DEPARTMENT OF HEALTH & HUMAN SERVICES Centers for Medicare & Medicaid Services 1301 Young Street Dallas, Texas 75202



## **Regional Operations Group**

July 8, 2019

Ms. Jen Steele, State Medicaid Director Department of Health 628 North 4<sup>th</sup> St. Post Office Box 91030 Baton Rouge, LA 70821-9030

Attention: Karen Barnes

RE: State Plan Amendment LA 19-0001

Dear Ms. Steele:

We have reviewed the State's proposed amendment to the Louisiana State Plan submitted under Transmittal Number 19-0001 dated February 1, 2019. This state plan amendment is to request to amend provider and staff qualifications relative to Community Psychiatric Support and Treatment (CPST) and Psychosocial Rehabilitation (PSR) services and to establish a preliminary accreditation requirement for providers of CPST and PSR services.

Based on the information submitted, we have approved the amendment for incorporation into the official Louisiana State Plan with an effective date change of January 1, 2019. A copy of the CMS-179 and approved plan pages are enclosed with this letter.

If you have any questions, please contact Tobias Griffin at (214) 767-4425 or by email at <a href="mailto:Tobias.Griffin@cms.hhs.gov">Tobias.Griffin@cms.hhs.gov</a>.

Sincerely,

Bill Brooks Director

Centers for Medicaid & CHIP Services

Regional Operations Group

Bill Broke

TRANSMITTAL AND NOTICE OF APPROVAL OF STATE PLAN MATERIAL FOR: CENTERS FOR MEDICARE & MEDICAID SERVICES		RANSMITTAL NUMBER 9-0001	2. STATE Louisiana	
		3. PROGRAM IDENTIFICATION: TITLE XIX OF THE SOCIAL SECURITY ACT (MEDICAID)		
TO: REGIONAL ADMINISTRATOR CENTERS FOR MEDICARE & MEDICAID SERVICES DEPARTMENT OF HEALTH AND HUMAN SERVICES	4. F	PROPOSED EFFECTIVE DATE January 1, 2019		
5. TYPE OF PLAN MATERIAL (Check One)  □ NEW STATE PLAN  □ AMENDMENT TO BE CONSIDERED AS NEW PLAN  □ AMENDMENT				
COMPLETE BLOCKS 6 THRU 10 IF THIS IS AN AME	ENDMEN	T (Separate transmittal for each am	endment)	
6. FEDERAL STATUTE/REGULATION CITATION		7. FEDERAL BUDGET IMPACT		
42 CFR 440.60		a. FFY <u>2019</u> \$ <u>0.00</u> b. FFY <u>2020</u> \$ <u>0.00</u>		
8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT		9. PAGE NUMBER OF THE SUPE SECTION OR ATTACHMENT		
Attachment 3.1-A, Item 4.b., Pages 8a-9d (1)		Same ( <del>TN 15-0026) also per</del>	<del>iding</del> TN 18-0025	
Attachment 3.1-A. Item 4.b., Pages 9d(2)		None - New Page		
11. GOVERNOR'S REVIEW (Check One)  GOVERNOR'S OFFICE REPORTED NO COMMENT COMMENTS OF GOVERNOR'S OFFICE ENCLOSED	PST an	Mathematical Math	w State Plan material.	
NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL  12. SIGNATURE OF STATE AGENCY OFFICIAL	16. RETURN TO			
Cudes Rues	VALUE OF THE PROPERTY OF	Jen Steele, Medicaid Director		
13. TYPED NAME	State of Louisiana			
Rebekah E. Gee MD, MPH		Department of Health		
14. TITLE Secretary	P.C	628 North 4 <sup>th</sup> Street P.O. Box 91030		
15. DATE SUBMITTED	Bat	ton Rouge, LA 70821-9030		
February 1, 2019			***************************************	
FOR REGIONAL OFFICE USE ONLY				
17. DATE RECEIVED February 1, 2019	18. DA <sup>-</sup>	TE APPROVED July 3, 2019		
PLAN APPROVED - ONE COPY ATTACHED				
19. EFFECTIVE DATE OF APPROVED MATERIAL January 1, 2019	20. SIG	NAT OF GION FFICIA	<b>-</b>	
21. TYPED NAME Bill Brooks	22. TIT	LE Director Regional Operations Group		
23. REMARKS The State requests a pen and ink change to boxes 8 and 9.				

