**TABLE OF CONTENTS** Page

23.01 **DEFINITION**. 1

23.01-1 Developmental and Behavioral Evaluation Clinic 1

23.01-2 Approved Staff Members 1

23.02 **ELIGIBILITY FOR CARE** 1

23.03 **DURATION OF CARE** 1

23.04 **COVERED SERVICES** 1

23.04-1 Developmental and Behavioral Evaluation 1

23.04-2 Child Abuse Evaluation 2

23.05 **LIMITATIONS** 3

23.06 **NON-COVERED SERVICES** 3

23.06-1 Academic 3

23.06-2 Vocational 3

23.06-3 Socialization & Recreational Services 3

23.07 **POLICIES AND PROCEDURES** 3

23.07-1 Setting 3

23.07-2 Professional Staff 3

23.07-3 Member’s Record 5

23.07-4 Program Integrity 6

23.08 **REIMBURSEMENT** 6

23.09 **BILLING INSTRUCTIONS**. 6

23.01 **DEFINITIONS**

Effective

04/01/10

23.01-1 **Developmental and Behavioral Evaluation Clinic** means a clinic that has as its primary purpose the provision of Developmental and Behavioral Evaluations and Child Abuse Evaluations for members aged birth through twenty (20) years. A Developmental and Behavioral Evaluation clinic may operate as a sub unit of an existing agency, but not as part of a home health agency or rural health clinic, and shall be licensed by the Department of Health and Human Services to provide outpatient therapy services.

23.01-2 **Approved Staff Members** means other qualified staff as defined in Section 23.07-2, or licensed professional staff, who are employed directly by a Developmental and Behavioral evaluation clinic, as well as appropriate licensed professionals providing covered services by consultant arrangement, subcontract, or cooperative agreement with a Developmental and Behavioral evaluation clinic.

23.02 **ELIGIBILITY FOR CARE**

Members aged birth through twenty (20) are eligible for covered Developmental and Behavioral Evaluation Clinic services as set forth in this manual. Members must meet the basic eligibility criteria as set forth in Part 2 of the *MaineCare Eligibility Manual*, 10-144 CMR Chapter 332. There are restrictions on the type and amount of services that members are eligible to receive as set forth in 23.05.

23.03 **DURATION OF CARE**

Each member is eligible for covered services which are medically necessary and are provided within the maximum number of reimbursable evaluations as stated in Section 23.05. The Department reserves the right to request additional information to evaluate medical necessity.

23.04 **COVERED SERVICES**

A covered service is a service for which payment to a provider is permitted under this Section of the *MaineCare Benefits Manual*. The following services are covered when provided by approved professional staff of a Developmental and Behavioral Evaluation clinic, and billed by that clinic. Covered services will be provided under the direction of a physician.

23.04-1 **Developmental and Behavioral Evaluation** is a Multidisciplinary Evaluation of social interaction, communication, stereotyped patterns of behavior and includes evaluation of other associated developmental and behavioral problems. The evaluation is conducted by a multidisciplinary team that consists of a Psychiatrist; and either a Licensed Psychologist or a

23.04 **COVERED SERVICES** (cont.)

 Psychological Examiner. If a Licensed Psychologist is not part of the team, the team must also include a Licensed Clinical Social Worker or Licensed Clinical Professional Counselor.

Effective

04/01/10

The Developmental and Behavioral Evaluation components may include a Psychosocial Assessment, a Psychological Evaluation and testing, clinically appropriate interviews and observations scales to assess for Autism Spectrum Disorders, and a Psychiatric Evaluation. The Developmental and Behavioral Evaluation may, at times, also include, speech/language, occupational therapy, and physical therapy assessments.

The Developmental and Behavioral Evaluation team consults to summarize the member’s functional strengths and limitations to establish diagnosis (es) and to prepare recommendations for treatment or service. The Developmental and Behavioral Evaluation team communicates its findings to the parent or guardian and if clinically appropriate, the member. The findings are also summarized in a written report provided to the parent or guardian.

23.04-2 **Child Abuse Evaluation** means an expert forensic evaluation of a member which is conducted under the direction of a board certified pediatrician who is a trained specialist in child abuse assessment. The purpose of the Child Abuse Evaluation is to evaluate the existence and extent of any child abuse or neglect and the emotional, physical and behavioral effects of such abuse or neglect. The Child Abuse Evaluation is a multidisciplinary evaluation. The Child Abuse Evaluation is performed by licensed professionals from at least two (2) of the disciplines as described in Section 23.07-2.

 The Child Abuse Evaluation may include a detailed psychosocial intake including contact with the Department, Law Enforcement and the member’s Primary Care Physician (PCP) , detailed medical evaluation as appropriate, clinical interview with the member and parent, and Psychological testing if necessary. There shall be a final team meeting(s) to determine diagnosis, finalize conclusions regarding abuse and neglect and make recommendations regarding care, treatment and safety plans. In addition to aiding in the provision of medically necessary services to the member, the purpose of the Child Abuse Evaluation is to produce a diagnosis and treatment recommendations that may be introduced into evidence in a child protective, criminal or other court proceeding.

23.05 **LIMITATIONS**

 Developmental and Behavioral Evaluation is limited to a maximum reimbursement of fourteen (14) units per evaluation, and Child Abuse Evaluation is limited to a maximum reimbursement of eleven (11) units per evaluation, and both are limited to two (2) evaluations per year. Each evaluation must be medically necessary to prepare medical recommendations regarding the member’s service needs.

Effective

04/01/10

23.06 **NON-COVERED SERVICES**

23.06-1 **Academic**. Any programs, services, or components of services provided to members which are academic in nature are not reimbursable by MaineCare. Academic services are those traditional subjects such as science, history, literature, foreign languages, and mathematics.

