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State/Territory Name: Minnesota

State Plan Amendment (SPA) #: 18-0006

This file contains the following documents in the order listed:

- 1) Approval Letter
- 2) CMS 179 Form
- 3) Approved SPA Pages

Department of Health & Human Services Centers for Medicare & Medicaid Services 233 North Michigan Avenue, Suite 600 Chicago, Illinois 60601-5519



January 7, 2019

Ann Berg, Deputy Medicaid Director Minnesota Department of Human Services P.O. Box 64983 St. Paul, MN 55164-0983

Dear Ms. Berg:

Enclosed for your records is an approved copy of the following State Plan Amendment:

Transmittal #18-0006 -- Revises mental health provider qualifications.

--Effective Date: May 12, 2018

--Approval Date: January 7, 2019

If you have any additional questions, please have a member of your staff contact Sandra Porter at (312) 353-8310 or via e-mail at Sandra.Porter@cms.hhs.gov.

Sincerely,

/s/

Ruth A. Hughes Associate Regional Administrator Division of Medicaid and Children's Health Operations

Enclosures

cc: Sean Barrett, DHS

DEPARTMENT OF HEALTH AND HUMAN SERVICES CENTERS FOR MEDICARE & MEDICAID SERVICES		FORM APPROVED OMB NO. 0938-0193
TRANSMITTAL AND NOTICE OF APPROVAL OF	1. TRANSMITTAL NUMBER:	2. STATE
STATE PLAN MATERIAL		
FOR: CENTER FOR MEDICARE & MEDICAID SERVICES	18-06	Minnesota
	3. PROGRAM IDENTIFICATION: TITLE XIX OF THE SOCIAL SECURITY ACT (MEDICAID)	
TO: REGIONAL ADMINISTRATOR	4. PROPOSED EFFECTIVE DATE	
CENTER FOR MEDICARE & MEDICAID SERVICES	· ·	
DEPARTMENT OF HEALTH AND HUMAN SERVICES	May 12, 2018	
5. TYPE OF PLAN MATERIAL (Check One):		
		77 A 3 (T) (T) (T) (T)
	ONSIDERED AS NEW PLAN	X AMENDMENT
COMPLETE BLOCKS 6 THRU 10 IF THIS IS AN AME		
6. FEDERAL STATUTE/REGULATION CITATION:	7. FEDERAL BUDGET IMPACT (in t a. FFY '18 \$0	nousands):
42 CFR § 440.130	b. FFY '19 \$0	
8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT:	9. PAGE NUMBER OF THE SUPERS	EDED PLAN SECTION
Attachment 3.1-A, pages: 17a-2, 17b, 17c, 17d, 54a-1, 54c,	OR ATTACHMENT (If Applicable):	
54c.1, 54d, 54g.1, 54o	Same	
Attachment 3.1-B, pages: 16a-2, 16b, 16c, 16d, 53a-1, 53c,	Same	
53c.1, 53d, 53g.1, 53o		
10. SUBJECT OF AMENDMENT:		
Rehabilitative Services		
Action Mark to 242 visus		
11. GOVERNOR'S REVIEW (Check One):		
x GOVERNOR'S OFFICE REPORTED NO COMMENT	\Box OTHER, AS SPECIF	IED:
☐ COMMENTS OF GOVERNOR'S OFFICE ENCLOSED		
☐ NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL		
10. GLOVE TATE OF STATE A CENTS OF STATE	16 DETUDNITO:	
12. SIGNATURE OF STATE AGENCY OFFICIAL:	16. RETURN TO: Sean Barrett Minnesota Department of Human Services Federal Relations Unit PO Box 64983	
	St. Paul, MN 55164-0983	
13. TYPED NAME:	St. 1 aui, 14114 33104-0903	
Ann Berg		
14. TITLE:		
Deputy Medicaid Director		
15. DATE SUBMITTED:		
June 29, 2018		
FOR REGIONAL OF	FICE USE ONLY	
17. DATE RECEIVED:	18. DATE APPROVED:	.*
June 29, 2018	January 7,	2019
PLAN APPROVED – ON		
19. EFFECTIVE DATE OF APPROVED MATERIAL:	20. SIGNATURE OF REGIONAL OF	FICIAL:
May 12, 2018	/s/	and the second s
21. TYPED NAME:	22. TITLE:	
Ruth A. Hughes	Associate Regional Adn	ninistrator
23. REMARKS:		

STATE: MINNESOTA ATTACHMENT 3.1-A Effective: May 12, 2018 Page 17a-2

TN: 18-06

Approved: January 7, 2019

Supersedes: 17-21 (15-14,13-14,11-04,09-22,08-02,06-12,04-10,02-22)

4.b. Early and periodic screening, diagnosis, and treatment services: (continued)

1. Children's therapeutic services and supports for children is a package of mental health services for children that includes varying levels of therapeutic and rehabilitative intervention provided by mental health professionals, and mental health practitioners under the clinical supervision of mental health professionals, in order to treat a diagnosed emotional disturbance or mental illness. The interventions are delivered using various treatment modalities and combinations of services designed to realize treatment outcomes identified in a recipient's individual treatment plan.