#### AMOUNT, DURATION, AND SCOPE OF MEDICAL AND REMEDIAL CARE AND SERVICES PROVIDED

LIMITATIONS ON THE AMOUNT, DURATION, AND SCOPE OF CERTAIN ITEMS OF PROVIDED MEDICAL AND REMEDIAL CARE AND SERVICES ARE DESCRIBED AS FOLLOWS:

## **Item 4.b, EPSDT services (continued)**

## Licensed Mental Health Professional 42 CFR 440.60 - Other Licensed Professionals

A licensed mental health professional (LMHP) is an individual who is licensed in the State of Louisiana to diagnose and treat mental illness or substance use disorders. LMHPs include the following individuals licensed to practice independently:

- 1. Medical Psychologists;
- 2. Licensed Psychologists;
- 3. Licensed Clinical Social Workers (LCSWs);
- 4. Licensed Professional Counselors (LPCs);
- 5. Licensed Marriage and Family Therapists (LMFTs);
- 6. Licensed Addiction Counselors (LACs); and
- 7. Advanced Practice Registered Nurse (APRN) must be a nurse practitioner specialist in Adult Psychiatric Mental Health, and Family Psychiatric and Mental Health, or a Certified Nurse Specialist in Psychosocial, Gerontological Psychiatric Mental Health, Adult Psychiatric and Mental Health and Child-Adolescent Mental Health, and may practice to the extent that services are within the APRN's scope of practice.

### **Service Exclusions**

The following services shall be excluded from Medicaid coverage:

- 1. Components that are not provided to, or directed exclusively toward the treatment of, Medicaid eligible children and youth;
- 2. Services provided at a work site which are job tasks oriented and not directly related to the treatment of the needs of children and youth;
- 3. Any services or components in which the basic nature are to supplant housekeeping, homemaking, or basic services for the convenience of children and youth receiving services;
- 4. Services rendered in an institution for mental disease (IMD), other than a psychiatric residential treatment facility (PRTF) or an inpatient psychiatric hospital; and
- 5. The cost of room and board associated with crisis stabilization.

State: Louisiana

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#### AMOUNT, DURATION, AND SCOPE OF MEDICAL AND REMEDIAL CARE AND SERVICES PROVIDED

LIMITATIONS ON THE AMOUNT, DURATION, AND SCOPE OF CERTAIN ITEMS OF PROVIDED MEDICAL AND REMEDIAL CARE AND SERVICES ARE DESCRIBED AS FOLLOWS:

# EPSDT Rehabilitation Services 42 CFR 440.130(d)

Services to the beneficiary's family and significant others are for the direct benefit of the beneficiary, in accordance with the beneficiary's needs and treatment goals identified in the beneficiary's treatment plan, and for the purpose of assisting in the beneficiary's recovery.

## **Service Descriptions**

1. Therapeutic Services: Individualized therapeutic interventions, including assessment, medication management, individual, family, and group therapy, and psychological testing, focus on the maximum reduction of mental disability and restoration to his/her best possible functional level.

Assessment: This service is a comprehensive evaluation of an individual's physical, mental, and emotional health, including issues related to mental health and substance use, along with their ability to function within a community in order to determine service needs and formulate recommendations for treatment. Psychological tests may be utilized during assessment services in order to determine an individual's recommended treatment plan.

