STATE OF RHODE ISLAND EXECUTIVE OFFICE OF HEALTH AND HUMAN SERVICES

07/18/2022 PUBLIC NOTICE OF PROPOSED AMENDMENT TO RHODE ISLAND MEDICAID STATE PLAN

In accordance Rhode Island General Laws 42-35, notice is hereby given that the Executive Office of Health and Human Services (EOHHS) proposes to make the following amendment to the Rhode Island State Plan under Title XIX of the Social Security Act:

MHPRR High Intensity Tier

EOHHS is seeking approval from the Centers for Medicare and Medicaid Services (CMS) to update Rhode Island's Medicaid State Plan to establish a Mental Health Psychiatric Rehabilitation Residences (MHPRR) tier for High Intensity clients.

These changes are proposed to take effect on July 19, 2022. The projected fiscal impact for FFY 2022 is 288,225 All Funds and \$4,310,775 All Funds for FFY 2023.

This proposed amendment is accessible on the EOHHS website (www.eohhs.ri.gov) or available in hard copy upon request (401-462-1501 or RI Relay, dial 711). Interested persons should submit data, views, or written comments by August 18, 2022 to Katy Thomas, Executive Office of Health and Human Services, 3 West Rd, Cranston, RI, 02920, or Kathryn.thomas@ohhs.ri.gov or via phone at (401) 462-2598.

In accordance with the Rhode Island General Laws 42-35-3, an oral hearing will be granted on the proposed State Plan Amendment if requested by twenty-five (25) persons, an agency, or by an association having at least twenty-five (25) members. A request for an oral hearing must be made within ten (10) days of this notice.

The Executive Office of Health and Human Services does not discriminate against individuals based on race, color, national origin, sex, gender identity or expression, sexual orientation, religious belief, political belief, or handicap in acceptance for or provision of services or employment in its programs or activities.

Original signed by Ana Novais, Acting Secretary, Rhode Island Executive Office of Health and Human Services
Signed this 18th day of July, 2022

13D. Rehabilitative Services (cont.) Adult Behavioral Health Services

Residential Services

Definition:

Residential services are services provided in facilities of no more than sixteen (16) beds that provide 24-hour staffing in which the clients receive a wide range of care management, treatment, psychiatric rehabilitation and individual care services. The services elements offered by a residential program shall include but not be limited to the provision of or linkage to the following based on each resident's individualized treatment plan:

- Behavioral health therapeutic and rehabilitative services necessary for the resident to attain recovery.
 - o "Rehabilitation service" means a service specifically tailored to assist a person to restore physical, psychosocial, and vocational functioning.
 - <u>o</u> Behavioral health therapeutic services include the delivery of interventions and enhanced supervision focused on a client's emerging clinical needs including, but not limited to, symptom management and de-escalation strategies, to increase awareness of emotional triggers and manage personal safety without the need for transfer to a higher level of care.
- Individual, group, and family counseling; Medication prescription, administration, education, cueing and monitoring;
- Behavioral Management <u>means any intervention or treatment that utilizes positive</u> reinforcement and/or restrictions to help an individual receiving services to restore and/or strengthen recovery-oriented behaviors and to address and correct targeted behaviors;
- Menu planning, meal preparation and nutrition education;
- Skill training regarding health and hygiene;
- Budgeting skills training and/or assistance;
- Crisis intervention means short-term emergency mental health services, available on a twenty-four-hour basis, seven days a week.. These services shall meet all of the applicable requirements of all Rhode Island rules and regulations of behavioral health organizations.
- Community and daily living skills training;
- Community resource information and access;
- Social skills training and assistance in developing natural social support networks;
- Coordination with the resident's medical care providers

In addition to the services above, the High Intensity facilities (HI-MHPRRs) will provide a safe and less restrictive environment for individuals with high intensity and acuity service. These individuals do not require hospital inpatient psychiatric services but have care needs that exceed existing MHPRR services. Providers that meet the HI-MHPRR certification standards will provide planned and integrated medical and behavioral supports through person centered treatment and care. Services shall include the daily participation of each client in an active treatment program in accordance with plan individualized to the needs of the client.

HI-MHPRRs will provide services for patients with complex mental health needs that are being discharged from hospital settings and require enhanced services, beyond those offered in a traditional community setting. Individuals are eligible for these high intensity enhanced services based on medical necessity criteria

Payment for room and board is excluded.

Provider Qualifications:

Residential Services are provided through Behavioral Health Organizations licensed by <u>the State</u> the <u>Department of Mental Health</u>, <u>Retardation</u>, and <u>Hospitals</u>.

Direct services staff in residential programs shall have, at a minimum, the following qualifications relevant to the service they are providing:

A license as a Registered Nurse or an Associate's Degree in a human services field; or a combination of education and prior work or life experience that the organization determines is comparable.

Residential programs promoting their services as a specialty program for individuals with co-occurring disorders must have an appropriate ratio of qualified mental health and substance abuse personnel.

