

Comprehensive Rehabilitation Services (CRS) Recommended Service Arrays		
Traumatic Brain Injury (TBI) Inpatient Comprehensive Medical Rehabilitation Services (maximum 90 days)		
Core Services	Service Delivery Modality	Provider Qualifications
Aquatic Therapy	Individual and Group	LP or CP
Art Therapy	Individual and Group	CP
Behavior Management	Individual	LP or CP
Case Management	Individual	CP
Chemical Dependency	Individual and Group	LP
Cognitive Rehabilitation Therapy (CRT)	Individual and Group	LP
Dietary Nutritional Services	Individual and Group	LP
Massage Therapy	Individual	LP
Medical Services	Individual	LP
Mental Restoration	Individual and Group	LP
Music Therapy	Individual and Group	CP
Neuropsychiatric Services	Individual and Group	LP
Neuropsychological Services	Individual and Group	LP
Occupational Therapy	Individual and Group	LP or CP
Physical Therapy	Individual and Group	LP or CP
Recreational Therapy	Individual and Group	CP
Room and Board	Individual	Qualifications not stipulated
Speech/Language Pathology (Speech Therapy)	Individual and Group	LP or CP
Ancillary Services	Service Delivery Modality	Provider Qualifications
Audiology	Individual	LP
DME/Supplies	Individual	Qualifications not stipulated
Family Therapy	Individual and Group	LP
Family/Caregiver Education & Training	Individual and Group	LP or CP
Orthotics/Prosthetics	Individual	LP
Over the Counter Medications	Individual	Qualifications not stipulated
Physical Restoration	Individual	LP
Prescription Medications	Individual	LP
Rehabilitation Technology	Individual	LP, other professionals
Transportation	Individual	Qualifications not stipulated
Vision Services	Individual	LP

Key
(LP) Licensed Professional
(CP) Certified Professional
Qualifications not stipulated

Comprehensive Rehabilitation Services (CRS) Recommended Service Arrays		
Traumatic Brain Injury (TBI) Outpatient Services (maximum 120 hours)		
Core Services	Service Delivery Modality	Provider Qualifications
Aquatic Therapy	Individual and Group	LP or CP
Art Therapy	Individual and Group	CP
Chemical Dependency	Individual and Group	LP
Cognitive Rehabilitation Therapy (CRT)	Individual and Group	LP
Massage Therapy	Individual	LP
Mental Restoration	Individual and Group	LP
Music Therapy	Individual and Group	CP
Neuropsychiatric Services	Individual and Group	LP
Neuropsychological Services	Individual and Group	LP
Occupational Therapy	Individual and Group	LP or CP
Physical Therapy	Individual and Group	LP or CP
Recreational Therapy	Individual and Group	CP
Speech/Language Pathology (Speech Therapy)	Individual and Group	LP or CP
Ancillary Services	Service Delivery Modality	Provider Qualifications
Audiology	Individual	LP
Dietary Nutritional Services	Individual and Group	LP
DME/Supplies	Individual	Qualifications not stipulated
Family Therapy	Individual and Group	LP
Family/Caregiver Education & Training	Individual and Group	LP or CP
Home Modification	Individual	LP
Orthotics/Prosthetics	Individual	LP
Personal Attendant Care	Individual	PP
Physical Restoration	Individual	LP
Prescription Medications	Individual	LP
Rehabilitation Technology	Individual	LP, other professionals
Transportation	Individual	Qualifications not stipulated
Vision Services	Individual	LP

Key
(LP) Licensed Professional
(CP) Certified Professional
(PP) Paraprofessional
Qualifications not stipulated