Medication Management: Goal-oriented interactions to assess the appropriateness of medications in an individual's treatment; periodically evaluating and re-evaluating the efficacy of the prescribed medications; and providing ongoing management of a medication regimen within the context of an individual's treatment plan.

Individual, Family, and Group Therapy: A structured, goal-oriented therapeutic process in which an individual, group, or family interacts on a face-to-face basis with a qualified provider in accordance with the individuals' treatment plan to resolve problems related to a mental illness, serious emotional disorder and/or substance use disorder that interferes with the individual's or family's functioning and adjustment. Counseling to the beneficiary's family is for the direct benefit of the beneficiary, in accordance with the beneficiary's needs and treatment goals identified in the beneficiary's treatment plan, and for the purpose of assisting in the beneficiary's recovery.

#### Components

- 1. Ongoing assessment of current risk and presenting problem.
- 2. Assistance in implementing social, interpersonal, self-care, and/or independent living skills as outlined in the treatment plan in order to restore stability, support functional gains, and/or adapt to community living.
- 3. Assessing progress toward achievement of treatment goals, and adapting emotional and behavioral management interventions commensurate with progress.

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AMOUNT, DURATION, AND SCOPE OF MEDICAL AND REMEDIAL CARE AND SERVICES PROVIDED LIMITATIONS ON THE AMOUNT, DURATION, AND SCOPE OF CERTAIN ITEMS OF PROVIDED MEDICAL

AND REMEDIAL CARE AND SERVICES ARE DESCRIBED AS FOLLOWS:

#### **Provider Qualifications**

Therapeutic services must be provided by an LMHP, as defined above.

2. Community Psychiatric Support and Treatment (CPST) is a comprehensive service which focuses on reducing the disability resulting from mental illness, restoring functional skills of daily living, building natural supports and solution-oriented interventions intended to achieve identified goals or objectives as set forth in the individualized treatment plan. The supportive intervention component of CPST includes problem behavior analysis, as well as, emotional and behavioral management with a focus on developing skills and improving daily functional living skills in order to restore stability, support functional gains and adapt to community living. CPST is a face-to-face intervention; however, it may include family or other collaterals. Most contacts occur in community locations where child or youth lives, works, attends school, and/or socializes.

**Development of a treatment plan:** includes an agreement with the individual and family members (or other collateral contacts) on the specific strengths and needs, resources, natural supports and individual goals and objectives for that person. The overarching focus is to utilize the personal strengths, resources, and natural supports to reduce functional deficits associated with their mental illness and increase restoration of independent functioning. The agreement should also include developing a crisis management plan.

**Individual supportive interventions:** include problem behavior analysis as well as emotional and behavioral management with the individual member with a focus on restoring skills and improving daily functional living skills. The primary focus is on implementing social, interpersonal, self-care, and independent living skill goals in order to restore stability, support functional gains, and adapt to community living.

**NOTE:** CPST services are rehabilitative services associated with assisting individuals with skill restoration to restore stability, support functional gains and adapt to community living, and should not be confused with psychotherapy or other clinical treatment, which shall only be provided by a licensed professional.

**Skill Restoration:** Includes the practice and reinforcement of independent living skills, use of community resources and daily self-care routines. The primary focus is to restore the basic skills that promote independent functioning of the member and to restore the fullest possible integration of the individual as an active and productive member of his or her family, community, and/or culture with the least amount of ongoing professional intervention.

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#### AMOUNT, DURATION, AND SCOPE OF MEDICAL AND REMEDIAL CARE AND SERVICES PROVIDED

LIMITATIONS ON THE AMOUNT, DURATION, AND SCOPE OF CERTAIN ITEMS OF PROVIDED MEDICAL AND REMEDIAL CARE AND SERVICES ARE DESCRIBED AS FOLLOWS:

Skill restoration also includes assisting the member with effectively responding to or avoiding identified precursors or triggers that would risk their remaining in a natural community location, including assisting the individual and family members or other collaterals with identifying a potential psychiatric or personal crisis, developing a crisis management plan and/or, as appropriate, seeking other supports to restore stability and functioning.

