



SALISH BHO

ADMINISTRATION POLICIES AND PROCEDURES

Policy Name: PROVISION OF PRIORITY STATE FUNDED SERVICES

Policy Number: 2.09

Reference: State Contract, WAC 388-877

Effective Date: 10/2005

Revision Date(s): 6/2016; 7/2017; 6/2018

Reviewed Date: 6/2016; 7/2017; 6/2018

Approved by: SBHO Executive Board

CROSS REFERENCES

- Policy: Culturally Competent Services
- Policy: Corrective Action Plan
- Policy: Provision of Additional State Funded Services

PURPOSE

The Salish Behavioral Health Organization (SBHO) ensures eligible individuals can access priority state funded services.

DEFINITIONS

Additional State Funded Services: All state funded services not defined as priority services.

Priority State Funded Services: Priority services include crisis services, stabilization services, involuntary treatment act services, ancillary crisis services, freestanding evaluation and treatment, psychiatric inpatient services, and Medicaid personal care.

PROCEDURE

1. SBHO is responsible for ensuring the provision of services to residents of Kitsap, Clallam and Jefferson counties. Services are delivered by contracted service providers.
2. SBHO monitors contracted providers on an ongoing basis to ensure all covered services and resources are available to eligible individuals. When a provider requests authorization of a service, the SBHO sub-delegated authorization entity, CommCare, applies the SBHO medical necessity criteria and clinical judgment in making authorization determinations. If the level of care requested is not appropriate to the client's needs, the request is forwarded to CommCare's board-certified physician or chemical dependency professional who may deny the authorization and recommend an alternate, more appropriate service for the client.
 - Some priority state funded services do not require pre-authorization and may be delivered by our network of contracted providers without prior authorization.
2. SBHO conducts annual chart reviews to determine whether clients are receiving appropriate services and adequate levels of care.
3. Service provision includes the following priority state funded **mental health** services:
 - a. **Crisis Services** are available 24 hours a day and are directed at the evaluation and treatment of a mental health crisis situation and are available to any individual who experiences such a crisis. Crisis services are provided under the supervision of a mental health professional. The intent of the service is to quickly stabilize a situation so that further treatment needs can be assessed and provided for. Crisis Services do not require pre-authorization. Crisis services are typically accessed by a community member directly calling the crisis line.
 - b. **Stabilization Services** can be provided in an individual's home or other safe setting and are short term in duration (less than two weeks). The intent of the service is to establish stability during or immediately after a crisis. Stabilization services may include staff providing services on-site, or an individual in need of this level of care may be placed in a bed in a supervised setting. Stabilization services do not require pre-authorization.
 - c. **Involuntary Treatment Act Services:** The intent of the service is to provide all the services and administrative functions required for the evaluation of involuntary detention or involuntary treatment in compliance with RCW 71.05 and 71.34. This service is provided by Designated Crisis Responders (DCR's) who are designated by the SBHO to implement RCW 71.05 and RCW 71.34. DCR's are employed by SBHO network providers, and are located in Bremerton, Port Townsend, Port Angeles and Forks. Involuntary Treatment Act Services do not require pre-authorization.

- d. **Ancillary Crisis Services:** The intent of the service is to fund costs associated with addressing a crisis situation such as housing costs in a treatment center, that are not covered by Medicaid.
- e. **Freestanding Evaluation and Treatment:** The intent of the service is to provide evaluation and treatment services in a location other than a hospital. The SBHO contracts with Kitsap Mental Health Services, which operates two freestanding Evaluation and Treatment facilities, one for adults and one for individuals under the age of 18. Evaluation and Treatment Services are designed to provide inpatient treatment to individuals who would otherwise need to be hospitalized. Services are provided under the direction of licensed psychiatrists, nurses and other mental health professionals. Family involvement is key to discharge planning, which begins at admission. Nursing care is available on site.
- f. **Psychiatric Inpatient Services:** The intent of the service is to provide medically necessary services for members in a secure facility with who may be a danger to themselves or others, or who cannot currently function outside of a structured and safe facility. Voluntary Psychiatric Inpatient Services must be pre-approved by the SBHO's designated care management contractor. Psychiatric inpatient services occur in community hospitals which contract with the Medical Assistance Administration of the Department of Social and Health Services.
- g. **Medicaid Personal Care:** The intent of the service is to provide personal care to SBHO enrolled individuals who qualify for Medicaid Personal Care solely due to their psychiatric disorder.

The Aging and Disabilities Services Administration, through their Home and Community Services offices, determines the need for this service. Requests are sent to the SBHO by the Home and Community Services office and evaluated by the SBHO to determine if the individual seeking services is currently receiving services from a SBHO contractor, and if their need for Medicaid Personal Care is due solely to a psychiatric disability. The SBHO may not limit or restrict access due to insufficient resources.

- 4. Service provision includes the following priority state funded **Substance Use Disorder** services:
 - a. **Secure Withdrawal Management and stabilization services:** The intent of the service is to provide licensed, facility based services to an individual to assist in the process of withdrawal from psychoactive substances in a safe and effective manner, or medically stabilize an individual after acute intoxication. Individuals are referred to Secure Withdrawal Management and stabilization services following intervention by a Designated Crisis Responder (DCR) in response to concerns that the individual presents a risk of harm to

self or others, other's property, or of physical harm due to being gravely disabled as a result of a substance use disorder (SUD).

- b. **Residential Treatment:** Services that are provided to an Individual in a twenty-four (24) hour per day supervised facility that includes room and board in accordance with WAC 388-877. Services include individual and group counseling, education and related activities.
- c. **Withdrawal Management:** Services that are provided to an Individual to assist in the process of withdrawal in a safe and effective manner in accordance with ASAM criteria.

MONITORING

This policy is mandated by contract.

1. SBHO monitors the provision of priority state funded services by:
 - Longitudinal tracking of the provision of priority state funded services through the SBHO's information services to measure the provision of services against historic norms
 - Annual Provider Chart Reviews
 - Quarterly Performance Reports
 - Annual SBHO Provider and Subcontractor Administrative Review, that include staff interviews that address this topic
2. If a provider performs below expected standards during any of the reviews listed above a Corrective Action will be required for SBHO approval. Reference SBHO Corrective Action Plan Policy.