



# **BEHAVIORAL HEALTH SERVICES PROVIDER MANUAL**

*Chapter Two of the Medicaid Services Manual*

**Issued March 14, 2017**

**State of Louisiana  
Bureau of Health Services Financing**

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**CHAPTER 2: BEHAVIORAL HEALTH SERVICES**

**SECTION 2.0: OVERVIEW**

**OVERVIEW**

Specialized behavioral health services (SBHS) are mental health services and substance use/addiction disorder services, specifically defined in the Medicaid State Plan and/or applicable waivers. These services shall be administered under the authority of the Louisiana Department of Health (LDH) in collaboration with the Healthy Louisiana plans, as well as through the Coordinated System of Care (CSoC) program contractor, for members enrolled in CSoC. Specialized behavioral health services are distinguished from basic behavioral health (BH) services offered by the Healthy Louisiana plans and the CSoC contractor. Specialized behavioral health services are delivered by psychiatrists and other licensed mental health professionals including licensed psychiatrists, licensed clinical social workers and licensed professional counselors. Basic BH services are mental health and substance use services which are provided to enrollees with emotional, psychological, substance use, psychiatric symptoms and/or disorders that are provided in the member’s primary care physician (PCP) office by the member’s PCP as part of primary care service activities.

This provider manual chapter outlines SBHS offered under Medicaid managed care, §1915(c) and §1915(b) wavier services offered only through the CSoC program contractor (currently Magellan), as well as other specialized behavioral health services offered to CSoC children and Medicaid members enrolled in a Healthy Louisiana plan.

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**PROVIDER REQUIREMENTS**

A provider must be enrolled in the Medicaid Program and meet the provider qualifications at the time service is rendered to be eligible to receive reimbursement through the Louisiana Medicaid Program.

Providers should refer to Chapter 1 – General Information and Administration of the *Medicaid Services Manual* for additional information on provider enrollment and requirements, including general standards for participation. (See Appendix A for information on accessing Chapter 1.)

Healthy Louisiana managed care organizations (MCOs) are responsible for ensuring providers with whom they contract to provide specialized behavioral health services (SBHS), meet the minimum qualification requirements in accordance with the below provisions, all applicable state and federal laws, rules and regulations, and Centers for Medicare and Medicaid Services' (CMS) approved waivers and Medicaid State Plan amendments.

**Licensure and Specific Provider Requirements**

Providers must meet licensure and/or certification requirements, as well as other additional requirements as outlined below:

**Behavioral Health Rehabilitation Services**

Behavioral health rehabilitation services include:

- Psychosocial rehabilitation (PSR);
- Crisis intervention (CI); and
- Community psychiatric supportive treatment (CPST).

**Provider Qualifications**

Providers of behavioral health rehabilitation services must meet the following qualifications:

- Be licensed as a behavioral health services (BHS) provider per R.S. 40:2151 et seq.;
- Be accredited by the Commission on Accreditation of Rehabilitation Facilities (CARF), the Council on Accreditation (COA), or The Joint Commission (TJC).

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Denial, loss of or any negative change in accreditation status, must be reported in writing immediately upon notification to the managed care entities with which the agency contracts;

- Provide services under the supervision of a licensed mental health professional (LMHP) or physician who is acting within the scope of his/her professional license and applicable state law;
- Arrange for criminal background checks and maintain documentation that confirms all persons, prior to employment, pass criminal background checks through the Louisiana Department of Public Safety (DPS), State Police. If the results of any criminal background check reveal that the potential employee (or contractor) was convicted of any offenses against a child/youth or an elderly or disabled person, the provider shall not hire and/or shall terminate the employment (or contract) of such individual. The provider shall not hire an individual with a record as a sex offender nor permit these individuals to work for the provider as a subcontractor. Criminal background checks must be performed as required by R.S. 40:1203 et seq., and in accordance with R.S. 15:587 et seq. Criminal background checks performed over 30 days prior to the date of employment will not be accepted as meeting this requirement;
- Arrange for tuberculosis (TB) testing and maintain documentation that confirms all persons, prior to employment, are free from TB in a communicable state via skin testing to reduce the risk of such infections in recipients and staff. Results from testing performed over 30 days prior to the date of employment will not be accepted as meeting this requirement;
- Establish and maintain written policies and procedures inclusive of drug testing staff to ensure an alcohol and drug-free workplace and a workforce free of substance use;
- Maintain documentation that all direct care staff, who are required to complete first aid, cardiopulmonary resuscitation (CPR) and seizure assessment training, complete the training within 90 days of hire;
- Maintain documentation verifying that staff meet all educational and professional requirements, licensure (where applicable), as well as verification of staff completion of required trainings;
- Ensure and maintain documentation that all unlicensed persons employed by the organization complete training in a recognized crisis intervention curriculum prior to handling or managing crisis calls, which shall be updated annually; and

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- Must operate under an agency license issued by the Louisiana Department of Health (LDH). PSR, CI and CPST services may not be performed by an individual who is not under the authority of an agency license.

**Staffing Qualifications**

Behavioral health rehabilitation services staff must:

- Pass a criminal background check through the DPS State Police prior to employment;
- Pass a motor vehicle screen;
- Pass a TB test prior to employment;
- Pass drug screening tests as required by the agency’s policies and procedures;
- Complete first aid, CPR and seizure assessment training.  
(NOTE: Psychiatrists, advanced practical registered nurses (APRNs)/clinical nurse specialists (CNSs)/physician assistants (PAs), registered nurses (RNs) and licensed practical nurses (LPNs) are exempt from this training.); and
- Non-Licensed direct care staff are required to complete a basic clinical competency training program approved by the LDH Office of Behavioral Health (OBH) prior to providing the service.

**Psychosocial Rehabilitation**

Staff who provide psychosocial rehabilitation (PSR) services must:

- Be at least 18 years of age and have a high school diploma or equivalent. Additionally, the service provider must be at least three years older than any individual they serve under 18 years of age. This can include credentialed peer support specialists as defined by LDH;
- Complete an approved PSR training, according to a curriculum approved by OBH prior to providing the service; and

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- Must have documented training related to the PSR model(s) utilized in the program.

