

# North Texas Behavioral Health Authority

## Notice for Public Comment

### Proposed Plan for Network Development

The **North Texas Behavioral Health Authority (NTBHA)** is the Department of State Health Services designated Local Behavioral Health Authority (LBHA) established to plan, coordinate, develop policy, develop and allocate resources, supervise, and ensure the provision of community based mental health and substance use disorder services for the residents of Dallas, Ellis, Navarro, Hunt, Kaufman, and Rockwall Counties.

NTBHA is seeking public comment on the Proposed Plan for Network Development. Written comments will be accepted through April 7, 2016 and should be directed by email to Brittony McNaughton, NTBHA Transition Director, at email: [bmcnaughton@ntbha.org](mailto:bmcnaughton@ntbha.org).

Copies of this document may be obtained via internet at [www.ntbha.org](http://www.ntbha.org) or email request to [bmcnaughton@ntbha.org](mailto:bmcnaughton@ntbha.org).

#### ***For Comment:***

##### Organization of the Procurement

In accordance with the Texas Administrative Code, North Texas Behavioral Health Authority (NTBHA) has the authority to acquire community services for persons with behavioral health disorders by certain procurement methods one of which is the Request for Applications (RFA.) This method supports the Open Enrollment form of procurement for which NTBHA plans to request proposals from interested persons and organizations (Applicants) for the purpose of entering into one or more contracts (Contracts) to provide effective, evidenced-based behavioral health services to adults and youth. The individuals to be served under this arrangement must meet the DSHS definition for the Priority Population for Mental Health or be diagnosed with a Substance Use Disorder, have limited funds and no third party coverage to purchase such care and must also reside in the six County region served by NTBHA. This Request for Application is a client choice driven system and there is no warranty or guarantee that successful Applicant will be utilized by a client or any number of clients. The term of the contracts for services between NTBHA and a provider will be through August 31, 2016 with automatic extension through August 31, 2017 depending on funding availability.

NTBHA plans to procure routine outpatient mental health (MH) services and community based substance use disorder (SUD) services through this Open Enrollment process. The Application will be structured so that an organization can fill out one set of information that describes its fundamental structure and organizational qualifications. Separate addenda will be available to describe and solicit information needed to assess qualifications to provide Adult MH services, Child and Youth MH services,

Adult SUD services and Child and Youth SUD services. An Addendum for the population to be served must be submitted along with the Application. The applications will be reviewed by the NTBHA Transition Team and all of those meeting the qualifications stated in the enrollment packet will be eligible to secure a contract with NTBHA to provide services. Feedback will be provided to those whose application is not complete or needs revision and they will be offered the opportunity to re-submit their application.

Special programs referenced in the MH Performance Contract will be procured through an RFP process. These services include but are not limited to: Crisis Hotline, TCOOMMI services, Extended Observation Services, Inpatient Services, Supported Housing Services, Respite, Crisis Residential Treatment, Crisis Stabilization Units, COPSD Services, YES Waiver Services.

### Timeline

- It is planned to issue the applications in the first full week of April.
- Applications are due within 30 days after the date of issuance.
- Re-submissions are due within 15 days of notification that the application does not meet minimum standards.
- Contract negotiations between each eligible organization and NTBHA will begin immediately upon notice that the applicant is eligible

### Minimum Standards for Organizations Submitting Applications

- All organizations submitting applications must be eligible to do business in Texas, and be registered with the Texas Secretary of State to the extent required by Texas law.
- Professionals must hold valid Texas licenses and/or certifications to the extent required to perform any individual component of the Services.
- In the case of submission by a consortium of providers, a single entity responsible for the services delivered must be identified and the financial agent must be an organization with a demonstrated ability to manage funds.
- All organizations applying to provide SUD services must be non-profit organizations.
- Since this is a transition that occurs during a Fiscal Year, all organizations applying to provide MH Services to either Adults or Children and Youth must have at least two years' experience providing such care; this requirement will be re-assessed prior to the next round of procurement.
- It is preferred that all organizations have valid contracts with the Medicaid MCOs in the Dallas Service Area. If MCO contracts are not yet secured then evidence must be provided of active effort to secure those contracts.

### The Application

The application will be organized into the sections listed below and applicants are required to provide detailed information regarding the scope of the applicant's business in response to questions falling under the following sections:

- Business Demographics
- Organizational Structure

- Quality Management/Utilization Management
- Services
- Budget/Financial
- Risk Profile
- Managed Care Profile
- Information System
- Behavioral Health Friendly Workplace
- Assurances Document

MH Services

Every Applicant proposing to provide MH services will be expected to conduct Outreach, Screening, Pre-Admission Assessment and Engagement in accordance with Information Item G of the Performance Contract as a routine part of conducting business (see attached.) Additionally, every applicant applying to provide MH services must provide the full array of applicable services.

Services to be compensated at a Case Rate or Fee for Service in accordance with descriptions found in Information Item G are:

- Psychiatric Diagnostic Interview
- Routine Case Management
- Counseling
- Peer Support
- Supplemental Nursing Services
- Pharmacological Management
- Provision of Medication
- Crisis Intervention Services
- Crisis Follow-Up and Relapse Prevention
- Medication Training and Support
- Psychosocial Rehabilitative Services
- Skills Training and Development Services
- Assertive Community Treatment (ACT) – optional; but if not provided Applicant must agree to enter into a referral MOU with a qualified ACT provider for those consumers who meet the appropriate level of care.

SUD Services

Treatment services for persons with Substance Use Disorders will be procured in accordance with the Program Identification categories and service types displayed in the Table below. The quantity of services to be procured will be set based on the final DSHS allocation of funds for these services.

Prog ID	Service Type
TRA	Ambulatory Detoxification
	Residential Detoxification
	Methadone
	Buprenorphine

	OST Immunization/Screening
	Intensive Residential
	Supportive Residential
	Outpatient
TRF	Ambulatory Detoxification
	Residential Detoxification
	Intensive Residential (W&C)
	Supportive Residential (W&C)
	Intensive Residential
	Supportive Residential
	Outpatient
TRY	Intensive Residential
	Supportive Residential
	Outpatient

Payment

Each Applicant will be expected to propose a fee to be paid for each service or a case rate to be paid for each person served. Instructions and the format for presenting these proposals will be included in the separate Service Addenda.

