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State/Territory Name: New York

State Plan Amendment (SPA) #: 22-0026

This file contains the following documents in the order listed:

- 1) Approval Letter
- 2) Summary Form (with 179-like data)
- 3) Approved SPA Pages



Medicaid and CHIP Operations Group

June 29, 2023

Amir Bassiri Medicaid Director Office of Health Insurance Programs New York State Department of Health One Commerce Plaza Rm. 1605 Albany, NY 12237

Re: New York State Plan Amendment (SPA) 22-0026

Dear Director Bassiri:

The Centers for Medicare & Medicaid Services (CMS) reviewed your Medicaid State Plan Amendment (SPA) submitted under transmittal number (TN) NY-22-0026. This amendment proposes to expand access to crisis intervention services previously available to children and populations under the 1115 waiver only under the State Plan. This State Plan Amendment also authorizes crisis intervention services provided in crisis stabilization centers to both adults and children under the State Plan.

We conducted our review of your submittal according to statutory requirements in Title XIX of the Social Security Act. This letter is to inform you that New York's Medicaid SPA 22-0026 was approved on June 29, 2023, with an effective date of April 1, 2022.

If you have any questions, please contact Melvina Harrison at 212-616-2247 or via email at Melvina.harrison@cms.hhs.gov.

Sincerely,

James G. Scott, Director Division of Program Operations

Enclosures

cc: Regina Deyette, DYDOH

DEPARTMENT OF HEALTH ANDHUMAN SERVICES CENTERS FOR MEDICARE & MEDICAID SERVICES	FORM APPROVE OMB No. 0938-019
TRANSMITTAL AND NOTICE OF APPROVAL O STATE PLAN MATERIAL FOR: CENTERS FOR MEDICARE & MEDICAID SERVICES	$\underline{2 \ 2} = \underline{0 \ 0 \ 2 \ 0} \underline{N \ f}$
TO: CENTER DIRECTOR CENTERS FOR MEDICAID & CHIP SERVICES DEPARTMENT OF HEALTH AND HUMAN SERVICES	4. PROPOSED EFFECTIVE DATE April 1, 2022
 5. FEDERAL STATUTE/REGULATION CITATION §-1902(a) of the Social Security Act and 42 CER-447 1905(a)(13) Other Diagnostic, Screening, Preventive, and Rehabilitative Services 7. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT Attachment 3.1-A Supp.Pages: 3b-13, 3b-14, 3b-15, 3b-16, 3b-13, 3b-18, 3b-19, 3b-56, 3b-57, 3b-58, 3b-59, 3b-60, 3b-61, 3b-62, 	8. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION
3b-63, 3b-64, 3b-65, 3b-66, 3b-67, 3b-68, 3b-69, 3b-70 Attachment 3.1-B Supp.Pages: 3b-13, 3b-14, 3b-15, 3b-16, 3b-1 3b-18, 3b-19, 3b-56, 3b-57, 3b-58, 3b-59, 3b-60, 3b-61, 3b-62, 3b-63, 3b-64, 3b-65, 3b-66, 3b-67, 3b-68, 3b-69, 3b-70 Attachment 4.19-B Pages: 3N 9. SUBJECT OF AMENDMENT	3b-17, 3b-18, 3b-19 Attachment 3.1-BSupp.Pages: 3b-13, 3b-14, 3b-15, 3b-16, 3b-17, 3b-18, 3b-19
OMH Crisis Services	
10. GOVERNOR'S REVIEW (Check One) GOVERNOR'S OFFICE REPORTED NO COMMENT COMMENTS OF GOVERNOR'S OFFICE ENCLOSED NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL	O OTHER, AS SPECIFIED:
CY OFFICIAL	15. RETURN TO New York State Department of Health Division of Finance and Rate Setting
12. TYPED NAME Amir Bassiri 13. TITLE	99 Washington Ave – One Commerce Plaza Suite 1432
Acting Medicaid Director 14. DATE SUBMITTED June 30, 2022	Albany, NY 12210
FOR CMS	USE ONLY
16. DATE RECEIVED June 30, 2022	17. DATE APPROVED June 29, 2023
18. EFFECTIVE DATE OF APPROVED MATERIAL April 1, 2022	19. SIG
20. TYPED NAME OF APPROVING OFFICIAL James G. Scott	21. TITLE OF APPROVING OFFICIAL Director, DPO
22. REMARKS Pen and Ink changes Box 5: Federal Statute/Regulation Citation: 1905(a)(13) Other Dia Box 6: Federal Budget Impact a. FFY 04/01/22-09/30/22: \$0.00 b. FFY10/01/22-09/30/23: \$811,368.00	gnostic, Screening, Preventive, and Rehabilitative Services
FORM CMS-179 (09/24)	ns on Back

1905(a) (13) Other Diagnostic, Screening, Preventive, and Rehabilitative Services -Rehabilitative Services

42 CFR 440.130(d)

Item 4.b, EPSDT services - **Rehabilitative Services: 42 CFR 440.130(d)** The State provides coverage for this benefit as defined at 42 CFR 440.130(d) and as described in this section:

Provided as an Early and Periodic Screening, Diagnostic and Treatment service for individuals who are eligible under the plan and are under the age of 21 1902(a)(43), 1905(a)(4)(B) and 1905(r)).

Rehabilitative Services Description

The rehabilitative service (or services) described below is:

- Community Psychiatric Support and Treatment
- Psychosocial Rehabilitation
- Youth Peer Support
- Family Peer Support

Assurances:

The State assures that all rehabilitative services are provided to, or directed exclusively toward the treatment of, the Medicaid eligible individual in accordance with section 1902 (a) (10)(A)(i) of the Act.

The State assures that rehabilitative services do not include and FFP is not available for any of the following in accordance with section 1905(a) (13) of the Act.

- A. educational, vocational and job training services;
- B. room and board;
- C. habilitation services;
- D. services to inmates in public institutions as defined in 42 CFR §435.1010;
- E. services to individuals residing in institutions for mental diseases as described in 42 CFR§435.1010;
- F. recreational and social activities; and-
- G. services that must be covered elsewhere in the state Medicaid plan.

