## STATE OF RHODE ISLAND EXECUTIVE OFFICE OF HEALTH AND HUMAN SERVICES

## 10/23/2023 PUBLIC NOTICE OF PROPOSED AMENDMENT TO RHODE ISLAND MEDICAID STATE PLAN

In accordance Rhode Island General Laws 42-35, notice is hereby given that the Executive Office of Health and Human Services (EOHHS) proposes to make the following amendment to the Rhode Island State Plan under Title XIX of the Social Security Act:

#### **Certified Community Behavioral Health Clinics**

EOHHS is seeking approval from the Centers for Medicare and Medicaid Services (CMS) to update Rhode Island's Medicaid State Plan to implement a statewide RI Certified Community Behavioral Health Clinic (CCBHC) program. The model is designed to provide comprehensive mental health and substance use disorder services to vulnerable individuals throughout the life cycle.

These changes are proposed to take effect on February 1, 2024 and is expected to result in an increase in expenditures of \$34.4 million in FFY 24 and \$51.6 million in FFY 25 (all funds).

This proposed amendment is accessible on the EOHHS website (www.eohhs.ri.gov) or available in hard copy upon request (401-462-2407 or RI Relay, dial 711). Interested persons should submit data, views, or written comments by November 22, 2023 to Brittany Church, Executive Office of Health and Human Services, 3 West Rd, Cranston, RI, 02920, or Brittany.Church@ohhs.ri.gov or via phone at (401) 462-2407.

In accordance with the Rhode Island General Laws 42-35-2.8, an oral hearing will be granted on the proposed State Plan Amendment if requested by twenty-five (25) persons, an agency, or by an association having at least twenty-five (25) members. A request for an oral hearing must be made within ten (10) days of this notice.

The Executive Office of Health and Human Services does not discriminate against individuals based on race, color, national origin, sex, gender identity or expression, sexual orientation, religious belief, political belief, or handicap in acceptance for or provision of services or employment in its programs or activities.

Original signed by Richard Charest, Secretary, Rhode Island Executive Office of Health and Human Services
Signed this 23rd day of October, 2023

#### 13D. Rehabilitative Services (cont.)

### **Certified Community Behavioral Health Center Services**

#### Definition:

Certified Community Behavioral Health Center (CCBHC) services include a comprehensive set of outpatient, community-based behavioral health services and supports that take an integrated, whole-person approach through coordination with physical health and social service providers.

#### **Service Description**

The services described in the following table are provided by qualified individual practitioners employed by or affiliated with Rhode Island CCBHCs or their Designated Collaborating Organizations (DCOs)

CCBHC Services Authorized by the Rehabilitative Services Benefits		
Service	Covered Components	Providers
Crisis Services	Services provided to an individual who is experiencing a psychiatric or substance use disorder crisis. Crisis services are designed to interrupt and/or improve a crisis experience. Services include a preliminary assessment; immediate crisis resolution and de-escalation, which could include detox and relapse prevention; and referral and linkage to appropriate community services to avoid more restrictive levels of treatment. Services are available 24/7, and may occur in a variety of clinically appropriate locations.	<ul> <li>Licensed Independent         Practitioner</li> <li>Qualified Mental Health         Professional (QMHP)</li> <li>Master's Degree w/ license to         provide relevant BH service</li> <li>Master's degree without         license with 1 year post         master's degree full time BH         experience</li> <li>Licensed RN w/ ANCC         certification as a psychiatric         and mental health nurse or         licensed RN with 1 year post         RN full time BH experience</li> <li>Principal Counselor</li> <li>Clinical Interns</li> <li>Clinical Supervisors</li> <li>Supervisor/manager</li> </ul>
Adult Substance Abuse Assessment Services	An evaluation of at least 60-90 minutes duration which includes a comprehensive biopsychological assessment designed to determine the client's substance abuse history, diagnosis according to the latest version of the Diagnostic and Statistical Manual of Mental Disorders (DSM), treatment needs, readiness for treatment, and recommended level of care	<ul> <li>Licensed Independent         Practitioner     </li> <li>Master's Degree w/ license to         provide relevant BH service             or experience providing BH             services     </li> <li>Licensed RN w/ ANCC             certification as a psychiatric         and mental health nurse or     </li> </ul>