A diagnostic assessment by a mental health professional or mental health practitioner clinical trainee as described in item 6.d.A, must have determined that the child is in need of children's therapeutic services and supports to address an identified disability and functional impairment.

Qualified children's therapeutic services and supports providers can provide diagnostic assessment, explanation of findings, psychological testing and neuropsychological services.

The following are eligible to provide children's therapeutic services and supports:

- A. A county-operated or non-county operated entity certified by the Department
- B. A facility of the Indian Health Service or a facility owned or operated by a tribe or tribal organization and funded by either Title I of the Indian Self-Determination and Education Assistance Act, P.L. 93-638, as amended, or Title V of the Indian Self-Determination and Education Assistance Act, P.L. 106-260, operating as a 638 facility. A facility of the Indian Health Service or a 638 facility must be certified by the Department.

Provider Qualifications and Training

- A. A mental health professional is an individual defined in item 6.d.A.
- B. A mental health practitioner working under the direction of a mental health professional:
 - 1) holds a bachelor's degree in one of the behavior sciences or related fields from an accredited college or university, works in a day treatment program, and:
 - a. has at least 2,000 hours of supervised experience in the delivery of mental health services to children with emotional disturbances or mental illness;

STATE: MINNESOTA ATTACHMENT 3.1-A Effective: May 12, 2018 Page 17b

TN: 18-06

Approved: January 7, 2019

Supersedes: 17-21 (13-14, 11-04, 09-22, 06-12, 04-10, 02-22)

Early and periodic screening, diagnosis, and treatment services: (continued)

- b) is fluent in the non-English language of the ethnic group to which at least 50 percent of the practitioner's clients belong, completes 40 hours of training in the delivery of services to children clients with mental illness or emotional disturbances, and receives clinical supervision from a mental health professional at least once a week until the requirement of 2,000 hours of supervised experience is met; or
- c) works in a day treatment program, receives 40 hours of training in the delivery of services to clients with mental illness or emotional disturbance within the first six months of employment, and receives weekly supervision from a mental health professional until he or she has 2,000 hours of supervised experience. Or,
- 2) has at least 64,000 hours of supervised experience in the delivery of mental health services to children with emotional disturbances, mental illness, or substance use disorder, including hours worked as a mental health behavioral aide I or II; a practitioner with 2,000 hours of supervised experience must receive weekly supervision from a mental health professional until he or she has 4,000 hours of supervised experience; or
- 3) has at least 4,000 hours of supervised experience in the delivery of services to children with traumatic brain injury or developmental disabilities, and completes Department required training on mental illness and emotional disturbance. A practitioner with 2,000 hours of supervised experience must receive weekly supervision from a mental health professional until he or she has 4,000 hours of supervised experience; or
- 4) is a graduate student in one of the behavioral sciences or related fields and is formally assigned by an accredited college or university to an agency or facility for clinical training; or
- 5) holds a master's or other graduate degree in one of the behavioral sciences or related fields from an accredited college or university; and or
- 6) must have 20 hours of continuing education every two calendar years. Topics covered are those identified in item C, subitem 1), clause c), subclause 1), below or holds a bachelor's degree in one of the behavioral sciences or related fields, and completes a practicum or internship that requires direct interaction with children and is focused on behavioral sciences or a related field; or

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Effective: May 12, 2018

TN: 18-06

Approved: January 7, 2019

Supersedes: 13-14 (06-12, 04-10, 02-22)

Early and periodic screening, diagnosis, and treatment services: (continued)

- 7) is working as a clinical trainee as described in item 6.d.A.
- C. A mental health behavioral aide, a paraprofessional who is not the legal quardian or foster parent of the child, working under the direction of a mental health professional or a mental health practitioner under the clinical supervision of a mental health professional.
 - 1) Level I mental health behavioral aides must:
 - a. be at least 18 years of age;
 - b. have a high school diploma or general equivalency diploma (GED) or two years of experience as a primary caregiver to a child with severe emotional disturbance or mental illness within the previous ten years; and
 - c. meet the following orientation and training requirements:
 - 30 hours of preservice training covering Minnesota's data privacy law; the provisions of Minnesota's Comprehensive Children's Mental Health Act; the different diagnostic classifications of emotional disturbance; the use of psychotropic medications in children and the potential side effects; the core values and principles of the Child Adolescent Service System Program; how to coordinate services between the public education system and the mental health system; how to provide culturally appropriate services; and how to provide services to children with developmental disabilities or other special needs.