**Crisis Intervention**

Staff who provide crisis intervention (CI) services must:

- Be at least 20 years of age 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. Credentialed peer support specialists as defined by LDH, with the above qualifications, can also be included. Additionally, the provider must be at least three years older than an individual they serve under 18 years of age; and
- Must complete an approved CI training, according to a curriculum approved by OBH prior to providing the service.

An 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.

**Community Psychiatric Supportive Treatment**

Staff who provide community psychiatric supportive treatment (CPST) services must possess a master's degree in social work, counseling, psychology or a related human services field to provide all aspects of CPST, including individual supportive behavioral interventions.

Other aspects of CPST, except for individual supportive behavioral interventions, may otherwise be performed by an individual with 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. Credentialed peer support specialists as defined by LDH who meet the qualifications above may also provide CPST services.

**Approved Curriculum and Equivalency Standards**

The Office of Behavioral Health has developed standardized basic training modules for unlicensed staff and direct care staff as an introduction to key concepts they must be familiar with and competencies they must demonstrate prior to rendering specialized behavioral health services to members of Healthy Louisiana and the Coordinated System of Care (CSoC).

These modules are available online through the Healthy Louisiana MCOs, the CSoC Contractor, and LDH. Staff must complete these trainings prior to rendering specialized behavioral health

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services, and provider agencies are required to submit attestation documentation to the managed care entities with whom they contract.

Training focuses on:

- MH 101 – Introduction to Serious Mental Illness and Emotional Behavioral Disorders;
- Crisis intervention;
- Suicide and homicide precautions;
- System of Care overview;
- Co-occurring disorders;
- Cultural and linguistic competency (basic); and
- Treatment planning.

All links to training modules and approved PSR curriculum for adults can be found on the LDH website. Reference Appendix A for links.

**Evidence-Based practice (EBP) – CPST Service****Assertive Community Treatment**

Agencies that provide assertive community treatment (ACT) services must:

- Be licensed in accordance with R.S. 40:2151 et seq. for behavioral health service providers;
- Be accredited by an LDH approved national accrediting body: CARF, COA or TJC. Denial, loss of, or any negative change in accreditation status must be reported to their contracted managed care entity in writing immediately upon notification by the accreditation body;
- Meet all qualifications as required for other outpatient and rehabilitation agencies and must maintain documentation and verification of staff meeting educational and professional requirements, licensure, accreditation, criminal background checks, TB testing, drug testing, evidence of fidelity to the ACT model



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[Substance Abuse and Mental Health Services Administration (SAMHSA) ACT EBP Toolkit] and required training for staff employed or contracted with the agency; and

- Have ACT teams that meet national fidelity standards as evidenced by the SAMHSA Assertive Community Treatment Evidence-Based Practices Toolkit.

Each ACT team shall include the following individuals at a minimum:

- One qualified ACT team leader;
- One board-certified or board-eligible psychiatrist;
- Two nurses, at least one of whom shall be an RN;
- One other LMHP;
- One substance use service provider;
- One employment specialist;
- One housing specialist; and
- One peer specialist.

Each ACT team shall have a staff-to-individual ratio that does not exceed 1:10. Any ACT team vacancies that occur will be filled in a timely manner to ensure that these ratios are maintained. All professional staff must be currently and appropriately licensed by the applicable professional board. Prior to providing the service, each member receives an assessment of initial training needs based on the skills and competencies necessary to provide ACT services. Each staff person must meet the required skills and competencies within six months of their employment on an ACT team. Successful completion of LDH-approved ACT team trainings can satisfy this requirement.

### **Multi-Systemic Therapy**

Agencies that provide multi-systemic therapy (MST) services must:

- Be licensed to provide MST services by MST Services, Inc. or any of its approved subsidiaries;

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- Be a BH/substance use provider organization, which is a legally recognized entity in the United States and is qualified to do business in Louisiana and meets the standards established by BHSF or its designee;
- Be licensed in accordance with R.S. 40:2151 et seq. for behavioral health service providers; and
- Meet all qualifications as required for other outpatient and rehabilitation agencies and must maintain documentation and verification of staff meeting educational and professional requirements, licensure, certification by MST Services, Inc., staff criminal background checks, TB testing, drug testing and required training for staff employed or contracted with the agency. MST-only agencies are not required to be accredited due to the extensive nature of consultation by MST Services, Inc. These agencies must maintain good standing with MST Services, Inc., ensure fidelity to the MST model and maintain licensure through LDH.

MST teams must have an MST clinical supervisor and two to four MST therapists. There must be a system supervisor who is responsible for the clinical fidelity of the MST team.

**MST Clinical Supervisors**

Multi-Systemic therapy clinical supervisors are independently licensed master's level mental health professionals with a graduate degree in a clinical mental health field and experience providing mental health treatment. A minimum of three years' experience is preferred. A full-time supervisor may supervise up to two teams. A half-time supervisor may supervise one team. Clinical services and supervision must be provided by LMHPs in accordance with their respective licensing board regulations. All practitioners must hold an unrestricted Louisiana license.

**MST Therapists**

Therapists are master's level mental health professionals with graduate degrees in a clinical field, a background in family, youth and community service. A minimum of two years' experience is preferred. Under certain hiring conditions, highly skilled bachelor-level professionals may be selected. These conditions include:

- Education in a human services field;
- A minimum of three years' experience working with family and/or children/youth services; and

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- The provider has actively recruited for master's level therapists but has not found any acceptable candidates or the bachelor's level applicant is clearly better qualified than the master's level applicants. Bachelor's level staff must have a degree in social work, counseling, psychology or a related human services field and must have at least three years of experience working with the target population.