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1905(a)(13) Other Diagnostic, Screening, Preventive, and Rehabilitative Services

Item 13d. Rehabilitative Services: Outpatient and Residential Crisis Intervention Services

The State provides coverage for this benefit as defined at 42 CFR 440.130(d).

Assurances:

The State assures that all rehabilitative services are provided to, or directed exclusively toward the treatment of the Medicaid eligible individual in accordance with section 1902(a)(10)(A)(i) of the Act.

The State assures that rehabilitative services do not include and FFP is not available for any of the following in accordance with section 1905(a)(13) of the Act:

- A. educational, vocational and job training services;
- B. room and board;
- C. habilitation services;
- D. services to inmates in public institutions as defined in 42 CFR §435.1010;
- E. services to individuals residing in institutions for mental diseases as described in 42 CFR §435.1010;
- F. recreational and social activities; and-
- G. services that must be covered elsewhere in the state Medicaid plan.

Outpatient and Residential Crisis Intervention Services Description:

Outpatient and Residential Crisis Intervention (CI) Services are provided to individuals who are identified as experiencing an acute psychological or emotional change which results in a marked increase in personal distress and which exceeds the abilities and the resources of the individual and those involved (e.g., collateral, provider, community member) to effectively resolve.

CI services are recommended by any of the following licensed practitioners of the healing arts operating within the scope of their practice of their State license, who may or may not be part of the crisis intervention team: Physician (MD), including Psychiatrist and

Addictionologist/Addiction Specialist; Nurse Practitioner; Registered Nurse; Physician Assistant; Licensed Psychologist; Licensed Psychoanalyst; Licensed Social Worker (Licensed Masters Social Worker – LMSW or Licensed Clinical Social Worker — LCSW); Licensed Marriage and Family Therapist; Licensed Creative Arts Therapists; Licensed Mental Health Counselor; and Licensed Occupational Therapist.

Item 13d. Rehabilitative Services: Outpatient and Residential Crisis Intervention Services (continued):

CI services are designed to interrupt and ameliorate the crisis experience and include an assessment that is culturally and linguistically competent and result in timely crisis resolution and de-escalation, and development of a crisis plan. The goals of CI services are engagement in services, symptom reduction, stabilization, restoring individuals to a previous level of functioning, and developing the coping mechanisms to minimize or prevent the crisis in the future. CI services are provided in multiple modalities as described herein, and include developing crisis diversion plans, safety plans or relapse prevention plans, providing support during and after a crisis and connecting an individual with identified supports and linkages to community services. All activities must occur within the context of a potential or actual behavioral health crisis with a desired outcome of resolving or stabilizing the crisis episode and diverting an emergency room visit or inpatient admission, if appropriate.

CI services include engagement with the individual adult or child/youth or other identified collateral supports (e.g., family, friends, or activated community resources) that is culturally and linguistically competent, person-centered, and trauma-informed to determine level of safety, risk, and to plan for the next level of services. For children and youth, CI services include family-focused engagement, where "family" may include a birth, foster, adoptive, or self-created unit of people residing together, with significant attachment to the individual, consisting of adult(s) and/or child(ren), with adult(s) performing duties of parenthood/caregiving for the child(ren) even if the individual is living outside of the home. All services including family or other collaterals are for the direct benefit of the beneficiary.

Practitioner qualifications:

Crisis Intervention Professionals (CI Professionals) are practitioners possessing a license or authority under State licensure law by the New York State Education Department who are qualified by credentials, training, and experience to provide direct services related to the treatment of behavioral health conditions. CI Professionals include the following individuals licensed or permitted in NYS: Physician, including Psychiatrist and Addictionologist/Addiction Specialist; Nurse Practitioner; Registered Nurse; Physician Assistant; Licensed Psychologist; Licensed Psychoanalyst; Licensed Social Worker (Licensed Masters Social Worker – LMSW or Licensed Clinical Social Worker — LCSW); Licensed Marriage and Family Therapist; Licensed Mental Health Counselor; Licensed Creative Arts Therapist, Licensed Behavioral Analyst, and Occupational Therapist who meet the qualifications set forth in 42 C.F.R. 440.110(b)(2).

For services provided to individuals age 21 and over, CI Professionals also include Certified Psychiatric Rehabilitation Practitioners certified by the Psychiatric Rehabilitation Association, Certified Rehabilitation Counselors certified by the Commission on Rehabilitation Counselor Certification, Therapeutic Recreation Therapists certified by the National Council on Therapeutic Recreation or the American Therapeutic Recreation Association, and Counselors certified by and currently registered with the National Board for Certified Counselors.

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1905(a)(13) Other Diagnostic, Screening, Preventive, and Rehabilitative Services

Item 13d. Rehabilitative Services: Outpatient and Residential Crisis Intervention Services (continued):

Note: A Licensed psychologist is a professional who is currently licensed as a psychologist by the New York State Education Department or possesses a permit from the New York State Education Department and who possesses a doctoral degree in psychology, or an individual who has obtained at least a master's degree in psychology who works in a Federal, State, county or municipally operated program or services. Such master's degree-level psychologists may use the title "psychologist," and may be considered professional staff, but may not be assigned supervisory responsibility. Any reference to supervision by a CI Professional excludes these Master's level psychologists who may not supervise CI services.

Crisis Intervention Staff (CI Staff) include practitioners who are at least 18 years of age and have a bachelor's degree, which may be substituted for a high school diploma, high school equivalency, or State Education Commencement Credential. Individuals without a Bachelor's degree must also meet one or more of the following qualifications:

- For CI services for adults, possess 1-3 years of experience working with individuals with serious mental illness or substance use disorders; or for CI services for children/youth, two years of work experience in children's mental health, addiction, or foster care;
- A student or intern within a DOH-approved New York State Education Department program;
- Licensed Practical Nurse;
- Credentialed Alcoholism and Substance Abuse Counselor (CASAC); or
- Individuals with lived-experience as an individual with emotional, behavioral, addiction, or co-occurring disorders or as a parent/primary caregiver of a child with emotional, behavioral, addiction, or co-occurring disorders and who are not qualified peers. NYS may also waive the education requirement for these individuals to provide services as CI Staff.