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Supersedes: 15-14 (13-14, 11-04, 09-22, 06-12. 04-10, 02-22)

4.b. Early and periodic screening, diagnosis, and treatment services: (continued)

Fifteen hours must be face-to-face training in mental health services delivery and eight hours must be parent team training, which includes partnering with parents; fundamentals of family support; fundamentals of policy and decision-making; defining equal partnership; complexities of parent and service provider partnership in multiple service delivery systems; sibling impacts; support networks; and community resources; and

- ii. 20 hours of continuing education every two calendar years. Topics covered are those identified in subclause i., above.
- 2) a Level II mental health behavioral aide must:
 - 1) be at least 18 years of age;
 - 2) have an associate or bachelor's degree or 4,000 hours of experience delivering clinical services to children with in the treatment of mental illness or emotional disturbance concerning children or adolescents, or complete a certification program approved by the Department; and
 - 3) meet the preservice and continuing education requirements as a Level I mental health behavioral aide.
- D. A day treatment multidisciplinary team that includes at least one mental health professional and one mental health practitioner.

Components of Children's Therapeutic Services and Supports
Persons providing children's therapeutic services and support must be capable of providing the following components:

- A. Psychotherapy: patient and/or family, family, and group. Family psychotherapy services must be directed exclusively to the treatment of the child. Psychotherapy services require prior authorization.
- B. Individual, family, or group skills training designed to facilitate the acquisition of psychosocial skills that are medically necessary to rehabilitate the child to an ageappropriate developmental trajectory that was disrupted by psychiatric illness.

STATE: MINNESOTA ATTACHMENT 3.1-A Effective: May 12, 2018 Page 54a-1

TN: 18-06

Approved: January 7, 2019

Supersedes: 11-04 (06-12, 05-01, 04-08, 03-26)

13.d. Rehabilitative services. (continued)

community board of directors. Providers must be capable of providing the services to recipients who are diagnosed with both mental illness or emotional disturbance and chemical dependency, and to recipients dually diagnosed with a mental illness or emotional disturbance and mental retardation or a related condition.

The following are included in the CMHC services payment:

- 1. Diagnostic assessment
- 2. Explanation of findings
- 3. Family, group and individual psychotherapy, including crisis intervention psychotherapy services, multiple family group psychotherapy, psychological testing, and medication management
- 4. Adult day treatment services provided as described below
- 5. Professional home-based mental health services
- 6. For Medicare-certified centers, partial hospitalization for mental illness, as defined at \$1861(ff) of the Act
- 7. Neuropsychological services provided as described below

Adult day treatment includes at least one hour of group psychotherapy and must include group time focused on rehabilitative interventions or other therapeutic services that are provided by a multidisciplinary staff. Rehabilitative interventions are linked to goals and objectives identified in an individual's treatment plan which will lead to improvement in functioning that has been impaired by the symptoms of individual's mental illness or emotional disturbance. Other therapeutic services may include such services as harm reduction or cognitive behavior therapy. Coverage is limited to services provided up to 15 hours per week.

Individual members of the adult day treatment multidisciplinary team must meet, at a minimum, the standards for a mental health practitioner that apply to adult rehabilitative mental health services as defined on page 54c of in this item. Psychotherapy components of day treatment must be provided by a mental health professional unless a mental health practitioner works as a clinical trainee as defined in item 6.d.A. under the clinical supervision of a mental health professional service as defined in item 6.d.A. Members of the multidisciplinary team provide only those day treatment services that are within their scope of practice.

The following agencies may apply to become adult day treatment providers:

- o Licensed outpatient hospitals with JCAHO accreditation;
- o MHCP-enrolled community mental health centers; or
- o Entities under contract with a county to operate a day treatment program.

Neuropsychological services include neuropsychological assessment and neuropsychological testing.

Effective: May 12, 2018 Page 54c

TN: 18-06

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Supersedes: 17-21 (14-17, 08-17, 06-12, 05-01, 04-08, 03-26)

13.d. Rehabilitative services. (continued)

Provider Qualifications and Training

1. A mental health practitioner must be qualified in at least one of the following ways:

- A. holds a bachelor's degree in one has completed coursework in of the behavioral sciences or related fields—from an accredited college or university and equal to 30 semester hours or 45 hours under a quarters system, and one of the following:
 - (i) has at least 2,000 hours of supervised experience in the delivery of services to:
 - 1) persons with mental illness, <u>emotional disturbance</u>, or substance use disorder; or
 - 2) persons with traumatic brain injury or developmental disabilities, and completes Department required training on mental illness;
 - (ii) is fluent in the non-English language of the ethnic group to which at least 50 percent of the practitioner's clients belong, completes 40 hours of training in the delivery of services to persons with mental illness or emotional disturbance, and receives clinical supervision from a mental health professional at least once a week until the requirement of 2,000 hours of supervised experience is met;—or
 - (iii) works in a day treatment program; or
 - (iv) has completed a practicum or internship that required direct interaction with clients and was focused on behavioral sciences or a related field.
- B. has at least 64,000 hours of supervised experience in the delivery of services to persons with mental illness, emotional disturbance, or substance use disorder; a practitioner with 2,000 hours of supervised experience must receive weekly supervision from a mental health professional until he or she has 4,000 hours of supervised experience;
- C. has at least 4,000 hours of supervised experience in the delivery of services to clients with traumatic brain injury or developmental disabilities, and completes Department required training on mental illness. A practitioner with 2,000 hours of supervised experience must receive weekly supervision from a mental health professional until he or she has 4,000 hours of supervised experience;
- D. is a graduate student in one of the behavioral sciences or related fields and is formally assigned by an accredited college or university to an agency or facility for clinical training; or

