

Medicaid Behavioral Health Clinic/Rehabilitation Services Manual

WV DHHR Bureau for Medical Services
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Charleston, WV



Clinic/Rehab Collaboration



Over the past year, BMS, BHHF, behavioral health providers from across the state, and contractors for DHHR held collaborative workgroups in an effort to revise and update the Behavioral Health Clinic and Behavioral Health Rehabilitation Services, Chapters 502 and 503.

This collaboration was vital in the development of the manuals. Meetings were held weekly to biweekly on average and are credited for the successful revisions. A statewide training and multiple webinars will be conducted over the next few weeks along with agency-specific trainings over the next year as needed to assist providers to learn and implement the new policy. This presentation will be placed on both the BMS and APS Healthcare websites.

Clinic/Rehab Manuals



Any provider of Medicaid and/or BHHF services will be expected to have working knowledge of Chapters 502 and 503 as well as other chapters relevant to the services provided (please see Chapters 100 through 900).

www.dhhr.wv.gov/bms/pages/providermanuals.aspx

For further clarifications, you may access the BMS and APS Healthcare websites where FAQs will be posted following these trainings. APS Healthcare trainer-consultants are also available for assistance.

www.dhhr.wv.gov/bms/hcbs/pages/default.aspx

www.apshealthcare.com/publicprograms/west_virginia/West_Virginia1.htm

Provider Manual Summary-Part 5



CHAPTERS 503.18, 503.20.1, AND 503.20.2

503.18 SKILLS TRAINING AND DEVELOPMENT

503.20.1 DAY TREATMENT

503.20.2 COMPREHENSIVE COMMUNITY SUPPORT SERVICES

Skills Training and Development



- ▶ H2014U4 Skills Training 1:1 by Paraprofessional
- ▶ H2014U1 Skills Training 1:2-4 by Paraprofessional
- ▶ H2014HNU4 Skills Training 1:1 by Professional
- ▶ H2014HNU1 Skills Training 1:2-4 by Professional

- ▶ Service Unit: 15 minutes
- ▶ Telehealth: Not Available
- ▶ Service Limits: All units must be prior authorized
- ▶ Prior Authorization: Refer to Utilization Management Guidelines

Skills Training and Development Definition

- ▶ Skills Training and Development is a combination of structured individual and group activities offered to members who have basic skill deficits.
- ▶ Skill deficits may be due to factors such as history of abuse or neglect, or years spent in institutional settings or supervised living arrangements.
- ▶ This service is to provide therapeutic activities focused on elementary, basic, and fundamental to higher-level skills. Designed to improve or preserve a member's level of functioning.
- ▶ Therapeutic activities may be provided in the natural environment.
- ▶ Structured program as identified in the goals and objectives in the service plan.

Skills Training and Development Definition

- ▶ Therapeutic activities include, but are not limited to:
- ▶ Learning and demonstrating personal hygiene skills
- ▶ Managing living space
- ▶ Manners and Social appropriateness
- ▶ Sexuality
- ▶ Daily living skills.
- ▶ Where these services are provided in a group context, the group must be limited to four members to each staff person. In any setting, these services target members who require direct prompting or direct intervention by a provider.
- ▶ Recreational trips, visits to the mall, recreational/leisure time activities, activities which are reinforcements for behavioral management programs, and social events are not therapeutic services and cannot be billed as Skills Training and Development Services.

Skills Training and Development: Guidelines for Young Children

- ▶ The service must be age and functionally appropriate and be delivered at the intensity and duration that best meets the needs of individual children.
- ▶ The service must not be utilized to provide therapeutic activities for children under the age of five in a group setting for more than four hours per day or more than four days per week.
- ▶ Therapeutic activities for young children must promote skill acquisition, include necessary adaptations and modifications, and be based upon developmentally appropriate practice. These services must also be provided in a way that supports the daily activities and interactions within the family's routine.
- ▶ Skill acquisitions for Skills Training and Development Services for young children include, but are not limited to:
 - ▶ Adaptive, self-help, safety, and nutritional skills
 - ▶ Parent-child interactions, peer interactions, coping mechanisms, social competence, and adult-child interactions
 - ▶ Interpersonal and communication skills
 - ▶ Mobility, problem solving, causal relationships, spatial relationships, sensorimotor, sensory integration, and cognitive skills.

Skills Training and Development Requirements

- ▶ Documentation must contain an activity note describing the service/activity provided and the relationship of the service/activity to objectives in the member's service plan.
- ▶ Documentation must include:
 - the signature and credentials of the staff providing the service
 - the place of service
 - the date of service,
 - and the actual time spent providing the service (by listing the start-and-stop times).
- ▶ Additionally, if the service is provided in a ratio of 1:2-4, there must be an attendance roster listing those members and staff who participate in each ratio. The roster must be signed (with credential initials) and dated by staff that provided the service. It must not be stored in the main clinical record, but must be maintained and be available for review.