CI Services are also provided by qualified peers who are individuals with lived experience as an individual with emotional, behavioral, addiction, or co-occurring disorders or as a parent/primary caregiver of a child with emotional, behavioral, addiction, or co-occurring disorders and who are certified or credentialled as follows:

Credentialed or Provisionally Credentialed Family Peer Advocate (FPA) who has completed Level One and Level Two of the Parent Empowerment Program Training or approved comparable training. Credentialed FPAs complete the certification's required hours of continuing education annually and renew their credential every two years. A FPA may obtain a provisional credential for no longer than 18 months to complete all requirements of the full credential.

Item 13d. Rehabilitative Services: Outpatient and Residential Crisis Intervention Services (continued):

- Certified or Provisionally Certified Recovery Peer Advocate (CRPA) who has completed their content specific training, work-related experience, evidence of supervision, and passed the Peer Advocate Exam or other exam by an OASAS designated certifying body. The practitioner completes the certification's required hours of continuing education annually and renews their credential every two years.
- Credentialed or Provisionally Credentialed Youth Peer Advocate (YPA) who has completed Level One and Level Two of the Youth Peer Support Services State approved training for YPAs, work-related experience, and provided evidence of supervision. Credentialed YPAs complete the certification's required hours of continuing education and renew their credential every two years. A YPA may obtain a provisional credential for no longer than 18 months to complete all requirements of the full credential.
- Certified Peer Specialist who has completed the required training and has a current or provisional certification as a Peer Specialist from the New York State Peer Specialist Certification Board.

CI staff are eligible to provide CI services within their applicable scope of practice and under supervision of a CI Professional as provided herein. Only CI professionals and CASACs may conduct assessments. Qualified peers provide peer and family peer support services under the supervision of competent mental health professionals as provided herein.

Supervisor Qualifications: The supervisor is a qualified CI Professional, including a Licensed Clinical Social Worker (LCSW), Licensed Mental Health Counselor, Licensed Creative Arts Therapist, Licensed Marriage and Family Therapist, Licensed Psychoanalyst, Licensed Psychologist, Physician's Assistant, Physician, Registered Professional Nurse, or Nurse Practitioner operating within the scope of their practice. For purposes of peer and family peer support services, competent mental health professionals include CI professionals, CASACs, other CI Staff with a master's degree in a human services field, and qualified peers with at least three years of direct experience providing peer or family peer services. Experienced FPAs may supervise YPAs upon completion of State approved Youth Peer Support training. Supervisors will provide regularly scheduled supervision for CI Staff and qualified peers.

Provider Agency Qualifications: For Mobile CI services for children/youth, CI Professionals and Staff must work within a child-serving agency or agency with children's behavioral health and health experience that is licensed, certified, designated, and/or approved by OMH, OASAS, OCFS, or DOH or its designee to provide the crisis services referenced in the definition. For Mobile CI services for adults, CI professional and Staff must work in an agency licensed, certified, designated, or approved by OMH or OASAS. For Crisis Stabilization CI Services for adults and children/youth, CI Professionals and Staff will work within OMH and OASAS programs licensed pursuant to Article 36 of the Mental Hygiene Law. For Residential CI Services for adults and children/youth, CI Professionals and Staff will work within crisis residential programs licensed or certified by OMH or OASAS.

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1905(a)(13) Other diagnostic, screening, preventive, and rehabilitative services

Item 13d. Rehabilitative Services: Outpatient and Residential Crisis Intervention Services (continued):

Crisis Intervention Training: All CI Professionals, CI Staff, and qualified peers are required to have training on the administration of opioid antagonists and trauma-informed care, de-escalation strategies, harm reduction, and culturally and linguistically competent service provision.

CI Service Modalities

Crisis Intervention includes five modalities: Mobile Crisis, Crisis Stabilization, Children's Crisis Residence, Residential Crisis Support for adults, and Intensive Residential Crisis for adults.

 Mobile Crisis Intervention is provided by a multidisciplinary team of CI Professionals, CI Staff, and qualified peers that includes telephonic triage and mobile or telephonic follow-up and can occur in a variety of settings including community locations where the beneficiary lives, works, attends school, engages in services, or socializes. Mobile Crisis Intervention is available 24 hours a day, 7 days a week, and 365 days a year with capacity to respond immediately or within timeliness standards established by the State. Mobile Crisis Services may be provided by telehealth consistent with state guidance.

Mobile Crisis Intervention services are typically provided by response teams comprised of two team members, unless otherwise determined through triage. One member of a twoperson response team must be a CI Professional. If determined through triage that only one team member is needed to respond, either a CI Professional or a CI staff member with a Master's degree may respond alone with a licensed practitioner available via telehealth and a CASAC may respond alone to an individual experiencing a substance use disorder crisis with a licensed practitioner available via telehealth

Follow-up mobile crisis intervention services may include coordination with, and referrals to, health, social, and other services and supports as needed, including peer/family support services and are provided by CI staff with a Bachelor's degree or qualified peers.

Mobile Crisis Intervention services provided pursuant to Section 1947(b)(1)-(3) of the Social Security Act will be considered Qualifying Community-based Mobile Crisis Intervention Services. Such services will require an initial response by two team members, where one of which must be a CI professional and one team member may participate via telehealth.

Crisis Intervention Services components provided in this modality include the following, as further defined below:

- Mental Health and Substance Use Assessments
- Service Planning
- Crisis/Safety Planning
- Individual and Family Counseling
- Care Coordination; and
- Peer/Family Peer Support

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1905(a)(13) Other Diagnostic, Screening, Preventive, and Rehabilitative Services

Item 13d. Rehabilitative Services: Outpatient and Residential Crisis Intervention Services (continued):

2. Crisis Stabilization provides urgently needed immediate evaluation, treatment, and support services, including coordination with other mental health and substance use services, for children and adults experiencing or at risk of a mental health or substance use disorder crisis. CI Services are provided on-site by Crisis Stabilization Centers licensed by the New York State Offices of Mental Health and Addiction Services and Supports pursuant to Article 36 of the New York State Mental Hygiene Law that employ or contract with qualified CI Professionals, CI Staff and qualified peers.

