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State/Territory Name: **New York**

State Plan Amendment (SPA) #: **22-0090**

This file contains the following documents in the order listed:

- 1) Approval Letter
- 2) CMS 179 Form/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

March 15, 2023

Amir Bassiri
Medicaid Director
Office of Health Insurance Programs
New York State Department of Health
One Commerce Plaza Rm. 1605
Albany, NY 12237

Re: New York State Plan Amendment (SPA) 22-0090

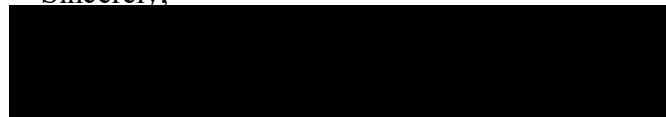
Dear Director Bassiri:

The Centers for Medicare & Medicaid Services (CMS) reviewed your Medicaid State Plan Amendment (SPA) submitted under transmittal number NY-22-0090. This amendment proposes to allow Article 29-I Health Facilities to be reimbursed for care and services provided by exempt practitioners as defined under State law who were employed by an authorized setting as of June 24, 2022 and continue to work there or in another authorized setting, working under the supervision of a professional licensed pursuant to Article 153 (psychologists), 154 (social workers) or 163 (mental health practitioners) of the State Education law.

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 New York Medicaid SPA 22-0090 was approved on March 13, 2023, with an effective date of May 12, 2023.

If you have any questions, please contact Melvina Harrison at 212-616-2247 or via email at melvina.harrison@cms.hhs.gov.

Sincerely,



James G. Scott, Director
Division of Program Operations

cc: Regina Deyette, NYDOH

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

1. TRANSMITTAL NUMBER

2 2 — 0 0 9 0

2. STATE

NY

3. PROGRAM IDENTIFICATION: TITLE OF THE SOCIAL SECURITY ACT

XIX XXI

TO: CENTER DIRECTOR
CENTERS FOR MEDICAID & CHIP SERVICES
DEPARTMENT OF HEALTH AND HUMAN SERVICES

4. PROPOSED EFFECTIVE DATE

~~Day after PHE ends~~ **May 12, 2023**

5. FEDERAL STATUTE/REGULATION CITATION

§1905(a)(4)(B), 1905(a)(13)(B), and 1905(a)(13)(C)

6. FEDERAL BUDGET IMPACT (Amounts in WHOLE dollars)

a. FFY 11/01/22-09/30/23 \$ 0
b. FFY 10/01/23-09/30/24 \$ 0

7. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT

**Att 3.1-A Supp: Pages 3b-12.4, 3b-12.6, 3b-12.7, 3b-40, 3b-42, 3b-43, 3b-12.4(a), 3b-12.6(a), 3b-12.7(a), 3b-40(a), 3b-42(a), 3b-43(a)
Att 3.1-B Supp: Pages 3b-12.4, 3b-12.6, 3b-12.7, 3b-40, 3b-42, 3b-43, 3b-12.4(a), 3b-12.6(a), 3b-12.7(a), 3b-40(a), 3b-42(a), 3b-43(a)**

8. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable)

**Att 3.1-A Supp: Pages 3b-12.4, 3b-12.6, 3b-12.7, 3b-40, 3b-42, 3b-43
Att 3.1-B Supp: Pages 3b-12.4, 3b-12.6, 3b-12.7, 3b-40, 3b-42, 3b-43**

9. SUBJECT OF AMENDMENT

~~LICENSE EXEMPTION FOR STAFF CURRENTLY EMPLOYED BY 29-I VFCA HEALTH FACILITY~~

License Exemption for State Employed by 29-I VFCA Health Facility

10. GOVERNOR'S REVIEW (Check One)

- GOVERNOR'S OFFICE REPORTED NO COMMENT
 COMMENTS OF GOVERNOR'S OFFICE ENCLOSED
 NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL

OTHER, AS SPECIFIED:

11. SIGNATURE OF STATE AGENCY OFFICIAL

12. TYPED NAME

Amir Bassiri

13. TITLE

Medicaid Director

14. DATE SUBMITTED

December 30, 2022

15. RETURN TO

New York State Department of Health
Division of Finance and Rate Setting
99 Washington Ave – One Commerce Plaza
Suite 1432
Albany, NY 12210

FOR CMS USE ONLY

16. DATE RECEIVED

12/30/2023

17. DATE APPROVED

03/13/2023

PLAN APPROVED - ONE COPY ATTACHED

18. EFFECTIVE DATE OF APPROVED MATERIAL

05/12/2023

19. SIGNATURE

20. TYPED NAME OF APPROVING OFFICIAL

James G. Scott

21. TITLE OF APPROVING OFFICIAL

Director, Division of Program Operations

22. REMARKS

Pen an ink authorized on 3/10/23 to block 4: Proposed effective date: May 12, 2023
Pen and ink authorized on 3/10/23 to block 7 to update 3.1-A Pages to 3b-12.4, 3b-12.4(a), 3b-12.6, 3b-12.6(a), 3b-12.7, 3b-12.7(a), 3b-40, 3b-40(a), 3b-42, 3b-42(a), 3b-43, 3b-43(a)
Pen and ink authorized on 3/10/23 to block 7 to update 3.1-B Pages to 3b-12.4, 3b-12.4(a), 3b-12.6, 3b-12.6(a), 3b-12.7, 3b-12.7(a), 3b-40, 3b-40(a), 3b-42, 3b-42(a), 3b-43, 3b-43(a)
Pen and ink authorized for Box 9 to update title to: License Exemption for Staff Employed by 29-I VFCA Health Facility

Pen and ink changes
NY SPA 22-0090

Box 4: PROPOSED EFFECTIVE DATE: May 12, 2023

Box 8: PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable)

Att 3.1-A Supp: Pages 3b-12.4, 3b-12.6, 3b-12.7, 3b-40, 3b-42, 3b-43

Att 3.1-B Supp: Pages 3b-12.4, 3b-12.6, 3b-12.7, 3b-40, 3b-42, 3b-43

Box 7: PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT

Att 3.1-A Supp: Pages 3b-12.4, 3b-12.4(a), 3b-12.6, 3b-12.6(a), 3b-12.7, 3b-12.7(a), 3b-40, 3b-40(a), 3b-42, 3b-42(a), 3b-43, 3b-43(a)

Att 3.1-B Supp: Pages 3b-12.4, 3b-12.4(a), 3b-12.6, 3b-12.6(a), 3b-12.7, 3b-12.7(a), 3b-40, 3b-40(a), 3b-42, 3b-42(a), 3b-43, 3b-43(a)

