

Rule No. 560-X-47-.03 Service Providers

~~Service providers must demonstrate that they meet the criteria in either (1), (2), OR (3) and both (4) AND (5) below.~~

~~(1) A provider must be a Community Mental Health Center who is a 310 Board that is certified and under contract with the Alabama Department of Mental Health (DMH) as defined by the Alabama Medicaid Administrative Code, Administrative Standards for 310 Boards and the DMH Contract Services Delivery Manual. The provider must have demonstrated the capacity to provide access to the following services through direct provision or referral arrangements:~~

~~(a) Inpatient services through referral to community hospitals and/or through the provider physician serving as the attending physician for community hospitalizations;~~

~~(b) Substance abuse services including intensive outpatient services and residential services.~~

~~(2) For the provision of Substance Abuse Rehabilitative Services an entity:~~

~~(a) Must be an organization that is currently certified by the Alabama Department of Mental Health (DMH) to provide alcohol and other drug treatment services under the provisions of Chapter 580 of the Alabama Administrative Code; and~~

~~(b) Must submit an application to and receive approval by DMH to provide Substance Abuse Rehabilitative Services under the Medicaid Rehabilitative Option program.~~

~~(3) For individuals under 21 years of age who need rehabilitative services and who are being served by the Alabama Department of Human Resources (DHR), the Alabama Department of Public Health (DPH), the Alabama Department of Youth Services (DYS), or the Department of Children's Affairs (DCA), these state agencies shall also be eligible rehabilitative services providers if they have demonstrated the capacity to provide either directly or through contract an array of medically necessary services. Additionally, DHR may provide these services to adults in protective service status. At a minimum this array will include:~~

~~(a) Individual, group, and family counseling;~~

~~(b) Crisis intervention services;~~

~~(c) Consultation and education services;~~

~~(d) Case management services;~~

~~(e) Assessment and evaluation.~~

~~(4) A provider must demonstrate the capacity to provide services off-site in a manner that assures the client's right to privacy and confidentiality and must demonstrate reasonable access to services as evidenced by service location(s), hours of operation, and coordination of services with other community resources.~~

~~(5) A provider must assure that Medicaid recipients receive quality services in a coordinated manner and have reasonable access to an adequate array of services delivered in a flexible manner to best meet their needs. Not all services listed above are covered by Medicaid, but the provider must have demonstrated the capacity to provide these services.~~

To participate in the Alabama Medicaid Program, rehabilitative services providers must meet the following requirements. Service providers must demonstrate that they meet the criteria in either (1), (2), or (3), and both (4) AND (5) below.

(1) A provider must be certified as a 310-board community mental health center by DMH and must have demonstrated the capacity to provide access to the following services through direct provision or referral arrangements:

(a) Inpatient services through referral to community hospitals and through the attending physician for community hospitalizations

(b) Substance abuse services including intensive outpatient services and residential services

(c) Must submit an application to and receive approval from DMH to provide mental health rehabilitative services under the Medicaid Rehabilitative Option program.

(2) For the provision of Substance Abuse Rehabilitative Services an entity:

(a) Must be an organization that is currently certified by the Alabama Department of Mental Health (DMH) to provide alcohol and other drug treatment services under the provisions of Chapter 580 of the Alabama Administrative Code; and

(b) Must submit an application to and receive approval by DMH to provide Substance Abuse Rehabilitative Services under the Medicaid Rehabilitative Option program.

(3) The Department of Human Resources (DHR), the Department of Youth Services (DYS), Department of Mental Health (DMH) for ASD, and the Department of Children's Services (DCS) are eligible to be rehabilitative services providers for children under age 21 if they have demonstrated the capacity to provide an array of medically necessary services, either directly or through contract. Additionally, DHR may provide these services to adults in protective service status. At a minimum, this array includes the following:

(a) Individual, group, and family counseling

(b) Crisis intervention services

(c) Consultation and education services

(d) Case management services Assessment and evaluation

(4) A provider must demonstrate the capacity to provide services off-site in a manner that assures the recipient's right to privacy and confidentiality and must demonstrate reasonable access to services as evidenced by service location(s), hours of operation, and coordination of services with other community resources.

(5) A provider must ensure that Medicaid recipients receive quality services in a coordinated manner and have reasonable access to an adequate array of services delivered in a flexible manner to best meet their needs. Medicaid does not cover all services listed above, but the provider must have demonstrated the capacity to provide these services.

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Statutory Authority: 42 CFR Section 440.130 (d); Social Security Act, Title XIX, Omnibus Budget Reconciliation Act of 1987, P.L. 100-203, Section 4105. State Plan for Medical Assistance, Attachment 3.1-A.

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