MH and SUD providers for which the organizations served under 200 people in FY 2015 will be eligible for a contract that pays fee-for-service. Fee-for-service rates will not exceed the current Medicaid rate or state determined SUD rate. Proposed rates for residential services should be based on an all-inclusive day rate.

All MH and SUD providers may propose a case rate for payment of services that is paid prospectively and settled up to the actual number served every quarter. The case rate could provide for varied payment based on the level of care of the patient.

## Information Item G ADULT AND CHILD SERVICE DEFINITIONS

### Adult Mental Health - SERVICE DEFINITIONS:

#	Service	Description
1.	Outreach.	Activities provided to reach and link to services individuals who often have difficulty obtaining appropriate behavioral health services due to factors such as acute behavioral symptomatology, economic hardship, homelessness, unfamiliarity with or difficulty in accessing community behavioral health care services and other support services, fear of mental illness, and related factors. This service may be provided in a variety of settings, including homes, schools, jails, streets, shelters, public areas, or wherever the individual is found.
2.	Hotline  <i>This service satisfies the requirements of Title 7 of the Texas Health and Safety Code §534.053(a)(1)</i>	A continuously available telephone service that provides information, support, referrals, and screening and intervention that responds to callers 24 hours per day, 7 days per week.
3.	Screening  <i>This service satisfies the requirements of Title 7 of the Texas Health and Safety Code §534.053(a)(1)</i>	Activities performed by a Qualified Mental Health Professional – Community Services (QMHP-CS) to gather triage information to determine the need for in-depth assessment. The QMHP-CS collects this information through face-to-face or telephone interviews with the individual or collateral.

#	Service	Description
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4.	<p>Extended Observation</p> <p><i>This service satisfies the requirements of Title 7 of the Texas Health and Safety Code §534.053(a)(1), (2), (3)</i></p>	<p>Up to 48 hour emergency and crisis stabilization service that provides emergency stabilization in a secure and protected, clinically staffed (including medical and nursing professionals), psychiatrically supervised treatment environment with immediate access to urgent or emergent medical evaluation and treatment. Individuals are provided appropriate and coordinated transfer to a higher level of care when needed.</p>
5.	<p>* Psychiatric Diagnostic Interview Examination</p> <p><i>This service satisfies the requirements of Title 7 of the Texas Health and Safety Code §534.053(a)(3)</i></p>	<p>Psychiatric Diagnostic Interview Examination. A licensed professional practicing within the scope of his or her license must provide this service and document as described in the most current version of Title 25 Texas Administrative Code (TAC), Part 1, Chapter 412, Subchapter G, Section 412.322(b) <i>Mental Health (MH) Community Services Standards</i>.</p>
6.	<p>Pre-Admission Assessment</p> <p><i>This service satisfies the requirements of Title 7 of the Texas Health and Safety Code §534.053(a)(3)</i></p>	<p>Pre-Admission QMHP-CS Assessment – A face-to-face assessment of the individual conducted by a QMHP-CS for the purposes of determining eligibility for services which includes gathering and documenting the information in accordance with 25 TAC, Part 1, Chapter 412, Subchapter G, Section 412.314(d)(2) and Section 412.322(a)(1)-(10) <i>MH Community Services Standards</i>.</p>
7.	<p>Engagement Activity</p>	<p>Activities with the client or collaterals (in accordance with confidentiality requirements) in order to develop treatment alliance and rapport with the client and includes activities such as enhancing the individual’s motivation, providing an explanation of services recommended, education on service value, education on adherence to the recommended level of care (LOC) and its importance in recovery, and short term planned activities designed to develop a therapeutic alliance and strengthen rapport. This service shall not be provided</p>

#	Service	Description
		in a group.
8.	<p>* Routine Case Management</p> <p><i>This service satisfies the requirements of Title 7 of the Texas Health and Safety Code §534.053(a)(4), (5)</i></p>	<p>Primarily site-based services that assist an adult, child or youth, or caregiver in gaining and coordinating access to necessary care and services appropriate to the individual's needs. Routine Case Management activities shall be provided in accordance with 25 TAC, Part 1, Chapter 412, Subchapter I, <i>MH Case Management Services</i>. <u>Contractor shall not subcontract for the delivery of these services.</u></p>
9.	<p>* Counseling</p> <p><i>This service satisfies the requirements of Title 7 of the Texas Health and Safety Code §534.053(a)(3)</i></p>	<p>Individual, family and group therapy focused on the reduction or elimination of a client's symptoms of mental illness and increasing the individual's ability to perform activities of daily living. Cognitive-Behavioral Therapy (CBT) is the selected Evidence-Based Practice (EBP) for adult counseling services. For persons with Post Traumatic Stress Disorder (PTSD), Cognitive Processing Therapy (CPT) is the selected EBP for trauma victims. Counseling shall be provided by a Licensed Practitioner of the Healing Arts (LPHA), practicing within the scope of his or her own license or by an individual with a master's degree in a human services field pursuing licensure under the direct supervision of an LPHA, if not billed to Medicaid. This service includes treatment planning to enhance recovery and resiliency. Providers should refer to Information Item A Cognitive Behavioral Therapy Competency Policy for guidelines regarding who is able to provide both CBT &amp; CPT and the requirements to do so.</p>
10.	Peer Support	<p>Activities provided between and among clients who have common issues and needs that are client-motivated, initiated, and/or managed and promote wellness, recovery, and an independent life in the community.. Contractor may use General Revenue funding to assist in the delivery of services provided under Texas Resilience and Recovery (TRR), or provide outreach through peer facilitated services, e.g., drop in centers, peer counseling, peer support groups, and peer led education groups. This service does not include Mental Health Rehabilitative Services provided by "Peer Providers."</p>