	according to the American Society of Addiction Medicine Patient Placement Criteria.	licensed RN with 1 year post RN full time BH experience Principal Counselor Clinical Interns Clinical Supervisors Supervisor/manager
Outpatient Counseling	Services provided with a primary purpose of evaluation, treatment and rehabilitation of problems directly related to substance abuse. Services are available to those individuals meeting ASAM PPC-2 criteria for this level of care or, alternatively, to those individuals for whom this level of care can be clinically justified and documented. Services are provided in accordance with a treatment plan approved by the program's clinical director. Covered services included: individual counseling; group counseling; family counseling; and significant other counseling.	Must meet 1 of the following qualifications:  • Licensed Independent Practitioner  • Master's Degree w/ license to provide relevant BH service or experience providing BH services  • Licensed RN w/ ANCC certification as a psychiatric and mental health nurse or licensed RN with 1 year post RN full time BH experience  • Principal Counselor  • Master's Degree staff  • Clinical Interns  • Clinical Supervisors  • Supervisor/manager
Psychiatric Rehabilitation Services	CCBHCs must provide Psychiatric Rehabilitation Services (PRS), as appropriate, to children, adolescents, and adults. PRS include:  1. Community Psychiatric Supportive Treatment Services 2. PSR Assessments, Treatment Planning, Care Coordination	<ul> <li>Certified Rhode Island Community Support Professional</li> <li>Clinical Interns</li> <li>Clinical Supervisors</li> <li>Supervisor/manager</li> </ul>
Peer Support Services	Person-centered services with a rehabilitation and recovery focus. These services are designed to promote skills to cope with and manage psychiatric symptoms while facilitating the use of natural resources and the enhancement of community living skills.  Peer support services must be intended to achieve identified goals and objectives in the individual's treatment plan.	Certified Peer Recovery     Specialist

	Services may be provided one on one or in	
Assertive Community Treatment (ACT)	Services may be provided one-on-one or in group settings.  Assertive Community Treatment (ACT) is an evidence-based practice that improves outcomes for individuals with severe mental illness who are at high risk of homelessness, psychiatric crisis and hospitalizations and involved in the criminal justice system. This mental health program is composed of a multidisciplinary staff, including peer specialists, who work as a team to provide the individualized psychiatric treatment, rehabilitation, and support services clients need for the maximum reduction of physical or mental disability and restoration to their best	<ul> <li>Licensed Independent         Practitioner     </li> <li>Registered Nurse</li> <li>Licensed Clinician</li> <li>Psychiatrist</li> <li>Substance Use Disorder         Specialist     </li> <li>Community Psychiatric         Supports and Treatment         Specialist     </li> <li>Certified Peer Recovery</li> <li>Specialist</li> </ul>
	possible functional level.	<ul><li>Clinical Interns</li><li>Clinical Supervisors</li><li>Supervisor/manager</li></ul>
Child and Adolescent Intensive Treatment Services (CAITS)	Short-term acute behavioral health service designed to provide intensive treatment to children and youth with moderate to severe emotion and/or behavioral disturbance. Services include behavioral counseling and therapy, skill training and development, and treatment plan development.	<ul> <li>Licensed Independent Clinical Social Worker</li> <li>Licensed Marriage and Family Therapist</li> <li>Licensed Mental Health Counselor</li> <li>Licensed Social Worker (MSW or LCSW) under the supervision of an independently licensed clinician</li> <li>Clinical Interns</li> <li>Clinical Supervisors</li> <li>Supervisor/manager</li> </ul>
Community Psychiatric Supportive Treatment (CPST)	Services provided in accordance with an approved treatment plan for the purpose of ensuring the client's stability and continued community tenure by monitoring and providing medically necessary intervention to assist them to manage the symptoms of their illness. Services include counseling, support, and treatment services identified in the person's individualized treatment plan; and assistance in further developing the competencies the person needs to increase his or her social support network and to minimize social isolation and withdrawal brought on by behavioral health issues	<ul> <li>Licensed/Credentialed Mental Health Professionals</li> <li>Community Psychiatric Support Specialists</li> <li>Clinical Interns</li> <li>Clinical Supervisors</li> <li>Supervisor/manager</li> </ul>

Medication Assisted	Medication-assisted treatment services includes	Licensed Drug Counselor
Treatment (MAT)	the drug component, the provider components, and the behavioral health component. The State will cover all forms of drugs and biologicals that the Food and Drug Administration has approved or licensed for MAT to treat opioid use disorder (OUD), with the exception of methadone which will remain accessible through existing coverage, to align with the Rhode Island CCBHC service array.	Certified Alcohol and Drug Counselors

CCBHCs may contract with Designated Collaborating Organizations (DCOs) to provide CCBHC services. The CCBHC retains responsibility for the overall coordination of a recipient's care, including the services that may be provided by a DCO. DCOs must comply with the same provider qualifications as CCBHCs for the specific services they provide.

CCBHC services that involve the participation of a non-Medicaid eligible individual must be for the direct benefit of the beneficiary. The service(s) must actively involve the beneficiary in the sense of being tailored to the beneficiary's individual needs. There may be times when, based on clinical judgment, the beneficiary is not present during the delivery of the service, but remains the focus of the service.