**MST Supervisor**

The system supervisor is a master's level, mental health professional with a graduate degree in a clinical field and experience as an MST clinical supervisor. The system supervisor provides weekly clinical consultation to the MST teams, monthly clinical consultation to the MST supervisors, quarterly booster trainings for the MST teams and monitors adherence to the MST model. A manager of network partnerships from MST Services is assigned to monitor and train system supervisors.

**Homebuilders®****Agency Qualifications**

Agencies that provide homebuilder services must:

- Be an approved Homebuilders® provider for Louisiana. The licensed entity has agreed to assume responsibility for this service under its license. The provider contracts with Institute for Family Development (IFD) for training, supervision and monitoring of services, which occurs primarily through a Homebuilders® national consultant;
- Be licensed in accordance with R.S. 40:2151 et seq. for behavioral health service providers; and
- Meet all qualifications as required for other outpatient and rehabilitation agencies, and must maintain documentation and verification of staff meeting educational and professional requirements, licensure, certification by IFD staff, criminal background checks, TB testing, drug testing and required training for staff employed or contracted with the agency.

Homebuilders®-only agencies are not required to be accredited due to the extensive nature of consultation by the IFD. These agencies must maintain good standing with IFD, ensure fidelity to the Homebuilders® model and maintain licensure through LDH.

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Homebuilders® staffing requirements consists of: Homebuilders® Therapists and a Homebuilders® Supervisor.

**Homebuilders® Therapists**

Homebuilders ® therapists must have a master's degree in psychology, social work, counseling, or a related field, or a bachelor's degree in the same fields plus two years of experience working with families.

**Homebuilders® Supervisor**

A Homebuilders® supervisor must have a master's degree in psychology, social work, counseling or a related field, or a bachelor's degree in the same fields plus two years of experience providing the program, plus one year supervisory/management experience.

**Functional Family Therapy (FFT) and Functional Family Therapy – Child Welfare (FFT-CW)**

Agencies that provide functional family therapy (FFT) and functional family therapy – child welfare (EFT-CW) services must:

- Have a current certification issued by the Institute for FFT Inc. The licensed entity has agreed to assume responsibility for this service under its license. The provider contracts with FFT, Inc. for training, supervision and monitoring of services, which occurs primarily through a FFT national consultant. The provider will also have a contractual relationship with FFT Inc., allowing the provider to deliver the licensed FFT model;
- Be licensed in accordance with R.S. 40:2151 et seq. for behavioral health service providers and certified by the Institute for FFT, LLC; and
- Meet all qualifications as required for other outpatient and rehabilitation agencies and must maintain documentation and verification of staff meeting educational and professional requirements, licensure, certification through the Institute for FFT, LLC, staff criminal background checks, TB testing, drug testing and required training for staff employed or contracted with the agency.

FFT/FFT-CW-only agencies are not required to be accredited due to the extensive nature of consultation by the Institute for FFT. These agencies must maintain good standing with the

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Institute for FFT, ensure fidelity to the FFT/FFT-CW model and maintain licensure through LDH.

Child psychiatrists and/or psychologists or medical psychologists must provide consultation to the FFT/FFT-CW teams as needed. Psychiatrists and/or psychologists are employees or subcontractors of the provider. All analysis of problem behaviors must be performed under the supervision of a licensed psychologist or medical psychologist.

**Staffing Qualifications**

FFT/FFT-CW agencies are required to employ or contract with a LMHP as a behavioral health service organizational requirement of LDH. Utilization of the FFT/FFT-CW Supervisor does not exempt FFT/FFT-CW agencies from this requirement.

FFT/FFT-CW staffing consists of:

- FFT/FFT-CW Therapists; and
- An FFT/FFT-CW Site Supervisor.

**FFT/FFT-CW Therapists**

Staffing at FFT/FFT-CW agencies will consist of one site comprised of three to eight therapists, who are master's level staff with graduate degrees in a clinical field. Other human service degrees may be accepted. Highly skilled bachelor's level professionals may also be selected under certain hiring conditions including:

- The bachelor's degree must be in a human services field. A degree in a mental health field is preferred. Therapists must have a background in family, youth and community service and a minimum of two years' experience working with children, adolescents and families; and
- The provider has actively recruited for master's level therapists but has not found any acceptable candidates or the bachelor's level applicant is clearly better qualified than the master's level applicants.

**FFT/FFT-CW Site Supervisor**

At the cessation of Phase One, (approximately nine to twelve months after the initial training) the FFT/FFT-CW site supervisor is expected to emerge and be appointed. The site can appoint a site supervisor prior to the cessation of Phase Two; however, the appointed site supervisor should follow FFT/FFT-CW training guidelines. Site supervisors must be master's-level mental health

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professionals with graduate degrees in a clinical discipline. A background in family, youth and community service and a minimum of two years' experience working in these areas is also required.

**Crisis Stabilization (CS)**

The following agencies are approved to provide crisis stabilization services:

- Respite care services agencies;
- Crisis receiving centers; and
- Center-Based respites.

**Respite Care Services Agencies**

Agencies that provide respite care services are licensed as HCBS providers/in-home respite agencies per R.S 40:2120.1 et seq. and *Louisiana Administrative Code* (LAC) 48:I.Chapter 50.

**Crisis Receiving Centers**

Agencies that operate as crisis receiving centers are licensed per R.S 40:2180.12 and LAC 48:I.Chapters 53 and 54.

**Center-Based Respites**

Agencies that operate as center-based respites are licensed as an HCBS provider/center-based respite per R.S. 40:2120.1 et seq. and LAC 48:I.Chapter 50.

**Child Placing Agencies (Therapeutic Foster Care)**

Agencies that operate as child placing agencies that provide therapeutic foster care are licensed as a child placing agency by the Department of Child and Family Services (DCFS) per R.S. 46:1401-1424. (See Appendix A for contact information).

