



ADMINISTRATIVE RULES OF MONTANA



37.87.1353 INTEGRATED CO-OCCURRING TREATMENT (ICT), REIMBURSEMENT AND AUTHORIZATION

- (1) A prior authorization (PA) request must be submitted to the Children's Mental Health Bureau no earlier than ten business days prior to the first date of the service for the youth. Requests received earlier than ten days prior to the admission of the youth, will be technically denied. If a request is received after the youth has been admitted, the request will be considered from the date the request was received by the department.
- (2) The clinical reviewer will complete the PA review process within two business days of receipt of complete information and take one of the following actions:
 - (a) request additional information as needed to complete the review and the provider must submit the requested information within five business days of the request for additional information;
 - (b) authorize the PA for up to 180 days as medically necessary and generate notification to all appropriate parties if the request meets the medical necessity criteria; or
 - (c) defer the case to a board-certified psychiatrist for review and determination if the PA request does not appear to meet the medical necessity criteria.
- (3) The board-certified psychiatrist will complete the review and determination within four business days of receipt of the information from the clinical reviewer.
- (4) After a denial, a new PA request may be submitted only if there is new clinical information.
- (5) The following services will not be reimbursed concurrently with ICT:
 - (a) outpatient therapy;
 - (b) home-support services;
 - (c) community-based psychiatric rehabilitation and support;
 - (d) therapeutic group home;
 - (e) psychiatric residential treatment facility;
 - (f) day treatment;
 - (g) comprehensive school and community treatment;
 - (h) acute inpatient hospital services; and
 - (i) targeted case management.

- (6) CPST services may be provided by the ICT team to a youth that is enrolled in partial hospitalization for up to 14 days.
- (7) The ICT provider must provide to the family a document that explains which services cannot be reimbursed concurrently as well as the potential for repayment if such services are provided concurrently.
- (8) ICT therapeutic interventions will be reimbursed as follows: procedure code H0040 at \$18.73 per 15-minute unit.
- (9) CPST will be reimbursed as follows: procedure code H0039 UA at \$14.30 per 15-minute unit.

Authorizing statute(s): 53-2-201, 53-6-113, MCA

Implementing statute(s): 53-6-101, MCA

History: NEW, 2016 MAR p. 1856, Eff. 10/15/16.