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PROGRAM INSTRUCTION

TO: Aging Services Access Points
From: Michael E. Festa, Secretary
Date: November 3, 2008
RE: Behavioral Health Services

Background

This Program Instruction introduces mental health services now available to non-waiver consumers in the Home Care Program and the Enhanced Community Options Program. All mental health services must be provided through a community mental health center (CMHC) that contracts with MassHealth and/or a provider under contract to one of the MassHealth agency's behavioral health contractors. Services must be provided in accordance with a mental health plan of care developed by a qualified individual employed by the CMHC or a licensed individual mental health provider, subject to approval by the ASAP. Rates of payment for mental health services are established by the Division of Health Care Finance and Policy (114.3 CMR 6.00).

Services

Services available to consumers are comparable to those available to MassHealth members. They are:

Diagnostic Services: The examination and determination of a patient's physical, psychological, social, economic, educational, and vocational assets and disabilities for the purpose of designing a treatment plan.

Individual Therapy: Psychotherapeutic services provided to an individual.

Couple/Family Therapy: The psychotherapeutic treatment of more than one member of a family simultaneously in the same session.

Group Therapy: The application of psychotherapeutic or counseling techniques to a group of persons, most of whom are not related by blood, marriage, or legal guardianship.

Case Consultation: A scheduled meeting of at least one-half hour's duration between the clinical staff at the mental health center and other providers of treatment concerning a member who is a center's client. Other providers of treatment are professional staff who are not employed by the mental health center but who are actively providing care or treatment for the member. The purpose of case consultation must be at least one of the following:

- (1) to identify and plan for additional services;
- (2) to coordinate a treatment plan with other providers involved in the member's care;
- (3) to review the member's progress; or
- (4) to revise the treatment plan as required.

Emergency Services: Services providing *immediate* face-to-face mental health evaluation, diagnosis, hospital prescreening, treatment, and arrangements for further care and assistance as required, up to 24 hours a day, seven days a week, to individuals showing sudden, incapacitating emotional stress.

Reevaluation: A session between a client and one or more staff members who are authorized to render mental health services for the determination and examination by interview techniques of a patient's physical, psychological, social, economic, educational and vocational assets and disabilities for the purpose of reevaluating the diagnostic formulation, treatment plan and procedures in order to assess aspects of an individual's functioning.

Services must be provided by qualified individuals in accordance with MassHealth regulations or MassHealth behavioral health contractor rules.

Rates

The authorized rates for mental health services provided to Home Care Program and ECOP consumers are established by the Division of Health Care Finance and Policy (114.3 CMR 6.00).

If the consumer has other insurance, the ASAP may pay the consumer's co-pay in lieu of the MassHealth rate if the provider prefers to third party bill.

Protocol

1. Based on a review by the ASAP interdisciplinary team responsible for the consumer's care, the ASAP identifies a consumer's potential need for mental health services.
2. The case manager seeks consent to refer from the consumer. Referrals for mental health services may not be made without the consumer's express permission. Subsequently, the case manager refers to the provider (a CMHC or provider under contract to the ASAP).

3. The provider conducts a comprehensive evaluation of the consumer.
4. The provider prepares a comprehensive written treatment plan that is based on the initial evaluation, incorporates short- and long-term treatment goals, and establishes criteria for determining when termination of behavioral health services is appropriate. The ASAP may pay for up to four visits prior to receiving a treatment plan from the provider.
5. The provider submits the treatment plan to the ASAP for review and approval. The treatment plan must be specific with respect to the amount, frequency, type of therapy, and duration of therapy. Other information may be released to the ASAP only with the consumer's written consent. The treatment plan must be reviewed at the ASAP by the interdisciplinary team and approved by a supervisor. Supervisory approval must be documented in a Journal Entry.
6. In cases in which a consumer receives services from a CMHC, one professional staff member of the CMHC must assume primary responsibility for the consumer.
7. At least once every 90 days, the CMHC must review the consumer's treatment plan and enter into the consumer's record an updated statement of the problems, goals, and treatment activities and, if indicated, a reformulation of the treatment plan.
8. At least once every 90 days, the ASAP interdisciplinary team must meet to review the consumer's ongoing need for behavioral health services. An ASAP supervisor must approve the continuation of treatment paid by the ASAP and such approval must be documented in a Journal Entry.
9. The provider must review each case at termination of treatment and prepare a termination summary that describes the course of treatment and the aftercare program or resources in which the consumer is expected to participate. At the request of the ASAP, the provider will make specific recommendations regarding the continuing provision of home care services to ensure successful community living for the elder.

If you have any questions about this program instruction, please contact Betsy Clifford, Home Care Program Coordinator, at 617-222-7556 or Elizabeth.Clifford@MassMail.State.MA.US.

This program instruction is effective November 1, 2008