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**Agency Qualifications**

Agencies that provide crisis stabilization services must:

- Arrange for criminal background checks and maintain documentation that all persons, prior to employment, pass criminal background checks through the DPS, State Police. If the results of any criminal background check reveal that the potential employee (or contractor) was convicted of any offenses against a child/youth or an elderly or disabled person, the provider shall not hire and/or shall terminate the employment (or contract) of such individual. The provider shall not hire an individual with a record as a sex offender nor permit these individuals to work for the provider as a subcontractor. Criminal background checks must be performed as required by R.S. 40:1203 et seq., and in accordance with R.S. 15:587 et seq. Criminal background checks performed over 30 days prior to date of employment will not be accepted as meeting this requirement;
- Arrange for TB testing and maintain documentation that all persons, prior to employment, are free from TB in a communicable state via skin testing to reduce the risk of such infections in recipients and staff. Results from testing performed over 30 days prior to the date of employment will not be accepted as meeting this requirement;
- Establish and maintain written policies and procedures, inclusive of drug testing staff, to ensure an alcohol and drug-free workplace and a workforce free of substance use;
- Maintain documentation that all direct care staff, who are required to complete first aid, CPR and seizure assessment training, complete the training within 90 days of hire;
- Ensure, and maintain documentation, that all unlicensed persons employed by the organization complete a documented training in a recognized crisis intervention curriculum prior to handling or managing crisis calls, which shall be updated annually;
- Utilize and maintain documentation of staff completion of State-approved training according to a curriculum approved by OBH prior to providing the service;
- Maintain documentation verifying that staff meet all educational and professional requirements, as well as completion of required staff trainings;

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- Be an agency licensed by LDH or DCFS;
- Maintain treatment records that include a copy of the plan of care or treatment plan, the name of the individual, dates of services provided, nature, content and units of rehabilitation services provided, and progress made toward functional improvement and goals in the treatment plan;
- Supervise the direct service workers (DSWs) that provide the care recipients receive. The supervisor must make an onsite visit to the recipient’s home to evaluate the following:
  - The DSW’s ability to perform their assigned duties;
  - Determine whether the recipient is receiving the services that are written in the plan of care;
  - Verify the DSW is reporting to the home according to the frequency ordered in the plan of care; and
  - Determine the recipient’s satisfaction with the services he/she is receiving.

**Staffing Qualifications**

Therapeutic foster care staff must:

- Be at least 18 years of age, and at least three years older than an individual they serve under 18 years of age;
- Possess a high school diploma, general equivalency diploma or trade school diploma in the area of human services, or demonstrate competency or verifiable work experience in providing support to persons with disabilities;
- Pass criminal and professional background checks through the Louisiana Department of Public Safety, State Police prior to employment;
- Pass a TB test prior to employment;
- Pass drug screening tests as required by agency’s policies and procedures;
- Pass a motor vehicle screen;
- Have no finding of abuse, neglect, mistreatment or misappropriation of a recipient’s property placed against them as verified by review of the Louisiana Direct Service Worker Registry;



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- Possess and provide documentation of a valid social security number;
- Provide documentation of current CPR and first aid certifications; and
- Comply with the provisions of R.S. 40:2179 et seq., and meet any additional qualifications established under Rule promulgated by LDH in association with this statute.

**Approved Curriculum and Equivalency Standards**

Staff providing CS services must use clinical programming and a training curriculum approved by OBH prior to providing the service.

**Therapeutic Group Homes**

**Agency Qualifications**

Facilities that operate as therapeutic group homes (TGH) must:

- Be licensed as a TGH by LDH in accordance with R.S. 36:254 and R.S. 40:2009;
- Provide community-based residential services in a home-like setting of no greater than 10 beds, under the supervision and oversight of a psychiatrist or licensed psychologist;
- Be accredited by CARF, COA, or TJC. Denial, loss of, or any negative change in accreditation status, must be reported to their contracted MCOs in writing immediately upon notification by the accreditation body;
- Ensure that staff be supervised by a LMHP with experience in evidence-based treatments and operating within their scope of practice license;
- Arrange for criminal background checks and maintain documentation that all persons, prior to employment, pass criminal background checks through the DPS State Police. If the results of any criminal background check reveal that the potential employee (or contractor) was convicted of any offenses against a child/youth or an elderly or disabled person, the provider shall not hire and/or shall terminate the employment (or contract) of such individual. The provider shall not hire an individual with a record as a sex offender nor permit these

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individuals to work for the provider as a subcontractor. Criminal background checks must be performed as required by R.S. 40:1203 et seq., and in accordance with R.S. 15:587 et seq. Criminal background checks performed over 30 days prior to the date of employment will not be accepted as meeting this requirement;

- Arrange for TB testing and maintain documentation that all persons, prior to employment, are free from TB in a communicable state via skin testing to reduce the risk of such infections in recipients and staff. Results from testing performed over 30 days prior to the date of employment will not be accepted as meeting this requirement;
- Establish and maintain written policies and procedures, inclusive of drug testing staff, to ensure an alcohol and drug-free workplace and a workforce free of substance use;
- Maintain documentation that all direct care staff, who are required to complete first aid, CPR and seizure assessment training, complete the training within 90 days of hire;
- Maintain documentation verifying that staff meet educational and professional requirements, licensure (as applicable), as well as completion of required trainings; and
- Ensure and maintain documentation that all unlicensed persons employed by the agency complete training in a recognized crisis intervention curriculum prior to handling or managing crisis calls, which shall be updated annually.

### **Staffing Qualifications**

Individuals who provide TGH services must meet the following requirements:

- Staff may include paraprofessional and bachelor’s level staff, who provide integration with community resources, skill building and peer support services, as well as master’s level staff who provide individual, group and family interventions with degrees in social work, counseling, psychology or a related human services field.
- Direct care staff must be at least 18 years old, and have a high school diploma or equivalent. All unlicensed staff must have oversight by a psychiatrist, psychologist or LMHP;

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- Direct care staff providing services must be at least three years older than an individual they serve under 18 year of age;
- Staff must pass a criminal background check through the DPS State Police prior to employment;
- Staff must pass a TB test prior to employment;
- Staff must pass drug screening tests as required by the agency's policies and procedures;
- Staff must complete first aid, CPR and seizure assessment training. (**NOTE:** Psychiatrists, APRNs/CNSs/PAs, RNs and LPNs are exempt from this training.);

**Approved Curriculum and Equivalency Standards**

All therapeutic group home staff must complete all required trainings appropriate to the program model approved by OBH.