Crisis Intervention Services components provided in this modality include the following, as further defined below:

- Mental Health and Substance Use Assessments
- Service Planning
- Crisis/Safety Planning
- Individual and Family Counseling
- Care Coordination
- Peer/Family Peer Support
- Medication Therapy
- Medication Management and Training
- Medication Assisted Treatment (MAT); and
- Mild to Moderate Detoxification Services

Item 13d. Rehabilitative Services: Outpatient and Residential Crisis Intervention Services (continued):

- 3. Children's Crisis Residence is a short-term, voluntary, non-IMD, sub-acute crisis intervention modality for children under age 21 to stabilize a child's psychiatric or other behavioral health crisis symptoms and restore the child to a level of functioning and stability that supports their transition back to the community and to prevent or reduce future crises. Children's Crisis Residences provide 24-hour monitoring and supervision, as well as treatment and support services in Crisis Residential facilities licensed by the New York State Office of Mental Health or certified by the NYS Office of Addiction Services and Supports that employ qualified CI Professionals and CI Staff. Crisis Intervention Services components provided in this modality include the following, as further defined below:
 - Mental Health and Substance Use Assessment
 - Service Planning
 - Crisis/Safety Planning
 - Individual, Family, Group Counseling
 - Care Coordination
 - Health Screening
 - Medication Monitoring
 - Medication Management and Training
 - Psychiatric Crisis Rehabilitation and Skills Training
 - Family Psychoeducation and Support
 - Medication Assisted Treatment; and
 - Mild to Moderate Detoxification Services

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Item 13d. Rehabilitative Services: Outpatient and Residential Crisis Intervention Services (continued):

4. Intensive Residential Crisis is a short-term, voluntary, non-IMD, sub-acute crisis intervention modality for individuals aged 18 and over who are experiencing an acute escalation of behavioral health symptoms or who are at imminent risk for loss of functional abilities and may raise safety concerns for themselves and others without intensive residential services. CI Services provided in this modality provide 24-hour monitoring and supervision and intensive treatment and support services to stabilize and address an individual's psychiatric symptoms in Crisis Residential facilities licensed by the New York State Office of Mental Health or certified by the NYS Office of Addiction Services and Supports that employ or contract with qualified CI Professionals, CI Staff and qualified peers.

Crisis Intervention Services components provided in this modality include the following, as further defined below:

- Mental Health and Substance Use Assessments
- Service Planning
- Crisis/Safety Planning
- Individual, Family, and Group Counseling
- Care Coordination
- Peer Support
- Medication Therapy
- Medication Monitoring
- Medication Management and Training
- Psychiatric Crisis Rehabilitation and Skills Training
- Co-occurring Disorder Treatment
- Medication Assisted Treatment; and
- Mild to Moderate Detoxification Services

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Item 13d. Rehabilitative Services: Outpatient and Residential Crisis Intervention Services (continued):

5. Residential Crisis Support is a short-term, voluntary, non-IMD, sub-acute crisis intervention modality for individuals aged 18 and older to stabilize crisis symptoms, address the cause of the crisis, and avert or delay the need for acute psychiatric inpatient hospitalization or emergency services. Residential Crisis Support is appropriate for individuals who are experiencing challenges in daily life that create risk for an escalation of psychiatric symptoms or a period of acute stress significantly impairing their ability to cope with normal life circumstances. CI Services provided in this modality provide respite, 24-hour supervision, and treatment and support services in Crisis Residential facilities licensed by the New York State Office of Mental Health or certified by the NYS Office of Addiction Services and Supports that employ or contract with qualified CI Professionals, CI Staff and qualified peers.

Crisis Intervention Services Components provided in this modality include the following, as further defined below:

- Mental Health and Substance Use Assessments
- Service Planning
- Crisis/Safety Planning
- Care Coordination
- Peer Support
- Medication Monitoring
- Medication Management and Training
- Psychiatric Crisis Rehabilitation and Skills Training
- Medication Assisted Treatment; and
- Mild to Moderate Detoxification Services

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1905(a)(13) Other Diagnostic, Screening, Preventive, and Rehabilitative Services

Item 13d. Rehabilitative Services: Outpatient and Residential Crisis Intervention Services (continued):

Service Components

Crisis intervention Services provided in the modalities described above include the following:

Mental Health and Substance Use Assessments

Service Description: Assessment services, including initial and on-going assessments to determine the need for further evaluation and to make treatment recommendations and referral to other health or behavioral health services as clinically indicated. Assessments may include:

- Risk of harm to self or others, current mental status, current and recent history of substance use, assessment of intoxication and potential for serious withdrawal;
- History of psychiatric and medical treatment;
- Prescribed medications, including medical, psychiatric and medication for substance use disorders;
- Presenting problem and review of immediate needs; and
- Identification of supports.

Qualifications: A CI Professional or a Credentialed Alcoholism and Substance Abuse Counselor (CASAC) supervised by a CI Professional.

Service Planning

Service Description: With the active involvement of the individual where developmentally appropriate or an individual's family members or other collaterals as necessary for the benefit of the beneficiary, services include:

- Developing, reviewing and modifying a care plan to address the mental health and substance use disorder treatment and support needs of the individual;
- Connecting an individual with identified supports and linkages to community services including referral and linkage to appropriate behavioral health community services as an alternative to more restrictive levels of care; and
- Facilitating timely access to services required to address the crisis-related needs of the individual, including mobile crisis, observation, stabilization, withdrawal management, local SUD services such as open access centers and centers of opioid treatment innovation (COTI), respite, and/or secure access to higher levels of care, if required such as psychiatric or substance use disorder inpatient hospitalization.

Qualifications: A CI Professional or CI Staff member supervised by a CI Professional.

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Item 13d. Rehabilitative Services: Outpatient and Residential Crisis Intervention Services (continued):

Crisis/Safety Planning

Services description: A service planning and rehabilitative skills training service to assist individuals to effectively avoid or respond to mental health and substance use crises by identifying triggers that risk their remaining in the community or that result in functional impairments. Services assist the individual or family members, or other collaterals as necessary for the benefit of the beneficiary, with identifying a potential psychiatric or personal crisis, developing a crisis management, safety or wellness plan to assist individuals to prevent relapse, identify early warning signs of decompensation, and cope or seek supports to restore stability and functioning.

Qualifications: A CI Professional or CI Staff member supervised by a CI Professional.