Comprehensive Rehabilitation Services (CRS) Recommended Service Arrays		
Post-Acute Brain Injury (PABI) Residential Services		
(maximum 180 days total PABI)		
Core Services	Service Delivery Modality	Provider Qualifications
Aquatic Therapy	Individual and Group	LP or CP
Art Therapy	Individual and Group	CP
Behavior Management	Individual	LP or CP
Case Management	Individual	CP
Chemical Dependency	Individual and Group	LP
Cognitive Rehabilitation Therapy (CRT)	Individual and Group	LP
Dietary Nutritional Services	Individual and Group	LP
Massage Therapy	Individual	LP
Medical Services	Individual	LP
Mental Restoration	Individual and Group	LP
Music Therapy	Individual and Group	CP
Neuropsychiatric Services	Individual and Group	LP
Neuropsychological Services	Individual and Group	LP
Occupational Therapy	Individual and Group	LP or CP
Personal Assistance	Individual and Group	PP
Physical Therapy	Individual and Group	LP or CP
Recreational Therapy	Individual and Group	CP
Room and Board	Individual	Qualifications not stipulated
Speech/Language Pathology (Speech Therapy)	Individual and Group	LP or CP
Ancillary Services	Service Delivery Modality	Provider Qualifications
Audiology	Individual	LP
DME/Supplies	Individual	Qualifications not stipulated
Family Therapy	Individual and Group	LP
Family/Caregiver Education & Training	Individual and Group	LP or CP
Home Modification	Individual	LP
Limited Skilled Nursing	Individual	LP
Orthotics/Prosthetics	Individual	LP
Over the Counter Medications	Individual	Qualifications not stipulated
Physical Restoration	Individual	LP
Prescription Medications	Individual	LP
Rehabilitation Technology	Individual	LP, other professionals
Transportation	Individual	Qualifications not stipulated
Vision Services	Individual	LP

Key
(LP) Licensed Professional
(CP) Certified Professional
(PP) Paraprofessional
Qualifications not stipulated

Comprehensive Rehabilitation Services (CRS) Recommended Service Arrays		
Post-Acute Brain Injury (PABI) Non-Residential Services (maximum 180 days total PABI)		
Core Services	Service Delivery Modality	Provider Qualifications
Aquatic Therapy	Individual and Group	LP or CP
Art Therapy	Individual and Group	CP
Behavior Management	Individual	LP or CP
Case Management	Individual	CP
Chemical Dependency	Individual and Group	LP
Cognitive Rehabilitation Therapy (CRT)	Individual and Group	LP
Dietary Nutritional Services	Individual and Group	LP
Massage Therapy	Individual	LP
Mental Restoration	Individual and Group	LP
Music Therapy	Individual and Group	CP
Neuropsychiatric Services	Individual and Group	LP
Neuropsychological Services	Individual and Group	LP
Occupational Therapy	Individual and Group	LP or CP
Physical Therapy	Individual and Group	LP or CP
Recreational Therapy (TBD)	Individual and Group	CP
Speech/Language Pathology (Speech Therapy)	Individual and Group	LP or CP
Ancillary Services	Service Delivery Modality	Provider Qualifications
Audiology	Individual	LP
DME/Supplies	Individual	Qualifications not stipulated
Family Therapy	Individual and Group	LP
Family/Caregiver Education & Training	Individual and Group	LP or CP
Home Modification	Individual	LP
Limited Skilled Nursing	Individual	LP
Orthotics/Prosthetics	Individual	LP
Over the Counter Medications	Individual	Qualifications not stipulated
Personal Attendant Care	Individual	PP
Physical Restoration	Individual	LP
Prescription Medications	Individual	LP
Rehabilitation Technology	Individual	LP, other professionals
Transportation	Individual	Qualifications not stipulated
Vision Services	Individual	LP

Key
(LP) Licensed Professional
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(PP) Paraprofessional
Qualifications not stipulated