**Psychiatric Residential Treatment Facilities (PRTFs)****Agency Qualifications**

Agencies that operate as psychiatric residential treatment facilities (PRTFs) must:

- Be licensed by the Louisiana Department of Health (LDH) in accordance with R.S. 40:2009;
- Be accredited by an LDH approved accrediting body: the CARF, COA or TJC. Denial, loss of, or any negative change in accreditation status, must be reported to their contracted MCOs in writing immediately upon notification by the accreditation body;
- Submit a program description to the State inclusive of the specific research based models to be utilized for both treatment planning and service delivery. PRTFs must have OBH approval of the PRTF program description and research model(s) prior to enrolling with Medicaid or executing a provider ad hoc agreement or contract with a Medicaid managed care entity(ies);

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- Have OBH approval of the auditing body(ies) providing evidence-based practice (EBP) and/or American Society of Addiction Medicine (ASAM) fidelity monitoring. PRTFs shall submit fidelity monitoring documentation annually demonstrating compliance with at least two EBPs and/or ASAM criteria;
- Arrange for criminal background checks and maintain documentation that all persons, prior to employment, pass criminal background checks through the DPS State Police. If the results of any criminal background check reveal that the potential employee (or contractor) was convicted of any offenses against a child/youth or an elderly or disabled person, the provider shall not hire and/or shall terminate the employment (or contract) of such individual. The provider shall not hire an individual with a record as a sex offender nor permit these individuals to work for the provider as a subcontractor. Criminal background checks must be performed as required by R.S. 40:1203 et seq., and in accordance with R.S. 15:587 et seq. Criminal background checks performed over 30 days prior to the date of employment will not be accepted as meeting this requirement;
- Arrange for TB testing and maintain documentation that all persons, prior to employment, are free from TB in a communicable state via skin testing to reduce the risk of such infections in recipients and staff. Results from testing performed over 30 days prior to the date of employment will not be accepted as meeting this requirement;
- Establish and maintain written policies and procedures, inclusive of drug testing staff, to ensure an alcohol and drug-free workplace and a workforce free of substance use;
- Maintain documentation that all direct care staff, who are required to complete first aid, cardiopulmonary resuscitation (CPR) and seizure assessment training, complete the training within 90 days of hire; and
- Maintain documentation verifying that staff meet educational and professional requirements, licensure (where applicable), as well as completion of required trainings.

As required by the CMS emergency preparedness Final Rule, effective November 16, 2016, PRTFs must comply with emergency preparedness regulations associated with 42 CFR §441.184 in order to participate in the Medicare or Medicaid programs. Regulations include safeguarding human resources, maintaining business continuity and protecting physical resources. Refer to Appendix A for the link to access CMS emergency preparedness regulation guidance and resources). Regulations must be implemented by November 15, 2017.

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**Staffing Qualifications**

PRTF staff must:

- Pass a criminal background check through DPS State Police prior to employment;
- Pass a TB test prior to employment;
- Pass drug screening tests as required by the agency's policies and procedures;
- Complete first aid, CPR and seizure assessment training. (**NOTE:** Psychiatrists, APRNs/ CNSs/ PAs, RNs and LPNs are exempt from this training.); and
- Complete all required training appropriate to the program model approved by OBH.

All experience requirements for staff are related to paid experience. Volunteer work, college work-study or internship related to completion of a degree cannot be counted as work experience. If experience is in a part-time position, the staff person must be able to verify the amount of time worked each week. Experience obtained while working in a position for which the individual is not qualified may not be counted as experience.

Per federal regulations at 42 CFR 441.156 and state regulations at LAC 48:I.Chapter 90.9067, the team must, at a minimum, include the following individuals:

- A board-eligible or board-certified psychiatrist;
- A clinical psychologist and a physician licensed to practice medicine or osteopathy; and
- A Physician licensed to practice medicine or osteopathy, with specialized training and experience in the diagnosis and treatment of mental diseases, and a licensed clinical or medical psychologist.

The team must also include one of the following:

- A licensed clinical social worker (LCSW);
- An RN with specialized training or one year's experience in treating individuals with mental illness;

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- An occupational therapist who is licensed, if required by the State, and who has specialized training or one year of experience in treating mentally ill individuals; and
- A licensed clinical or medical psychologist.

**PRTF - ASAM Level 3.7, Medically Monitored Residential (Adolescents) and ASAM Level 3.7-WM, -Medically Monitored Residential Withdrawal Management (Adolescents)****Facility Qualifications**

ASAM Level 3.7 and 3.7-WM facilities for adolescents must:

- Be licensed as a PRTF by LDH per LAC 48:I.Chapter 90;
- Be physician-directed and meet the requirements of 42 CFR 441.151, including requirements referenced therein to 42 CFR 483 Subpart G;
- Be accredited by an LDH approved national accrediting body: CARF, COA, or TJC. Denial, loss of, or any negative change in accreditation status, must be reported to their contracted MCOs in writing immediately upon notification by the accreditation body;
- Arrange for criminal background checks and maintain documentation that all persons, prior to employment, pass criminal background checks through DPS State Police. If the results of any criminal background check reveal that the potential employee (or contractor) was convicted of any offenses against a child/youth or an elderly or disabled person, the provider shall not hire and/or shall terminate the employment (or contract) of such individual. The provider shall not hire an individual with a record as a sex offender nor permit these individuals to work for the provider as a subcontractor. Criminal background checks must be performed as required by R.S. 40:1203 et seq., and in accordance with R.S. 15:587 et seq. Criminal background checks performed over 30 days prior to the date of employment will not be accepted as meeting this requirement;
- Arrange for TB testing and maintain documentation that all persons, prior to employment, are free from TB in a communicable state via skin testing to reduce the risk of such infections in recipients and staff. Results from testing performed

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over 30 days prior to the date of employment will not be accepted as meeting this requirement.