11.	* Respite Services	Services provided for temporary, short-term, periodic relief for primary caregivers. Program-based respite
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#	Service	Description
	<i>This service satisfies the requirements of Title 7 of the Texas Health and Safety Code §534.053(a)(4)</i>	services are provided at temporary residential placement outside the client's usual living situation. Communitybased respite services are provided by respite staff at the client's usual living situation. Respite includes both planned respite and crisis respite to assist in resolving a crisis situation.
<b>MEDICATION SERVICES</b>		
12.	* Supplemental Nursing Services  <i>This service satisfies the requirements of Title 7 of the Texas Health and Safety Code §534.053(a)(6)</i>	A service provided to a client by a licensed nurse or other qualified and properly trained personnel working under the supervision and delegation of a physician or Registered Nurse (RN), as provided by state law, to ensure the direct application of a psychoactive medication to the client's body by any means (including handing the client a single dose of medication to be taken orally), and to assess target symptoms, side effects and adverse effects, potential toxicity, and the impact of psychoactive medication for the client and family. This service includes such activities as checking a client's vital signs, refilling pill packs, monitoring selfadministration of medications, pill pack counts, conducting lab draws, and evaluating the severity of side effects during a home visit. This service does not include physician services, nursing services incidental to physician services, case management, or the rehabilitative services of "psychiatric nursing services" or "medication related services." This service may be provided in a clinic setting, client home, or other community setting.
13.	* Pharmacological Management  <i>This service satisfies the requirements of Title 7 of the Texas Health and Safety Code §534.053(a)(3), (6)</i>	A service provided by a physician or other prescribing professional which focuses on the use of medication and the in-depth management of psychopharmacological agents to treat a client's signs and symptoms of mental illness.



14.	* Provision of Medication  <i>This service satisfies</i>	Ensuring the provision of psychoactive medication benefits to clients registered in the Client Admission and Registration system (CARE), who have no source of funds for such, as determined to be medically necessary and as prescribed by an authorized provider of Contractor.
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#	Service	Description
	<i>the requirements of Title 7 of the Texas Health and Safety Code §534.053(a)(6)</i>	

#		REHABILITATIVE SERVICES
15.	<p>* Crisis Intervention Services</p> <p><i>This service satisfies the requirements of Title 7 of the Texas Health and Safety Code §534.053(a)(1), (3), (7)</i></p>	<p>Interventions in response to a crisis in order to reduce symptoms of severe and persistent mental illness or emotional disturbance and to prevent admission of an individual or client to a more restrictive environment. Shall be provided in accordance with 25 TAC, Part 1, Chapter 416, Subchapter A, <i>MH Rehabilitative Services, Rule §416.7</i>. The provision of Crisis Intervention Services to collaterals is limited to the coordination of emergency care services as defined, and outlined in the provision of crisis services within 25 TAC, Part 1, Chapter 412, Subchapter G, Division 3, <i>MH Community Standards</i>.</p>
16.	<p>* Medication Training and Support</p> <p><i>This service satisfies the requirements of Title 7 of the Texas Health and Safety Code §534.053(a)(6)</i></p>	<p>Education and guidance about medications and their possible side effects as described in 25 TAC, Part 1, Chapter 416, Subchapter A <i>MH Rehabilitative Services, Rule §416.8</i>, , provided to consumers and family members. The department has reviewed and approves the use of the materials that are available on the department's internet site at <a href="http://www.dshs.state.tx.us/mhsa/patient-family-ed/">http://www.dshs.state.tx.us/mhsa/patient-family-ed/</a></p>
17.	<p>* Psychosocial Rehabilitative Services</p> <p><i>This service satisfies the requirements of Title 7 of the Texas Health and Safety Code §534.053(a)(1), (3), (7)</i></p>	<p>Social, educational, vocational, behavioral, and cognitive interventions provided by members of a client's therapeutic team that address deficits in the individual's ability to develop and maintain social relationships, occupational or educational achievement, independent living skills, and housing, that are a result of a severe and persistent mental illness. This service includes treatment planning to facilitate recovery. Shall be provided in accordance with 25 TAC, Part 1, Chapter 416, Subchapter A, <i>Mental Health Rehabilitative Services</i>.</p>

18.	* Skills Training and Development Services	Training provided to a client that addresses the severe and persistent mental illness and symptom-related problems that interfere with the individual's functioning, provides opportunities for the individual to acquire and improve skills needed to function as appropriately and independently as possible in the community, and facilitates the individual's community integration and increases his or her community tenure. This service may
	<i>This service satisfies the requirements of Title 7 of the Texas Health and Safety Code §534.053(a)(3), (7)</i>	address skill deficits in vocational and housing. Shall be provided in accordance with 25 TAC, Part 1, Chapter 416, Subchapter A <i>Mental Health Rehabilitative Services</i> , Rule §416.10.
19.	* Day Programs for Acute Needs  <i>This service satisfies the requirements of Title 7 of the Texas Health and Safety Code §534.053(a)(3), (7)</i>	Day programs for acute needs provide short-term, intensive treatment to an individual who requires multidisciplinary treatment in order to stabilize acute psychiatric symptoms or prevent admission to a more restrictive setting. Shall be provided in accordance with 25 TAC, Part 1, Chapter 419, Subchapter L, <i>MH Rehabilitative Services</i> .
		SPECIALIZED SERVICES