BOX 9: SUBJECT OF AMENDMENT

LICENSE EXEMPTION FOR STAFF EMPLOYED BY 29-I VFCA HEALTH FACILITY

**New York
3b-12.4**

1905(a)(4)(B) Nursing Facility Services & 1905(a)(13)(C) Other Diagnostic, Screening, Preventive, and Rehabilitative Services

4.b. Early and Periodic Screening, Diagnostic, and Treatment (EPSDT) Services Continued

13.c. Preventive Services - 42 CFR 440.130(c)

The following explanations apply to all Preventive Residential Treatment (PRT) services for children under the age of 21:

EPSDT Preventive Attestations: The State assures that all preventive services are provided to, or directed exclusively toward the treatment of, the Medicaid eligible child. Medically necessary services will be furnished to those under age 21 without limitation in accordance with Section 1905(r) of the Social Security Act. The State also assures that preventive services do not include any of the following:

- A. Educational, vocational and job training services;
- B. Room and board;
- C. Services to inmates in public institutions as defined in 42 CFR §435.1010;
- D. Services to individuals residing in institutions for mental diseases as described in 42 CFR §435.1010;
- E. Recreational and social activities; and
- F. Services that must be covered elsewhere in the New York Medicaid State Plan.

Additional assurances related to PRT services under this State Plan and Other Limited Health Benefits:

- The State assures that the provision of PRT services will not restrict an individual's free choice of Medicaid providers.
- The State assures that the PRT services will not be used to restrict an individual's access to other services under the plan
- Individuals will not be compelled to receive PRT services, condition receipt of preventive residential services on the receipt of other Medicaid services, or condition receipt of other Medicaid services on receipt of these PRT services.
- Providers of PRT services do not exercise the agency's authority to authorize or deny the provision of other services under the plan.
- Payment for PRT services under the plan does not duplicate payments made to public agencies or private entities under other program authorities for the same purposes.
- Any individual, group of individuals or entity who meets the State's provider and practitioner qualifications will enroll in Medicaid and furnish the services under the plan.

TN # 22-0090 _____ **Approval Date** 03/13/2023
Supersedes TN # 21-0003 _____ **Effective Date** May 12, 2023

New York
3b-12.4(a)

1905(a)(4)(B) Nursing Facility Services & 1905(a)(13)(C) Other Diagnostic, Screening, Preventive, and Rehabilitative Services

4.b. Early and Periodic Screening, Diagnostic, and Treatment (EPSDT) Services Continued

13.c. Preventive Services - 42 CFR 440.130(c)

PRT provides community-based preventive residential services recommended by and under the supervision and oversight of one of the following licensed practitioners operating within the scope of their practice of their State license: a licensed psychiatrist, physician, psychologist, master social worker, clinical social worker, mental health counselor, marriage and family therapist, or psychoanalyst, licensed creative arts therapist, nurse practitioner, registered professional nurse, or a previously license exempt, unlicensed professional who was employed by an authorized setting as of June 24, 2022 and continues to work there or in another authorized setting who meets the following criteria:

- 1) Student enrolled in a degree granting program leading to licensure of Licensed Master Social Worker (LMSW), Licensed Clinical Social Worker (LCSW), Licensed Mental Health Counselor (LMHC), Licensed Marriage and Family Therapist (LMFT), Licensed Psychotherapist (LP) or Licensed Creative Arts Therapist (LCAT), **OR**
- 2) A person who holds a baccalaureate of social work or higher, **OR**
- 3) A person who holds a master's degree or higher in a behavioral health profession.

Unlicensed professionals must be supervised by a licensed psychiatrist, physician, psychologist, master social worker, clinical social worker, mental health counselor, marriage and family therapist, psychoanalyst, licensed creative arts therapist, nurse practitioner, or registered professional nurse.

The services should prevent disease, disability, and other health conditions or their progression; to prolong life; and to promote physical and mental health. PRT delivers preventive services to address the health issues identified on the treatment plan.

TN # 22-0090

Approval Date 03/13/2023

Supersedes TN # New

Effective Date May 12, 2023

**New York
3b-12.6**

1905(a)(4)(B) Nursing Facility Services & 1905(a)(13)(C) Other Diagnostic, Screening, Preventive, and Rehabilitative Services

Practitioner qualifications: Behavioral health counselors must be at least 21 years of age and licensed by the State of New York Department of Education and operating within the scope of his or her practice as: Licensed Psychoanalyst, Licensed Clinical Social Worker (LCSW), Licensed Marriage & Family Therapist, Licensed Mental Health Counselor, Licensed Creative Arts Therapist or Licensed Master Social Worker (LMSW), or be a previously license exempt, unlicensed professional who was employed by an authorized setting as of June 24, 2022 and continues to work there or in another authorized setting who meets the following criteria:

- 1) Student enrolled in a degree granting program leading to licensure of Licensed Master Social Worker (LMSW), Licensed Clinical Social Worker (LCSW), Licensed Mental Health Counselor (LMHC), Licensed Marriage and Family Therapist (LMFT), Licensed Psychotherapist (LP) or Licensed Creative Arts Therapist (LCAT), **OR**
- 2) A person who holds a baccalaureate of social work or higher, **OR**
- 3) A person who holds a master's degree or higher in a behavioral health profession.

Unlicensed professionals must be supervised by a licensed psychiatrist, physician, psychologist, master social worker, clinical social worker, mental health counselor, marriage and family therapist, or psychoanalyst, licensed creative arts therapist, nurse practitioner, or registered professional nurse.

- B. Nursing services and medication management – The PRT service must prevent disease, disability and other health conditions or their progression and will include twenty-four (24) hour medical availability when medically necessary. Coverage for the cost of medications is under the Medicaid pharmacy authority in the State Plan. Components include:
- Nursing assessments, including: HIV risk assessments, intake assessments, general first aid and triage activities
 - Routine screening for child abuse, drug abuse, and developmental milestones
 - Routine health management ordered during medical appointments, urgent/emergency care or hospitalization and training to prevent the progression of chronic diseases, such as diabetes and asthma
 - Training and health education including reproductive health education
 - Medical care for children on home visits, as medically necessary and monitoring of child healthcare needs, as medically necessary,
 - Educate caregivers on the medical needs of the child
 - Medical care for children on community provider visits, as medically necessary.

