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# Psychiatric Residential Treatment Facilities (PRTFs) Initial Application Process

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## What is a PRTF?

A PRTF is any non-hospital facility that provides inpatient psychiatric services to Medicaid-eligible individuals under the age of 21. A PRTF must have a provider agreement with the Idaho State Medicaid Agency, be accredited, and meet the Code of Federal Regulation (CFR) requirements in §441.151 through 441.182 and 483.350 Subpart G governing the use of restraint and seclusion.

## How do I become an PRTF provider?

To establish Centers for Medicare/Medicaid Services (CMS) Certification of a PRTF, an applicant must request, complete, and submit an application packet. Application materials are located below or requested through the Bureau of Facility Standards at (208) 334-6626 option 4.

## What is included in the PRTF application packet?

The application packet includes what information and documents must be submitted and approved by the Bureau of Facility Standards prior to initial PRTF certification (items #1 - #3) and resource information related to PRTFs (items #4 - #6) as follows:

1. **Accreditation.** A copy of the facility's [Joint Commission \(JC\)](#), [Commission on Accreditation of Rehabilitation Facilities \(CARF\)](#), or [Council on Accreditation of Services for Families and Children \(COA\)](#) accreditation survey along with any plan of correction submitted in response to the survey and the letter from the accrediting organization to you verifying the facility's accreditation as a provider of inpatient psychiatric services for children.
2. **Attestations.** All attestations must be signed and dated by the facility director and include the following information:
  - a. Facility General Characteristics: name, address, and telephone number of the facility;

- If the PRTF is located on a campus or co-located with other facilities, please include a map designating the specific location of the PRTF.

b. Facility Specific Characteristics:

- Bed size;
  - Number of individuals currently served within the PRTF who are provided service based on their eligibility for the Medicaid Inpatient Psychiatric Services for Individuals Under age 21 Benefit (Psych under 21);
  - Number of individuals, if any, whose Medicaid Inpatient Psychiatric Services Under 21 Benefit is paid for by any State other than the State of the PRTF identified in this attestation letter; and
  - List all States from which the PRTF has ever received Medicaid payment for the provision of Psych under 21 services.
- c. A statement certifying that the facility currently meets all of the requirements of Part 483, Subpart G governing the use of restraint and seclusion;
- d. A statement acknowledging the right of the SA (or its agents) and, if necessary, CMS to conduct an on-site survey at any time to validate the facility's compliance with the requirements of the rules, to investigate complaints lodged against the facility, or to investigate serious occurrences; and
- e. A statement that the facility will submit a new attestation of compliance annually and in the event a new facility director is appointed.

**3. Fiscal year ending date [form](#).**

**4. [Appendix N](#) - Psychiatric Residential Treatment Facilities (PRTF) Interpretive Guidance.**

**5. [Appendix Q](#) - Guidelines For Determining Immediate Jeopardy.**

**6. [Appendix Z](#) - Emergency Preparedness (EP) requirements.**

## How do I complete the PRTF application?

1. Submit all required facility information (items #1 - #3 above).  
Assure that all attestation information is complete. Hand-printed applications must be clearly printed and easily readable.

## Where do I send my completed Certification application materials?



The application materials can be submitted by mail and/or hand delivered.

*PLEASE KEEP A COPY FOR YOUR RECORDS.*

1. If you are mailing the application packet, mail to:

Department of Health and Welfare  
Bureau of Facility Standards  
P.O. Box 83720  
Boise, ID 83720-0009

2. If you are hand delivering the application packet, deliver to:

Department of Health and Welfare  
Bureau of Facility Standards  
3232 Elder Street  
Boise, ID 83705

## What happens after I submit my application materials?

Bureau of Facility Standards staff will review the materials you submitted. If the application is incomplete or if there are questions, Bureau staff will contact you. Once the application materials have been approved by the Bureau of Facility Standards, it will be sent to the State Medicaid Agency for final review and approval.

## **How long will the application process take?**

The length of the PRTF application process varies dependent on multiple factors such as whether or not the application is complete, whether or not additional information needs to be submitted, current work load and availability of resources necessary to complete the application review, etc. Therefore, it is not possible for the Bureau of Facility Standards to establish specific timeframes.

## **How do I get paid for providing services?**

To become an Idaho Medicaid provider, you must submit an Idaho Medicaid provider enrollment application to DXC Technology, Idaho's Medicaid Management Information Systems (MMIS) Vendor. To submit an Idaho Medicaid provider enrollment application, go to [www.idmedicaid.com](http://www.idmedicaid.com) and register for a trading partner account. A step-by-step user guide can be found by selecting Reference Material, User Guides, New Provider Enrollment Guide. Additional provider enrollment help is available by contacting your Provider Relations Consultant or Provider Services. Contact information can be found at [www.idmedicaid.com](http://www.idmedicaid.com) or call (866) 686-4272.

Applying to be an Idaho Medicaid provider is a separate process from federal certification and state licensure.

Medicare/Medicaid reimbursement is not retroactive and usually becomes effective only after your enrollment application is approved, the survey is completed, and you are in compliance with all regulations or have submitted an acceptable plan of correction.

## **Additional information**

For additional information please access the website and reference information below or contact the Bureau of Facility Standards at (208) 334-6626 option 4 or email questions to [fsb@dhw.idaho.gov](mailto:fsb@dhw.idaho.gov).

## **Centers for Medicare & Medicaid Services**

Access the Centers for Medicare & Medicaid Services website at [Psychiatric Residential Treatment Facility Providers](#) website.

## FISCAL YEAR ENDING

Facility Name: \_\_\_\_\_

National Provider Identifier (NPI) number: \_\_\_\_\_

Fiscal Year End date: \_\_\_\_\_

\_\_\_\_\_  
Facility Director Signature

\_\_\_\_\_  
Date