DEFINITION

Outpatient occupational therapy services are provided when the limits under the State Plan are exhausted. The scope and nature of these services do not otherwise differ from Occupational Therapy services furnished under State Plan, except that maintenance therapies are allowed. Occupational Therapy under the Home and Community Based services (HCBS) is to be used for maintenance or habilitation purposes or extended State Plan services.

MAINTENANCE AND EXTENDED STATE PLAN OCCUPATIONAL THERAPY

Maintenance occupational therapy is provided when Stat Plan therapy is denied and there is not expectation that the member’s condition will improve significantly in a reasonable and predictable period of time. Maintenance occupational therapy is only reimbursed under HCBS program. Extended State Plan Occupational Therapy services are those defined in ARM 37.86.601. In addition to maintenance, Occupational Therapy provided under HCBS may also be restorative in nature and be provided when Stat Plan therapy limits are in excess of what is allowable under State Plan Medicaid.

ELIGIBLE PROVIDERS

An Occupational Therapist must be:

1. Registered by the American Occupational Therapy Association; or
2. A graduate from a program in Occupational Therapy approved by the Council on Medical Education of the American Medical Association and engaged in the supplemental clinical experience required before registration by the American Occupational Therapy Association.
EFFECT ON PLAN OF CARE COSTS

Only those Occupational Therapy services provided under HCBS are included on the HCBS service plan cost sheet. The provision of State Plan Occupational Therapy services as defined in ARM 37.40.1460 should be reflected on the “Other Service and Informal Support Systems” section on the HCBS service plan.

SERVICE LIMITATION

Restorative Occupational Therapy services under HCBS may not be reimbursed until State Plan limits are met.