



# DHSS/Behavioral Health

Training: Integrated Behavioral Health  
Regulations

-7 AAC Chapter 70

- 7AAC Chapter 135

September 2011

# Division of Behavioral Health

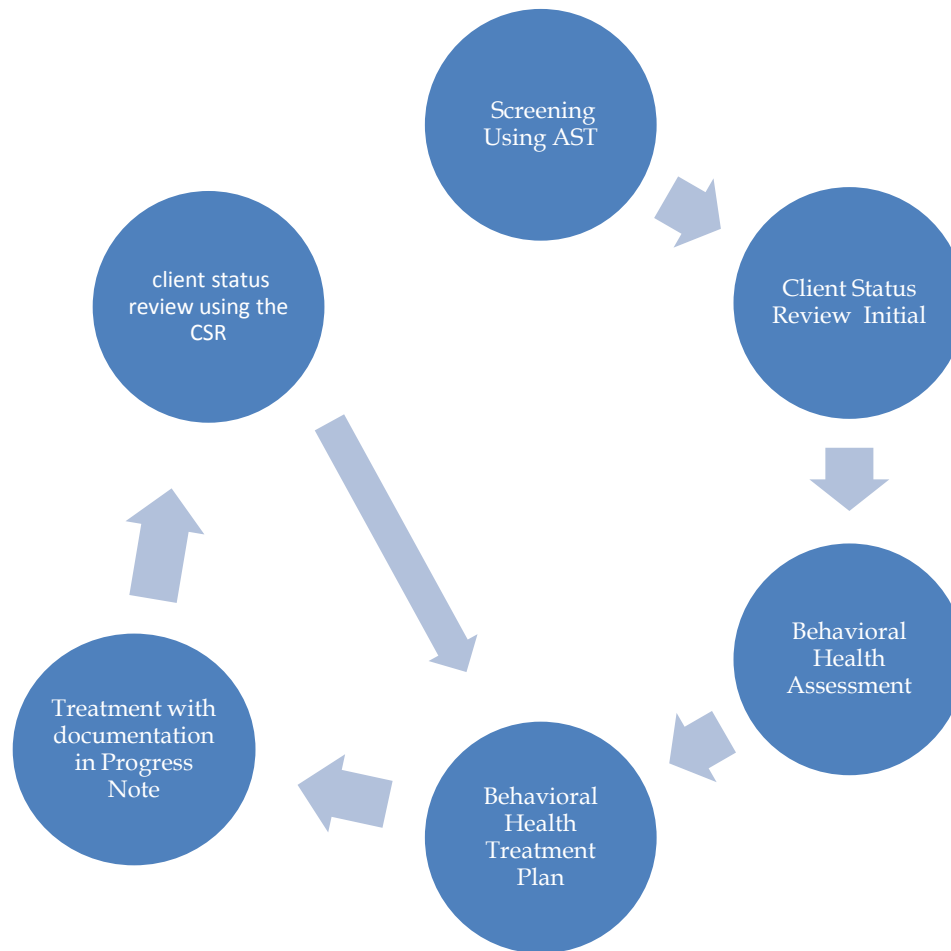
## Service Documentation Requirements

# Clinical Record: 7 AAC 70.100, 7 AAC 135.130 & 7 AAC 135.230

Community behavioral health services providers must maintain a clinical record for each recipient that includes the following:

- A completed behavioral health screening using the Alaska Screening Tool
- A Client Status Review
- An appropriate behavioral health assessment
- A behavioral health treatment plan
- Progress notes for each service for each day the service is provided

# Flow of Treatment



# Medical Necessity

All treatment must be medically necessary which means:

- A qualified individual identifies behavioral health problems and treatment needs in an assessment or reassessment that meets industry standards
- A qualified individual prescribes treatment objectives, services and active interventions in the behavioral health treatment plan derived from the assessment
- Services delivered are those prescribed
- Services are delivered by qualified staff
- Treatment is monitored
  - assessments updated
  - discharge criteria identified
  - progress evaluated
  - treatment changes are made accordingly

# Behavioral Health Screening: 7 AAC 135.100

## Alaska Screening Tool (AST)

- Reimbursable service
- Provider *must* complete the AST for each new or returning recipient of behavioral health services *before* a behavioral health assessment is conducted

# Client Status Review

- CSR= Form
- Client status review= Process of treatment review using the CSR form
- Documentation= CSR form located in the recipient's clinical record and client status review documented in a progress note
- Report CSR form to AKAIMS or the Department
- To Bill= A complete copy of the CSR form in the clinical record as reported to AKAIMS or the Department and a progress note in the clinical record

# Client Status Review: 7 AAC 135.100

Client status review *Reimbursable service if:*

- completed with the client present
- used as relevant clinical information *concurrent with*
  - an initial behavioral health assessment
  - ongoing treatment
  - at discharge
- administered using the Department's Client Status Review (CSR) form or AKAIMS
- used to assist in determining recipient's level of functioning
- used by the directing clinician to
  - measure treatment outcomes
  - make treatment decisions and revisions to the treatment plan
- administered and reviewed every 90 to 135 days
  - while the recipient is in treatment OR
  - from the date the treatment plan was last reviewed

