**Section 132.27 Provider Qualifying Conditions**

a) A Provider shall, at a minimum, directly provide mental health assessment, ITP development, review, modification (see Section 132.148(c)) and at least one additional Part 132 mental health service. Directly provided means that the QMHP and LPHA who signed the Mental Health Assessment and ITP are employed by or contractual employees of the Provider. The Public Payer may waive the requirement of at least one additional Part 132 mental health service if it deems that such a waiver increases the availability of mental health services to Medicaid-eligible Clients.

b) A Provider may not subcontract for services authorized by this Part. If a Provider is unable to provide a service needed by a Client, the Provider may refer the Client to another certified Provider if another certified Provider is available and if the Client agrees to the referral. For purposes of this subsection, a contractual employee or an individual on contract is not considered to be a subcontractor.

c) Billings for services rendered under this Part shall be submitted only by the Provider that directly provided the service and only to the Public Payer that is funding the service.

(Source: Amended at 38 Ill. Reg. 15550, effective July 1, 2014)