20.	<p>*Flexible Funds <i>This service satisfies the requirements of Title 7 of the Texas Health and Safety Code §534.053(a)(4)</i></p>	<p>Funds utilized for clinical or non-clinical supports, justified in the treatment plan, to assist clients in developing and maintaining healthy community integration. These supports must also be directly related to the individual's mental illness and recovery process.</p> <p><u>Non-Clinical Supports</u> - Services for assisting individuals to facilitate and support independent living, which are directly related to the individual's mental illness and recovery process. Services include, but are not limited to: assistance with rent and utility deposits, initial rent/utilities or temporary rental/utilities assistance, housewares, or other necessities.</p> <p><u>Clinical Supports</u> - An array of specialized services in the community that the Local Mental Health Authority does not provide which would assist the individual in his/her treatment. Examples include, but are not limited to: residential COPS-D or detox services, or medical/dental assistance related to the individual's behavioral health disorder.</p>
21	<p>* Co-Occurring Psychiatric Substance Use Disorder (COPSD)</p> <p><i>This service approach satisfies the requirements of Title 7 of the Texas Health and Safety Code §534.053(a)(3), (7)</i></p>	<p>Intervention services offered within programs that are part of the TRR service array to meet the needs of people with co-occurring disorders. COPSD treatments integrate mental health and substance abuse interventions at the level of provider engagement. COPSD is integrated treatment provided by the same clinicians or teams of clinicians, working in one setting, to provide appropriate mental health and substance abuse interventions in coordination to support persons in their recovery.</p> <p>Provider treatment specialists are trained to treat both substance use disorders and serious mental illnesses. Treatment is initiated in a stage-wise approach with different service provided at different stages. Motivational interventions are utilized in all stages inclusive of the engagement and persuasion stage. Counseling services guided by a cognitive-behavioral approach are utilized in active treatment and relapse prevention stages.</p> <p>Intervention services are provided in multiple formats including individual, peer/group, self-help, and family. Medication services are coordinated with other services to promote recovery.</p>

22.	<p>* Supported Employment</p> <p><i>This service satisfies the requirements of Title 7 of the Texas Health and Safety Code §534.053(a)(3), (7)</i></p>	<p>Intensive services designed to result in employment stability and to provide individualized assistance to clients in choosing and obtaining employment in integrated work sites in regular community jobs. Includes activities such as assisting the individual in finding a job, helping the individual complete job applications, job development*, and assisting with learning job-specific skills. This service includes treatment planning to facilitate recovery. Concurrent rehabilitative training should be identified as a separate encounter with the appropriate rehabilitative service code.</p> <p>*Job development is an activity essential to providing evidence-based supported employment. It is a systematic approach by the employment specialist that focuses on developing relationships with potential employers in an effort to find job matches for clients. It includes advocating with employers, employer negotiations and other networking activities. Job development may count as a collateral contact only when:</p> <ol style="list-style-type: none"> <li>1. a contractor has a dedicated employment specialist** who is providing the job development service and;</li> <li>2. the job development contact is focused on a specific consumer</li> </ol> <p>**For the purposes of this document, a dedicated employment specialist is someone who spends 90% of their time providing supported employment services.</p>
23.	<p>* Supported Housing</p>	<p>Activities to assist clients in choosing, obtaining, and maintaining regular, integrated housing. Services consist of individualized assistance in finding and moving into habitable, regular, integrated (i.e., no more than 50</p>
	<p><i>This service satisfies the requirements of Title 7 of the Texas Health and Safety Code §534.053(a)(3)</i></p>	<p>percent of the units may be occupied by clients with serious mental illness), and affordable housing. Includes: <u>Housing Assistance</u> - Funds for rental assistance (unless the Contractor has and documents evidence that housing is affordable for people on Supplemental Security Income (SSI) or that rental assistance funds are guaranteed from another source). To receive rental assistance, clients must be willing to make application for Section 8/Public Housing or have a plan to increase personal income so housing will become affordable without assistance. Housing assistance without services and supports cannot be counted as supported housing. <u>Services and Supports</u> - Assistance in locating, moving into and maintaining regular integrated housing that is habitable. This service includes treatment planning to facilitate recovery. While activities that fall under “services and supports” cannot be billed as rehabilitative services, concurrent rehabilitative training should be identified as a separate encounter with the appropriate rehabilitative service code.</p>

24.	<p>*Assertive Community Treatment (ACT) Urban ACT and Rural ACT</p> <p><i>This service model satisfies the requirements of Title 7 of the Texas Health and Safety Code §534.053(a)(3), (7)</i></p>	<p>ACT is a team-based program that provides treatment, rehabilitation and support services to clients who have a history of multiple hospitalizations (two or more in 180 days or four or more in two years) or at least one hospitalization of greater than 30 days duration in the last two years. Clients identified as needing ACT services shall be prioritized for supported housing, supported employment, and co-occurring psychiatric and substance use disorder (COPSD) services as needed. ACT uses an integrated services approach merging clinical and rehabilitation staff expertise (e.g., psychiatric, substance abuse, vocational/employment, supported housing) within one mobile service delivery system. Accordingly, there will be minimal referral of clients to other programs for treatment, rehabilitation, and support services. Limited use of group activities designed to reduce social isolation, or address substance use/abuse issues is also acceptable as part of ACT.</p> <p>ACT includes an Urban ACT program and Rural ACT program serving clients with an LOC-R = 4. The Urban ACT team serves a client base of 60 or more within a local service area or has a population density of 300 or more persons per square mile in the local service area. The Rural ACT team serves a client base of less than 60 within a local service area. Both the Urban ACT and Rural ACT programs shall follow the program description, Fidelity Measures,</p> <p><u>Urban ACT:</u> The Urban ACT team shall maintain a small client-to-staff ratio of 10:1. Urban ACT is a self-contained program with staff members dedicated to the ACT team. The client-to-staff ratio shall take into consideration evening and weekend hours, needs of special populations, and geographical areas to be covered. Flexibility, accessibility, and timeliness of service delivery are reflected in the team's ability to provide needed support and skills training to clients and their natural support system on evenings and weekends as needed. For all the Urban ACT consumers combined the Urban ACT team shall provide an average of 10 service hours per month;</p>
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and a minimum of 3.5 hours of service per client per month. Services are provided away from the office 80 percent of the time. The Urban ACT team shall maintain 24 hour responsibility and availability for covering and managing psychiatric crises for Urban ACT clients. Urban ACT team staffing shall include .15 full time equivalent (FTE) psychiatrist for every 30 consumers (or. 25 per 50 consumers) who works directly with and is assigned to the ACT team and at least 1.0 dedicated FTE RN providing direct services. The ACT Team Leader or Program Manager is an LPHA except in the case where an LMHA is granted a waiver from DSHS. Eighty percent of the ACT team members must have at least a bachelor's degree or be licensed. This service includes treatment planning to facilitate recovery.