Clinical supervisors of residential staff shall have, at a minimum, the following qualifications with education, license, and experience relevant to the services they are supervising:

Licensed Independent Practitioner: or

Licensed Chemical Dependency Clinical Supervisor: or

Licensed Chemical Dependency Professional who as completed a department approved course in clinical supervision; or

Clinician with relevant Master's Degree and license and, at least, two (2) years full time experience providing relevant behavioral health services; or

Registered nurse with ANCC certification as a Psychiatric and Mental Health Nurse or, at least, two (2) years full time experience providing relevant behavioral health services.

<u>High Intensity Enhanced MHPRRs will have a 3:3:2 staffing pattern and will have the following additional</u> full-time staff positions:

- Licensed Occupational Therapist
- Licensed CNA-
- Residential Manager assigned only to the HI-MHPRR who can provide additional staff support
 for clinical interventions. The Resident Manager shall have at least a bachelor's degree in
 psychology, social work, or other r behavioral health related field. Experience may be
 considered in lieu of a bachelor's degree

Rehabilitative Services (cont.)

Residential Services

Payment Methodology

The Mental Health Psychiatric Rehabilitation Residences (MHPRR) rate is structured to capture all of the staff costs associated with providing the basic, routine day-to-day rehabilitative care uniformly provided to all residents that either takes place in the program, or is provided by staff of the program whether on or off-site. This would include basic social skills development and support in the development of appropriate behaviors to allow the residents to participate, to the fullest extent possible, in normalized activities in their community.

Rates are paid according to the intensity of services that are needed and provided. Rates range from \$85 to \$525 per day.

•	\$85:	On-Site Supportive Psychiatric Rehabilitative Apartments
•	\$125:	Supportive Mental Health Psychiatric Rehabilitative Residence Apartments
•	\$125:	Basic Mental Health Psychiatric Rehabilitative Residences
•	\$175:	Specialized Mental Health Psychiatric Rehabilitative Residence
•	\$525:	High Intensity Enhanced Mental Health Psychiatric Rehabilitative Residences

The High Intensity Enhanced Mental Health Psychiatric Rehabilitative Residences is available to providers that provide services for patients with complex mental health needs that are being discharged from hospital settings and require enhanced services in a community setting. Individuals who will require these high intensity enhanced services include those with a dual diagnosis of behavioral health and developmental disabilities, co-occurring disorders (mental health disorder and substance use disorder), comorbidities (behavioral health disorder and significant medical conditions), traumatic brain injury (TBI) with a dual mental health related diagnosis), serious injurious behaviors, sex offenders and fire starters. The three (3) categories of High Intensity Enhanced MHPRR are:

- Medically Intensive MHPRR: Individuals diagnosed with mental illness and complex medical conditions, requiring increased medical monitoring, personal care assistance, and specialized environmental modifications.
- 2. Intensive Behavioral MHPRR: Provides increased therapeutic interventions and supervision. including one-to-one support on a consistent basis that focuses on identifying triggers and precipitant behaviors, coping skills, improving communication skills, addressing issues around substance use, and identifying and resolving barriers to the traditional MHPRR setting. Other individuals appropriate for this service are those with non-acute suicidality with a high risk of self-harm who have been determined to no longer be appropriate for an inpatient setting. This category includes two subspecialty groups:
 - a. Intensive Fire Safety MHPRR: Provides enhanced supervision and monitoring for fire setting behavior, therapeutic interventions to address individually identified risk behaviors, and a physical setting to minimize the risk of fire.

- b. Sex Offender MHPRR: Provides a safe and therapeutic environment for individuals
 who have been convicted of a sexual offense and are at risk for re-offending (levels
 I, II and I III sex offenders).
- 3. Forensic MHPRR: Individuals who are no longer clinically severely symptomatic but must remain in a highly structured and secure environment for prolonged periods of time awaiting the resolution of criminal proceedings. This category includes two subspecialty groups:
 - a. Intensive Fire Safety MHPRR: Provides enhanced supervision and monitoring for fire setting behavior, therapeutic interventions to address individually identified risk behaviors, and a physical setting to minimize the risk of fire.
 - b. Sex Offender MHPRR: Provides a safe and therapeutic environment for individuals who have been convicted of a sexual offense and are at risk for re-offending (levels I, II and I III sex offenders).

Payment is on a per diem basis.

Payment does not include room and board.

The State Medicaid agency will have a contract with each entity receiving payment under this service that will require that the entity furnish to the Medicaid agency on an annual basis the following:

- a. Data, by practitioner, on the utilization by Medicaid beneficiaries of the services included in the unit rate and'
- b. Cost information by practitioner type and by type of service actually delivered within the service unit.

Future rate updates will be based on information obtained from the providers.

Rate Increases:

The State does not increase rates based on a set inflation factor on a pre-determined basis.

Date of Effective Rates:

The agency rates were set as of January 1, 2008 and are effective for services on or after that date. The High Intensity Enhanced Mental Health Psychiatric Rehabilitative Residences rate is effective April July 1, 2022.

Substance Abuse Assessment Services

Payment Methodology

Payment is based on a fee schedule of 15 minutes units per qualified provider.

Rate Increases

The State does not increase rates based on a set inflation factor on a pre-determined basis.

Date of Effective Rates:

The agency rates were set as of January 1, 2008 and are effective for services on or after this date.