#### **Provider Qualifications**

To qualify as a CPST agency, the agency must be licensed as a behavioral health service provider by the Louisiana Department of Health and be accredited by a national accrediting organization approved by the Department.

Prior to January 1, 2019, agencies providing CPST services must have or have applied for accreditation by an accrediting organization approved by the Department. Agencies are allowed to render CPST services prior to obtaining full accreditation; however, agencies are required to attain a full accreditation status within 18 months of the initial accreditation application date.

Effective January 1, 2019, agencies providing CPST services must be fully accredited, or obtain preliminary accreditation prior to rendering CPST services. Agencies must maintain continuous, uninterrupted full or preliminary accreditation.

Agencies providing CPST services must obtain a full accreditation status within 18 months of the agency's initial accreditation application date.

Mental Health Rehabilitation (MHR) Specialists and Mental Health Rehabilitation (MHR) Professionals rendering CPST services must operate under an agency licensed to provide mental health services. MHR Specialists and MHR Professionals rendering CPST services may be licensed or unlicensed behavioral health specialists meeting state and federal qualifications and requirements to provide CPST services.

Prior to January 1, 2019, MHR Professionals with a master's degree from an accredited university or college in social work, counseling, psychology, sociology or a human services related field are qualified to provide all aspects of CPST, including the individual supportive intervention. Other aspects of CPST, except for the individual supportive behavioral intervention, can be provided by a MHR Specialist, who has a bachelor's degree in social work, counseling, psychology or a related human services field or four years of equivalent education and/or experience working in the human services field.

Effective January 1, 2019, MHR Specialists rendering CPST services must have a minimum of a bachelor's degree from an accredited university or college in social work, counseling, psychology, or sociology. MHR Specialists shall not provide individual supportive behavioral interventions.

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#### AMOUNT, DURATION, AND SCOPE OF MEDICAL AND REMEDIAL CARE AND SERVICES PROVIDED

LIMITATIONS ON THE AMOUNT, DURATION, AND SCOPE OF CERTAIN ITEMS OF PROVIDED MEDICAL AND REMEDIAL CARE AND SERVICES ARE DESCRIBED AS FOLLOWS:

MHR Professionals, who have a master's degree from an accredited university or college in counseling, social work, psychology or sociology, may render all aspects of CPST, including individual supportive behavioral interventions. Any MHR Professional hired prior to January 1, 2019, rendering the individual supportive intervention component of CPST for a licensed and accredited agency who does not possess the minimum master's degree in one of the four listed educational fields, but who has a minimum of a bachelor's degree in social work, counseling, psychology or sociology and who met all master's degree provider qualifications in effect prior to January 1, 2019, may continue to provide all components of CPST including the individual supportive intervention component of CPST for the same licensed provider agency.

Prior to the MHR Professional rendering the master's level aspects of CPST, including the individual supportive intervention component of CPST, for a different provider agency, the MHR Professional must comply with the minimum master's degree provisions established effective January 1, 2019.

Unlicensed MHR Specialists and unlicensed MHR Professionals must receive regularly scheduled clinical supervision from a person meeting the qualifications of an LMHP with experience regarding this specialized mental health service.

3. Psychosocial Rehabilitation (PSR) services are designed to assist children and youth with compensating for or eliminating functional deficits and interpersonal and/or environmental barriers associated with their mental illness and restoring functional skills of daily living. Activities included must be intended to achieve the identified goals or objectives as set forth in the individualized treatment plan.

The intent of psychosocial rehabilitation is to restore the fullest possible integration of children and youth as active and productive members of his/ her family, community, and/or culture with the least amount of ongoing professional intervention. PSR is a face-to-face intervention provided individually or in a group setting. Most PSR contacts may occur in the community or locations where the child or youth lives, works, attends school, and/or socializes.