STATE: MINNESOTA ATTACHMENT 3.1-A Page 54c.1

Effective: May 12, 2018

TN: 18-06

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Supersedes: 17-21 (09-15, 08-17, 06-12, 05-01, 04-08, 03-26)

Rehabilitative services. (continued)

E. holds a master's or other graduate degree in one of the behavioral sciences or related fields from an accredited college or university and has less than 4,000 hours post-master's experience in the treatment of mental illness.;

- F. holds a bachelor's degree in one of the behavioral sciences or related fields, and completes a practicum or internship that requires direct interaction with clients and is focused on behavioral sciences or a related field; or
- G. is working as a clinical trainee as described in item 6.d.A.

A mental health practitioner must receive ongoing continuing education training as required by the practitioner's professional license; or, if not licensed, a mental health practitioner must receive ongoing continuing education training of at least 30 hours every two years in areas of mental illness and mental health services.

- 2. A mental health rehabilitation worker must:
- A. Be at least 21 years of age;
- B. Have a high school diploma or equivalent;
- Have successfully completed 30 hours of training before provision of direct services, or during the two years immediately prior to the date of hire, in all the following areas: recovery from mental illness/emotional disturbance, mental health de-escalation techniques, recipient rights, recipient-centered individual treatment planning, behavioral terminology, mental illness/emotional disturbance, co-occurring mental illness and substance abuse, psychotropic medications and side effects, functional assessment, local community resources, adult vulnerability, and recipient confidentiality; and
- Meet the qualifications in (1), (2) or (3) $\overline{(2)}$ below:
 - (1) (a) have an associate of arts degree; or
 - (2) (b) completed a two-year full-time, post-secondary education in one of the behavioral sciences or human services;
 - (3) (c) completed coursework in one of the behavioral sciences or related fields equal to 15 semester hours or 23 hours under a quarters system;
 - (4) (d) be a registered nurse without a bachelor's degree, or
 - (5) (e) within the previous ten years:
 - (a) (i) have three years of personal life experience with serious and persistent mental illness;
 - (b) (ii) have three years of life experience as a primary caregiver to a person with a serious mental illness/emotional disturbance, substance use disorder, developmental
 - disability, or traumatic brain injury; or
 - (c) (iii) have 42,000 hours of supervised paid work experience in the delivery of mental health services to persons with serious mental illness/emotional disturbance, substance use disorder, developmental disability, or traumatic brain injury; or

ATTACHMENT 3.1-A STATE: MINNESOTA Page 54d

Effective: May 12, 2018

TN: 18-06

Approved: January 7, 2019

Supersedes: 09-15 (06-12, 05-01, 04-08, 03-26)

Rehabilitative services. (continued) 13.d.

> (a) Be fluent in the language or competent in the culture of the ethnic group to which at least 20 percent of the mental health rehabilitation worker's clients belong;

- receive monthly individual clinical supervision by a mental health professional during the first 2,000 hours of work. Supervision must be documented;
- have 18 hours of documented field supervision by a mental health professional or mental health practitioner during the first 160 hours of contact work with recipients and at least six hours of field supervision quarterly during the following year;
- have review and cosignature of charting of recipient contacts during field supervision by a mental health professional or mental health practitioner; and
- (e) have 15 hours of additional continuing education on mental health topics during the first year of employment and 15 hours during every additional year of employment. Or,
- (3) For providers of intensive residential treatment services or crisis stabilization services in a residential setting, meet the qualifications described below:
 - (a) Meet the requirements of clause 2(b) (d) above; and (b) Have 40 hours of additional continuing education on mental health topics during the first year of employment;
- Receive ongoing continuing education training of at least 30 hours every two years in areas of mental illness/emotional disturbance and mental health services and other areas specific to the population being served.

STATE: MINNESOTA ATTACHMENT 3.1-A Effective: May 12, 2018 Page 54g.1

TN: 18-06

Approved: January 7, 2019 Supersedes: 14-17

13.d. Rehabilitative services. (continued)

Mental health crisis response services are services recommended by a physician, mental health professional defined in item 6.d.A, or licensed mental health practitioner. Mental health crisis response services may be provided by the following provider types:

- 1. A county-operated or non-county operated entity certified by the Department.
- 2. A facility of the Indian Health Service or a facility owned or operated by a tribe or tribal organization and funded by either Title I of the Indian Self-Determination and Education Assistance Act, P.L. 93-638, as amended, or Title V of the Indian Self-Determination and Education Assistance Act, P.L. 106-260, operating as a 638 facility.

Mental health crisis team members must meet the qualifications, training and supervision standards that apply to adult rehabilitative mental health services in addition to completing at least 30 hours of training in crisis response services skills and knowledge every two years. Members of the team provide only those crisis services that are within their scope of practice.