Individual, Family, and Group Counseling

Services description: Services include psychotherapy and psychosocial rehabilitation counseling services to remediate psychiatric or substance use symptoms, resolve conflict, de-escalate crises, monitor for and address high-risk behaviors, maintain stabilization following a crisis episode, and prevent escalation of behavioral health symptoms. Services also include clinical consultation with psychiatric prescribers and urgent psychopharmacology intervention, as needed. Crisis intervention services provided in crisis residences also include group counseling.

Qualifications: A CI Professional or a Credentialed Alcoholism and Substance Abuse Counselor (CASAC) may provide Individual, Family and Group Counseling. A CI Staff member may assist a CI Professional providing Individual, Family and Group Counseling during and after a crisis.

Medication Therapy

Service description: Medication Therapy Services include prescribing and administering medication and monitoring the effects and side effects of the medication on an individual's mental and physical health. Services include the process of determining the medication to be utilized during the course of treatment or reviewing the appropriateness of an existing medication regimen.

Qualifications: Prescribing medications, monitoring the effects of medications, evaluating target symptom response to medications is provided by a Physician, Nurse practitioner, or Physician's assistant. Preparing, administering and monitoring the injection of intramuscular medications is provided by a Physician, Nurse practitioner, Physician's assistant, Registered professional nurse or Licensed practical nurse.

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Item 13d. Rehabilitative Services: Outpatient and Residential Crisis Intervention Services (continued):

Medication Monitoring

Service description: Medication Monitoring Services include appropriate monitoring and supervision associated with the use of medication, including appropriate dosage and frequency. Medication Monitoring Services may also include reviewing of the appropriateness of an existing medication regimen with the prescribing clinician.

Qualifications: A CI Professional.

Medication Assisted Treatment (MAT)

Service description: Services include the evidence-based use of FDA approved medications in combination with counseling and behavioral therapies to comprehensively address and ameliorate the symptoms of substance use disorders. Reimbursement for medications to treat Opioid Use Disorder is covered under the MAT for OUD benefit and medications to treat other addiction disorders is covered under the Medicaid pharmacy benefit.

Qualifications: A CI Professional in compliance with state and federal laws regarding the prescribing of FDA approved medications to treat substance use disorders or CI Staff member under the supervision of a CI Professional.

Mild to Moderate Detoxification Services

Service description: Services include a withdrawal and stabilization regimen to reduce the amount of an addictive substance on which a person is physiologically dependent or to provide reasonable control of active withdrawal symptoms including with the use of FDA approved medications to treat substance use disorders.

Qualifications: A CI Professional in compliance with state and federal laws regarding the prescribing of FDA approved medications to treat substance use disorders or CI Staff member under the supervision of a CI Professional.

Item 13d. Rehabilitative Services: Outpatient and Residential Crisis Intervention Services (continued):

Care Coordination

Service description: Services include:

- Involvement of an individual's natural support network, including identified family and friends to resolve the individual's crisis;
- Follow up and documentation of follow up with the individual and family/caregiver in the case of a child, after the initial contact or response.
- Referral to and facilitation of engagement in outpatient behavioral services, care coordination, medical, health or basic needs related to the original crisis service and other crisis intervention services, if appropriate;
- Confirmation with Medicaid service providers of connections to care and support to the recipient in the community while he or she is awaiting initiation or resumption of services;
- Contact with the individual's existing primary care and behavioral health treatment providers, other entities responsible for services or housing referrals, or care coordinator of the developed crisis plan;
- Referral and engagement or re-engagement with health homes and appropriate behavioral health community and certified peer services to avoid more restrictive levels of treatment; and
- Follow-up with the individual and the individual's family/support network to confirm enrollment in care coordination, outpatient treatment, or other Medicaid community services has occurred or is scheduled.

Qualifications: CI Professional or CI Staff member under the supervision of a CI Professional.

Item 13d. Rehabilitative Services: Outpatient and Residential Crisis Intervention Services (continued):

Peer/Family Peer Support

Service description: Services for adults and children/youth include age-appropriate psychoeducation, counseling, person-centered goal planning, modeling effective coping skills, and facilitating community connections and crisis support to reduce symptomology and restore functionality. Family Peer Support Services also include engagement, bridging support, parent skill development, and crisis support for families caring for a child who is experiencing social, emotional, medical, developmental, substance use or behavioral challenges in their home, school, placement, or community. Services are provided in individual or group settings to promote recovery, self-advocacy, and the development of natural supports and community living skills. Services are directed toward achievement of the specific, individualized, and result-oriented goals contained in an individual's treatment plan developed under the supervision of a competent mental health professional.

Qualifications: Services are provided by certified or provisionally certified Peer Specialists, certified or provisionally certified Recovery Peer Advocates, or credentialed or provisionally credentialled Family Peer Advocates and Youth Peer Advocates under supervision as described in this section.

Psychiatric Crisis Rehabilitation and Skills Training

Service description: Psychiatric Crisis Rehabilitation and Skills Training services are psychosocial rehabilitation and skills training services, including therapeutic communication and interactions to maintain stabilization following a crisis episode and prevent escalation of symptoms, including the proactive involvement of identified family or other collaterals identified by the individual to resolve the crisis. For children, services provide guidance and training in behavior intervention techniques and practice of skills to increase the child's capacity to manage their behavior from everyday life situations to acute emotional stress. Services assist in identifying internal or external stressors and developing coping strategies to address them.

Qualifications: CI Professional or CI Staff member under the supervision of a CI Professional.

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1905(a)(13) Other Diagnostic, Screening, Preventive, and Rehabilitative Services

Item 13d. Rehabilitative Services: Outpatient and Residential Crisis Intervention Services (continued):

Family Psychoeducation and Support

Service description: Family Psychoeducation and Support Services are psychoeducation and skills training services to maintain or facilitate positive relationships with family members and promote skills needed for success in the discharge living environment and to assist families in supporting a child's return to the community, such as implementation of a safety plan, and skills for eliciting positive interactions among family members. Services may involve the facilitation of home visiting and linkages for the family with local community services such as peer support.

Qualifications: CI Professional or CI Staff member under the supervision of a CI Professional.

