Certified Alcohol and Drug Counselor (CADC): KRS 309.083 states that a Certified Alcohol and Drug Counselor shall:
  - (1) Be at least eighteen (18) years of age;
  - (2) Have obtained a baccalaureate degree;
  - (3) Have completed six thousand (6,000) hours of board-approved experience working with alcohol or drug dependent persons, three hundred (300) hours of which shall have been under the direct supervision of a certified alcohol and drug counselor who has at least two (2) years of post-certification experience; (4) Have completed at least two hundred seventy (270) classroom hours of board-approved curriculum;
  - (4) Have passed a written examination that has been approved by the International Certification Reciprocity Consortium on Alcoholism and Drug Abuse and an oral examination approved by the board;

State: Kentucky

13. Other diagnostic, screening, preventive and, rehabilitative services, i.e., other than those provided elsewhere in this plan.

13d. Rehabilitative Services

A. Treatment Services for Substance Use Disorders and Mental Health Disorders

**9. Qualifications of Providers (continued)**

- w. Licensed Assistant Behavior Analyst: KRS 319C.080 states that a Licensed Assistant Behavior Analyst shall:
- (1) Have met the education requirements of the Board Certified Assistant Behavior Analyst (BCaBA) standards, has passed the BCaBA examination, and is credentialed as an assistant behavior analyst by the certification board;
  - (2) Maintain active status and fulfills all requirements for renewal and recertification with the certification board as a Board Certified Assistant Behavior Analyst;
  - (3) Conduct his professional activities in accordance with accepted standards as required by administrative regulations promulgated by the board in accordance with KRS 319C.050(1);
  - (4) Comply with all applicable administrative regulations promulgated by the board; and
  - (5) Be supervised by a certified behavior analyst in a manner consistent with the certification board requirements for supervision of Board Certified Assistant Behavior Analysts.
- x. Registered Behavioral Technician (RBT) shall meet the following requirements provided by the Behavior Analyst Certification Board (BACB):
- (1) Be at least 18 years of age
  - (2) Have a minimum educational requirement of a high school diploma or the equivalent
  - (3) Complete a 40-hour training program approved by the Behavior Analyst Certification Board conducted by BACB certificants.
  - (4) Pass the Registered Behavioral Technician Competency Assessment administered by a BACB certificant.
  - (5) Pass the Registered Behavioral Technician exam provided by the Behavior Analyst Certification Board
- y. Certified Psychologist with autonomous functioning: KRS 319.056 states a Certified Psychologist with autonomous functioning shall be:
- (1) A person currently authorized to use the title "certified psychologist with autonomous functioning" may continue to function with that title or may choose to permanently change this title to "licensed psychological practitioner" and notify the board of this choice. The board shall issue a license at the time of renewal to the credential holder with the title of choice.
- z. Behavioral Health Associate shall meet the following requirements:  
An individual with a minimum of a Bachelor of Arts or Sciences degree in a human service field who is matriculating towards a master's degree or working toward a specialized credential in the field of mental health or substance use disorder.

State: Kentucky

13. Other diagnostic, screening, preventive and, rehabilitative services, i.e., other than those provided elsewhere in this plan.