TN # 22-0090

Approval Date 03/13/2023

Supersedes TN # 21-0003

Effective Date May 12, 2023

**New York
3b-12.6(a)**

**1905(a)(4)(B) Nursing Facility Services & 1905(a)(13)(C) Other Diagnostic, Screening,
Preventive, and Rehabilitative Services**

Practitioner qualifications: Nursing services and medication management must be performed by an individual licensed by the State of New York Department of Education as a nurse practitioner or registered professional nurse within the scope of his or her practice. The nurse practitioner or registered professional nurse must be at least 21 years old. Prescribers must be available to prescribe medications and provide medical orders as necessary. Nursing services are provided within the PRT in the costs for the level of care. Nursing services do not substitute for Private Duty Nursing or Certified Home Health Aide Care in Foster Boarding Homes. Private Duty Nursing or Certified Home Health Aide Care continues to be available under EPSDT if the resources already in the PRT rate cannot meet the needs of an individual child. The State will prior authorize these services to ensure that there is no duplication of funding.

C. Service Coordination including the development/implementation of the Treatment Plan and Discharge Planning – Components include:

- Treatment Plan Development – A service coordinator within the agency providing PRT must develop a treatment plan for the Medicaid services provided to the child by the agency. The treatment plan is developed under the supervision of a licensed practitioner.
- Service Coordination - Service coordination entails the coordination of Medicaid-covered services in the community, including medical care that the child will receive at school.

TN # 22-0090

Approval Date 03/13/2023

Supersedes TN # New

Effective Date May 12, 2023

**New York
3b-12.7**

1905(a)(4)(B) Nursing Facility Services & 1905(a)(13)(C) Other Diagnostic, Screening, Preventive, and Rehabilitative Services

- Discharge Planning - The PRT must transition the child from PRT to home or community based living with outpatient treatment (e.g., individual and family therapy) as part of discharge planning.

Practitioner qualifications: Service Coordination staff must be at least 21 years old, and have a high school diploma or equivalent certification in the State of New York and must be supervised by one of the following licensed practitioners operating within the scope of their practice under their State license: a licensed psychiatrist, physician, psychologist, master social worker, clinical social worker, mental health counselor, marriage and family therapist, or psychoanalyst, licensed creative arts therapist, nurse practitioner, or registered professional nurse, or a previously license exempt, unlicensed professional who was employed by an authorized setting as of June 24, 2022 and continues to work there or in another authorized setting that meets the following criteria:

- 1) Student enrolled in a degree granting program leading to licensure of Licensed Master Social Worker (LMSW), Licensed Clinical Social Worker (LCSW), Licensed Mental Health Counselor (LMHC), Licensed Marriage and Family Therapist (LMFT), Licensed Psychotherapist (LP) or Licensed Creative Arts Therapist (LCAT), **OR**
- 2) A person who holds a baccalaureate of social work or higher, **OR**
- 3) A person who holds a master's degree or higher in a behavioral health profession.

Unlicensed professionals must be supervised by a licensed psychiatrist, physician, psychologist, master social worker, clinical social worker, mental health counselor, marriage and family therapist, or psychoanalyst, licensed creative arts therapist, nurse practitioner, or registered professional nurse.

Provider Agency Qualifications: Any unlicensed practitioner providing health services must operate within an agency licensed, certified or designated by DOH or its designee qualified to provide the supervision required of an unlicensed practitioner for that service. The State will ensure, consistent with Section 1905(r)(5) of the Social Security Act, that medically necessary EPSDT services reflecting the medical practices for children will be provided in a timely manner even if the evidence-based practice is not otherwise listed in the State Plan.

An agency providing PRT must be licensed as a health facility by Department of Health in conjunction with the Office of Children and Family Services and will not be an Institute for Mental Disease (IMD). PRT staff must be supervised by one of the following licensed practitioners operating within the scope of their practice under their State license: a licensed psychiatrist, physician, psychologist, master social worker, clinical social worker, mental health counselor, marriage and family therapist, or psychoanalyst, licensed creative arts therapist, nurse practitioner, or registered professional nurse. The licensed practitioner must provide twenty-four (24) hour, on-call coverage seven (7) days a week for emergency consultation.

TN # 22-0090

Approval Date 03/13/2023

Supersedes TN # 21-0003

Effective Date May 12, 2023

**New York
3b-12.7(a)**

**1905(a)(4)(B) Nursing Facility Services & 1905(a)(13)(C) Other Diagnostic, Screening,
Preventive, and Rehabilitative Services**

An agency providing PRT must provide twenty-four (24) hours/day, seven (7) days/week structured and supportive living environment. Integration with community resources is provided to plan and arrange access to a range of educational and therapeutic services. Room and board is reimbursed separately using non-Medicaid funding.

PRT services are provided according to an individualized person-centered treatment plan, which will be subject to prior approval by DOH or its designee. The activities included in the service must be intended to achieve identified treatment plan goals or objectives of the Medicaid eligible child. The treatment plan should be developed in a person-centered manner with the active participation of the individual, family and providers and be based on the individual's condition and the standards of practice for the provision of these specific preventive services.

An agency providing PRT must coordinate with the child's community resources including Medicaid community-based providers when possible, with the goal of transitioning the child out of the PRT as soon as possible and appropriate. Discharge planning begins upon admission with concrete plans for the child to transition back into the community beginning within the first thirty (30) days of admission with clear action steps and target dates outlined in the treatment plan. The treatment plan must include measurable discharge goals.

TN # 22-0090

Approval Date 03/13/2023

Supersedes TN # New

Effective Date May 12, 2023

**New York
3b-40**

1905(a)(4)(B) Nursing Facility Services & 1905(a)(13)(C) Other Diagnostic, Screening, Preventive, and Rehabilitative Services

4.b. Early and Periodic Screening, Diagnostic, and Treatment (EPSDT) Services Continued

13.d. Rehabilitative Services - 42 CFR 440.130(d)

The following explanations apply to all Rehabilitative Residential Treatment (RRT) services for children under the age of 21:

EPSDT Rehabilitative Attestations: The State assures that all rehabilitative services are provided to, or directed exclusively toward the treatment of, the Medicaid eligible child. Medically necessary services will be furnished to those under age 21 without limitation in accordance with Section 1905(r) of the Social Security Act. The State also assures that rehabilitative services do not include any of the following:

- A. Educational, vocational and job training services;
- B. Room and board;
- C. Services to inmates in public institutions as defined in 42 CFR §435.1010;
- D. Services to individuals residing in institutions for mental diseases as described in 42 CFR §435.1010;
- E. Recreational and social activities; and
- F. Services that must be covered elsewhere in the New York Medicaid State Plan.

