

Attention Provider Types 14 and 82:

Rehabilitation Plan and Progress Notes for Rehabilitative Mental Health Services

An individualized Rehabilitation Plan must be developed prior to Rehabilitative Mental Health (RMH) services being performed and is considered a part of the recipient's permanent medical record. The Rehabilitation Plan must be developed and approved by a Qualified Mental Health Professional (QMHP) within the scope of their practice. The plan must include all prescribed RMH services and must be medically necessary, clinically appropriate, and contribute to the goals and objectives of the Rehabilitation Plan. The plan must also reflect the frequency, amount and duration and have a timeline for services as well as identify the anticipated providers for services. The plan also requires the signature of the Clinical Supervisor, recipient and their family/legal guardian (in the case of legal minors) and the individual responsible for developing the plan. This is further outlined in <u>Medicaid Services Manual (MSM)</u> Chapter 400, Section 403.2B.2.

Progress notes for recipients need to relate directly to the required individualized Rehabilitation Plan. All progress notes must reflect the date and time of day that RMH services were provided; the recipient's progress toward functional improvement and the attainment of established rehabilitation goals and objectives; the nature, content and number of RMH service units provided; and the name, credential(s) and signature of the person who provided the RMH service(s). This requirement is further outlined in MSM Section 403.6B.1.b.