# Behavioral Health Assessments: 7AAC 135.110

## Professional Behavioral Health Assessments

If a behavioral health screening (AST) or a referral by a court or other agency that has identified an individual who is suspected of having a behavioral health disorder that could require behavioral health services the department will pay

### **a community behavioral health services provider for:**

- a mental health intake assessment
- a substance use intake assessment
- an integrated mental health and substance use intake assessment
- a psychiatric assessment
- psychological testing and evaluation

# Behavioral Health Assessments: 7AAC 135.110

**If the provider is a community behavioral health services provider:**

the individual who conducts a professional behavioral health assessment will document in the written assessment that the results of the *Alaska Screening Tool* were reviewed and considered during the assessment

# Behavioral Health Assessments, Cont.

## Mental Health Intake Assessment

- ⦿ Documented in accordance with 7 AAC 135.130 (Clinical Record)
- ⦿ Documented in accordance with 7 AAC 135.230 (Recipient Support Services)

**NOTE: If assessments recommend RSS, the assessment must document**

1. History of high risk behavior or rationale for heightened vigilance
2. Location and frequency of service

- Conducted by a mental health professional clinician
- Upon admission to services as new information becomes available
- Conducted for the purpose of determining:
  - the recipient's mental status, social and medical histories
  - the nature and severity of any identified mental health disorder
  - a complete multi-axial DSM diagnosis
  - functional impairments
  - treatment recommendations that form the basis of a treatment plan

# Behavioral Health Assessments, Cont.

## Substance Use Intake Assessment

- ⦿ Documented in accordance with 7 AAC 135.130 (Clinical Record)
- ⦿ Documented in accordance with 7 AAC 135.230 (Recipient Support Services)

**NOTE: If assessments recommend RSS, the assessment must document**

- 1. History of high risk behavior or rationale for heightened vigilance**
- 2. Location and frequency of service**

Conducted by a substance use disorder counselor, social worker, or other qualified staff qualified program staff member performing duties regularly within the scope of the individual's authority, training, and job description

# Behavioral Health Assessments, Cont.

## Substance Use Intake Assessment

- Upon admission to services
- As new information becomes available
- Conducted for the purpose of determining:
  - if the recipient has a substance abuse disorder
  - the nature and severity of any identified substance abuse disorder
  - the correct diagnosis
  - functional impairments
  - treatment recommendations that form the basis of a treatment plan

# Behavioral Health Assessments, Cont.

## Integrated Mental Health and Substance Use Intake Assessment

- ⦿ Documented in accordance with 7 AAC 135.130 (Clinical Record)
- ⦿ Documented in accordance with 7 AAC 135.230 (Recipient Support Services)

**NOTE: If assessments recommend RSS, the assessment must document**

1. History of high risk behavior or rationale for heightened vigilance
2. Location and frequency of service

- Conducted by a mental health professional clinician
- Upon admission to services as new information becomes available
- Conducted for the purpose of determining:
  - the recipient's mental status, social and medical histories
  - the nature and severity of any identified mental health disorder
  - a complete multi-axial DSM diagnosis
  - functional impairments
  - treatment recommendations that form the basis of a treatment plan

# Behavioral Health Assessments, Cont.

## Psychiatric Assessments

The department will pay a community behavioral health services provider for a psychiatric assessment that is to serve as the professional behavioral health assessment if the recipient's condition indicates the need for a more intensive assessment, including an assessment to evaluate the need for medication.

A psychiatric assessment must be conducted by a licensed practitioner working within the scope of their education, training, and experience, if the provider has prescriptive authority, and if the provider is enrolled under 7 AAC 120.100(c) as a dispensing provider:

- Physician
- Physician Assistant
- Advanced Nurse Practitioner

# Behavioral Health Assessments, Cont.

## Psychiatric Assessments

There are 2 types of Psychiatric Assessments

1. Psychiatric Assessment Interview
2. Interactive Psychiatric Assessment (uses equipment and devices)

# Behavioral Health Assessments, Cont.

## Psychiatric Assessments

Both types of Psychiatric Assessments must include:

- a review of any general medical and psychiatric history or problem the recipient is presenting;
- a relevant recipient history;
- a mental status examination;
- a complete multi-axial DSM diagnosis
- include a listing of any identified psychiatric problems, including functional impairments, with treatment recommendations.

# Behavioral Health Assessments, Cont.

## Psychological Testing and Evaluation

- The department will pay a community behavioral health services provider, or psychologist for psychological testing and evaluation to assist in the diagnosis and treatment of mental and emotional disorders.
- Psychological testing and evaluation includes the assessment of functional capabilities, the administration of standardized psychological tests, and the interpretation of findings.
- Psychological testing and evaluation must be conducted by a mental health professional clinician working within the scope of their education, training, and experience.