Additional assurances related to RRT services under this State Plan and Other Limited Health Benefits:

- The State assures that the provision of RRT services will not restrict an individual's free choice of Medicaid providers.
- The State assures that the RRT services will not be used to restrict an individual's access to other services under the plan
- Individuals will not be compelled to receive RRT services, condition receipt of RRT services on the receipt of other Medicaid services, or condition receipt of other Medicaid services on receipt of these RRT services.
- Providers of RRT services do not exercise the agency's authority to authorize or deny the provision of other services under the plan.
- Payment for RRT services under the plan does not duplicate payments made to public agencies or private entities under other program authorities for the same purposes.
- Any individual, group of individuals or entity who meets the State's provider and practitioner qualifications will enroll in Medicaid and furnish the services under the plan.

TN # 22-0090

Approval Date 03/13/2023

Supersedes TN # 21-0003

Effective Date May 12, 2023

**New York
3b-40(a)**

1905(a)(4)(B) Nursing Facility Services & 1905(a)(13)(C) Other Diagnostic, Screening, Preventive, and Rehabilitative Services

4.b. Early and Periodic Screening, Diagnostic, and Treatment (EPSDT) Services Continued

13.d. Rehabilitative Services - 42 CFR 440.130(d)

RRT provides community-based rehabilitative residential services recommended by and under the supervision and oversight of one of the following licensed practitioners operating within the scope of their practice of their State license: a licensed psychiatrist, physician, psychologist, master social worker, clinical social worker, mental health counselor, marriage and family therapist, or psychoanalyst, licensed creative arts therapist, nurse practitioner, or registered professional nurse, or a previously license exempt, unlicensed professional who was employed by an authorized setting as of June 24, 2022 and continues to work there or in another authorized setting who meets the following criteria:

- 1) Student enrolled in a degree granting program leading to licensure of Licensed Master Social Worker (LMSW), Licensed Clinical Social Worker (LCSW), Licensed Mental Health Counselor (LMHC), Licensed Marriage and Family Therapist (LMFT), Licensed Psychotherapist (LP) or Licensed Creative Arts Therapist (LCAT), **OR**
- 2) A person who holds a baccalaureate of social work or higher, **OR**
- 3) A person who holds a master's degree or higher in a behavioral health profession.

Unlicensed professionals must be supervised by a licensed psychiatrist, physician, psychologist, master social worker, clinical social worker, mental health counselor, marriage and family therapist, or psychoanalyst, licensed creative arts therapist, nurse practitioner, or registered professional nurse.

The treatment includes the medical or remedial services listed below, for maximum reduction of physical or mental disability and restoration of a beneficiary to his best possible functional level. RRT delivers rehabilitative services including psychiatric services, service coordination and skill-building. RRT must address the health issues identified on the treatment plan. Treatment will relate directly to restoring the child's ability to function successfully in the home and school environment (e.g., compliance with reasonable behavioral expectations; safe behavior and appropriate responses to social cues and conflicts or medically appropriate care).

TN # 22-0090

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Effective Date May 12, 2023

**New York
3b-42**

1905(a)(4)(B) Nursing Facility Services & 1905(a)(13)(C) Other Diagnostic, Screening, Preventive, and Rehabilitative Services

Practitioner qualifications: Behavioral health counselors must be at least 21 years of age and licensed by the State of New York Department of Education as: Licensed Psychoanalyst, Licensed Clinical Social Worker (LCSW), Licensed Marriage & Family Therapist, Licensed Mental Health Counselor, Licensed Creative Arts Therapist or Licensed Master Social Worker (LMSW) within the scope of his or her practice, or be a previously license exempt, unlicensed professional who was employed by an authorized setting as of June 24, 2022 and continues to work there or in another authorized setting who meets the following criteria:

- 1) Student enrolled in a degree granting program leading to licensure of Licensed Master Social Worker (LMSW), Licensed Clinical Social Worker (LCSW), Licensed Mental Health Counselor (LMHC), Licensed Marriage and Family Therapist (LMFT), Licensed Psychotherapist (LP) or Licensed Creative Arts Therapist (LCAT), **OR**
- 2) A person who holds a baccalaureate of social work or higher, **OR**
- 3) A person who holds a master's degree or higher in a behavioral health profession.

Unlicensed professionals must be supervised by a licensed psychiatrist, physician, psychologist, master social worker, clinical social worker, mental health counselor, marriage and family therapist, or psychoanalyst, licensed creative arts therapist, nurse practitioner, or registered professional nurse.

- B. Nursing services and medication management – The RRT service must provide medical care to meet the needs of children with monitoring and twenty-four (24) hour medical availability, when appropriate, medically necessary and relevant within their scope of practice. Coverage for the cost of medications is under the Medicaid pharmacy authority in the State Plan. Components include:
- Nursing assessments, including: HIV risk assessments, intake assessments, general first aid and triage activities
 - Routine screening for child abuse, drug abuse, and developmental milestones
 - Routine health care management ordered during medical appointments, urgent/emergency care or hospitalization and training regarding chronic conditions, such as diabetes and asthma
 - Training and health education including reproductive health education
 - Medical care for children on home visits as medically necessary and monitor child healthcare needs, as medically necessary,
 - Educate caregivers on the medical needs of the child,
 - Medical care for children on community provider visits, as medically necessary.

TN # 22-0090

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Effective Date May 12, 2023

**New York
3b-42(a)**

**1905(a)(4)(B) Nursing Facility Services & 1905(a)(13)(C) Other Diagnostic, Screening,
Preventive, and Rehabilitative Services**

Practitioner qualifications: Nursing services and medication management must be performed by an individual licensed by the State of New York Department of Education as a nurse practitioner or registered professional nurse within the scope of his or her practice. The nurse practitioner or registered professional nurse must be at least 21 years old. Prescribers must be available to prescribe medications and provide medical orders as necessary. Nursing services are provided within the RRT in the costs for the level of care. Nursing services do not substitute for Private Duty Nursing or Certified Home Health Aide Care in Foster Boarding Homes. Private Duty Nursing or Certified Home Health Aide Care continues to be available under EPSDT if the resources already in the RRT rate cannot meet the needs of an individual child. The State will prior authorize these services to ensure that there is no duplication of funding.

C. Service Coordination including the development/implementation of the Treatment Plan and Discharge Planning – Components include:

- Treatment Plan Development – A service coordinator within the agency providing RRT must develop a treatment plan for the Medicaid services provided to the child by the agency. The treatment plan is developed under the supervision of a licensed practitioner.
- Service Coordination - Service coordination entails the coordination of Medicaid-covered services in the community, including medical care the child will receive at school.