- Establish and maintain written policies and procedures, inclusive of drug testing staff, to ensure an alcohol and drug-free workplace and a workforce free of substance use;
- Maintain documentation that all direct care staff, who are required to complete first aid, CPR and seizure assessment training, complete the training within 90 days of hire; and
- Maintain documentation verifying that staff meet educational and professional requirements, as well as completion of required trainings.

As required by CMS Emergency Preparedness Final Rule effective November 16, 2016, PRTFs must comply with emergency preparedness regulations associated with 42 CFR §441.184 in order to participate in the Medicare or Medicaid programs. Regulations include safeguarding human resources, maintaining business continuity and protecting physical resources. Facilities should incorporate the four core elements of emergency preparedness into their plans and comply with all components of the Rule. Regulations must be implemented by November 15, 2017.

**Staffing Qualifications**

Staff that provide ASAM Level 3.7 and 3.7-WM services for adolescents must:

- Pass a criminal background check through DPS State Police prior to employment;
- Pass a TB test prior to employment;
- Pass drug screening tests as required by the agency's policies and procedures;
- Complete first aid, CPR and seizure assessment training. (**NOTE:** Psychiatrists, APRNs/CNSs/PAs, RNs and LPNs are exempt from this training.); and
- Complete all required training appropriate to the program model approved by OBH;

All experience requirements for staff are related to paid experience. Volunteer work, college work/study or internship related to completion of a degree cannot be counted as work experience. If experience is in a part-time position, the staff person must be able to verify the amount of time worked each week. Experience obtained while working in a position for which the individual is not qualified may not be counted as experience.

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ASAM Level 3.7, 3.7-WM facilities for adolescents must have qualified professional medical, nursing and other support staff necessary to provide services appropriate to the bio-psychosocial needs of individuals being admitted to the program. The staff must include the following individuals:

- A medical director (MD) on site as needed for management of psychiatric/medical needs with 24-hour on-call availability;
- A licensed psychologist (as needed);
- A Nursing staff;
- One full-time equivalent (FTE) supervisor (APRN/nurse practitioner (NP)/RN) with 24-hour on-call availability;
- One FTE (RN/LPN) available on site 7a.m. – 11 p.m.;
- A licensed or certified clinician or counselor with direct supervision by an LMHP, or unlicensed professional (UP) under supervision of a QPS– one clinician per eight clients;
- A Direct care aide – Two FTE PA’s on all shifts. The ratio cannot exceed 1:8. (**Exception:** Ratio must be 1:3 on therapy outings);
- Clerical support staff – two FTE per day shift;
- An activity/occupational therapist – one FTE;
- A care coordinator – one FTE per day shift, and/or duties may be assumed by clinical staff;
- An outreach worker/peer mentor (recommended);
- Physicians, who are available 24 hours a day by telephone. (A PA, NP or APRN may perform duties within the scope of their practice as designated by physician);
- Licensed, certified or registered clinicians who provide a planned regimen of 24-hour, professionally directed evaluation, care and treatment services for individuals and their families;



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- An interdisciplinary team of appropriately trained clinicians, such as physicians, nurses, counselors, social workers and psychologists is available to assess and treat the individual and to obtain and interpret information regarding the patient’s needs. The number and disciplines of team members are appropriate to the range and severity of the individual’s problems;
- An LMHP is available on site 40 hours per week; and
- A qualified professional supervisor available for clinical oversight and by telephone for consultation.

**Addiction Services**

**Agency Qualifications**

Agencies that provide addiction services must:

- Be licensed per R.S. 40:2151 et seq. as a BHS provider. (**NOTE:** A facility license is not required for individual or group practice of licensed counselors/therapists providing services under the auspices of their individual license(s).);
- Provide services under the supervision of a LMHP or physician who is acting within the scope of his/her professional license and applicable state law;
- Arrange for criminal background checks and maintain documentation that all persons, prior to employment, pass criminal background checks through the DPS State Police. If the results of any criminal background check reveal that the potential employee (or contractor) was convicted of any offenses against a child/youth or an elderly or disabled person, the provider shall not hire and/or shall terminate the employment (or contract) of such individual. The provider shall not hire an individual with a record as a sex offender nor permit these individuals to work for the provider as a subcontractor. Criminal background checks must be performed as required by R.S. 40:1203 et seq., and in accordance with R.S. 15:587 et seq. Criminal background checks performed over 30 days prior to the date of employment will not be accepted as meeting this requirement;
- Arrange for TB testing and maintain documentation that all persons, prior to employment, are free from TB in a communicable state via skin testing to reduce the risk of such infections in recipients and staff. Results from testing performed

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over 30 days prior to the date of employment will not be accepted as meeting this requirement;

- Establish and maintain written policies and procedures, inclusive of drug testing staff, to ensure an alcohol and drug-free workplace and a workforce free of substance use;
- Maintain documentation that all direct care staff, who are required to complete first aid, CPR and seizure assessment training, complete the training within 90 days of hire;
- Maintain documentation verifying that staff meet educational and professional requirements, licensure (where applicable), as well as completion of required trainings; and
- Ensure and maintain documentation that all unlicensed persons employed by the organization complete training in a recognized crisis intervention curriculum prior to handling or managing crisis calls, which shall be updated annually.