13d. Rehabilitative Services

A. Treatment Services for Substance Use Disorders and Mental Health Disorders

**8. Community Mental Health Centers (CMHC) (continued)**

- A professional equivalent, employed by a CMHC as of, or prior to January 17, 2018 through education in a behavioral health field and experience in a behavioral health setting, qualified to provide behavioral health services. Professional equivalents may include practitioners obtaining experience to qualify for licensure in their behavioral health profession or individuals with a bachelor's degree or greater, with experience in behavioral health. Education and experience are as follows:
  - i. Bachelor's degree and three (3) years of full-time supervised experience.
  - ii. Master's degree and six (6) months of full-time supervised experience.
  - iii. Doctoral degree. No experience.
- The following professionals may provide services with appropriate supervision:
  - i. A behavioral health associate ~~A mental health associate with a minimum of a Bachelor's degree in psychology, sociology, social work, or human services under supervision of one of the above professionals;~~
  - ii. A licensed psychological associate;
  - iii. A licensed professional counselor associate;
  - iv. A certified social worker, Master Level;
  - v. A marriage and family therapy associate;
  - vi. A physician assistant working under the supervision of a physician;
  - vii. A certified or registered Peer Support Specialist working under the supervision of a physician, a psychiatrist, an APRN, a PA, a LP, a LPP, a LCSW, a LMFT, a LPCC, a LCADC (for substance use only), a psychiatric nurse, or a LPAT;
  - viii. A certified alcohol and drug counselor (CADC) working under the supervision of a physician, a psychiatrist, an APRN, a PA, a LP, a LPP, a LCSW, a LMFT, a LPCC, LCADC, or a LPAT, with three (3) years of inpatient or outpatient clinical experience in psychiatric social work and currently employed by a hospital or forensic psychiatric facility licensed by the Commonwealth or a psychiatric unit of a general hospital or a private agency or company engaged in the provision of mental health services or a regional community mental health center;
  - ix. A community support associate who is working under the supervision of a physician, a psychiatrist, an APRN, a PA, a LP, a LPP, a LCSW, a LMFT, a LPCC, a psychiatric nurse, or a LPAT;

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**XVI. Other diagnostic, screening, preventive and rehabilitative services.**

- B. Other practitioners providing the service (listed in 1, 2, 3, 4, and 5 below) will be reimbursed based on a step down methodology calculated as a percentage of the physician rate (75% of the current Kentucky-specific Medicare Physician rate, or the established Medicaid rate if a current Kentucky-specific Medicare rate does not exist). The step down includes:
- (1) 85% - Advanced Practice Registered Nurse (APRN), Licensed Psychologist (LP), Physician Assistant (PA)
  - (2) 80% - Licensed Professional Clinical Counselor (LPCC), Licensed Clinical Social Worker (LCSW), Licensed Psychological Practitioner (LPP), Licensed Marriage and Family Therapist (LMFT), Licensed Professional Art Therapist (LPAT), Licensed Behavior Analyst (LBA), Licensed Clinical Alcohol and Drug Counselor (LCADC), or Certified Psychologist with autonomous functioning.
  - (3) 70% - Licensed Psychological Associate (LPA), Licensed Marriage and Family Therapist Associate (LMFTA), Licensed Professional Counselor Associate (LPCA), Certified Social Worker, Masters Level (CSW), Licensed Professional Art Therapist Associate (LPATA), Licensed Assistant Behavior Analyst (LABA), Licensed Clinical Alcohol and Drug Counselor Associate (LCADCA), Licensed Alcohol and Drug Counselor, or Certified psychologist without autonomous functioning. The billing provider is either the supervisor, a provider group, or licensed organization.
  - (4) 50% - Certified alcohol and drug counselor (CADC) and Behavioral Health Associate.
  - (5) 40% - Other non-bachelors-level providers

€ Reimbursement for the following services shall be as established on the Behavioral Health and Substance Abuse Services Outpatient (Non-Facility) fee Schedule. Except as otherwise noted in the plan, state-developed fee schedule rates are the same for both governmental and private providers of the following services. The agency's fee schedule rate was set as of 7/1/2019 and is effective for services provided on or after that date. All rates are published on the agency's website at <https://www.chfs.ky.gov/agencies/dms/Pages/feerates.aspx>

- (1) Screening, brief intervention and referral to treatment (SBIRT)
  - (2) Service planning
  - (3) Day treatment
  - (4) Comprehensive community support services
  - (5) Peer support services
  - (6) Intensive outpatient program services
- Partial hospitalization services

Reimbursement for these services will be reviewed and may be adjusted annually according to the Medicare Economic Index.

- A. Kentucky has developed a method for allocating the portion of the rate related to each of the bundled services for purposes of proper reporting on the CMS-64.