TN # 22-0090

Approval Date 03/13/2023

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Effective Date May 12, 2023

New York
3b-43

1905(a)(4)(B) Nursing Facility Services & 1905(a)(13)(C) Other Diagnostic, Screening, Preventive, and Rehabilitative Services

- Discharge Planning - The RRT must transition the child from RRT to home or community based living with outpatient treatment (e.g., individual and family therapy) as part of discharge planning.

Practitioner qualifications: Direct care staff must be at least 21 years old, and have a high school diploma or equivalent, certification in the State of New York and must be supervised by one of the following licensed practitioners operating within the scope of their practice under their State license: a licensed psychiatrist, physician, psychologist, master social worker, clinical social worker, mental health counselor, marriage and family therapist, or psychoanalyst, licensed creative arts therapist, nurse practitioner, or registered professional nurse, or a previously license exempt, unlicensed professional who was employed by an authorized setting as of June 24, 2022 and continues to work there or in another authorized setting who meets the following criteria:

- 1) Student enrolled in a degree granting program leading to licensure of Licensed Master Social Worker (LMSW), Licensed Clinical Social Worker (LCSW), Licensed Mental Health Counselor (LMHC), Licensed Marriage and Family Therapist (LMFT), Licensed Psychotherapist (LP) or Licensed Creative Arts Therapist (LCAT), **OR**
- 2) A person who holds a baccalaureate of social work or higher, **OR**
- 3) A person who holds a master's degree or higher in a behavioral health profession.

Unlicensed professionals must be supervised by a licensed psychiatrist, physician, psychologist, master social worker, clinical social worker, mental health counselor, marriage and family therapist, or psychoanalyst, licensed creative arts therapist, nurse practitioner, or registered professional nurse.

Provider Agency Qualifications: Any unlicensed practitioner providing health services must operate within an agency licensed, certified or designated by DOH or its designee qualified to provide the supervision required of an unlicensed practitioner for that service. The State will ensure, consistent with Section 1905(r)(5) of the Social Security Act, that medically necessary EPSDT services reflecting the medical practices for children will be provided in a timely manner even if the evidence-based practice is not otherwise listed in the State Plan.

An agency providing RRT must be licensed as a health facility by Department of Health in conjunction with the Office of Children and Family Services and will not be an Institute for Mental Disease (IMD). RRT staff must be supervised by one of the following licensed practitioners operating within the scope of their practice under their State license: a licensed psychiatrist, physician, psychologist, master social worker, clinical social worker, mental health counselor, marriage and family therapist, or psychoanalyst, licensed creative arts therapist, nurse practitioner, or registered professional nurse. The licensed practitioner must provide twenty-four (24) hour, on-call coverage seven (7) days a week for emergency consultation.

TN # 22-0090

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Supersedes TN # 21-0003

Effective Date May 12, 2023

**New York
3b-43(a)**

1905(a)(4)(B) Nursing Facility Services & 1905(a)(13)(C) Other Diagnostic, Screening, Preventive, and Rehabilitative Services

An agency providing RRT must provide twenty-four (24) hours/day, seven (7) days/week structured and supportive living environment. Integration with community resources is provided to plan and arrange access to a range of educational and therapeutic services. Room and board is reimbursed separately using non-Medicaid funding.

RRT services are provided according to an individualized person-centered treatment plan, which will be subject to prior approval by DOH or its designee. The activities included in the service must be intended to achieve identified treatment plan goals or objectives of the Medicaid eligible child. The treatment plan should be developed in a person-centered manner with the active participation of the individual, family and providers and be based on the individual's condition and the standards of practice for the provision of these specific rehabilitation services.

An agency providing RRT must coordinate with the child's community resources including Medicaid community-based providers when possible, with the goal of transitioning the child out of the RRT as soon as possible and appropriate. Discharge planning begins upon admission with concrete plans for the child to transition back into the community beginning within the first thirty (30) days of admission with clear action steps and target dates outlined in the treatment plan. The treatment plan must include measurable discharge goals.

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**New York
3b-12.4**

1905(a)(4)(B) Nursing Facility Services & 1905(a)(13)(C) Other Diagnostic, Screening, Preventive, and Rehabilitative Services

4.b. Early and Periodic Screening, Diagnostic, and Treatment (EPSDT) Services Continued

13.c. Preventive Services - 42 CFR 440.130(c)

The following explanations apply to all Preventive Residential Treatment (PRT) services for children under the age of 21:

EPSDT Preventive Attestations: The State assures that all preventive services are provided to, or directed exclusively toward the treatment of, the Medicaid eligible child. Medically necessary services will be furnished to those under age 21 without limitation in accordance with Section 1905(r) of the Social Security Act. The State also assures that preventive services do not include any of the following:

- A. Educational, vocational and job training services;
- B. Room and board;
- C. Services to inmates in public institutions as defined in 42 CFR §435.1010;
- D. Services to individuals residing in institutions for mental diseases as described in 42 CFR §435.1010;
- E. Recreational and social activities; and
- F. Services that must be covered elsewhere in the New York Medicaid State Plan.

Additional assurances related to PRT services under this State Plan and Other Limited Health Benefits:

- The State assures that the provision of PRT services will not restrict an individual's free choice of Medicaid providers.
- The State assures that the PRT services will not be used to restrict an individual's access to other services under the plan
- Individuals will not be compelled to receive PRT services, condition receipt of preventive residential services on the receipt of other Medicaid services, or condition receipt of other Medicaid services on receipt of these PRT services.
- Providers of PRT services do not exercise the agency's authority to authorize or deny the provision of other services under the plan.
- Payment for PRT services under the plan does not duplicate payments made to public agencies or private entities under other program authorities for the same purposes.
- Any individual, group of individuals or entity who meets the State's provider and practitioner qualifications will enroll in Medicaid and furnish the services under the plan.

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1905(a)(4)(B) Nursing Facility Services & 1905(a)(13)(C) Other Diagnostic, Screening, Preventive, and Rehabilitative Services

4.b. Early and Periodic Screening, Diagnostic, and Treatment (EPSDT) Services Continued

13.c. Preventive Services - 42 CFR 440.130(c)

PRT provides community-based preventive residential services recommended by and under the supervision and oversight of one of the following licensed practitioners operating within the scope of their practice of their State license: a licensed psychiatrist, physician, psychologist, master social worker, clinical social worker, mental health counselor, marriage and family therapist, or psychoanalyst, licensed creative arts therapist, nurse practitioner, registered professional nurse, or a previously license exempt, unlicensed professional who was employed by an authorized setting as of June 24, 2022 and continues to work there or in another authorized setting who meets the following criteria:

- 1) Student enrolled in a degree granting program leading to licensure of Licensed Master Social Worker (LMSW), Licensed Clinical Social Worker (LCSW), Licensed Mental Health Counselor (LMHC), Licensed Marriage and Family Therapist (LMFT), Licensed Psychotherapist (LP) or Licensed Creative Arts Therapist (LCAT), **OR**
- 2) A person who holds a baccalaureate of social work or higher, **OR**
- 3) A person who holds a master's degree or higher in a behavioral health profession.