CCBHCs can also provide the following services:

- Personal Assistance Services and Supports (PASS) family-directed services provided in the home and/or the community, helping families of children with special health needs with a child's ability to become more independent, to self-regulate to maintain safety, and to participate in home and community-based services.
- Home-Based Therapeutic Services (HBTS) intensive services to assist families with children with moderate-severe behavioral health, developmental, or physical disabilities. Services are provided in the home and/or community and are intended to support children to help improve a child's functioning in the least restrictive level of care.
- Seven Challenges comprehensive counseling program delivered to youth and young adults aged 12-25 who have been diagnosed with substance use disorders and/or co-occurring disorder.
- Coordinated Specialty Care (CSC) a multi- component, evidence-based, early intervention service for individuals experiencing a first episode of psychosis (FEP) that can improve their quality of life and social and clinical outcomes.

#### **Provider Qualifications**

Certified Community Behavioral Health Clinics are not-for-profit organizations certified and licensed by the Rhode Island Department of Behavioral Healthcare, Developmental Disabilities and Hospitals (BHDDH).

Individual clinicians providing CCBHC services must have at a minimum, the qualifications in accordance with state regulations, as well as education and experience relevant to the service that they are providing.

Qualified Mental Health Professional - a mental health professional who has a minimum of a Master's Degree in a clinical practice or a license as a Registered Nurse, or a license as an Advanced Practice Registered Nurse and who has a minimum of thirty (30) hours of supervised face-to-face emergency services contact experience as a psychiatric emergency service worker in Rhode Island.

**Principal Counselor** - Principal Counselor shall have a least a Master's degree from an accredited program in counseling or clinical psychology and the equivalent of two years of full-time supervised clinical experience in a mental health setting.

#### **Clinical Interns**

- Master's Degree student actively enrolled in an accredited program in behavioral health or related field.
- Supervised by independently licensed clinician.

#### Master's Degree Staff

- CCBHC personnel with a master's degree from an accredited program in behavioral health or related field who are unlicensed or working towards licensure.
- Supervised by independently licensed clinician.

Clinical Supervisor – A clinical supervisor must hold a current and valid Certified Alcohol and Drug Counselor (CADC), Certified Advanced Alcohol and Drug Counselor (CAADC), Certified Co-occurring Disorder Professional (CCDP), Certified Co-occurring Disorders Professional Diplomate (CCDPD), Certified Criminal Justice Addictions Professional (CCJP) OR a specialty credential in another professional discipline in the human services field at the master's level or higher. Requires five (5) years of full-time or 10,000 hours of part-time work experience as a substance use disorder or co-occurring disorder counselor AND two (2) years of full-time or 400 hours of part-time work experience providing clinical supervision to substance use disorder or co-occurring disorder counselors. The two years of clinical supervisor work experience may be included in the five years of counseling work experience. A clinical supervisor requires 200 hours of on-the-job supervision of qualifying work experience with a minimum of 10 hours of supervision in each clinical supervisor domain and 30 hours of clinical supervision education/training.

#### **Credentialed Mental Health Professionals**

• Certified Alcohol and Drug Counselor (CADC) – Requires 300 total hours of relevant education/training to the field of substance use disorders. 120 of the hours must be specific to substance use disorders. 6 of the hours must be in substance use disorders ethics, 6 of the hours must be in confidentiality, 6 of the

hours must be in communicable diseases and 6 of the hours must be in medication assisted treatment. Must also meet one of the following minimum qualifications:

- I. High School Diploma or General Education Diploma (GED) and three (3) years of full-time employment or 6,000 hours of part-time employment.
- II. Associate's degree and two and half (2.5) years of full-time employment or 5,000 hours of part-time employment.
- III. Bachelor's degree and two (2) years of full-time employment or 4,000 hours of part-time employment.
- IV. Master's degree and one (1) year of full-time employment or 2,000 hours of part-time employment.
- Certified Advanced Alcohol and Drug Counselor (CAADC) Requires 180 total hours of relevant education/training to the field of substance use disorders. 6 of the hours must be in substance use disorders ethics, 6 of the hours must be in confidentiality, 6 of the hours must be in communicable diseases, and 6 of the hours must be in medication assisted treatment. Must have a minimum of a master's degree in a relevant field, one (1) year of full-time or 2,000 years of hours of part-time work experience as a drug and alcohol counselor.
- Certified Peer Recovery Specialist Certified Peer Recovery Specialists (CRPS) are credentialed behavioral health care professionals who promote socialization, long-term recovery, wellness, self-advocacy, and connections to the community while serving as a positive role model during service delivery. CPRS must have completed 500 hours of field work as well as 46 hours of education and pass a peer recovery support exam.

