

CHAPTER 2: BEHAVIORAL HEALTH SERVICES**SECTION 2.1: PROVIDER REQUIREMENTS****PAGE(S) 1****PROVIDER REQUIREMENTS**

A provider must be enrolled in the Medicaid Program and meet the provider qualifications at the time service is rendered to be eligible to receive reimbursement through the Louisiana Medicaid Program.

Providers should refer to Chapter 1 – General Information and Administration of the *Medicaid Services Manual* for additional information on provider enrollment and requirements, including general standards for participation. (See Appendix A for information on accessing Chapter 1.)

Healthy Louisiana managed care organizations (MCOs) are responsible for ensuring providers with whom they contract to provide specialized behavioral health services (SBHS), meet the minimum qualification requirements in accordance with the below provisions, all applicable state and federal laws, rules and regulations, and Centers for Medicare and Medicaid Services' (CMS) approved waivers and Medicaid State Plan amendments.

Licensure and Specific Provider Requirements

Providers must meet licensure and/or certification requirements, as well as other additional requirements as outlined in the sections below:

Section	Subject	Topic
2.1	Residential Services	Therapeutic Group Homes
2.1	Residential Services	Psychiatric Residential Treatment Facilities
2.2	Outpatient Services	Behavioral Health Services in a Federally Qualified Health Center or Rural Health Clinic
2.2	Outpatient Services	Outpatient Therapy by Licensed Practitioners
2.2	Outpatient Services	Rehabilitation Services for Children, Adolescents, and Adults
2.3	Addiction Services	same
2.4	Coordinated System of Care	same