Unlicensed professionals must be supervised by a licensed psychiatrist, physician, psychologist, master social worker, clinical social worker, mental health counselor, marriage and family therapist, psychoanalyst, licensed creative arts therapist, nurse practitioner, or registered professional nurse.

The services should prevent disease, disability, and other health conditions or their progression; to prolong life; and to promote physical and mental health. PRT delivers preventive services to address the health issues identified on the treatment plan.

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**New York
3b-12.6**

1905(a)(4)(B) Nursing Facility Services & 1905(a)(13)(C) Other Diagnostic, Screening, Preventive, and Rehabilitative Services

Practitioner qualifications: Behavioral health counselors must be at least 21 years of age and licensed by the State of New York Department of Education and operating within the scope of his or her practice as: Licensed Psychoanalyst, Licensed Clinical Social Worker (LCSW), Licensed Marriage & Family Therapist, Licensed Mental Health Counselor, Licensed Creative Arts Therapist or Licensed Master Social Worker (LMSW), or be a previously license exempt, unlicensed professional who was employed by an authorized setting as of June 24, 2022 and continues to work there or in another authorized setting who meets the following criteria:

- 1) Student enrolled in a degree granting program leading to licensure of Licensed Master Social Worker (LMSW), Licensed Clinical Social Worker (LCSW), Licensed Mental Health Counselor (LMHC), Licensed Marriage and Family Therapist (LMFT), Licensed Psychotherapist (LP) or Licensed Creative Arts Therapist (LCAT), **OR**
- 2) A person who holds a baccalaureate of social work or higher, **OR**
- 3) A person who holds a master's degree or higher in a behavioral health profession.

Unlicensed professionals must be supervised by a licensed psychiatrist, physician, psychologist, master social worker, clinical social worker, mental health counselor, marriage and family therapist, or psychoanalyst, licensed creative arts therapist, nurse practitioner, or registered professional nurse.

- B. Nursing services and medication management – The PRT service must prevent disease, disability and other health conditions or their progression and will include twenty-four (24) hour medical availability when medically necessary. Coverage for the cost of medications is under the Medicaid pharmacy authority in the State Plan. Components include:
- Nursing assessments, including: HIV risk assessments, intake assessments, general first aid and triage activities
 - Routine screening for child abuse, drug abuse, and developmental milestones
 - Routine health management ordered during medical appointments, urgent/emergency care or hospitalization and training to prevent the progression of chronic diseases, such as diabetes and asthma
 - Training and health education including reproductive health education
 - Medical care for children on home visits, as medically necessary and monitoring of child healthcare needs, as medically necessary,
 - Educate caregivers on the medical needs of the child
 - Medical care for children on community provider visits, as medically necessary.

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**New York
3b-12.6(a)**

**1905(a)(4)(B) Nursing Facility Services & 1905(a)(13)(C) Other Diagnostic, Screening,
Preventive, and Rehabilitative Services**

Practitioner qualifications: Nursing services and medication management must be performed by an individual licensed by the State of New York Department of Education as a nurse practitioner or registered professional nurse within the scope of his or her practice. The nurse practitioner or registered professional nurse must be at least 21 years old. Prescribers must be available to prescribe medications and provide medical orders as necessary. Nursing services are provided within the PRT in the costs for the level of care. Nursing services do not substitute for Private Duty Nursing or Certified Home Health Aide Care in Foster Boarding Homes. Private Duty Nursing or Certified Home Health Aide Care continues to be available under EPSDT if the resources already in the PRT rate cannot meet the needs of an individual child. The State will prior authorize these services to ensure that there is no duplication of funding.

- C. Service Coordination including the development/implementation of the Treatment Plan and Discharge Planning – Components include:
- Treatment Plan Development – A service coordinator within the agency providing PRT must develop a treatment plan for the Medicaid services provided to the child by the agency. The treatment plan is developed under the supervision of a licensed practitioner.
 - Service Coordination - Service coordination entails the coordination of Medicaid-covered services in the community, including medical care that the child will receive at school.

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**New York
3b-12.7**

1905(a)(4)(B) Nursing Facility Services & 1905(a)(13)(C) Other Diagnostic, Screening, Preventive, and Rehabilitative Services

- Discharge Planning - The PRT must transition the child from PRT to home or community based living with outpatient treatment (e.g., individual and family therapy) as part of discharge planning.

Practitioner qualifications: Service Coordination staff must be at least 21 years old, and have a high school diploma or equivalent certification in the State of New York and must be supervised by one of the following licensed practitioners operating within the scope of their practice under their State license: a licensed psychiatrist, physician, psychologist, master social worker, clinical social worker, mental health counselor, marriage and family therapist, or psychoanalyst, licensed creative arts therapist, nurse practitioner, or registered professional nurse, or a previously license exempt, unlicensed professional who was employed by an authorized setting as of June 24, 2022 and continues to work there or in another authorized setting that meets the following criteria:

- 1) Student enrolled in a degree granting program leading to licensure of Licensed Master Social Worker (LMSW), Licensed Clinical Social Worker (LCSW), Licensed Mental Health Counselor (LMHC), Licensed Marriage and Family Therapist (LMFT), Licensed Psychotherapist (LP) or Licensed Creative Arts Therapist (LCAT), **OR**
- 2) A person who holds a baccalaureate of social work or higher, **OR**
- 3) A person who holds a master's degree or higher in a behavioral health profession.

Unlicensed professionals must be supervised by a licensed psychiatrist, physician, psychologist, master social worker, clinical social worker, mental health counselor, marriage and family therapist, or psychoanalyst, licensed creative arts therapist, nurse practitioner, or registered professional nurse.

Provider Agency Qualifications: Any unlicensed practitioner providing health services must operate within an agency licensed, certified or designated by DOH or its designee qualified to provide the supervision required of an unlicensed practitioner for that service. The State will ensure, consistent with Section 1905(r)(5) of the Social Security Act, that medically necessary EPSDT services reflecting the medical practices for children will be provided in a timely manner even if the evidence-based practice is not otherwise listed in the State Plan.