# Behavioral Health Treatment Plan: 7 AAC 135.120

## Behavioral Health Treatment Plan

- ⦿ Documented in accordance with 7 AAC 135.130 (clinical record)
- ⦿ Based on a behavioral health assessment
- ⦿ Developed with the recipient *or*
  - With the recipient's legal representative if the recipient is an adult (18 and older)
  - Based upon the input of a treatment team if the recipient is a child (under 18)
- ⦿ Signed and supervised by the directing clinician and signed by the recipient or the recipient's parent or legal representative
- ⦿ Remains current based on the Client Status Review that is conducted every 90-135 days

# Behavioral Health Treatment Plan, Cont.

## Directing Clinician

A substance use disorder counselor or mental health professional clinician working within the scope of their education, training, and experience who, with respect to the recipient's *treatment plan*:

- Develops or oversees the development of the plan
- Periodically reviews and revises the plan as needed
- Signs the plan each time a change is made to the plan
- Monitors and directs the delivery of all services identified in the plan

By signing a treatment plan, a directing clinician attests that in their professional judgment the services prescribed in the plan are appropriate to the recipient's needs, delivered at an adequate skill level, and are achieving the treatment goals.

# Behavioral Health Treatment Plan, Cont.

A behavioral health *treatment team* for a recipient under 18 **must include**:

- The recipient
- The recipient's family members, including parents, guardians, and others involved in providing general oversight to the client
- A staff member from OCS if the recipient is in state's custody
- A staff member from DJJ if the recipient is in their custody
- The directing clinician
- The case manager, if the recipient is experiencing a severe emotional disturbance

A behavioral health *treatment team* for a recipient under 18 **may include**:

- Representative(s) from alternative living arrangements, including foster care, residential child care, or an institution
- Representative(s) from the recipient's educational system

## Behavioral Health Treatment Plan, Cont.

If the recipient is 18 years of age or older, the plan is

(A) developed with the recipient or the recipient's representative and

(B) signed by the recipient or the recipient's representative

# Behavioral Health Treatment Plan, Cont.

All members of the behavioral health treatment team shall attend meetings of the team in person or by telephone and be involved in team decisions unless the clinical record documents that

- (1) the other team members determine that participation by the recipient or other individual involved with the care of the recipient is detrimental to the recipient's well-being
- (2) family members, school district employees, or government agency employees refuse to or are unable to participate after the provider's responsible efforts to encourage participation or
- (3) weather, illness, or other circumstances beyond the member's control prohibits that member from participating

# Behavioral Health Treatment Plan, Cont.

## Documentation Requirements

- Recipient's identifying information
- The date implementation of plan will begin
- Treatment goals that are directly related to the findings of the assessment
- The services and interventions that will be rendered to address the goals
- The name, signature, and credentials of the directing clinician
- The signature of the recipient or the recipient's parent or legal representative

# Progress Notes

## Progress Notes- 7AAC 135.130

- Documented progress note for each service for each day the service is provided
- Date service was provided
- Duration of the service expressed in service units or clock time
- Description of the active treatment provided (interventions)
- Treatment goals that the service targeted
- Description of the recipient's progress toward treatment goals
- Name, signature, and credentials of the individual who rendered the service

# Progress Notes

## Progress Notes 7AAC 105.230

- Name of recipient
- Specific services provided
- Extent (duration) of services provided
- Date on which service was provided
- Individual who provided service
- Information that identifies the recipients diagnosis and the medical need for the service
- Start and Stop times for time based service codes
- Name, credentials of the individual who rendered

# Short-term Crisis Intervention

## 7AAC 135.160

The department will pay a community behavioral health services provider for short-term crisis intervention services, **provided by a mental health professional clinician** to a recipient, if that mental health professional clinician provides an initial assessment of the

- nature of the crisis;
- recipient's mental, emotional, and behavioral status; and
- recipient's overall functioning in relation to the crisis.

# Short-term Crisis Intervention

The mental health professional clinician may order and deliver any medically necessary and clinically appropriate behavioral health **clinic or rehabilitation service** or intervention in the crisis plan to

- reduce symptoms
- prevent harm
- prevent further relapse or deterioration
- stabilize the recipient

# Short-term Crisis Intervention

The mental health professional clinician is responsible for

- 1- planning behavioral health services needed
- 2- writing the short-term crisis intervention plan that contains:
  - treatment goals derived from the assessment
  - a description of the medically necessary and clinically appropriate services
  - directing all services (except for pharmacologic management services)

# Short-term Crisis Intervention

- ✓ Services must be documented by the individual who provides the service
- ✓ All documentation must be filed in the recipient's clinical record
- ✓ Short-term crisis intervention must be documented on a contact form provided by the department

# Short-term Crisis Stabilization

## 7 AAC 135.170

The department will pay a community behavioral health services provider for short-term crisis stabilization services, provided by a substance use disorder counselor or a behavioral health clinical associate to a recipient, if the counselor or associate

- provides an initial assessment of the recipient's overall functioning in relation to the crisis
- develops a short-term crisis stabilization plan
- documents the assessment, stabilization plan, and rehab services to be delivered

# Short-term Crisis Stabilization

- ✓ Services must be documented by the individual who provides the service
- ✓ All documentation must be filed in the recipient's clinical record
- ✓ Short-term crisis intervention must be documented on a contact form provided by the department