Comprehensive Rehabilitation Services (CRS) Recommended Service Arrays		
Spinal Cord Injury (SCI) Inpatient Comprehensive Medical Rehabilitation Services (maximum 90 days)		
Core Services	Service Delivery Modality	Provider Qualifications
Aquatic Therapy	Individual and Group	LP or CP
Art Therapy	Individual and Group	CP
Case Management	Individual	CP
Dietary Nutritional Services	Individual and Group	LP
Massage Therapy	Individual	LP
Medical Services	Individual	LP
Music Therapy	Individual and Group	CP
Occupational Therapy	Individual and Group	LP or CP
Physical Therapy	Individual and Group	LP or CP
Recreational Therapy (TBD)	Individual and Group	CP
Room and Board	Individual	Qualifications not stipulated
Speech/Language Pathology (Speech Therapy)	Individual and Group	LP or CP
Ancillary Services	Service Delivery Modality	Provider Qualifications
DME/Supplies	Individual	Qualifications not stipulated
Family Therapy	Individual and Group	LP
Family/Caregiver Education & Training	Individual and Group	LP or CP
Home Modification	Individual	LP
Limited Skilled Nursing	Individual	LP
Mental Restoration	Individual and Group	LP
Orthotics/Prosthetics	Individual	LP
Over the Counter Medications	Individual	Qualifications not stipulated
Physical Restoration	Individual	LP
Prescription Medications	Individual	LP
Rehabilitation Technology	Individual	LP, other professionals
Transportation	Individual	Qualifications not stipulated

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(LP) Licensed Professional
(CP) Certified Professional
Qualifications not stipulated

Comprehensive Rehabilitation Services (CRS) Recommended Service Arrays		
Spinal Cord Injury (SCI) Outpatient Services (maximum 120 hours)		
Core Services	Service Delivery Modality	Provider Qualifications
Aquatic Therapy	Individual and Group	LP or CP
Art Therapy	Individual and Group	CP
Massage Therapy	Individual	LP
Music Therapy	Individual and Group	CP
Occupational Therapy	Individual and Group	LP or CP
Physical Therapy	Individual and Group	LP or CP
Recreational Therapy	Individual and Group	CP
Speech/Language Pathology (Speech Therapy)	Individual and Group	LP or CP
Ancillary Services	Service Delivery Modality	Provider Qualifications
Dietary Nutritional Services	Individual and Group	LP
DME/Supplies	Individual	Qualifications not stipulated
Family Therapy	Individual and Group	LP
Family/Caregiver Education & Training	Individual and Group	LP or CP
Home Modification	Individual	LP
Mental Restoration	Individual and Group	LP
Orthotics/Prosthetics	Individual	LP
Personal Attendant Care	Individual	PP
Physical Restoration	Individual	LP
Prescription Medications	Individual	LP
Rehabilitation Technology	Individual	LP, other professionals
Transportation	Individual	Qualifications not stipulated

Key
(LP) Licensed Professional
(CP) Certified Professional
(PP) Paraprofessional
Qualifications not stipulated

Comprehensive Rehabilitation Services (CRS) Recommended Service Arrays		
Post Acute Spinal Cord Injury Non-Residential (maximum 180 days)		
Core Services	Service Delivery Modality	Provider Qualifications
Aquatic Therapy	Individual and Group	LP or CP
Art Therapy	Individual and Group	CP
Case Management	Individual	CP
Dietary Nutritional Services	Individual and Group	LP
Massage Therapy	Individual	LP
Music Therapy	Individual and Group	CP
Occupational Therapy	Individual and Group	LP
Physical Therapy	Individual and Group	LP
Recreational Therapy	Individual and Group	CP
Speech/Language Pathology (Speech Therapy)	Individual and Group	LP
Ancillary Services	Service Delivery Modality	Provider Qualifications
DME/Supplies	Individual	Qualifications not stipulated
Family Therapy	Individual and Group	LP
Family/Caregiver Education & Training	Individual and Group	LP or CP
Home Modification	Individual	Qualifications not stipulated
Limited Skilled Nursing	Individual	LP
Mental Restoration	Individual and Group	LP
Orthotics/Prosthetics	Individual	Qualifications not stipulated
Over the Counter Medications	Individual	Qualifications not stipulated
Personal Attendant Care	Individual	PP
Physical Restoration	Individual	LP
Prescription Medications	Individual	Qualifications not stipulated
Rehabilitation Technology	Individual	Qualifications not stipulated
Transportation	Individual	Qualifications not stipulated
Vision Therapy	Individual	LP

Key
(LP) Licensed Professional
(CP) Certified Professional
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