Community Psychiatric Supports and Treatment Specialists – provide case management services and must have a minimum of an associate degree with case management training.

**Supervisor/Manager** with relevant master's degree with at least two (2) years' experience or a relevant bachelor's degree with at least three (3) years' experience in a program or environment that provides community integration services.

**Substance Use Disorder Specialist** - minimum of a Bachelor's degree as well as receive appropriate training on case management specific to substance use. A Licensed Chemical Dependency Specialist is permitted in lieu of a Bachelor's degree.

#### **Service Limitations**

CCBHC services cannot be provided in non-community settings, including IMDs, ICF/IID, nursing facilities, or tier B or C of assisted living facilities.

# Methods and Standards for Establishing Payment Rates Certified Community Behavioral Health Center (CCBHC)

The Medicaid program will provide coverage for a bundle of medically necessary services provided by practitioners employed by, or associated with, provider entities to be known as Certified Community Behavioral Health Clinics (CCBHC). CCBHCs are provider entities certified by the Rhode Island Department of Behavioral Health, Developmental Disabilities and Hospitals as meeting the state's qualifications for a CCBHC.

The state agency will reimburse CCBHCs clinic-specific prospective payment system (PPS) rates applicable to providers affiliated with the CCBHC. Payments will be limited to one payment per member per month so long as the individual receives at least one qualifying service. per CCBHC the number of services provided by a given CCBHC within a single month by a clinic user accessing services from CCBHC practitioners. The clinic-specific CCBHC Rehabilitative Services PPS rate will be published on the fee schedule located here: https://eohhs.ri.gov/providers-partners/fee-schedules and is effective for CCBHC rehabilitative services provided on or after February 1, 2024.

#### **Payment Methodology**

The Medicaid program will provide coverage for a bundle of medically necessary services. The payment rate for CCBHC services is based on the total allowable CCBHC costs. A clinic's rate is set by dividing its allowable costs by the number of monthly event in a year. A monthly event is any month in which a patient has at least one event. For the purposes of calculating rates, visits include all visits for CCBHC services including both Medicaid and non-Medicaid visits.

CCBHCs are required to submit annual cost reports which will be used for the state to conduct a thorough review process.

The bundled rate will be paid when a CCBHC delivers at least one of the services specified in the services listed below in sections A and B. Note that the expense of the following encounters is an allowable cost in the cost report, but may not serve alone as a visit for the purpose of monthly billing:

- A collateral event (for example: one that occurs between a CCBHC staff member and an individual other than the identified client, with the client's permission, and involves the sharing of information in support of the client's treatment or service plan)
- A care coordination event
- An outreach event
- Primary care screening event
- A. **Rehabilitative Services** The monthly bundled rate is inclusive of all services described in Attachment 3.1-A, pages 36a through 36g.
- B. Other State Plan Covered Services The Monthly bundled rate also includes services covered elsewhere (see the table below).

CCBHC Activity/Service	State Plan Page
Targeted Case Management	Attachment 3.1-A, supplement to page 8.
Tobacco Cessation	Attachment 3.1-A, page 1

#### **Rate Setting**

The initial rate period will be from February 1, 2024, to June 30, 2024. After the initial rate period for each clinic, the rate period will follow the state fiscal year. For the initial year of the CCBHC program, the state will establish a provider-specific bundled monthly payment rate using provided-submitted cost report data. Estimates shall include the expected cost of providing the full scope of CCBHC services and the expected number of visits for the rate period. Expected costs are based on estimates for salaries and expected visits per Full-Time Employee (FTE) plus projected costs for non-wage expenses, including indirect costs. Rates will be set based on a thorough review process in which the state and the CCBHC coordinate and validate anticipated costs. The initial rates include expected costs and visits that are subject to State review. In subsequent years, the rate will be adjusted annually using the most recent Medicare Economic Index (MEI)

#### **Rate Reimbursement for Special Populations**

For high acuity populations, as described in the CCBHC certification standards, the state will pay a different PPS rate. Individuals in the high acuity group must be re-evaluated every 90 days to determine if they continue to need this level of service intensity.

#### **Allowable Costs**

Allowable direct and indirect costs are identified using requirements in 45 CFR §75 Uniform Administrative Requirements, Cost Principles, and Audit Requirements for HHS Awards and 42 CFR §413 Principles of Reasonable Cost Reimbursement.

#### **Duplication of Payment**

Individuals eligible for CCBHC services are eligible for all needed Medicaid covered services; however, duplicate payment is prohibited. The State will avoid duplication through MMIS to advance an approach to health care that emphasizes recovery, wellness, trauma-informed care, and physical-behavioral health integration.