



Provider Enrollment and Amendment ❖ Service Needs List

Publication of this Service Needs List does not constitute an offer to contract with new entities, or to add sites or services to the contracts of providers that already are contracted with Cardinal Innovations. Rather, Cardinal Innovations operates a closed Provider Network and, therefore, reserves the right to extend applications for enrollment and/or approve applications for additional sites or services based on factors that, in Cardinal Innovations' sole discretion, warrant the addition of such providers, sites and/or services. Furthermore, in some instances, Cardinal Innovations may, in its sole discretion, determine that it is preferable first to look to our existing network providers to render services identified on the Service Needs List before opening up our network to non-contracted entities for the rendering of those services. It is the **responsibility of the provider** to review and understand service definition requirements prior to making a request to enroll. As to any service which requires special licensure, certification, registration/ rostering, degree or expertise, such requirements **must be established by provider at time of request**.

Service Gaps	Priority Service Population	Alamance Region	Five County Region	Mecklenburg Region	OPC Region	Piedmont Region	Triad Region
Multi-lingual, <i>Fully Licensed</i> Service Clinicians	All	Yes	Yes	Yes	Yes	Yes	Yes
Licensed Psychologist (specialized testing only per COC regional needs)	All	Yes	Yes	Yes	Yes	Yes	Yes
Psychiatry, Board Eligible/Certified Psychiatrists	All	Yes	Yes	Yes	Yes	Yes	Yes
Child SA Services: <ul style="list-style-type: none"> • LCAS (fully licensed) • CSAC • SAIOP for Adolescents <ul style="list-style-type: none"> ○ Must use Evidence-Based Practices (e.g. Seven Challenges, Adolescent Community Reinforcement Approach (A-CRA) and have a strong family treatment component 	Substance Use Disorder	Yes	Yes	NO	Yes	Yes NO for SAIOP for Adolescents	Yes
Psychiatric Residential Treatment Facility – PRTF (in-State only)	All	Yes	Yes	Yes	Yes	Yes	Yes
Specialized Consultation Services: <ul style="list-style-type: none"> • Psychology • Behavior intervention • Speech Therapy • Therapeutic Recreation • Augmentative Communication • Assistive Technology Equipment • Occupational Therapy • Physical Therapy • Nutrition 	I/DD	Yes	Yes	Yes	Yes	Yes	Yes
Specialty Provider – Youth With Sexual Harm / Sexually Aggressive: <ul style="list-style-type: none"> • Testing , Evaluation and Treatment for both adult and children (especially IDD) 	All	Yes	Yes	Yes	Yes	Yes	Yes
Specialty Provider – Trauma Focused Cognitive Behavioral Therapy. MCO approved source is required.	Mental Health	Yes	Yes	Yes	NO	Yes	Yes
Specialty Provider – Suboxone Treatment (MD required)	Substance Use Disorder	Yes	Yes	NO	NO	Yes	Yes
Licensed Adult AFL Homes, Licensed Child AFL Homes or ICF Community Group Homes specializing in members with complicated medical/behavioral/I/DD and MH needs.	All	Yes	Yes	Yes	Yes	Yes	Yes
Applied Behavioral Analysis (ABA) Services <i>Requires prior contact with Network for information specific to this service</i>	I/DD	Yes	Yes	Yes	Yes	Yes	Yes
Self-Direction (Agency with Choice / Employer of Record)							Yes
Facility Based Respite and/or Community Based Respite							Yes