Co-occurring Disorder Treatment

Service description: A psychosocial rehabilitation service to assist individuals recognize and address alcohol and substance use disorders through education and evidence-based practices such as motivational interviewing, cognitive-behavioral and harm reduction techniques designed to restore functionality and promote recovery for persons with both mental health and substance use disorders. Services also include skills training to identify and manage the symptoms of co-occurring disorders and enable more active participation in social networks and recovery groups.

Qualifications: CI Professional or CI Staff member under the supervision of a CI Professional.

1905(a)(13) Other Diagnostic, Screening, Preventive, and Rehabilitative Services -Rehabilitative Services

42 CFR 440.130(d)

Item 4.b, EPSDT services - **Rehabilitative Services: 42 CFR 440.130(d)** The State provides coverage for this benefit as defined at 42 CFR 440.130(d) and as described in this section:

Provided as an Early and Periodic Screening, Diagnostic and Treatment service for individuals who are eligible under the plan and are under the age of 21 1902(a)(43), 1905(a)(4)(B) and 1905(r)).

Rehabilitative Services Description

The rehabilitative service (or services) described below is:

- Community Psychiatric Support and Treatment
- Psychosocial Rehabilitation
- Youth Peer Support
- Family Peer Support

Assurances:

The State assures that all rehabilitative services are provided to, or directed exclusively toward the treatment of, the Medicaid eligible individual in accordance with section 1902 (a) (10)(A)(i) of the Act.

The State assures that rehabilitative services do not include and FFP is not available for any of the following in accordance with section 1905(a) (13) of the Act.

- A. educational, vocational and job training services;
- B. room and board;
- C. habilitation services;
- D. services to inmates in public institutions as defined in 42 CFR §435.1010;
- E. services to individuals residing in institutions for mental diseases as described in 42 CFR§435.1010;
- F. recreational and social activities; and-
- G. services that must be covered elsewhere in the state Medicaid plan.

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1905(a)(13) Other Diagnostic, Screening, Preventive, and Rehabilitative Services

Item 13d. Rehabilitative Services: Outpatient and Residential Crisis Intervention Services

The State provides coverage for this benefit as defined at 42 CFR 440.130(d).

Assurances:

The State assures that all rehabilitative services are provided to, or directed exclusively toward the treatment of the Medicaid eligible individual in accordance with section 1902(a)(10)(A)(i) of the Act.

The State assures that rehabilitative services do not include and FFP is not available for any of the following in accordance with section 1905(a)(13) of the Act:

- A. educational, vocational and job training services;
- B. room and board;
- C. habilitation services;
- D. services to inmates in public institutions as defined in 42 CFR §435.1010;
- E. services to individuals residing in institutions for mental diseases as described in 42 CFR §435.1010;
- F. recreational and social activities; and-
- G. services that must be covered elsewhere in the state Medicaid plan.

Outpatient and Residential Crisis Intervention Services Description:

Outpatient and Residential Crisis Intervention (CI) Services are provided to individuals who are identified as experiencing an acute psychological or emotional change which results in a marked increase in personal distress and which exceeds the abilities and the resources of the individual and those involved (e.g., collateral, provider, community member) to effectively resolve.

CI services are recommended by any of the following licensed practitioners of the healing arts operating within the scope of their practice of their State license, who may or may not be part of the crisis intervention team: Physician (MD), including Psychiatrist and

Addictionologist/Addiction Specialist; Nurse Practitioner; Registered Nurse; Physician Assistant; Licensed Psychologist; Licensed Psychoanalyst; Licensed Social Worker (Licensed Masters Social Worker – LMSW or Licensed Clinical Social Worker — LCSW); Licensed Marriage and Family Therapist; Licensed Creative Arts Therapists; Licensed Mental Health Counselor; and Licensed Occupational Therapist.

Item 13d. Rehabilitative Services: Outpatient and Residential Crisis Intervention Services (continued):

CI services are designed to interrupt and ameliorate the crisis experience and include an assessment that is culturally and linguistically competent and result in timely crisis resolution and de-escalation, and development of a crisis plan. The goals of CI services are engagement in services, symptom reduction, stabilization, restoring individuals to a previous level of functioning, and developing the coping mechanisms to minimize or prevent the crisis in the future. CI services are provided in multiple modalities as described herein, and include developing crisis diversion plans, safety plans or relapse prevention plans, providing support during and after a crisis and connecting an individual with identified supports and linkages to community services. All activities must occur within the context of a potential or actual behavioral health crisis with a desired outcome of resolving or stabilizing the crisis episode and diverting an emergency room visit or inpatient admission, if appropriate.

CI services include engagement with the individual adult or child/youth or other identified collateral supports (e.g., family, friends, or activated community resources) that is culturally and linguistically competent, person-centered, and trauma-informed to determine level of safety, risk, and to plan for the next level of services. For children and youth, CI services include family-focused engagement, where "family" may include a birth, foster, adoptive, or self-created unit of people residing together, with significant attachment to the individual, consisting of adult(s) and/or child(ren), with adult(s) performing duties of parenthood/caregiving for the child(ren) even if the individual is living outside of the home. All services including family or other collaterals are for the direct benefit of the beneficiary.

Practitioner qualifications:

Crisis Intervention Professionals (CI Professionals) are practitioners possessing a license or authority under State licensure law by the New York State Education Department who are qualified by credentials, training, and experience to provide direct services related to the treatment of behavioral health conditions. CI Professionals include the following individuals licensed or permitted in NYS: Physician, including Psychiatrist and Addictionologist/Addiction Specialist; Nurse Practitioner; Registered Nurse; Physician Assistant; Licensed Psychologist; Licensed Psychoanalyst; Licensed Social Worker (Licensed Masters Social Worker – LMSW or Licensed Clinical Social Worker — LCSW); Licensed Marriage and Family Therapist; Licensed Mental Health Counselor; Licensed Creative Arts Therapist, Licensed Behavioral Analyst, and Occupational Therapist who meet the qualifications set forth in 42 C.F.R. 440.110(b)(2).

For services provided to individuals age 21 and over, CI Professionals also include Certified Psychiatric Rehabilitation Practitioners certified by the Psychiatric Rehabilitation Association, Certified Rehabilitation Counselors certified by the Commission on Rehabilitation Counselor Certification, Therapeutic Recreation Therapists certified by the National Council on Therapeutic Recreation or the American Therapeutic Recreation Association, and Counselors certified by and currently registered with the National Board for Certified Counselors.