The components of mental health crisis response services are:

1. **Crisis assessment**. Crisis assessment is an immediate face-to-face appraisal by a physician, mental health professional, or mental health practitioner under the clinical supervision of a mental health professional, following a determination that suggests the recipient may be experiencing a mental health crisis.

The crisis assessment is an evaluation of any immediate needs for which emergency services are necessary and, as time permits, the recipient's life situation, sources of stress, mental health problems and symptoms, strengths, cultural considerations, support network, vulnerabilities, and current functioning.

- 2. Crisis intervention. Crisis intervention is a face-to-face, short-term intensive service provided during a mental health crisis to help a recipient cope with immediate stressors, identify and utilize available resources and strengths, and begin to return to the recipient's baseline level of functioning. Crisis intervention must be available 24 hours a day, seven days a week. However, if a county provider demonstrates to the satisfaction of the Department that, due to geographic or other barriers, it cannot provide crisis intervention 24 hours a day, seven days a week, the Department may approve a county provider based on an alternative plan proposed by a county or group of counties. The alternative plan must be designed to:
 - 1) result in increased access and reduction in disparities in the availability of crisis services;

Effective: May 12, 2018 Page 540

TN: 18-06

Approved: January 7, 2019

Supersedes: 14-17 (09-17, 05-01, 04-08, 03-26)

13.d. Rehabilitative services. (continued)

is at least one staff for every nine recipients for each day and evening shift. If more than nine recipients are present at the residence, there must be a minimum of two staff during day and evening shifts, one of whom must be a mental health professional or a mental health practitioner.

Team members must meet the qualifications, training and supervision standards that apply to adult rehabilitative mental health services, except that mental health rehabilitative workers acting as overnight staff need only meet the qualifications listed in item 2, subitems A through C on page 54c.1. Members of the team provide only those services that are within their scope of practice. A mental health rehabilitation worker under the supervision of a mental health professional can provide skills training and education, medication monitoring, resident supervision and direction, inter-agency coordination, and crisis services.

The team must provide the following:

- 1. The components of adult rehabilitative mental health.
- 2. Integrated dual diagnosis treatment.
- 3. Medication monitoring and training in medication self-administration.
- 4. Illness management and recovery.
- 5. Psychological support and skills training.
- 6. Consultation with relatives, guardians, friends, employers, treatment providers, and other significant people, in order to change situations and allow the recipient to function more independently. The consultation must be directed exclusively to the treatment of the recipient.
- 7. Crisis services.
- 8. Resident supervision and direction.
- 9. Inter-agency coordination.

The services below are not eligible for medical assistance payment as intensive residential treatment services:

- 1. Recipient transportation services otherwise reimbursed under this Attachment.
- 2. Services billed by a nonenrolled Medicaid provider.

Effective: May 12, 2018 Page 16a-2

TN: 18-06

Approved: January 7, 2019

Supersedes: 17-21 (15-14, 13-14, 11-04, 09-22, 08-02, 06-12, 04-10, 02-22)

4.b. Early and periodic screening, diagnosis, and treatment services: (continued)

1. Children's therapeutic services and supports for children is a package of mental health services for children that includes varying levels of therapeutic and rehabilitative intervention provided by mental health professionals, and mental health practitioners under the clinical supervision of mental health professionals, in order to treat a diagnosed emotional disturbance or mental illness. The interventions are delivered using various treatment modalities and combinations of services designed to realize treatment outcomes identified in a recipient's individual treatment plan.

A diagnostic assessment by a mental health professional or mental health practitioner clinical trainee as described in item 6.d.A, must have determined that the child is in need of children's therapeutic services and supports to address an identified disability and functional impairment.

Qualified children's therapeutic services and supports providers can provide diagnostic assessment, explanation of findings, psychological testing and neuropsychological services.

The following are eligible to provide children's therapeutic services and supports:

- A. A county-operated or non-county operated entity certified by the Department
- B. A facility of the Indian Health Service or a facility owned or operated by a tribe or tribal organization and funded by either Title I of the Indian Self-Determination and Education Assistance Act, P.L. 93-638, as amended, or Title V of the Indian Self-Determination and Education Assistance Act, P.L. 106-260, operating as a 638 facility. A facility of the Indian Health Service or a 638 facility must be certified by the Department.

Provider Qualifications and Training

- A. A mental health professional is an individual defined in item 6.d.A.
- B. A mental health practitioner working under the direction of a mental health professional:
 - 1) holds a bachelor's degree in one of the behavior sciences or related fields from an accredited college or university, works in a day treatment program, and:
 - a. has at least 2,000 hours of supervised experience in the delivery of mental health services to children with emotional disturbances or mental illness;

STATE: MINNESOTA ATTACHMENT 3.1-B Effective: May 12, 2018 Page 16b

TN: 18-06

Approved: January 7, 2019

Supersedes: 17-21 (13-14, 11-04, 09-22, 06-12, 04-10, 02-22)

4.b. Early and periodic screening, diagnosis, and treatment services: (continued)