Rural ACT:

The Rural ACT team must maintain a small caseload to include no more than eight ACT consumers (client-to-staff ratio of 8:1) in addition to consumers served in other LOCs. Total caseload should be lower than caseloads for staff who serve consumers in LOCs other than ACT. The client-to-staff ratio shall take into consideration evening and weekend hours, needs of special populations, and geographical areas to be covered; as well as to provide the intensity of services needed based on the clinical severity for consumers in ACT and to meet service requirements for the consumers they serve in any of the LOCs. Flexibility, accessibility, and timeliness of service delivery are reflected in the team's ability to provide needed support and skills training to clients and their natural support system on evenings and weekends as needed. For all the Rural ACT consumers combined the Rural ACT team shall provide an average of 10 service hours per month; and a minimum of 3.5 hours of service per client per month. Services are provided away from the office 80 percent of the time. The Rural ACT team shall maintain 24 hour responsibility and availability for covering and managing psychiatric crises for Rural ACT clients. The psychiatrist shall be available to provide services to individuals in ACT services and shall be available for consultation by Rural ACT team staff at all times. An RN shall be a part of the Rural ACT team, although the RN may also have other duties within a community mental health center. The ACT Team Leader or Program Manager is an LPHA except in the case where an LMHA is granted a waiver from DSHS. Eighty percent of the ACT team members must have at least a bachelor's degree or be licensed. This service includes treatment planning to facilitate recovery.

**RESIDENTIAL SERVICES**

25.	<p>* Inpatient Hospital Services</p> <p><i>This service satisfies the requirements of Title 7 of the Texas Health and Safety Code §534.053(a)(1), (2)</i></p>	<p>Hospital services staffed with medical and nursing professionals who provide 24 hour professional monitoring, supervision, and assistance in an environment designed to provide safety and security during acute psychiatric crisis. Staff provides intensive interventions designed to relieve acute psychiatric symptomatology and restore patient's ability to function in a less restrictive setting. The hospital shall be contracting with or operated by Contractor.</p>
26.	<p>* Crisis Stabilization Unit</p> <p><i>This service satisfies the requirements of Title 7 of the Texas Health and Safety Code §534.053(a)(1), (2)</i></p>	<p>Short-term residential treatment designed to reduce acute symptoms of mental illness provided in a secure and protected clinically staffed, psychiatrically supervised, treatment environment that is licensed under and complies with a crisis stabilization unit licensed under Chapter 577 of the Texas Health and Safety Code and Title 25, TAC, Part 1, Chapter 411, Subchapter M (relating to Standards of Care and Treatment in Crisis Stabilization Units).</p>
27.	<p>* Crisis Residential Treatment</p> <p><i>This service satisfies the requirements of Title 7 of the Texas Health and Safety Code §534.053(a)(1), (2)</i></p>	<p>Short-term, community-based residential treatment to persons with some risk of harm or who may have fairly severe functional impairment who require direct supervision and care but do not require hospitalization.</p>
28.	<p>* Residential Treatment</p>	<p>Twenty-four hour specialized living environments. Includes administration of medications, room and board, and all daily living needs. Adult Foster Care, Personal Care Homes, and Assisted Living Facilities are included in this category.</p>
		<p>CRISIS SERVICES</p>



29.	* Crisis Flexible Benefits	Non-clinical supports that reduce the crisis situation, reduce symptomatology and enhance an individual's ability to remain in the home or community. Benefits in adult mental health services include spot rental, partial rental subsidies, respite, utilities, emergency food, housewares, clothing, transportation assistance, and residential services.
30.	* Safety Monitoring	Ongoing observation of an individual to ensure the individual's safety. An appropriate staff person must be continuously present in the individual's immediate vicinity, provide ongoing monitoring of the individual's mental and physical status, and ensure rapid response to indications of a need for assistance or intervention. Safety monitoring includes maintaining continuous visual contact with frequent face-to-face contacts as needed.
31.	* Crisis Follow-Up and Relapse Prevention <i>This service satisfies the requirements of Title 7 of the Texas Health and Safety Code §534.053(a)(3)</i>	A service provided to or on behalf of individuals who are not in imminent danger of harm to self or others but require additional assistance to avoid recurrence of the crisis event. The service is provided to ameliorate the situation that gave rise to the crisis event, ensure stability, and prevent future crisis events.
32.	* Crisis Transportation	Transporting individuals receiving crisis services or Crisis Follow-up and Relapse Prevention services from one location to another. Transportation is provided in accordance with state laws and regulations by law enforcement personnel, or, when appropriate, by ambulance or qualified staff.

**Children's Mental Health—SERVICE DEFINITIONS:**

	Service	Description
1.	Outreach	Activities provided to reach and to link services to individuals who often have difficulty obtaining appropriate behavioral health services due to factors such as acute behavioral symptomatology, economic hardship, homelessness, unfamiliarity with or difficulty in accessing community behavioral health care services and other support services, fear of mental illness, and related factors. This service may be provided in a variety of settings, including homes, schools, jails, streets, shelters, public areas, or wherever the individual and their family are found.