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1905(a)(13) Other Diagnostic, Screening, Preventive, and Rehabilitative Services

Item 13d. Rehabilitative Services: Outpatient and Residential Crisis Intervention Services (continued):

Note: A Licensed psychologist is a professional who is currently licensed as a psychologist by the New York State Education Department or possesses a permit from the New York State Education Department and who possesses a doctoral degree in psychology, or an individual who has obtained at least a master's degree in psychology who works in a Federal, State, county or municipally operated program or services. Such master's degree-level psychologists may use the title "psychologist," and may be considered professional staff, but may not be assigned supervisory responsibility. Any reference to supervision by a CI Professional excludes these Master's level psychologists who may not supervise CI services.

Crisis Intervention Staff (CI Staff) include practitioners who are at least 18 years of age and have a bachelor's degree, which may be substituted for a high school diploma, high school equivalency, or State Education Commencement Credential. Individuals without a Bachelor's degree must also meet one or more of the following qualifications:

- For CI services for adults, possess 1-3 years of experience working with individuals with serious mental illness or substance use disorders; or for CI services for children/youth, two years of work experience in children's mental health, addiction, or foster care;
- A student or intern within a DOH-approved New York State Education Department program;
- Licensed Practical Nurse;
- Credentialed Alcoholism and Substance Abuse Counselor (CASAC); or
- Individuals with lived-experience as an individual with emotional, behavioral, addiction, or co-occurring disorders or as a parent/primary caregiver of a child with emotional, behavioral, addiction, or co-occurring disorders and who are not qualified peers. NYS may also waive the education requirement for these individuals to provide services as CI Staff.

CI Services are also provided by qualified peers who are individuals with lived experience as an individual with emotional, behavioral, addiction, or co-occurring disorders or as a parent/primary caregiver of a child with emotional, behavioral, addiction, or co-occurring disorders and who are certified or credentialled as follows:

Credentialed or Provisionally Credentialed Family Peer Advocate (FPA) who has completed Level One and Level Two of the Parent Empowerment Program Training or approved comparable training. Credentialed FPAs complete the certification's required hours of continuing education annually and renew their credential every two years. A FPA may obtain a provisional credential for no longer than 18 months to complete all requirements of the full credential.

Item 13d. Rehabilitative Services: Outpatient and Residential Crisis Intervention Services (continued):

- Certified or Provisionally Certified Recovery Peer Advocate (CRPA) who has completed their content specific training, work-related experience, evidence of supervision, and passed the Peer Advocate Exam or other exam by an OASAS designated certifying body. The practitioner completes the certification's required hours of continuing education annually and renews their credential every two years.
- Credentialed or Provisionally Credentialed Youth Peer Advocate (YPA) who has completed Level One and Level Two of the Youth Peer Support Services State approved training for YPAs, work-related experience, and provided evidence of supervision. Credentialed YPAs complete the certification's required hours of continuing education and renew their credential every two years. A YPA may obtain a provisional credential for no longer than 18 months to complete all requirements of the full credential.
- Certified Peer Specialist who has completed the required training and has a current or provisional certification as a Peer Specialist from the New York State Peer Specialist Certification Board.

CI staff are eligible to provide CI services within their applicable scope of practice and under supervision of a CI Professional as provided herein. Only CI professionals and CASACs may conduct assessments. Qualified peers provide peer and family peer support services under the supervision of competent mental health professionals as provided herein.

Supervisor Qualifications: The supervisor is a qualified CI Professional, including a Licensed Clinical Social Worker (LCSW), Licensed Mental Health Counselor, Licensed Creative Arts Therapist, Licensed Marriage and Family Therapist, Licensed Psychoanalyst, Licensed Psychologist, Physician's Assistant, Physician, Registered Professional Nurse, or Nurse Practitioner operating within the scope of their practice. For purposes of peer and family peer support services, competent mental health professionals include CI professionals, CASACs, other CI Staff with a master's degree in a human services field, and qualified peers with at least three years of direct experience providing peer or family peer services. Experienced FPAs may supervise YPAs upon completion of State approved Youth Peer Support training. Supervisors will provide regularly scheduled supervision for CI Staff and qualified peers.

Provider Agency Qualifications: For Mobile CI services for children/youth, CI Professionals and Staff must work within a child-serving agency or agency with children's behavioral health and health experience that is licensed, certified, designated, and/or approved by OMH, OASAS, OCFS, or DOH or its designee to provide the crisis services referenced in the definition. For Mobile CI services for adults, CI professional and Staff must work in an agency licensed, certified, designated, or approved by OMH or OASAS. For Crisis Stabilization CI Services for adults and children/youth, CI Professionals and Staff will work within OMH and OASAS programs licensed pursuant to Article 36 of the Mental Hygiene Law. For Residential CI Services for adults and children/youth, CI Professionals and Staff will work within crisis residential programs licensed or certified by OMH or OASAS.

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1905(a)(13) Other diagnostic, screening, preventive, and rehabilitative services

Item 13d. Rehabilitative Services: Outpatient and Residential Crisis Intervention Services (continued):

Crisis Intervention Training: All CI Professionals, CI Staff, and qualified peers are required to have training on the administration of opioid antagonists and trauma-informed care, de-escalation strategies, harm reduction, and culturally and linguistically competent service provision.

CI Service Modalities

Crisis Intervention includes five modalities: Mobile Crisis, Crisis Stabilization, Children's Crisis Residence, Residential Crisis Support for adults, and Intensive Residential Crisis for adults.

 Mobile Crisis Intervention is provided by a multidisciplinary team of CI Professionals, CI Staff, and qualified peers that includes telephonic triage and mobile or telephonic follow-up and can occur in a variety of settings including community locations where the beneficiary lives, works, attends school, engages in services, or socializes. Mobile Crisis Intervention is available 24 hours a day, 7 days a week, and 365 days a year with capacity to respond immediately or within timeliness standards established by the State. Mobile Crisis Services may be provided by telehealth consistent with state guidance.