- b) is fluent in the non-English language of the ethnic group to which at least 50 percent of the practitioner's clients belong, completes 40 hours of training in the delivery of services to children clients with mental illness or emotional disturbances, and receives clinical supervision from a mental health professional at least once a week until the requirement of 2,000 hours of supervised experience is met; or
- c) works in a day treatment program, receives 40 hours of training in the delivery of services to clients with mental illness or emotional disturbance within the first six months of employment, and receives weekly supervision from a mental health professional until he or she has 2,000 hours of supervised experience. Or,
- 2) has at least 64,000 hours of supervised experience in the delivery of mental health services to children with emotional disturbances, mental illness, or substance use disorder, including hours worked as a mental health behavioral aide I or II; a practitioner with 2,000 hours of supervised experience must receive weekly supervision from a mental health professional until he or she has 4,000 hours of supervised experience; or
- has at least 4,000 hours of supervised experience in the delivery of services to children with traumatic brain injury or developmental disabilities, and completes Department required training on mental illness and emotional disturbance.

 A practitioner with 2,000 hours of supervised experience must receive weekly supervision from a mental health professional until he or she has 4,000 hours of supervised experience; or
- 4) is a graduate student in one of the behavioral sciences or related fields and is formally assigned by an accredited college or university to an agency or facility for clinical training; or
- 5) holds a master's or other graduate degree in one of the behavioral sciences or related fields from an accredited college or university; and or
- 6) must have 20 hours of continuing education every two calendar years. Topics covered are those identified in item C, subitem 1), clause c), subclause 1), below or holds a bachelor's degree in one of the behavioral sciences or related fields, and completes a practicum or internship that requires direct interaction with children and is focused on behavioral sciences or a related field; or

Effective: May 12, 2018 Page 16c

TN: 18-06

Approved: January 7, 2019

Supersedes: 13-14 (06-12, 04-10, 02-22)

4.b. Early and periodic screening, diagnosis, and treatment services: (continued)

- 7) is working as a clinical trainee as described in item 6.d.A.
- C. A mental health behavioral aide, a paraprofessional who is not the legal guardian or foster parent of the child, working under the direction of a mental health professional or a mental health practitioner under the clinical supervision of a mental health professional.
 - 1) Level I mental health behavioral aides must:
 - a. be at least 18 years of age;
 - b. have a high school diploma or general equivalency diploma (GED) or two years of experience as a primary caregiver to a child with severe emotional disturbance or mental illness within the previous ten years; and
 - c. meet the following orientation and training requirements:
 - i. 30 hours of preservice training covering Minnesota's data privacy law; the provisions of Minnesota's Comprehensive Children's Mental Health Act; the different diagnostic classifications of emotional disturbance; the use of psychotropic medications in children and the potential side effects; the core values and principles of the Child Adolescent Service System Program; how to coordinate services between the public education system and the mental health system; how to provide culturally appropriate services; and how to provide services to children with developmental disabilities or other special needs.

Effective: May 12, 2018 Page 16d

TN: 18-06

Approved: January 7, 2019

Supersedes: 15-14 (13-14, 11-04, 09-22, 06-12, 04-10, 02-22)

4.b. Early and periodic screening, diagnosis, and treatment services: (continued)

Fifteen hours must be face-to-face training in mental health services delivery and eight hours must be parent team training, which includes partnering with parents; fundamentals of family support; fundamentals of policy and decision-making; defining equal partnership; complexities of parent and service provider partnership in multiple service delivery systems; sibling impacts; support networks; and community resources; and

- ii. 20 hours of continuing education every two calendar years. Topics covered are those identified in subclause i., above.
- 2) a Level II mental health behavioral aide must:
 - 1) be at least 18 years of age;
 - 2) have an associate or bachelor's degree or 4,000 hours of experience delivering clinical services to children with in the treatment of mental illness or emotional disturbance concerning children or adolescents, or complete a certification program approved by the Department; and
 - 3) meet the preservice and continuing education requirements as a Level I mental health behavioral aide.
- D. A day treatment multidisciplinary team that includes at least one mental health professional and one mental health practitioner.

Components of Children's Therapeutic Services and Supports

Persons providing children's therapeutic services and support must be capable of providing the following components:

- A. Psychotherapy: patient and/or family, family, and group. Family psychotherapy services must be directed exclusively to the treatment of the child. Psychotherapy services require prior authorization.
- B. Individual, family, or group skills training designed to facilitate the acquisition of psychosocial skills that are medically necessary to rehabilitate the child to an age-appropriate developmental trajectory that was disrupted by psychiatric illness.

STATE: MINNESOTA ATTACHMENT 3.1-B Effective: May 12, 2018 Page 53a-1

TN: 18-06

Approved: January 7, 2019

Supersedes: 11-04 (06-12, 05-01, 04-08, 03-26)

13.d. Rehabilitative services. (continued)

community board of directors. Providers must be capable of providing the services to recipients who are diagnosed with both mental illness or emotional disturbance and chemical dependency, and to recipients dually diagnosed with a mental illness or emotional disturbance and mental retardation or a related condition.