2.	<p>Hotline</p> <p><i>This service satisfies</i></p>	<p>A continuously available telephone service that provides information, support, referrals, screening and intervention that responds to callers 24 hours per day, 7 days per week.</p>
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	Service	Description
	<p><i>the requirements of Title 7 of the Texas Health and Safety Code §534.053(a)(1)</i></p>	
3.	<p>Screening</p> <p><i>This service satisfies the requirements of Title 7 of the Texas Health and Safety Code §534.053(a)(1)</i></p>	<p>Activities performed by a Qualified Mental Health Professional – Community Services (QMHP-CS) to gather triage information to determine the need for in-depth assessment. The QMHP-CS collects this information through face-to-face or telephone interviews with the individual, caregiver, or collateral. The service includes screenings to determine if the individual’s need is emergent or urgent (which is conducted prior to the face-to-face assessment to determine the need for emergency services).</p>
4.	<p>Extended Observation</p> <p><i>This service satisfies the requirements of Title 7 of the Texas Health and Safety Code §534.053(a)(1), (2),(3)</i></p>	<p>Up to 48 hour emergency and crisis stabilization service that provides emergency stabilization in a secure and protected, clinically staffed (including medical and nursing professionals), psychiatrically supervised treatment environment with immediate access to urgent or emergent medical evaluation and treatment. Individuals are provided appropriate and coordinated transfer to a higher level of care when needed.</p>

5.	<p>* Psychiatric Diagnostic Interview Examination</p> <p><i>This service satisfies the requirements of Title 7 of the Texas Health and Safety Code §534.053(a)(3)</i></p>	<p>Psychiatric Diagnostic Interview Examination provided by a licensed professional practicing within the scope of their license must provide this service and document as described in the most current version of Title 25 Texas Administrative Code (TAC), Part 1, 412, Subchapter G, Section 412.315(a)(5) <i>MH Community Services Standards.</i></p>
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	Service	Description
6.	<p>Pre-Admission Assessment</p> <p><i>This service satisfies the requirements of Title 7 of the Texas Health and Safety Code §534.053(a)(3)</i></p>	<p>Pre-Admission QMHP-CS Assessment – A face-to-face assessment of the individual conducted by a QMHPCS for the purposes of determining eligibility for services which includes gathering and documenting the information described in the most current version of 25 TAC, Part 1, Chapter 412, Subchapter G, Section 412.314(d)(2) and Section 412.322(a)(1)-(10) <i>MH Community Services Standards.</i></p>
7.	<p>Engagement Activity</p>	<p>Short term planned activities with the child/youth, caregiver and/or legally authorized representative (LAR) to develop treatment alliance and rapport with the child/youth, caregiver and/or LAR. Activities include but are not limited to: enhancing the child/youth and/or caregiver/LAR’s motivation to participate in services; explaining recommended services; and providing education regarding value of services, adherence to the recommended level of care and its importance in recovery. This service shall not be provided in a group, and shall be provided in accordance with confidentiality requirements.</p>

8.	<p>* Routine Case Management</p> <p><i>This service satisfies the requirements of Title 7 of the Texas Health and Safety Code §534.053(a)(4), (5)</i></p>	<p>Primarily site-based services that assist a child/youth, or caregiver/LAR in obtaining and coordinating access to necessary care and services appropriate to the individual's needs. Routine Case Management activities shall be provided in accordance with 25 TAC, Part 1, Chapter 412, Subchapter I, <i>MH Case Management Services</i>. <u>Contractor shall not subcontract for the delivery of these services.</u></p>
9.	<p>* Intensive Case Management</p> <p><i>This service satisfies the requirements of Title 7 of the Texas</i></p>	<p>Activities to assist a child/youth and caregiver/LAR in obtaining and coordinating access to necessary care and services appropriate to the individual's needs. Wraparound Planning is used to develop the Case Management Plan. Intensive Case Management activities shall be provided in accordance with 25 TAC, Part 1, Chapter 412, Subchapter I, <i>MH Case Management Services</i>. <u>Contractor shall not subcontract for the delivery of these services.</u></p>

	Service	Description
	<p><i>Health and Safety Code §534.053(a)(4), (5)</i></p>	

10.	<p>* Counseling</p> <p><i>This service satisfies the requirements of Title 7 of the Texas Health and Safety Code §534.053(a)(4)(5)(6)(7))</i></p>	<p>Individual, family, and group therapy focused on the reduction or elimination of a child/youth's symptoms of emotional disturbance and increasing the individual's ability to perform activities of daily living. Cognitive Behavioral Therapy (CBT) is the selected treatment model for Children's Mental Health (CMH) counseling services. Trauma-Focused Cognitive Behavioral Therapy is the approved counseling treatment model for children/youth with trauma disorders or children/youth whose functioning or behavior is affected by their history of traumatic events. DSHS approved CBT protocols for treating children/youth for depression and anxiety are outlined in the Texas Resilience and Recovery Utilization Management Guidelines. Providers should refer to Information Item A Cognitive Behavioral Therapy (CBT) Competency Policy for guidelines regarding who is able to provide CBT and the requirements to do so.</p> <p>Additional models of counseling available to children age 3-5 include Parent-Child Psychotherapy (Dyad Therapy) and Play Therapy. These models must be used as outlined in the Texas Resilience and Recovery Utilization Management Guidelines.</p> <p>Counseling services includes treatment planning to enhance recovery and resiliency.</p> <p>All counseling services shall be provided by a Licensed Practitioner of the Healing Arts (LPHA), practicing within the scope of his or her own license or by an individual with a master's degree in a human services field pursuing licensure under the direct supervision of an LPHA, if not billed to Medicaid.</p>
11.	<p>* Respite Services</p> <p><i>This service satisfies the requirements of Title 7 of the Texas Health and Safety Code §534.053(a)(4)</i></p>	<p>Services provided for temporary, short-term, periodic relief for primary caregivers. Program-based respite services are provided at temporary residential placement outside the child/youth's usual living situation. Community-based respite services are provided by respite staff at the child/youth's usual living situation. Respite includes both planned respite and crisis respite to assist in resolving a crisis situation.</p>
MEDICATION SERVICES		