**Staffing Qualifications**

Staff that provide addiction services may be licensed and unlicensed professionals and must meet the following qualifications:

- Must be at least 18 years of age, with a high school diploma or equivalent according to their areas of competence as determined by degree, required levels of experience as defined by State law and regulations and departmentally approved guidelines and certifications. Staff can include credentialed peer support specialists as defined by LDH who meet all other qualifications;
- Staff providing services must be at least three years older than an individual they serve under the age of 18;
- Licensed individual practitioners, with no documentation of having provided addiction services prior to December 1, 2015, are required to demonstrate competency via the Alcohol and Drug Counselor (ADC) exam, the Advanced Alcohol and Drug Counselor (AADC) exam, or the Examination for Master Addictions Counselor (EMAC). Any licensed individual practitioner, who has documentation of providing addiction services prior to December 1, 2015, and within their scope of practice is exempt from (ADC, AADC, EMAC) testing requirements. Organizational agencies are required to obtain verification of

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competency (passing of accepted examinations) or exemption (prior work history/resume, employer letter). Licensed providers practicing independently must submit verification of competency or an exemption request (based on verified required work history) to the managed care entity(ies) with whom they credential and contract;

Unlicensed professionals of addiction services must be registered with the Addictive Disorders Regulatory Authority (ADRA) and demonstrate competency as defined by LDH, state law at RS 37:3386 et seq., and Department regulations. An unlicensed addiction provider must meet at least one of the following qualifications:

- Be a registered addiction counselor;
- Be a certified addiction counselor;
- Be a counselor in training (CIT) that is registered with ADRA and is currently participating in a supervisory relationship with an ADRA registered certified clinical supervisor; or
- Be a master's level behavioral health professional that has not obtained full licensure privileges and is participating in ongoing professional supervision. When working in addiction treatment settings, the master's prepared UP shall be supervised by an LMHP, who meets the requirements of this Section;

State regulations require supervision of unlicensed professionals by a qualified Professional Supervisor (QPS). A QPS includes the following professionals, who are currently registered with their respective Louisiana board:

- Licensed psychologist;
- Licensed clinical social worker (LCSW);
- Licensed professional counselor (LPC);
- Licensed addiction counselor;
- Licensed physician; or
- Advanced practice registered nurse.

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The following professionals may obtain QPS credentials: A master's prepared individual who is registered with the appropriate State Board and under the supervision of a licensed psychologist, LPC, or LCSW. The QPS may provide clinical/administrative oversight and supervision of staff.

**ASAM Level 1 in an Outpatient Setting****Agency Qualifications**

In addition to the qualifications noted for addiction service providers, the following qualifications are required for ASAM Level 1:

- Must be licensed per R.S. 40:2151 et seq. as a BHS provider;
- Must provide services under the supervision of a LMHP or physician who is acting within the scope of his/her professional license and applicable state law;
- Arrange for criminal background checks and maintain documentation that all persons, prior to employment, pass criminal background checks through DPS, State Police. If the results of any criminal background check reveal that the potential employee (or contractor) was convicted of any offenses against a child/youth or an elderly or disabled person, the provider shall not hire and/or shall terminate the employment (or contract) of such individual. The provider shall not hire an individual with a record as a sex offender nor permit these individuals to work for the provider as a subcontractor. Criminal background checks must be performed as required by R.S. 40:1203 et seq., and in accordance with R.S. 15:587 et seq. Criminal background checks performed over 30 days prior to the date of employment will not be accepted as meeting this requirement;
- Arrange for TB testing and maintain documentation that all persons, prior to employment, are free from TB in a communicable state via skin testing to reduce the risk of such infections in recipients and staff. Results from testing performed over 30 days prior to the date of employment will not be accepted as meeting this requirement;
- Maintain documentation that all direct care staff, who are required to complete first aid, CPR and seizure assessment training, complete the training within 90 days of hire;

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- Maintain documentation verifying that staff meet educational and professional requirements, licensure (where applicable), as well as completion of required trainings; and
- Ensure and maintain documentation that all unlicensed persons employed by the organization complete training in a recognized crisis intervention curriculum prior to handling or managing crisis calls, which shall be updated annually.

Refer to the *Service Definitions Manual* and BHS licensing rule for additional staff composition, caseload and group requirements.

**Staffing Qualifications**

Staff that provide ASAM level 1 treatment must:

- Pass criminal background check through DPS, State Police prior to employment;
- Pass a motor vehicle screen (if duties may involve driving or transporting recipients);
- Pass a TB test prior to employment;
- Pass drug screening tests as required by agency's policies and procedures; and
- Complete first aid, CPR and seizure assessment training. (Note: psychiatrists, APRNs/CNSs/PAs, RNs and LPNs are exempt from this training.)

Non-licensed direct care staff are required to complete a basic clinical competency training program approved by OBH prior to providing the service.

**ASAM Level 2.1 Intensive Outpatient Program (IOP) and Level 2-WM Ambulatory Withdrawal Management**

Refer to Addiction Services and ASAM Level 1 above for agency qualifications.

**Staffing Qualifications**

ASAM Level 2.1 Intensive Outpatient Program (IOP) and ASAM Level 2-WM Ambulatory Withdrawal Management (WM) staff must be licensed in accordance with R.S. 40:2151 et seq. as a BHS provider.

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Refer to the *Service Definitions Manual* and BHS licensing rule for additional staffing pattern, composition, caseload, and group requirements.

**ASAM Level 3.1 - Clinically Managed Low Intensity Residential****ASAM Level 3.2 – WM Clinically Managed Residential Social Withdrawal Management****ASAM Level 3.3 - Clinically Managed Medium Intensity Residential****ASAM Level 3.5 - Clinically Managed High Intensity Residential****ASAM Level 3.7 - Medically Monitored Intensive Residential****ASAM Level 3.7 - WM Medically Monitored Intensive Residential Withdrawal Management**

Refer to Addiction Services and ASAM Level 1 above for agency qualifications.

**Staffing Qualifications**

Staff that provide the above services must:

- Be licensed in accordance with R.S. 40:2151 et seq. as a BHS provider; and
- Be accredited by an LDH approved national accrediting body: CARF, COA, OR TJC. Denial, loss of, or any negative change in accreditation status must be reported to their contracted MCOs in writing immediately upon notification by the accreditation body.