The following are included in the CMHC services payment:

- 1. Diagnostic assessment
- 2. Explanation of findings
- 3. Family, group and individual psychotherapy, including crisis intervention psychotherapy services, multiple family group psychotherapy, psychological testing, and medication management
- 4. Adult day treatment services provided as described below.
- 5. Professional home-based mental health services
- 6. For Medicare-certified centers, partial hospitalization for mental illness, as defined at \$1861(ff)\$ of the Act \div
- 7. Neuropsychological services provided as described below.

Adult day treatment includes at least one hour of group psychotherapy and must include group time focused on rehabilitative interventions or other therapeutic services that are provided by a multidisciplinary staff. Rehabilitative interventions are linked to goals and objectives identified in an individual's treatment plan which will lead to improvement in functioning that has been impaired by the symptoms of individual's mental illness or emotional disturbance. Other therapeutic services may include such services as harm reduction or cognitive behavior therapy. Coverage is limited to services provided up to 15 hours per week.

Individual members of the adult day treatment multidisciplinary team must meet, at a minimum, the standards for a mental health practitioner that apply to adult rehabilitative mental health services as defined on page 54c of in this item. Psychotherapy components of day treatment must be provided by a mental health professional unless a mental health practitioner works as a clinical trainee as defined in item 6.d.A. under the clinical supervision of a mental health professional service as defined in item 6.d.A. Members of the multidisciplinary team provide only those day treatment services that are within their scope of practice.

The following agencies may apply to become adult day treatment providers:

- o Licensed outpatient hospitals with JCAHO accreditation;
- o MHCP-enrolled community mental health centers; or
- o Entities under contract with a county to operate a day treatment program.

Neuropsychological services include neuropsychological assessment and neuropsychological testing.

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13.d. Rehabilitative services. (continued)

Provider Qualifications and Training

1. A mental health practitioner must be qualified in at least one of the following ways:

- A. holds a bachelor's degree in one has completed coursework in of the behavioral sciences or related fields—from an accredited college or university and equal to 30 semester hours or 45 hours under a quarters system, and one of the following:
 - (i) has at least 2,000 hours of supervised experience in the delivery of services to:
 - 1)persons with mental illness, <u>emotional disturbance</u>, or substance use disorder; or
 - 2) persons with traumatic brain injury or developmental disabilities, and completes Department required training on mental illness;
 - (ii) is fluent in the non-English language of the ethnic group to which at least 50 percent of the practitioner's clients belong, completes 40 hours of training in the delivery of services to persons with mental illness or emotional disturbance, and receives clinical supervision from a mental health professional at least once a week until the requirement of 2,000 hours of supervised experience is met;—or
 - (iii) works in a day treatment program; or
 - (iv) has completed a practicum or internship that required direct interaction with clients and was focused on behavioral sciences or a related field.
- B. has at least 64,000 hours of supervised experience in the delivery of services to persons with mental illness, emotional disturbance, or substance use disorder; a practitioner with 2,000 hours of supervised experience must receive weekly supervision from a mental health professional until he or she has 4,000 hours of supervised experience;
- C. has at least 4,000 hours of supervised experience in the delivery of services to clients with traumatic brain injury or developmental disabilities, and completes Department required training on mental illness. A practitioner with 2,000 hours of supervised experience must receive weekly supervision from a mental health professional until he or she has 4,000 hours of supervised experience;
- D. is a graduate student in one of the behavioral sciences or related fields and is formally assigned by an accredited college or university to an agency or facility for clinical training; or

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13.d Rehabilitative services. (continued)

E. holds a master's or other graduate degree in one of the behavioral sciences or related fields from an accredited college or university and has less than 4,000 hours post-master's experience in the treatment of mental illness.;

- F. holds a bachelor's degree in one of the behavioral sciences or related fields, and completes a practicum or internship that requires direct interaction with clients and is focused on behavioral sciences or a related field; or
- G. is working as a clinical trainee as described in item 6.d.A.

A mental health practitioner must receive ongoing continuing education training as required by the practitioner's professional license; or, if not licensed, a mental health practitioner must receive ongoing continuing education training of at least 30 hours every two years in areas of mental illness and mental health services.

- 2. A mental health rehabilitation worker must:
- A. Be at least 21 years of age;
- B. Have a high school diploma or equivalent;
- Have successfully completed 30 hours of training before provision of direct services, or during the two years immediately prior to the date of hire, in all the following areas: recovery from mental illness/emotional disturbance, mental health de-escalation techniques, recipient rights, recipient-centered individual treatment planning, behavioral terminology, mental illness/emotional disturbance, co-occurring mental illness and substance abuse, psychotropic medications and side effects, functional assessment, local community resources, adult vulnerability, and recipient confidentiality; and
- Meet the qualifications in (1), (2) or (3) $\overline{(2)}$ below:
 - (1) (a) have an associate of arts degree; or
 - (2) (b) completed a two-year full-time, post-secondary education in one of the behavioral sciences or human services;
 - (3) (c) completed coursework in one of the behavioral sciences or related fields equal to 15 semester hours or 23 hours under a quarters system;
 - (4) (d) be a registered nurse without a bachelor's degree, or
 - (5) (e) within the previous ten years:
 - (a) (i) have three years of personal life experience with serious and persistent mental illness;
 - (b) (ii) have three years of life experience as a primary caregiver to a person with a serious mental illness/emotional disturbance, substance use disorder, developmental disability, or traumatic brain injury; or
 - (c) (iii) have 42,000 hours of supervised paid work experience in the delivery of mental health services to persons with serious mental illness/emotional disturbance, substance use disorder, developmental disability, or traumatic brain injury; or

