



IDAHO PROVIDER MANUAL UPDATES – January 2023 Edition
 (Note: The change index does not include minor change to content or formatting)

Section	Page	Previous Content	New Content
Child and Adolescent Needs and Strengths (CANS) Functional Assessment	74		<p>Description The CANS is required prior to a youth receiving any outpatient behavioral health services except those services that do not address a functional need. Services that do not require a CANS are as follows: <u>Health Behavior Assessment and Interventions (HBAI)</u>, Neuro/Psychological Testing, Medication Management, and Crisis Services. All treatment plans that address a functional need (i.e. Psychotherapy) must be based on the CANS.</p>
Behavioral Modification and Consultation	83 & 86	<p>Description Behavior Modification and Consultation is the design, implementation, and evaluation of social and other environmental modifications to produce meaningful changes in human behavior. Behavioral strategies are used to teach the member alternative skills to manage targeted behaviors across social and learning environments.</p>	<p>Description Behavior modification and consultation (BMC) is the design, implementation, and evaluation of social and other environmental modifications to produce meaningful changes in human behavior. These interventions are based on scientific research and the use of direct observation, measurement, and functional analysis. Behavioral strategies are used to teach the Member alternative skills to manage targeted behaviors across various environments. Behavior modification providers may provide this service at any time and any setting appropriate to meet the Member’s needs, including home, school, and community. For successful outcomes, modified behaviors must be reinforced by the child/adolescent’s parents, family and other natural supports. All treatment, care and support services must be provided in a context that is child centered, family-focused, strengths based, culturally competent and responsive to each</p>

Section	Page	Previous Content	New Content
			<p>child’s psychosocial, developmental, and treatment care needs.</p> <p>Additional Information The Member should not be actively engaged in Skills Building/Community-Based Rehabilitative Services (CBRS).</p>
SOAR Case Management	117		<p>Description SSI/SSDI, Outreach, Access, and Recovery (SOAR) Case Management provides SSI/SSDI application assistance to individuals, both adult and children, who are experiencing homelessness or are at risk of homelessness and who have severe and persistent mental illness, co-occurring substance use disorders and/or other medical issues.</p> <p>Provider Qualifications SOAR case managers within the IBHP network must hold a minimum of a bachelor’s level degree in a health or human services field and be practicing under Optum Idaho supervisory protocol. SOAR case managers must be certified as a SOAR certified case manager through SAMHSA. All questions regarding SOAR Case Manager qualifications must be directed to the current SOAR State Lead who can be contacted at SOARtraining@dhw.idaho.gov.</p> <p>Provider Responsibilities See Provider Responsibilities in Section 4.12 - Case Management. While providing SOAR Case Management services, providers will ensure they are following the fidelity model outlined in SAMHSA’s SOAR certification materials.</p> <p>Authorization Type See Authorization Type in Section 4.12 - Case Management.</p> <p>Payment Methodology Same as Case Management</p> <p>Additional Information</p>

Section	Page	Previous Content	New Content
			<p>See Provider Responsibilities in Section 4.12 – Case Management. All SOAR Case Management certifications and training are provided through SAMHSA. The SOAR State Lead will be the primary point of contact and technical resource regarding SOAR Case Management SOARtraining@dhw.idaho.gov.</p>
Intensive Outpatient Program (IOP)	126 & 127		<p>Payment Methodology Added GT Modifier for service rendered as Telehealth</p> <p>Additional Information This service may be provided using Telehealth. See the Telehealth Services section of this manual for additional information.</p>
Health Behavior Assessment and Intervention (HBAI)	143		<p>Description These interventions do not require a Comprehensive Diagnostic Assessment (CDA) or a full treatment plan. <u>Additionally, these services will not require the completion of the CANS assessment for members under the age of 19.</u> However, the interventions are to be documented in the member’s medical record and must be billed with a primary medical diagnosis. The services must be provided by a qualified licensed behavioral health clinician.</p>
Telehealth (Virtual Visits)	147 & 148	<p>Provider Qualifications and Responsibilities Requirements for providers using telehealth to provide services:</p> <ul style="list-style-type: none"> • Prior to delivering telehealth services, has signed Optum’s Telehealth Attestation, which is located in the Secure Transactions area of Provider Express, you must be a registered user of Provider Express to complete the online attestation. <p>Additional Information Optum Idaho does not cover the following services:</p>	<p>Description Optum Idaho covers the delivery of the following behavioral health services (mental health and substance use disorder) by a doctoral level or masters level provider who is an independently licensed clinician via a secure two-way, real time interactive telehealth system with both an audio and video component:</p> <ul style="list-style-type: none"> • Assessment and diagnosis (such as the CDA, CANS, etc. see the respective service sections in this manual) • Targeted Care Coordination • Case Management

Section	Page	Previous Content	New Content
		<ul style="list-style-type: none"> • Psychotherapy with provider and/or members at more than two sites 	<ul style="list-style-type: none"> • Individual, group, or family psychotherapy; and • Medication management • <u>Intensive Outpatient</u> <p>The clinician will determine if telehealth is the appropriate modality for the patient at the time of service.</p> <p>Provider Qualifications and Responsibilities Requirements for providers using telehealth to provide services:</p> <ul style="list-style-type: none"> • Is at least a masters level provider who is an independently licensed clinician. • Abides by Optum’s Telehealth Checklist Protocol and the American Telemedicine Association’s Practice Guidelines for Video-Based Online Mental Health Services, both of which are located on Provider Express. • <u>Comply with Idaho Telehealth Access Act</u> • Uses the current Optum Idaho fee schedule for determining which telehealth services are covered by Optum. • Are licensed in the state in which the member resides at the time of service. • <u>Providers may be physically located outside of Idaho when seeing Idaho members, as long as they are licensed in Idaho.</u> • <u>Providers located outside of Idaho must comply with the Idaho Telehealth Access Act and any Telehealth Access Act within the state they are located.</u>
Member Appeal Process	169 & 170	<p>Instructions for Filing a Member Appeal An appeal can be requested orally by the member by calling the Optum Member Line at 1-855- 202-0973l. An Optum Appeal Request form is included in the clinical Adverse Benefit</p>	<p>Instructions for Filing a Member Appeal An appeal can be requested orally by the member by calling the Optum Member Line at 1-855- 202-0973l. An Optum Appeal Request form is included in the clinical Adverse Benefit</p>

Section	Page	Previous Content	New Content
		<p>Determination letter sent to the member and provider. You may use the Optum Appeal Request form or send the request in a letter with the following information:</p> <ul style="list-style-type: none"> • Written consent from the member if filing on behalf of the member 	<p>Determination letter sent to the member and provider. You may use the Optum Appeal Request form or send the request in a letter with the following information:</p>