- ▶ **Procedure Code:** H2012
- ▶ **Service Unit:** 60 minutes
- ▶ **Telehealth:** Not Available
- ▶ **Service Limits:** All units must be prior authorized
- ▶ **Payment Limits:** Day Treatment services are all-inclusive. This service cannot be billed concurrently with any other Behavioral Health Rehabilitation or Clinic Service.
- ▶ **Prior Authorization:** Refer to Utilization Management Guidelines

Definition: Day Treatment Rehabilitation

- ▶ Structured program of on-going, scheduled therapeutic activities to increase a member's skill level, produce behavioral change which improves adaptive functioning, and/or which facilitates progress toward more independent living as reflected in the Service Plan
- ▶ Day Treatment Services for adults have a maximum staff-to-member ratio of 1:5
- ▶ Program must be available at least for 5 days/4 hours each day
- ▶ For children under age five, the maximum ratio is 1:4
- ▶ Programs for under the age of 5 must not be utilized for more than 4 hours per day and no more than 4 days per week
- ▶ Day Treatment must only be provided at site listed on the provider's behavioral health license
- ▶ **Activities provided for the purpose of leisure or recreations are not billable services.**
- ▶ Day Treatment Services include activities designed to increase the members' skills.
- ▶ May consist of small group activities
- ▶ Intensity, frequency, and type of activities must be age and functionally appropriate.

Definition: Day Treatment Rehabilitation Continued

- ▶ Progress on all objectives must be reviewed at 90 day intervals. Any objective that results in no progress after two consecutive 90 day intervals must be discontinued or modified.
- ▶ Areas of intervention may include but are not limited to the following:
 - ▶ Self-care skills and Emergency skills
 - ▶ Mobility skills
 - ▶ Nutritional skills and Social Skills
 - ▶ Communication and speech instruction
 - ▶ Carryover of physical and/or occupational therapy
 - ▶ Interpersonal skills instruction
 - ▶ Functional community skills (such as recognizing emergency and other public signs, money management skills, travel training, etc.)
 - ▶ Volunteering in community service settings
 - ▶ Citizenship, rights and responsibilities, self-advocacy, etc.
 - ▶ Other services necessary for a member to participate in the community settings of his/her choice

Day Treatment Clinic Definition

- ▶ Behavioral Health Clinic Day Treatment is a program only for Medicaid members with Intellectually/Developmentally Disabled (I/DD) diagnoses. It is a structured program of skill building instruction and supervision designed to assist members in achieving greater independence (and/or employment) in activities of daily living. The programming must be in accordance with each member's needs and interests as reflected in his/her Master Service Plan.
- ▶ Programs are to include positive behavior support interventions that assist members in reducing challenging behaviors and replacing them with socially valuable, adaptive behaviors and skills. If specific written programs for either skill building or behavior reduction are implemented that require one-to-one staff to member ratio, Therapeutic Behavioral Services – Implementation (procedure code H2019) would be utilized in lieu of Day Treatment.

H2012 Program Staff Requirements

- ▶ The Day Treatment program supervisor must meet one of the educational criteria along with the training and experience criteria listed below:
- ▶ Licensed Psychologist (or Masters level psychologist under supervision for licensure)
- ▶ Licensed Professional Counselor or Licensed Certified Social Worker
- ▶ Licensed Social Worker with a minimum of a Bachelor's degree
- ▶ Registered Nurse, OT/PT or recreation therapist with state certification and license
- ▶ Masters or Bachelor's level in education with a specialization to a disability group and teaching certification
- ▶ Certified Addiction Counselor with minimum of a bachelor degree
- ▶ Masters degree in a human services field with 20 hours verified of training specific to the target population served
- ▶ Bachelor's level degree in a human services field with training specific to the target population.
- ▶ Training Criteria : Each qualified staff person must have verified training, experience, and skills specific to the targeted population served by the Day Treatment Program
- ▶ Experience Criteria : All Bachelor level staff are required to obtain 15 hours every two years of continued education relevant to the targeted population served or the provision of Day Treatment Services.

H2012 Program Staff Requirements Cont.



- ▶ Staff with a Bachelor's degree in a human service field that does not specifically provide training in developmental disabilities services must meet one of the three following criteria:
 - ▶ Completion of specific courses relating to developmental disabilities
 - ▶ Completion of staff development in-service or classes relating to I/DD
 - ▶ Completion of 15 hours every two years of continuing education relating to I/DD

- ▶ Paraprofessional staff must have, at a minimum, the following qualifications:
 - Be at least 18 years old ,high school diploma or Graduate Equivalent Degree
 - Be currently certified in Standard First Aid and Adult/Child Cardiopulmonary Resuscitation
 - Successfully completed Behavioral Health agency training in all of the following criteria:
 - Instructional techniques necessary to achieve objectives of individual's program plans
 - Health related issues
 - Recognition of abuse and neglect
 - Individuals' rights and, confidentiality, awareness of, and sensitivity to, family and individual's needs
 - Non-aversive behavior intervention techniques for those providers who are implementing behavior support and intervention plans

H2012 Documentation Requirements

Documentation must contain:

- ▶ A daily summary of total time in attendance at the Program: start/stop times, place of service, and summary of member's participation in the services. Attending staff must sign, list their credentials, and date this summary.
- ▶ Activity note of each service/activity and relationship to service objectives in the service plan. Attending staff must sign, list their credentials, place of service and date this summary and start/stop times.
- ▶ **Note: All treatment objectives provided in the Day Treatment Program must be included on the member's Master Service Plan (or 90 day update).**
- ▶ Daily attendance roster listing members and staff in each ratio. Roster must be signed (with credential initials) and dated by staff that provided the service.
- ▶ Monthly notes that summarize progress on the objectives specified in the individual member's service plan or Day Treatment Plan. This documentation must be reviewed at 90 day intervals.