An agency providing PRT must be licensed as a health facility by Department of Health in conjunction with the Office of Children and Family Services and will not be an Institute for Mental Disease (IMD). PRT staff must be supervised by one of the following licensed practitioners operating within the scope of their practice under their State license: a licensed psychiatrist, physician, psychologist, master social worker, clinical social worker, mental health counselor, marriage and family therapist, or psychoanalyst, licensed creative arts therapist, nurse practitioner, or registered professional nurse. The licensed practitioner must provide twenty-four (24) hour, on-call coverage seven (7) days a week for emergency consultation.

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**New York
3b-12.7(a)**

1905(a)(4)(B) Nursing Facility Services & 1905(a)(13)(C) Other Diagnostic, Screening, Preventive, and Rehabilitative Services

An agency providing PRT must provide twenty-four (24) hours/day, seven (7) days/week structured and supportive living environment. Integration with community resources is provided to plan and arrange access to a range of educational and therapeutic services. Room and board is reimbursed separately using non-Medicaid funding.

PRT services are provided according to an individualized person-centered treatment plan, which will be subject to prior approval by DOH or its designee. The activities included in the service must be intended to achieve identified treatment plan goals or objectives of the Medicaid eligible child. The treatment plan should be developed in a person-centered manner with the active participation of the individual, family and providers and be based on the individual's condition and the standards of practice for the provision of these specific preventive services.

An agency providing PRT must coordinate with the child's community resources including Medicaid community-based providers when possible, with the goal of transitioning the child out of the PRT as soon as possible and appropriate. Discharge planning begins upon admission with concrete plans for the child to transition back into the community beginning within the first thirty (30) days of admission with clear action steps and target dates outlined in the treatment plan. The treatment plan must include measurable discharge goals.

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**New York
3b-40**

1905(a)(4)(B) Nursing Facility Services & 1905(a)(13)(C) Other Diagnostic, Screening, Preventive, and Rehabilitative Services

4.b. Early and Periodic Screening, Diagnostic, and Treatment (EPSDT) Services Continued

13.d. Rehabilitative Services - 42 CFR 440.130(d)

The following explanations apply to all Rehabilitative Residential Treatment (RRT) services for children under the age of 21:

EPSDT Rehabilitative Attestations: The State assures that all rehabilitative services are provided to, or directed exclusively toward the treatment of, the Medicaid eligible child. Medically necessary services will be furnished to those under age 21 without limitation in accordance with Section 1905(r) of the Social Security Act. The State also assures that rehabilitative services do not include any of the following:

- A. Educational, vocational and job training services;
- B. Room and board;
- C. Services to inmates in public institutions as defined in 42 CFR §435.1010;
- D. Services to individuals residing in institutions for mental diseases as described in 42 CFR §435.1010;
- E. Recreational and social activities; and
- F. Services that must be covered elsewhere in the New York Medicaid State Plan.

Additional assurances related to RRT services under this State Plan and Other Limited Health Benefits:

- The State assures that the provision of RRT services will not restrict an individual's free choice of Medicaid providers.
- The State assures that the RRT services will not be used to restrict an individual's access to other services under the plan
- Individuals will not be compelled to receive RRT services, condition receipt of RRT services on the receipt of other Medicaid services, or condition receipt of other Medicaid services on receipt of these RRT services.
- Providers of RRT services do not exercise the agency's authority to authorize or deny the provision of other services under the plan.
- Payment for RRT services under the plan does not duplicate payments made to public agencies or private entities under other program authorities for the same purposes.
- Any individual, group of individuals or entity who meets the State's provider and practitioner qualifications will enroll in Medicaid and furnish the services under the plan.

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1905(a)(4)(B) Nursing Facility Services & 1905(a)(13)(C) Other Diagnostic, Screening, Preventive, and Rehabilitative Services

4.b. Early and Periodic Screening, Diagnostic, and Treatment (EPSDT) Services Continued

13.d. Rehabilitative Services - 42 CFR 440.130(d)

RRT provides community-based rehabilitative residential services recommended by and under the supervision and oversight of one of the following licensed practitioners operating within the scope of their practice of their State license: a licensed psychiatrist, physician, psychologist, master social worker, clinical social worker, mental health counselor, marriage and family therapist, or psychoanalyst, licensed creative arts therapist, nurse practitioner, or registered professional nurse, or a previously license exempt, unlicensed professional who was employed by an authorized setting as of June 24, 2022 and continues to work there or in another authorized setting who meets the following criteria:

- 1) Student enrolled in a degree granting program leading to licensure of Licensed Master Social Worker (LMSW), Licensed Clinical Social Worker (LCSW), Licensed Mental Health Counselor (LMHC), Licensed Marriage and Family Therapist (LMFT), Licensed Psychotherapist (LP) or Licensed Creative Arts Therapist (LCAT), **OR**
- 2) A person who holds a baccalaureate of social work or higher, **OR**
- 3) A person who holds a master's degree or higher in a behavioral health profession.

Unlicensed professionals must be supervised by a licensed psychiatrist, physician, psychologist, master social worker, clinical social worker, mental health counselor, marriage and family therapist, or psychoanalyst, licensed creative arts therapist, nurse practitioner, or registered professional nurse.

The treatment includes the medical or remedial services listed below, for maximum reduction of physical or mental disability and restoration of a beneficiary to his best possible functional level. RRT delivers rehabilitative services including psychiatric services, service coordination and skill-building. RRT must address the health issues identified on the treatment plan. Treatment will relate directly to restoring the child's ability to function successfully in the home and school environment (e.g., compliance with reasonable behavioral expectations; safe behavior and appropriate responses to social cues and conflicts or medically appropriate care).

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**New York
3b-42**

1905(a)(4)(B) Nursing Facility Services & 1905(a)(13)(C) Other Diagnostic, Screening, Preventive, and Rehabilitative Services

Practitioner qualifications: Behavioral health counselors must be at least 21 years of age and licensed by the State of New York Department of Education as: Licensed Psychoanalyst, Licensed Clinical Social Worker (LCSW), Licensed Marriage & Family Therapist, Licensed Mental Health Counselor, Licensed Creative Arts Therapist or Licensed Master Social Worker (LMSW) within the scope of his or her practice, or be a previously license exempt, unlicensed professional who was employed by an authorized setting as of June 24, 2022 and continues to work there or in another authorized setting who meets the following criteria:

- 1) Student enrolled in a degree granting program leading to licensure of Licensed Master Social Worker (LMSW), Licensed Clinical Social Worker (LCSW), Licensed Mental Health Counselor (LMHC), Licensed Marriage and Family Therapist (LMFT), Licensed Psychotherapist (LP) or Licensed Creative Arts Therapist (LCAT), **OR**
- 2) A person who holds a baccalaureate of social work or higher, **OR**
- 3) A person who holds a master's degree or higher in a behavioral health profession.