#### **Components**

- 1. Restoration, rehabilitation and support of social and interpersonal skills to increase community tenure, enhance personal relationships, establish support networks, increase community awareness, coping strategies and effective functioning in the individual's social environment, including home, work and school.
- Restoration, rehabilitation and support of daily living skills to improve self-management of the negative
  effects of psychiatric or emotional symptoms that interfere with a person's daily living. Supporting the
  individual with daily living skills and daily routines necessary to remain in home, school, work and
  community.

**NOTE:** PSR services are psycho-educational services associated with assisting individuals with skill-restoration and rehabilitation, and should not be confused with counseling, psychotherapy or other clinical treatment, which may only be provided by a licensed professional. State: Louisiana

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#### AMOUNT, DURATION, AND SCOPE OF MEDICAL AND REMEDIAL CARE AND SERVICES PROVIDED

LIMITATIONS ON THE AMOUNT, DURATION, AND SCOPE OF CERTAIN ITEMS OF PROVIDED MEDICAL AND REMEDIAL CARE AND SERVICES ARE DESCRIBED AS FOLLOWS:

3. Restoring skills so the member may remain in a natural community location and achieve developmentally appropriate functioning, and assisting the individual with effectively responding to or avoiding identified precursors or triggers that result in functional impairment.

#### **Provider Qualifications**

To qualify as a PSR agency, the agency must be licensed as a behavioral health service provider by the Louisiana Department of Health and be accredited by a national accrediting organization approved by the Department.

Prior to January 1, 2019, agencies providing PSR services must have or have applied for accreditation by an accrediting organization approved by the Department. Agencies are allowed to render PSR services prior to attaining full accreditation; however, agencies are required to attain a full accreditation status within 18 months of the initial accreditation application date.

Effective January 1, 2019, agencies providing PSR services must be fully accredited, or obtain a preliminary accreditation prior to rendering PSR services. Agencies must maintain continuous, uninterrupted full or preliminary accreditation. Agencies providing PSR services must obtain a full accreditation status within 18 months of the agency's initial accreditation application date.

Effective January 1, 2019, MHR Specialists rendering PSR services for a licensed provider agency shall hold a minimum of a bachelor's degree from an accredited university or college in the field of counseling, social work, psychology or sociology.

PSR services may be provided by an agency licensed to provide mental health services. MHR Specialists rendering PSR services must operate under an agency license. MHR Specialists rendering PSR services may be licensed or unlicensed behavioral health specialists meeting state and federal qualifications and requirements to provide PSR services. Any MHR Specialist rendering PSR services for a licensed provider agency shall hold a minimum of a bachelor's degree from an accredited university or college in counseling, social work, psychology, or sociology. Any MHR Specialist hired prior to January 1, 2019, rendering PSR services who does not possess the minimum bachelor's degree as described here, but who met all qualifications in effect prior to January 1, 2019, may continue to provide PSR services for the same licensed provider agency. Prior to the MHR Specialist rendering PSR services for a different provider agency, the MHR Specialist must comply with the minimum bachelor's degree provisions established effective January 1, 2019.

Unlicensed MHR Specialists must receive regularly scheduled clinical supervision from a person meeting the qualifications of an LMHP with experience regarding this specialized mental health service.

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#### AMOUNT, DURATION, AND SCOPE OF MEDICAL AND REMEDIAL CARE AND SERVICES PROVIDED

LIMITATIONS ON THE AMOUNT, DURATION, AND SCOPE OF CERTAIN ITEMS OF PROVIDED MEDICAL AND REMEDIAL CARE AND SERVICES ARE DESCRIBED AS FOLLOWS:

**4. Crisis Intervention (CI)** is provided to a children and youth who are experiencing a psychiatric crisis, designed to interrupt and/or ameliorate a crisis experience including a preliminary assessment, immediate crisis resolution and de-escalation, and referral and linkage to appropriate community services to avoid more restrictive levels of treatment.