Day Treatment Program Certification Process



- ▶ Behavioral Health Rehabilitation providers must obtain approval from BMS to provide Day Treatment Services and to bill the West Virginia Medicaid Program for such services.
- ▶ Providers must complete and send the Day Treatment Program Certification form to BMS.
- ▶ Any changes from an approved original certification must be submitted with corresponding rationale for the changes.
- ▶ A Day Treatment Program must recertify every 2 years. This submission must include a summary of utilization information for the 2 years. Specific content is listed on the Application for Day Treatment Program Certification used by BMS.

Comprehensive Community Support Services (CFT)



- ▶ Service Unit: 15 minutes
- ▶ Telehealth: Not Available
- ▶ Service Limits: All units must be prior authorized

- ▶ **PAYMENT LIMITS:** Comprehensive Community Support services (CFT) are all-inclusive. This service cannot be billed concurrently with any other Behavioral Health Rehabilitation Service.

- ▶ **PRIOR AUTHORIZATION:** Refer to Utilization Management Guidelines.

CFT Service Definition

- ▶ Comprehensive Community Support Services is a long-term, preventive, and rehabilitative service designed to serve members with severe and persistent mental illness.
- ▶ This is a structured program of ongoing, regularly scheduled activities designed to maintain a member's level of functioning and prevent deterioration.
- ▶ This may be accomplished through skill maintenance and/or development and behavioral programming.
- ▶ CFT emphasizes community-based activities. Services must be based at a site listed on the agency's behavioral health license. Training may occur onsite or in community settings.
- ▶ CFT Services are to be provided in accordance with the member's potential and interests as reflected in the Master Service Plan.

CFT Service Definition

- ▶ The intensity, frequency and type of CFT activities must be individualized and appropriate to the age and functional level of the member
- ▶ Critical skills identified as essential to maintain placement in the community and preventing hospitalization will also be targeted.
- ▶ CFT has a maximum staff-to-member ratio of 1:12 staff per member at a licensed site; and a maximum 1:8 when provided in a community setting.
- ▶ The amount of service provided is individually determined, not automatically the program's operating hours.
- ▶ Members eligible for Comprehensive Community Support do not meet medical necessity for Day Treatment services.

CFT Documentation Requirements

- ▶ All treatment objectives addressed in a CFT Program must be included on the member's Individual Master Service Plan.
- ▶ Reviews include progress toward objectives, problems that impeded progress, and provide a decision to continue the same plan, or adjust the plan.
- ▶ Additionally, all documentation requirements for Mental Health Service Plan Development (procedure code H0032) must be satisfied.

A daily attendance roster must include:

- ▶ Signature
- ▶ Date of service
- ▶ Staff start-and-stop times
- ▶ Staff/member ratios
- ▶ Location of the services/activities

CFT Staff Qualifications

- ▶ The Comprehensive Community Support program site must be supervised by a minimum of a Bachelor's degree with education specific to the target population being treated. The full-time-equivalent hours in the agency's job description for the supervisor must reflect the number of hours expected supervising the program. If the supervisor is included as part of the direct care ratio, the hours spent supervising must be outside of the direct care hours provided by the supervisor.
- ▶ Paraprofessional staff must possess at a minimum a high school diploma and have verified training, experience and skills specific to working with individuals with serious and persistent mental illness.

Comprehensive Community Support Program Certification Process



- ▶ All Comprehensive Community Support programs require approval through the completion of the Comprehensive Community Support Certification Form. The application is reviewed and subject to approval by the Bureau for Medical Services.
- ▶ New Comprehensive Community Support Programs must submit the Comprehensive Community Support Certification Form to BMS for approval. All programs must be based at a site listed on the provider Behavioral Health License. Billing may commence after receiving initial Bureau approval.
- ▶ After initial approval, a desk review and/or an onsite review will be conducted to validate the approval. BMS reserves the right to review any program at any time for the purpose of certifying or de-certifying a program. Programs not receiving approval may appeal the decision as per policy contained in Chapter 800 (A), Medicaid regulations.
- ▶ Any changes from an original certification must be submitted with corresponding rationale for the changes. See Attachment C of the Rehabilitation Manual.

Follow Up Training



As follow up to the webinars being offered on the Medicaid manual, APS trainer consultants will be available for onsite trainings, simulated reviews, and phone and email consultation regarding site specific questions.

APS Trainer Consultant Staff Available for Trainings/Simulated Reviews



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