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13.d. Rehabilitative services. (continued)

(2) (a) Be fluent in the language or competent in the culture of the ethnic group to which at least 20 percent of the mental health rehabilitation worker's clients belong;

- (b) receive monthly individual clinical supervision by a mental health professional during the first 2,000 hours of work. Supervision must be documented;
- (c) have 18 hours of documented field supervision by a mental health professional or mental health practitioner during the first 160 hours of contact work with recipients and at least six hours of field supervision quarterly during the following year;
- (d) have review and cosignature of charting of recipient contacts during field supervision by a mental health professional or mental health practitioner; and
- (e) have 15 hours of additional continuing education on mental health topics during the first year of employment and 15 hours during every additional year of employment. $\underline{\text{Or}}_{,}$
- (3) For providers of intensive residential treatment services or crisis stabilization services in a residential setting, meet the qualifications described below:
 - (a) Meet the requirements of clause 2(b) (d) above; and (b) Have 40 hours of additional continuing education on mental health topics during the first year of employment;
- E. Receive ongoing continuing education training of at least 30 hours every two years in areas of mental illness/emotional disturbance and mental health services and other areas specific to the population being served.

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13.d. Rehabilitative services. (continued)

Mental health crisis response services are services recommended by a physician, mental health professional defined in item 6.d.A, or licensed mental health practitioner. Mental health crisis response services may be provided by the following provider types:

- 1. A county-operated or non-county operated entity certified by the Department.
- 2. A facility of the Indian Health Service or a facility owned or operated by a tribe or tribal organization and funded by either Title I of the Indian Self-Determination and Education Assistance Act, P.L. 93-638, as amended, or Title V of the Indian Self-Determination and Education Assistance Act, P.L. 106-260, operating as a 638 facility.

Mental health crisis team members must meet the qualifications, training and supervision standards that apply to adult rehabilitative mental health services in addition to completing at least 30 hours of training in crisis response services skills and knowledge every two years. Members of the team provide only those crisis services that are within their scope of practice.

The components of mental health crisis response services are:

1. Crisis assessment. Crisis assessment is an immediate face-to-face appraisal by a physician, mental health professional, or mental health practitioner under the clinical supervision of a mental health professional, following a determination that suggests the recipient may be experiencing a mental health crisis.

The crisis assessment is an evaluation of any immediate needs for which emergency services are necessary and, as time permits, the recipient's life situation, sources of stress, mental health problems and symptoms, strengths, cultural considerations, support network, vulnerabilities, and current functioning.

- 2. Crisis intervention. Crisis intervention is a face-to-face, short-term intensive service provided during a mental health crisis to help a recipient cope with immediate stressors, identify and utilize available resources and strengths, and begin to return to the recipient's baseline level of functioning. Crisis intervention must be available 24 hours a day, seven days a week. However, if a county provider demonstrates to the satisfaction of the Department that, due to geographic or other barriers, it cannot provide crisis intervention 24 hours a day, seven days a week, the Department may approve a county provider based on an alternative plan proposed by a county or group of counties. The alternative plan must be designed to:
 - 1) result in increased access and reduction in disparities in the availability of crisis services;

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13.d. Rehabilitative services. (continued)

is at least one staff for every nine recipients for each day and evening shift. If more than nine recipients are present at the residence, there must be a minimum of two staff during day and evening shifts, one of whom must be a mental health professional or a mental health practitioner.

Team members must meet the qualifications, training and supervision standards that apply to adult rehabilitative mental health services, except that mental health rehabilitative workers acting as overnight staff need only meet the qualifications listed in item 2, subitems A through C on page 53c.1. Members of the team provide only those services that are within their scope of practice. A mental health rehabilitation worker under the supervision of a mental health professional can provide skills training and education, medication monitoring, resident supervision and direction, inter-agency coordination, and crisis services.

The team must provide the following:

- 1. The components of adult rehabilitative mental health services.
- 2. Integrated dual diagnosis treatment.
- 3. Medication monitoring and training in medication self-administration.
- 4. Illness management and recovery.
- 5. Psychological support and skills training.
- 6. Consultation with relatives, guardians, friends, employers, treatment providers, and other significant people, in order to change situations and allow the recipient to function more independently. The consultation must be directed exclusively to the treatment of the recipient.
- 7. Crisis services.
- 8. Resident supervision and direction.
- 9. Inter-agency coordination.

The services below are not eligible for medical assistance payment as intensive residential treatment services:

- 1. Recipient transportation services otherwise reimbursed under this Attachment.
- 2. Services billed by a nonenrolled Medicaid provider.