The goals of Crisis Interventions are symptom reduction, stabilization, and restoration to a previous level of functioning. All activities must occur within the context of a potential or actual psychiatric crisis. Crisis Intervention is a face-to-face intervention and can occur in a variety of locations, including an emergency room or clinic setting, in addition to other community locations where the child or youth lives, works, attends school, and/or socializes.

## **Provider Qualifications**

To qualify as a CI agency, the agency must be licensed as a behavioral health service provider by the Louisiana Department of Health and be accredited by a national accrediting organization approved by the Department.

Agencies providing CI services must be fully accredited or have applied for accreditation by an accrediting organization approved by the Department prior to providing CI services. Agencies are allowed to render CI services prior to attaining full accreditation; however, agencies must have applied for full accreditation by an accrediting organization approved by the Department, and must attain full accreditation status within 18 months of the initial accreditation application date. Agencies must maintain continuous, uninterrupted accreditation.

CI Specialists rendering CI services must operate under an agency licensed to provide mental health services. CI Specialists rendering CI services may be licensed or unlicensed behavioral health specialists meeting state and federal qualifications and requirements to provide CI services. At a minimum, CI Specialists rendering CI services must be at least 20 years old and have an associate's degree in social work, counseling, psychology or a related human services field, or two years of equivalent education and/or experience working in the human services field. Additionally, the provider must be at least three years older than children and youth under the age of 18. The assessment of risk, mental status and medical stability must be completed by an LMHP with experience regarding this specialized mental health service, practicing within the scope of their professional license.

Unlicensed CI Specialists must receive regularly scheduled clinical supervision from a person meeting the qualifications of an LMHP with experience regarding this specialized mental health service.

5. Crisis Stabilization (CS) services are short-term and intensive supportive resources for children and youth, and their family. The intent of this service is to provide an out-of-home crisis stabilization option for the family in order to avoid psychiatric inpatient and institutional treatment of children and youth by responding to potential crisis situations.

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Attachment 3.1-A Item 4.b, Page 9d(2)

STATE OF LOUISIANA

#### AMOUNT, DURATION, AND SCOPE OF MEDICAL AND REMEDIAL CARE AND SERVICES PROVIDED

LIMITATIONS ON THE AMOUNT, DURATION, AND SCOPE OF CERTAIN ITEMS OF PROVIDED MEDICAL AND REMEDIAL CARE AND SERVICES ARE DESCRIBED AS FOLLOWS:

The goal is to support children, youth and family in ways that will address current acute and/or chronic mental health needs and coordinate a successful return to the family setting at the earliest possible time. During the time the crisis stabilization is supporting the child or youth, there is regular contact with the family to prepare for the child's/youth's return and his/her ongoing needs as part of the family. It is expected that the children and youth, family and crisis stabilization provider are integral members of the treatment team.

To qualify as a CS agency, the agency must be licensed by the Louisiana Department of Health as a Center-Based Respite Care Agency under the Home and Community Based Service Provider license or as a Crisis Receiving Center, or the agency must be licensed by the Louisiana Department of Children and Family Services as a Child Placing Agency.

CS services also work in partnership with the child's/youth's other community-based providers and the custodial agency (for children and youth in state custody). CS services allow children and youth to benefit from a community-based setting while receiving additional intensive treatment and clinical services as needed. The child or youth must require a service that includes direct monitoring by professional behavioral health staff that would not be able to be provided by a less restrictive service.

#### **Provider Qualifications**

Services must be provided by an agency licensed by LDH or the Department of Children and Family Services. CS Specialists rendering CS services may be licensed or unlicensed behavioral health specialists. CS Specialists providing CS services must use clinical programming and a training curriculum approved by LDH. Unlicensed CS Specialists must receive regularly scheduled clinical supervision from a person meeting the qualifications of an LMHP with experience regarding this specialized mental health service.

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