23.06-2 **Vocational**. Any programs, services or components of service provided to members of which the basic nature is to provide a vocational program not reimbursable by MaineCare. Vocational services are organized programs directly related to the preparation of individuals for paid or unpaid employment, such as vocational skills training, sheltered employment.

23.06-3 **Socialization & Recreational Services**. Any programs, services, or components of services of which the basic nature is to provide opportunities for socialization or recreation are not reimbursable under the MaineCare Program unless such services are provided as part of the member's service plan for which the specific goals and objectives must be specifically identified in that plan. These non-covered services include, but are not limited to picnics, dances, ball games, parties, field trips, and social clubs.

Effective

04/01/10

23.07 **POLICIES AND PROCEDURES**

Effective

04/01/10

23.07-1 Setting. Developmental and Behavioral Evaluation and Child Abuse Evaluation services must be provided in settings which are appropriate to the member's needs.

23.07-2 Professional Staff. Developmental and Behavioral Evaluation and Child Abuse Evaluation services are reimbursable services when provided by the following staff practicing within the scope of their license or qualifications, as appropriate. The clinic shall collect and retain copies of current licenses of its professional staff and shall produce them for purposes of enrollment.

1. **Physician**. A physician must be licensed by the from the Maine Board of Licensure in Medicine or the Maine Board of Osteopathic Licensure.

23.07 **POLICIES AND PROCEDURES** (cont.)

B. **Psychiatrist**

Effective

04/01/10

A psychiatrist is a physician who is board-certified by the American Board of Psychiatry and Neurology, or be eligible for examination by the American Board of Psychiatry and Neurology, or has completed three years of post graduate training in psychiatry in a program approved by the Educational Council of the American Medical Association and has written evidence of such training.

C. **Psychologist**

A psychologist must be licensed as a psychologist by the Maine Board of Examiners of Psychologists.

D. **Psychological Examiner**

A psychological examiner must be licensed as a psychological examiner by the Maine Board of Examiners of Psychologists.

E. **Social Wor**ker

A social worker must hold a Master's Degree from a school of social work accredited by the Council on Social Work Education, and must be licensed as a licensed clinical social worker by the Maine Board of Social Worker Registration.

F. **Licensed Clinical Professional Counselor**

A licensed clinical professional counselor must be licensed by the Maine State Board of Counseling Professionals Licensure in accordance with 32 M.R.S.A. 13858, Chapter 119.

G. **Speech Pathologist**

A speech pathologist must be licensed as a speech pathologist by the State Board of Examiners on Speech Pathology and Audiology.

H. **Occupational Therapist**

An occupational therapist must be licensed as an occupational therapist by the Maine Board of Examiners of Occupational Therapists.

23.07 **POLICIES AND PROCEDURES** (cont.)

I. **Physical Therapist**

A physical therapist is an individual who is a graduate of a program of physical therapy approved by both the Council on Medical Education of the American Medical Association and the American Physical Therapy Association or its equivalent; and licensed by the State of Maine, Board of Examiners in Physical Therapy.

Effective

04/01/10

J. **Registered Nurse**

A registered nurse must be licensed as a registered professional nurse by the Maine State Board of Nursing.

K. **Audiologist**

An audiologist must be licensed from the State of Maine, Board of Examiners on Speech Pathology and Audiology.

23.07-3 **Member's Records**

The Developmental and Behavioral Evaluation and Child Abuse Evaluation must be done under the direct supervision of a physician and that fact must be documented in the member's record.

There shall be a specific record for each member which shall include but not be limited to:

A. The evaluation components provided, the provider(s) of each component, the goal(s) of the evaluation, and the method(s) or action(s) to achieve that goal.

B. Complete results of all Developmental and Behavioral Evaluation and Child Abuse Evaluation services, including reports of each individual assessment and reports of any consultations held.

C. A closing summary signed and dated by the physician who supervised the Developmental and Behavioral Evaluation or Child Abuse Evaluation service. The closing summary shall contain, at minimum: (1) reason for referral, (2) medical considerations, (3) functional strengths and limitations, (4) diagnosis(es), (5) recommendations.

23.07 **POLICIES AND PROCEDURES** (cont.)

23.07-4 **Program Integrity**

A. The Division of Program Integrity monitors the medical services provided and determines the appropriateness and necessity of the services.

Effective

04/01/10

B. The Department and its professional advisors regard the maintenance of adequate clinical records as essential for the delivery of quality care. In addition, providers should be aware that clinical records are key documents for post-payment audits. In the absence of proper and complete clinical records, no payment will be made and payments previously made may be recovered in accordance with Chapter I of this Manual.

C. Upon request, the provider must furnish to the Department, without additional charge, the clinical records, or copies thereof, corresponding to and substantiating services billed by that provider.

D. The Department requires the clinical records and other pertinent information shall be transferred upon request and with the member's signed release of information, to other clinicians involved in the member's care.

Effective

04/01/10

23.08 **REIMBURSEMENT**

 The amount of payment for services rendered shall be based on a rate listed in the Allowances for Developmental and Behavioral Evaluation Services, Chapter III, Section 23. In accordance with Chapter I of the *MaineCare Benefits Manual*, it is the responsibility of the provider to ascertain from each member whether there are any other resources (private or group insurance benefits, worker's compensation, etc.) that are available for payment of the rendered service, and to seek payment from such resources prior to billing the *MaineCare Benefits Manual*.

Effective

04/01/10

23.09 **BILLING INSTRUCTIONS**

Billing must be accomplished in accordance with the Department's billing instructions for the CMS1500 claim form.