	Service	Description
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12.	<p>* Supplemental Nursing Services</p> <p><i>This service satisfies the requirements of Title 7 of the Texas Health and Safety Code §534.053(a)(6)</i></p>	<p>A service provided to an individual by a licensed nurse or other qualified and properly trained personnel working under the supervision and delegation of a physician or registered nurse (RN), as provided by state law, to ensure the direct application of a psychoactive medication to the individual's body by any means (including handing the individual a single dose of medication to be taken orally), and to assess target symptoms, side effects and adverse effects, potential toxicity, and the impact of psychoactive medication for the client and family. This service includes such activities as checking an individual's vital signs, refilling pill packs, monitoring self-administration of medications, pill pack counts, conducting lab draws, and evaluating the severity of side effects during a home visit. This service does not include physician services, nursing services incidental to physician services, case management, or the rehabilitative services of "psychiatric nursing services" or "medication related services." This service may be provided in a clinic setting, individual home, or other community setting.</p>
13.	<p>* Pharmacological Management</p> <p><i>This service satisfies the requirements of Title 7 of the Texas Health and Safety Code §534.053(a)(3), (6)</i></p>	<p>A service provided by a physician or other prescribing professional which focuses on the use of medication and the in-depth management of psychopharmacological agents to treat a client's signs and symptoms of mental illness.</p>
14.	<p>* Provision of Medication</p> <p><i>This service satisfies the requirements of Title 7 of the Texas Health and Safety Code §534.053(a)(6)</i></p>	<p>Ensuring the provision of psychoactive medication benefits to individuals registered in the Client Assignment and Registration System (CARE), who have no source of funds for such, as determined to be medically necessary and as prescribed by an authorized representative of Contractor.</p>
REHABILITATIVE SERVICES		
15.	<p>* Crisis Intervention Services</p>	<p>Interventions in response to a crisis in order to reduce symptoms of severe and persistent mental illness serious emotional disturbance and to prevent admission of an individual to a more restrictive environment.</p>

	Service	Description
	<i>This service satisfies the requirements of Title 7 of the Texas Health and Safety Code §534.053(a)(1), (3), (7)</i>	Crisis Intervention services shall be provided in accordance with 25 TAC, Part 1, Chapter 416, Subchapter A, <i>MH Rehabilitative Services, Rule §416.7</i> . The provision of Crisis Intervention Services to collaterals is limited to the coordination of emergency care services as defined, and outlined in the provision of crisis services within 25 TAC, Part 1, Chapter 412, Subchapter G, Division 3, <i>MH Community Standards</i> .
16.	* Medication Training and Support  <i>This service satisfies the requirements of Title 7 of the Texas Health and Safety Code §534.053(a)(6)</i>	Education and guidance about medications and their possible side effects as described in 25 TAC, Part 1, Chapter 416, Subchapter A <i>MH Rehabilitative Services, Rule §416.8</i> , , provided to children, youths, and caregivers and/or LAR. The department has reviewed and approves the use of the materials that are available on the department's internet site at <a href="http://www.dshs.state.tx.us/mhsa/patient-family-ed/">http://www.dshs.state.tx.us/mhsa/patient-family-ed/</a>
17.	* Skills Training and Development Services  <i>This service satisfies the requirements of Title 7 of the Texas Health and Safety Code §534.053(a)(3), (7)</i>	Training provided to an individual and/or the primary caregiver or legally authorized representative (LAR) that addresses the serious emotional disturbance and symptom-related problems that interfere with the individual's functioning, provides opportunities for the individual to acquire and improve skills needed to function as appropriately and independently as possible in the community, and facilitates the individual's community integration and increases his or her community tenure. For 17-year-old youth, skills training and development may also include supported employment and supported housing services delivered as defined above for Adult Mental Health Services. Must be provided in accordance with 25 TAC, Part 1, Chapter 416, Subchapter A <i>MH Rehabilitative Services, Rule §416.10</i> .
		SPECIALIZED SERVICES

	Service	Description
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18.	<p>* Family Case Management</p> <p><i>This service satisfies the requirements of Title 7 of the Texas Health and Safety Code §534.053(a)(3), (4)</i></p>	<p>Activities to assist the individual's family members in accessing and coordinating necessary care and services appropriate to the family members' needs. The need for Family Case Management shall be documented in the individual's Case Management Plan.</p>
19.	<p>* Family Training</p> <p><i>This service satisfies the requirements of Title 7 of the Texas Health and Safety Code §534.053(a)(4)</i></p>	<p>Training provided to the individual's primary caregivers to assist the caregivers in coping and managing with the individual's emotional disturbance. This includes instruction on basic parenting skills and other forms of guidance that cannot be considered rehabilitative skills training. Concurrent rehabilitative training should be identified as a separate encounter with the appropriate rehabilitative service code.</p>
20.	<p>* Family Partner Supports</p> <p><i>This service satisfies the requirements of Title 7 of the Texas Health and Safety Code §534.053(a)(4)</i></p>	<p>Peer mentoring and support provided by Certified Family Partners to the primary caregivers of a child who is receiving mental health community services. This may include introducing the family to the treatment process; modeling self-advocacy skills; providing information, making referrals; providing non-clinical skills training; assisting in the identification of natural/non-traditional and community supports. Family Partners are the parent or LAR of a child or youth with a serious emotional disturbance-and have at least one year of experience navigating a child-serving system (e.g. mental health, juvenile justice, social security, special education) as the LAR to that child or youth. (TAC Title 25 Part 1 Chapter 412 Subchapter G Division 1)</p>
21.	<p>* Parent Support Group</p> <p><i>This service satisfies the requirements of Title 7 of the Texas Health and Safety Code §534.053(a)(4)</i></p>	<p>Routinely scheduled support and informational meetings for the individual's primary caregivers.</p>
22.	<p>* Flexible Funds</p> <p><i>This service satisfies the requirements of Title 7 of the Texas Health and Safety Code §534.053(a)(4)</i></p>	<p>Funds utilized for non-clinical supports that augment the service plan to reduce symptomatology and maintain quality of life and family integration. Non-clinical supports shall be:</p> <ol style="list-style-type: none"> <li>1. Included as strategies in the individual's Case Management Plan;</li> <li>2. Based on the preference of the child/youth and caregiver and focus on the outcomes they choose;</li> </ol>



