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| 2.6 | Funding for Psychological Assessments for Individuals who are Medicaid Eligible | Page 1 of 1 |
| Issue date: 12/99 | Revision date: n/a | Division Staff |
| Form(s): 295S | | |

All adults 21 years and older, who are eligible for **Division** services or who are seeking **Division** services, and who need a psychological evaluation as a part of eligibility determination will be paid under the **Division** Open-Ended Psychological Assessment contract through Division authorized psychological providers.

Procedure

1. Psychological services provided by a licensed independent psychologist are a **Medicaid** benefit only for Child Health Evaluation and Care (CHEC) eligible individuals who are under 21 years of age. Child Health Evaluation and Care eligible individuals continue to be eligible to receive psychological evaluation, testing, and individual and group therapy and should be referred to the **Division** of Health Care Financing.
2. Psychological assessments must accurately reflect the **Person's** intellectual and adaptive functioning levels. The **Support Coordinator** shall review the psychological evaluation annually to determine if the psychological reliably reflects the **Person**. There is no need to update a psychological assessment unless you think it does not accurately reflect the **Person's** ability level.
3. Psychological assessments are paid via a 295S payment form at the region level using existing region funds. The Support Coordinator should be prudent in the expenditure of these funds.
4. **To get a psychological test completed and paid for, use the following process:**
 - a. **Support Coordinators** must receive **Region** authorization to complete a psychological assessment. **Regions** are to develop their own authorization/review process.
 - b. **Providers** must receive prior authorization from the **Support Coordinator** before delivering services in order to determine if the **Person** is eligible for services or is in the **intake** process.
 - c. **Support Coordinators** must indicate if the **Person** is eligible for payment as HP/SM (Home and Community-Based **Waiver**) or MR/SG (General Fund). For **Persons** in the **Waiver**, the **Division** will receive matching funds at the administrative rate.
 - d. To assure quick payment, the **Support Coordinator** shall assure that the **Person** was eligible for payment/services effective the date the psychological assessment was completed. Payments cannot be made prior to eligibility determination date or when the **Person** is in closed status.
 - e. All psychological payments shall be made at the **Region** level.