

Behavioral health agency/facility scope of services profile

This form collects information not available through the credentialing application. Humana Healthy Horizons® in Indiana uses this information to guide patients to appropriate care and to assess provider qualifications as defined by the Indiana Family and Social Services Administration and the Division of Mental Health and Addiction requirements for behavioral health services.

Please complete the applicable sections according to your primary specialty.

Provider information

Legal entity name:

Tax ID:

Group or facility NPI:

Group or facility Medicaid ID:

Street address:

City:

State:

ZIP code:

Phone:

Email address:

Is your practice a patient-centered medical home or specialty practice? Yes No

Agency/Facility type:

Community mental health center	Outpatient community-based mental health agency
Crisis center/unit	Psychiatric residential treatment facility (PRTF)
Distinct psychiatric unit	Rural health clinic:
Federally Qualified Health Center	Independent Provider-based
Free-standing psychiatric hospital	School-based health center
Medication-assisted treatment	Substance use center
Multispecialty group	Substance use residential treatment facility
Opioid treatment program	

Practitioner type:

Adult practice registered nurse	Licensed psychologist:	
Clinical nurse specialist	Clinical	Prescribing/medical
Licensed addiction counselor	Licensed social worker	
Licensed marriage and family therapist	Psychiatrist:	
Licensed professional counselor	M.D.	D.O.

Healthy Horizons® in Indiana

Humana Healthy Horizons in Indiana is a Medicaid Product of Arcadian Health Plan, Inc.

300302IN0923 INHM43BEN0923

Languages spoken:

Please provide all languages spoken: _____

Language services available at your practice:

Bilingual staff

☐ Remote video interpreters

☐ Telephonic interpreters

On-site interpreters

☐ Other; please specify: _____

Member population the agency serves:

Select all applicable age groups:

Pediatric	Teen/adolescent	Adult	Geriatric
Birth–5 years	<input type="checkbox"/> 13–17 years	<input type="checkbox"/> 21–64 years	<input type="checkbox"/> 65+ years
6–12 years	<input type="checkbox"/> 18–20 years	<input type="checkbox"/> Other age range: _____	<input type="checkbox"/> Other age range: _____

Select genders served:

Female only	Both female and male	Transgender male
Male only	Transgender female	Nonbinary

Please confirm if your practice provides services to the following populations:

Victims of abuse with intellectual or developmental disabilities	Victims of domestic violence
	Victims of elder abuse

Select all other populations served:

Adult substance users	IV drug user with addiction
Adult SMI	Individuals with pregnancy-related and postpartum mental health disorders
AIDS/HIV-positive substance users	Pregnancy-related and postpartum substance use disorder (SUD)
Child/adolescent serious mental illness (SMI)	Sexual offenders – adolescents
Child/adolescent substance users	Sexual offenders – adults
Deaf/hearing impaired	Patients demonstrating sexually acting out behaviors
LGBTQ+	
Homebound persons	
Homeless persons	

Telehealth services:

Does your agency provide telehealth services? Yes No

If yes, which methods? Audio Video Secure text messaging

Electronic record capability:

Do you use an electronic health record? Yes No

If so, which vendor: _____

Do you use a health information exchange? Yes No

Addiction services:

Select the appropriate level of care:

ASAM level 0.5:

Early intervention

ASAM level 1:

Outpatient setting

ASAM level 2-WM:

Ambulatory withdrawal management
with extended on-site monitoring

ASAM level 2.1:

Intensive outpatient treatment

ASAM level 2.5:

Partial hospitalization

ASAM level 3.1:

Clinically managed low-intensity
residential treatment

ASAM level 3.2-WM:

Clinically managed residential
withdrawal management

ASAM level 3.3:

Clinically managed population-specific
high-intensity residential treatment

ASAM level 3.5:

Clinically managed high-intensity
residential treatment

ASAM Level 3.7:

Medically monitored intensive
inpatient services

ASAM Level 3.7-WM:

Medically monitored inpatient
withdrawal management

ASAM Level 4:

Medically managed intensive
inpatient treatment

ASAM Level 4-WM:

Medically managed inpatient withdrawal
management, hospital setting

Behavioral health services:

Applied behavior analysis

Assertive community treatment (ACT) services

Behavioral health crisis care

Behavioral health outpatient services

Case management

Crisis stabilization – adult

Crisis stabilization – youth

Electroconvulsive therapy

Laboratory services

Medication management

Mobile crisis response (MCR)

Peer support services

Permanent supportive housing

Pregnancy-related and postpartum
mental health disorders

Pregnancy-related and postpartum
substance use disorder

Psychological testing

Psychosocial rehabilitation (PSR)

Area of practice focus/interest:

Anxiety disorders

Art therapy

Attention deficit disorder

(ADD)/ Attention-deficit/
hyperactivity disorder (ADHD)

Autism

Faith-based/spiritual

Family therapy

Fetal alcohol spectrum
disorder

Group therapy

Neuropsychological testing

Personality disorders

Play therapy

Post-traumatic stress disorder

Reactive attachment disorder

Behavioral health services:

Area of practice focus/interest:

Chemical dependency/ codependency	Intellectual developmental disabilities (IDD)	Social supports/social determinants of health
Depression/mood disorder	Learning disabilities	Telepsychiatry
Developmental disabilities	Mental health skill building	Teletherapy
Dissociative disorders	Multidimensional family therapy	
Eating disorders		

Attestation:

As a duly authorized representative of the organization listed above, I acknowledge and agree that the organization has established processes and procedures that comply with the requirements established by the Indiana Family and Social Services Administration and the Division of Mental Health and Addiction.

Reviewed and agreed:

_____	_____	_____
Printed name of authorized signatory	Signature of authorized signatory	Date