	Service	Description
		<p>3. Monitored for effectiveness by the Case Manager and adjusted based on effectiveness;  4. Available through General Revenue (GR) funding; and  5. Not readily available through other sources (e.g., other agencies, volunteers)</p> <p>Community supports that may be purchased through Flexible Funds include but are not limited to: tutors, family aides, specialized camps, therapeutic child-oriented activities, temporary child care, temporary kinship care, initial job development and placement activities, initial independent living support, transportation services, short-term counseling for family members who do not meet the child or adult priority population definitions. Authorization of flexible funds should be provided in a timely manner. In cases of emergencies, Flexible Funds should be available within 24 hours of a request by the family. If respite services are provided with Flexible Funds, they should be identified with Procedure Codes H0045ETHA, H0045HA, T1005ETHA, or T1005HA.</p>
<b>RESIDENTIAL SERVICES</b>		
23.	<p>* Inpatient Hospital Services</p> <p><i>This service satisfies the requirements of Title 7 of the Texas Health and Safety Code §534.053(a)(1), (2)</i></p>	<p>Hospital services staffed with medical and nursing professionals who provide 24-hour professional monitoring, supervision, and assistance in an environment designed to provide safety and security during acute psychiatric crisis. Staff provides intensive interventions designed to relieve acute psychiatric symptomatology and restore the individual's ability to function in a less restrictive setting. The hospital shall be contracting with or operated by Contractor.</p>
24.	<p>* Children's Crisis Residential Treatment</p> <p><i>This service satisfies the requirements of Title 7 of the Texas Health and Safety Code §534.053(a)(1), (2)</i></p>	<p>Twenty-four hour, usually short-term residential services provided to an individual demonstrating a psychiatric crisis that cannot be stabilized in a less restrictive setting. This service may use crisis beds in a residential treatment center or crisis respite beds.</p>
<b>CRISIS SERVICES</b>		
25.	<p>* Crisis Flexible Benefits</p>	<p>Non-clinical supports that reduce the crisis situation, reduce symptomatology, and enhance the ability of the child/youth to remain in the home. Examples in children's mental health</p>

	Service	Description
		services include home safety modifications, child care to allow the family to participate in treatment activities, and transportation assistance.
26	* Safety Monitoring	Ongoing observation of an individual to ensure the individual's safety. An appropriate staff person shall be continuously present in the individual's immediate vicinity, provide ongoing monitoring of the individual's mental and physical status, and ensure rapid response to indications of a need for assistance or intervention. Safety monitoring includes maintaining continuous visual contact with frequent face-to-face contacts as needed.

	Service	Description
27	<p>* Crisis Follow-Up and Relapse Prevention</p> <p><i>This service satisfies the requirements of Title 7 of the Texas Health and Safety Code §534.053(a)(3)</i></p>	<p>A service provided to or on behalf of individuals who are not in imminent danger of harm to self or others but require additional assistance to avoid recurrence of the crisis event. The service is provided to ameliorate the situation that gave rise to the crisis event, ensure stability, and prevent future crisis events.</p>
28	<p>* Crisis Transportation</p>	<p>Transporting individuals receiving crisis services or Crisis Follow-up and Relapse Prevention services from one location to another. Transportation is provided in accordance with state laws and regulations by law enforcement personnel, or, when appropriate, by ambulance or qualified staff.</p>
29	<p>* Supported Employment</p> <p><i>This service satisfies the requirements of Title 7 of the Texas Health and Safety Code §534.053(a)(3), (7)</i></p>	<p>Intensive services designed to result in employment stability and to provide individualized assistance to clients in choosing and obtaining employment in integrated work sites in regular community jobs. Includes activities such as assisting the individual in finding a job, helping the individual complete job applications, job development*, and assisting with learning jobspecific skills. This service includes treatment planning to facilitate recovery. Concurrent rehabilitative training should be identified as a separate encounter with the appropriate rehabilitative service code.</p> <p>*Job development is an activity essential to providing evidence-based supported employment. It is a systematic approach by the employment specialist that focuses on developing relationships with potential employers in an effort to find job matches for clients. It includes advocating with employers, employer negotiations and other networking activities. Job development may count as a collateral contact only when:</p> <ol style="list-style-type: none"> <li>1. a contractor has a dedicated employment specialist** who is providing the job development service and;</li> <li>2. the job development contact is focused on a specific consumer</li> </ol> <p>**For the purposes of this document, a dedicated employment specialist is someone who spends 90% of their time providing supported employment services.</p>

30	* Supported Housing	Activities to assist clients in choosing, obtaining, and maintaining regular, integrated housing.
	<i>This service satisfies the requirements of Title 7 of the Texas Health and Safety Code §534.053(a)(3)</i>	<p>Services consist of individualized assistance in finding and moving into habitable, regular, integrated (i.e., no more than 50 percent of the units may be occupied by clients with serious mental illness), and affordable housing. Includes:</p> <p><u>Housing Assistance</u> - Funds for rental assistance (unless the Contractor has and documents evidence that housing is affordable for people on Supplemental Security Income (SSI) or that rental assistance funds are guaranteed from another source). To receive rental assistance, clients must be willing to make application for Section 8/Public Housing or have a plan to increase personal income so housing will become affordable without assistance. Housing assistance without services and supports cannot be counted as supported housing.</p> <p><u>Services and Supports</u> - Assistance in locating, moving into and maintaining regular integrated housing that is habitable. This service includes treatment planning to facilitate recovery. While activities that fall under “services and supports” cannot be billed as rehabilitative services, concurrent rehabilitative training should be identified as a separate encounter with the appropriate rehabilitative service code.</p>

**Adult and Children’s Mental Health—DEFINITIONS:**

		Description
1.	Super User	The CANS or ANSA Super User is the organization’s identified “local expert” or “trainer” in enhancing the reliability of the CANS or the ANSA, who is easily identifiable and accessible to staff. Preferably, the CANS/ANSA Super User is a team lead or clinical supervisor/manager. The following are examples of activities that the CANS/ANSA Super User will likely engage in: individual/group supervision, follow-up face-to-face trainings, desk reviews, inter-rater reliability reviews, and support of CANS/ANSA users with CANS/ANSA administration and scoring.

\* Note: Contractor shall establish a reasonable standard charge for each service containing an asterisk (i.e., \*) above.