Unlicensed professionals must be supervised by a licensed psychiatrist, physician, psychologist, master social worker, clinical social worker, mental health counselor, marriage and family therapist, or psychoanalyst, licensed creative arts therapist, nurse practitioner, or registered professional nurse.

- B. Nursing services and medication management – The RRT service must provide medical care to meet the needs of children with monitoring and twenty-four (24) hour medical availability, when appropriate, medically necessary and relevant within their scope of practice. Coverage for the cost of medications is under the Medicaid pharmacy authority in the State Plan. Components include:
- Nursing assessments, including: HIV risk assessments, intake assessments, general first aid and triage activities
 - Routine screening for child abuse, drug abuse, and developmental milestones
 - Routine health care management ordered during medical appointments, urgent/emergency care or hospitalization and training regarding chronic conditions, such as diabetes and asthma
 - Training and health education including reproductive health education
 - Medical care for children on home visits as medically necessary and monitor child healthcare needs, as medically necessary,
 - Educate caregivers on the medical needs of the child,
 - Medical care for children on community provider visits, as medically necessary.

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**New York
3b-42(a)**

**1905(a)(4)(B) Nursing Facility Services & 1905(a)(13)(C) Other Diagnostic, Screening,
Preventive, and Rehabilitative Services**

Practitioner qualifications: Nursing services and medication management must be performed by an individual licensed by the State of New York Department of Education as a nurse practitioner or registered professional nurse within the scope of his or her practice. The nurse practitioner or registered professional nurse must be at least 21 years old. Prescribers must be available to prescribe medications and provide medical orders as necessary. Nursing services are provided within the RRT in the costs for the level of care. Nursing services do not substitute for Private Duty Nursing or Certified Home Health Aide Care in Foster Boarding Homes. Private Duty Nursing or Certified Home Health Aide Care continues to be available under EPSDT if the resources already in the RRT rate cannot meet the needs of an individual child. The State will prior authorize these services to ensure that there is no duplication of funding.

C. Service Coordination including the development/implementation of the Treatment Plan and Discharge Planning – Components include:

- Treatment Plan Development – A service coordinator within the agency providing RRT must develop a treatment plan for the Medicaid services provided to the child by the agency. The treatment plan is developed under the supervision of a licensed practitioner.
- Service Coordination - Service coordination entails the coordination of Medicaid-covered services in the community, including medical care the child will receive at school.

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3b-43

1905(a)(4)(B) Nursing Facility Services & 1905(a)(13)(C) Other Diagnostic, Screening, Preventive, and Rehabilitative Services

- Discharge Planning - The RRT must transition the child from RRT to home or community based living with outpatient treatment (e.g., individual and family therapy) as part of discharge planning.

Practitioner qualifications: Direct care staff must be at least 21 years old, and have a high school diploma or equivalent, certification in the State of New York and must be supervised by one of the following licensed practitioners operating within the scope of their practice under their State license: a licensed psychiatrist, physician, psychologist, master social worker, clinical social worker, mental health counselor, marriage and family therapist, or psychoanalyst, licensed creative arts therapist, nurse practitioner, or registered professional nurse, or a previously license exempt, unlicensed professional who was employed by an authorized setting as of June 24, 2022 and continues to work there or in another authorized setting who meets the following criteria:

- 1) Student enrolled in a degree granting program leading to licensure of Licensed Master Social Worker (LMSW), Licensed Clinical Social Worker (LCSW), Licensed Mental Health Counselor (LMHC), Licensed Marriage and Family Therapist (LMFT), Licensed Psychotherapist (LP) or Licensed Creative Arts Therapist (LCAT), **OR**
- 2) A person who holds a baccalaureate of social work or higher, **OR**
- 3) A person who holds a master's degree or higher in a behavioral health profession.

Unlicensed professionals must be supervised by a licensed psychiatrist, physician, psychologist, master social worker, clinical social worker, mental health counselor, marriage and family therapist, or psychoanalyst, licensed creative arts therapist, nurse practitioner, or registered professional nurse.

Provider Agency Qualifications: Any unlicensed practitioner providing health services must operate within an agency licensed, certified or designated by DOH or its designee qualified to provide the supervision required of an unlicensed practitioner for that service. The State will ensure, consistent with Section 1905(r)(5) of the Social Security Act, that medically necessary EPSDT services reflecting the medical practices for children will be provided in a timely manner even if the evidence-based practice is not otherwise listed in the State Plan.

An agency providing RRT must be licensed as a health facility by Department of Health in conjunction with the Office of Children and Family Services and will not be an Institute for Mental Disease (IMD). RRT staff must be supervised by one of the following licensed practitioners operating within the scope of their practice under their State license: a licensed psychiatrist, physician, psychologist, master social worker, clinical social worker, mental health counselor, marriage and family therapist, or psychoanalyst, licensed creative arts therapist, nurse practitioner, or registered professional nurse. The licensed practitioner must provide twenty-four (24) hour, on-call coverage seven (7) days a week for emergency consultation.

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1905(a)(4)(B) Nursing Facility Services & 1905(a)(13)(C) Other Diagnostic, Screening, Preventive, and Rehabilitative Services

An agency providing RRT must provide twenty-four (24) hours/day, seven (7) days/week structured and supportive living environment. Integration with community resources is provided to plan and arrange access to a range of educational and therapeutic services. Room and board is reimbursed separately using non-Medicaid funding.

RRT services are provided according to an individualized person-centered treatment plan, which will be subject to prior approval by DOH or its designee. The activities included in the service must be intended to achieve identified treatment plan goals or objectives of the Medicaid eligible child. The treatment plan should be developed in a person-centered manner with the active participation of the individual, family and providers and be based on the individual's condition and the standards of practice for the provision of these specific rehabilitation services.

An agency providing RRT must coordinate with the child's community resources including Medicaid community-based providers when possible, with the goal of transitioning the child out of the RRT as soon as possible and appropriate. Discharge planning begins upon admission with concrete plans for the child to transition back into the community beginning within the first thirty (30) days of admission with clear action steps and target dates outlined in the treatment plan. The treatment plan must include measurable discharge goals.

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