See *Service Definitions Manual* and BHS licensing rule for additional staffing pattern, composition, caseload and group requirements.

**ASAM Level 4, 4-WM Medically Managed Inpatient Addiction Disorder Treatment in an Inpatient Setting**

Freestanding psychiatric hospitals and distinct part psychiatric units that provide ASAM Level 4, 4-WM medically managed inpatient addiction disorder treatment must be licensed as a hospital per R.S. 40:2100 et seq.

As required by the CMS emergency preparedness Final Rule, effective November 16, 2016, hospitals must comply with emergency preparedness regulations associated with 42 CFR §441.184 in order to participate in the Medicare or Medicaid programs. Regulations include safeguarding human resources, maintaining business continuity and protecting physical resources. Facilities should incorporate the four core elements of emergency preparedness into

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their plans and comply with all components of the Rule (see Appendix A). Regulations must be implemented by November 15, 2017.

**Outpatient Psychiatric and Therapy Services**

Outpatient psychiatric and therapy services include:

- Physician, psychiatrist, nursing outpatient medical services;
- Outpatient psychotherapy (individual, family, and group);
- Assessment and evaluation; and
- Case conference.

**Agency Qualifications**

Agencies that provide outpatient psychiatric and therapy services must:

- Be licensed per R.S. 40:2151 et seq. as a BHS provider;
- Arrange for criminal background checks and maintain documentation that all persons, prior to employment, pass criminal background checks through the DPS, State Police. If the results of any criminal background check reveal that the potential employee (or contractor) was convicted of any offenses against a child/youth or an elderly or disabled person, the provider shall not hire and/or shall terminate the employment (or contract) of such individual. The provider shall not hire an individual with a record as a sex offender nor permit these individuals to work for the provider as a subcontractor. Criminal background checks must be performed as required by R.S. 40:1203 et seq., and in accordance with R.S. 15:587 et seq. Criminal background checks performed over 30 days prior to the date of employment will not be accepted as meeting this requirement;
- Arrange for TB testing and maintain documentation that all persons, prior to employment, are free from TB in a communicable state via skin testing to reduce the risk of such infections in recipients and staff. Results from testing performed over 30 days prior to the date of employment will not be accepted as meeting this requirement;

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- Establish and maintain written policies and procedures, inclusive of drug testing staff, to ensure an alcohol and drug-free workplace and a workforce free of substance use;
- Maintain documentation that all direct care staff, who are required to complete first aid, CPR and seizure assessment training, complete the training within 90 days of hire; and
- Maintain documentation verifying that staff meet educational and professional requirements, licensure and completion of required trainings.

**Staffing Qualifications**

Staff for agencies that provide outpatient psychiatric and therapy services must consist of the following individuals:

- A physician;
- A psychiatrist or PA working under the protocol of a psychiatrist;
- A registered nurse working within the scope of practice; and
- An LMHP.

A licensed mental health practitioner (LMHP) is defined as an individual who is licensed in the State of Louisiana, and acts within the scope of all applicable State laws to diagnose and treat mental illness or substance use. A LMHP includes individuals licensed to practice independently as:

- Medical psychologists;
- Licensed psychologists;
- Licensed clinical social workers (LCSWs);
- Licensed professional counselors (LPCs);
- Licensed marriage and family therapists (LMFTs);
- Licensed addiction counselors (LACs); or



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- APRNs. An APRN must be a nurse practitioner specialist in adult psychiatric and 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.

Licensed addiction counselors (LACs) who provide addiction services must demonstrate competency, as defined by LDH, State law (Act 803 of the 2004 Regular Session of the Louisiana Legislature, Addictive Disorders Practice Act) and Department regulations. State law does not permit LACs to diagnose under their scope of practice. Licensed addiction counselors providing addiction and/or behavioral health services must adhere to their scope of practice license.

LPCs and LMFTs are limited to rendering or offering prevention, assessment, diagnosis and treatment of mental, emotional, behavioral, and addiction disorders requiring mental health counseling in accordance with their scope of practice under state law found in R.S. 37:1101 et seq.

### **Behavioral Health Services in Federally Qualified Health Centers**

Federally qualified health centers (FQHCs) must be certified by the federal government.

LMHPs and staff of FQHCs offering behavioral health services in a FQHC are required to meet the qualifications specified for other licensed practitioners and direct care staff.

FQHCs and practitioners should follow the guidelines and specifications outlined in Chapter 22, Federally Qualified Health Centers, of the *Medicaid Services Manual* for guidance on approved practitioner types.

The following licensed practitioners are approved to render BH services in an FQHC:

- Physicians;
- APRN/CNs/PAs;
- Medical psychologists;
- Licensed psychologists;
- LCSWs;

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- LPCs; and
- LMFTs.

As required by the CMS emergency preparedness Final Rule, effective November 16, 2016, FQHCs must comply with emergency preparedness regulations associated with 42 CFR §441.184 in order to participate in the Medicare or Medicaid programs. Regulations include safeguarding human resources, maintaining business continuity and protecting physical resources. Facilities should incorporate the four core elements of emergency preparedness into their plans and comply with all components of the Rule. Regulations must be implemented by November 15, 2017.

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**APPENDIX A: FORMS AND LINKS**

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Link to training modules on the LDH website:

<http://new.LDH.louisiana.gov/index.cfm/page/2473>

Approved Psychosocial Rehabilitation (PSR) curriculum – Adults

- Boston Psychiatric Rehabilitation Model <https://cpr.bu.edu/>
- Clubhouse Model <http://clubhouse-intl.org/>
- Social Skills Training Model <http://www.psychrehab.com/>

Substance Abuse and Mental Health Service Administration’s (SAMHSA) online guide for establishing drug-free workplace programs and developing written policies. (See Appendix A)

- This resource may be found at the following link:  
<http://www.samhsa.gov/workplace/toolkit/develop-policy>

CMS Emergency Preparedness Regulation Guidance and Resources:

<https://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/SurveyCertEmergPrep/index.html>