

Rule No. 560-X-64-.17 ICN Covered Services

(1) The following services must be covered for Medicaid recipients who are enrolled in an integrated care network (ICN):

- ~~(a) Ambulatory Surgical Center Services in accordance with Alabama Medicaid Administrative Code Rule 560-X-38-.04;~~
- ~~(b) Durable Medical Equipment, Medical Equipment, Supplies, Appliances, Prosthetics, Orthotics, and Pedorthics in accordance with Alabama Medicaid Administrative Code Rule 560-X-13-.01;~~
- ~~(c) Eye Care Services in accordance with Alabama Medicaid Administrative Code Rules 560-X-17-.02 through 560-X-17-.04;~~
- ~~(d) Family Planning Services in accordance with Alabama Medicaid Administrative Code Rule 560-X-14-.03;~~
- ~~(e) Federally Qualified Health Center Services in accordance with Alabama Medicaid Administrative Code Chapter 560-X-48;~~
- (a) Direct Home and Community-Based ServicesService Case Management for the Alabama Community Transition (ACT) Waiver in accordance with Alabama Medicaid Administrative Code Rule 560-X-44-.04;
- (b) Direct Home and Community-Based ServicesService Case Management for the Elderly and Disabled in accordance with Alabama Medicaid Administrative Code Rule 560-X-36-.04; and
- ~~(f) Hospice Services in accordance with Alabama Medicaid Administrative Code Rule 560-X-51-.09;~~
- ~~(g) Hospital Services in accordance with Alabama Medicaid Administrative Code Rules 560-X-7-.03 through 560-X-17-.17;~~
- ~~(h) Independent Laboratory Services in accordance with Alabama Medicaid Administrative Code Rule 560-X-9-.02;~~
- ~~(i) Independent Radiology Services in accordance with Alabama Medicaid Administrative Code Rule 560-X-34-.02;~~
- ~~(j) Independent Rural Health Clinic Services in accordance with Alabama Medicaid Administrative Code Rule 560-X-8-.01;~~

~~(k) Nursing facility services in accordance with Alabama Medicaid Administrative Code Rule 560-X-10-.04(1);~~

~~(l) Physician and Certified Physician Assistant Services in accordance with Alabama Medicaid Administrative Code Rule 560-X-6-.12 and 560-X-6-.13;~~

~~(m) Transportation Services in accordance with Alabama Medicaid Administrative Code Chapter 560-X-18, with the exception of the non-emergency transportation program described in Rule No. 560-X-18-.16.~~

(c) Primary care case management services, which include the location, coordination, and monitoring of primary health care services, in addition to one or more of the following, as specified by the Medicaid Agency:

(i) Provision of intensive telephonic or face-to-face case management, including operation of a nurse triage advice line.

(ii) Development of enrollee care plans.

(iii) Execution of contracts with and/or oversight responsibilities for the activities of FFS providers in the FFS program.

(iv) Provision of payments to FFS providers on behalf of the State.

(v) Provision of enrollee outreach and education activities.

(vi) Operation of a customer service call center.

(vii) Review of provider claims, utilization and practice patterns to conduct provider profiling and/or practice improvement.

(viii) Implementation of quality improvement activities including administering enrollee satisfaction surveys or collecting data necessary for performance measurement of providers.

(ix) Coordination with behavioral health systems/providers.

(x) Coordination with long-term services and supports systems/providers.

(2) Only those services identified in ~~sub~~paragraph (1) above will be used in calculating an ICN's ~~capitation~~Per Member, Per Month (PMPM) payment amount; however, nothing in this rule shall preclude an ICN from providing services not identified in ~~sub~~paragraph (1), subject to the approval of the Medicaid Agency, at its own expense.

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Statutory Authority: State Plan; Title XIX, Social Security Act; 42 C.F.R. Part 438.

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