Mobile Crisis Intervention services are typically provided by response teams comprised of two team members, unless otherwise determined through triage. One member of a twoperson response team must be a CI Professional. If determined through triage that only one team member is needed to respond, either a CI Professional or a CI staff member with a Master's degree may respond alone with a licensed practitioner available via telehealth and a CASAC may respond alone to an individual experiencing a substance use disorder crisis with a licensed practitioner available via telehealth

Follow-up mobile crisis intervention services may include coordination with, and referrals to, health, social, and other services and supports as needed, including peer/family support services and are provided by CI staff with a Bachelor's degree or qualified peers.

Mobile Crisis Intervention services provided pursuant to Section 1947(b)(1)-(3) of the Social Security Act will be considered Qualifying Community-based Mobile Crisis Intervention Services. Such services will require an initial response by two team members, where one of which must be a CI professional and one team member may participate via telehealth.

Crisis Intervention Services components provided in this modality include the following, as further defined below:

- Mental Health and Substance Use Assessments
- Service Planning
- Crisis/Safety Planning
- Individual and Family Counseling
- Care Coordination; and Peer/Family Peer Support

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1905(a)(13) Other Diagnostic, Screening, Preventive, and Rehabilitative Services

Item 13d. Rehabilitative Services: Outpatient and Residential Crisis Intervention Services (continued):

2. Crisis Stabilization provides urgently needed immediate evaluation, treatment, and support services, including coordination with other mental health and substance use services, for children and adults experiencing or at risk of a mental health or substance use disorder crisis. CI Services are provided on-site by Crisis Stabilization Centers licensed by the New York State Offices of Mental Health and Addiction Services and Supports pursuant to Article 36 of the New York State Mental Hygiene Law that employ or contract with qualified CI Professionals, CI Staff and qualified peers.

Crisis Intervention Services components provided in this modality include the following, as further defined below:

- Mental Health and Substance Use Assessments
- Service Planning
- Crisis/Safety Planning
- Individual and Family Counseling
- Care Coordination
- Peer/Family Peer Support
- Medication Therapy
- Medication Management and Training
- Medication Assisted Treatment (MAT); and
- Mild to Moderate Detoxification Services

Item 13d. Rehabilitative Services: Outpatient and Residential Crisis Intervention Services (continued):

- 3. Children's Crisis Residence is a short-term, voluntary, non-IMD, sub-acute crisis intervention modality for children under age 21 to stabilize a child's psychiatric or other behavioral health crisis symptoms and restore the child to a level of functioning and stability that supports their transition back to the community and to prevent or reduce future crises. Children's Crisis Residences provide 24-hour monitoring and supervision, as well as treatment and support services in Crisis Residential facilities licensed by the New York State Office of Mental Health or certified by the NYS Office of Addiction Services and Supports that employ qualified CI Professionals and CI Staff. Crisis Intervention Services components provided in this modality include the following, as further defined below:
 - Mental Health and Substance Use Assessment
 - Service Planning
 - Crisis/Safety Planning
 - Individual, Family, Group Counseling
 - Care Coordination
 - Health Screening
 - Medication Monitoring
 - Medication Management and Training
 - Psychiatric Crisis Rehabilitation and Skills Training
 - Family Psychoeducation and Support
 - Medication Assisted Treatment; and
 - Mild to Moderate Detoxification Services

Item 13d. Rehabilitative Services: Outpatient and Residential Crisis Intervention Services (continued):

4. Intensive Residential Crisis is a short-term, voluntary, non-IMD, sub-acute crisis intervention modality for individuals aged 18 and over who are experiencing an acute escalation of behavioral health symptoms or who are at imminent risk for loss of functional abilities and may raise safety concerns for themselves and others without intensive residential services. CI Services provided in this modality provide 24-hour monitoring and supervision and intensive treatment and support services to stabilize and address an individual's psychiatric symptoms in Crisis Residential facilities licensed by the New York State Office of Mental Health or certified by the NYS Office of Addiction Services and Supports that employ or contract with qualified CI Professionals, CI Staff and qualified peers.

Crisis Intervention Services components provided in this modality include the following, as further defined below:

- Mental Health and Substance Use Assessments
- Service Planning
- Crisis/Safety Planning
- Individual, Family, and Group Counseling
- Care Coordination
- Peer Support
- Medication Therapy
- Medication Monitoring
- Medication Management and Training
- Psychiatric Crisis Rehabilitation and Skills Training
- Co-occurring Disorder Treatment
- Medication Assisted Treatment; and
- Mild to Moderate Detoxification Services

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Item 13d. Rehabilitative Services: Outpatient and Residential Crisis Intervention Services (continued):

5. Residential Crisis Support is a short-term, voluntary, non-IMD, sub-acute crisis intervention modality for individuals aged 18 and older to stabilize crisis symptoms, address the cause of the crisis, and avert or delay the need for acute psychiatric inpatient hospitalization or emergency services. Residential Crisis Support is appropriate for individuals who are experiencing challenges in daily life that create risk for an escalation of psychiatric symptoms or a period of acute stress significantly impairing their ability to cope with normal life circumstances. CI Services provided in this modality provide respite, 24-hour supervision, and treatment and support services in Crisis Residential facilities licensed by the New York State Office of Mental Health or certified by the NYS Office of Addiction Services and Supports that employ or contract with qualified CI Professionals, CI Staff and qualified peers.

Crisis Intervention Services Components provided in this modality include the following, as further defined below:

- Mental Health and Substance Use Assessments
- Service Planning
- Crisis/Safety Planning
- Care Coordination
- Peer Support
- Medication Monitoring
- Medication Management and Training
- Psychiatric Crisis Rehabilitation and Skills Training
- Medication Assisted Treatment; and
- Mild to Moderate Detoxification Services

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1905(a)(13) Other Diagnostic, Screening, Preventive, and Rehabilitative Services

Item 13d. Rehabilitative Services: Outpatient and Residential Crisis Intervention Services (continued):

Service Components

Crisis intervention Services provided in the modalities described above include the following:

Mental Health and Substance Use Assessments

Service Description: Assessment services, including initial and on-going assessments to determine the need for further evaluation and to make treatment recommendations and referral to other health or behavioral health services as clinically indicated. Assessments may include:

- Risk of harm to self or others, current mental status, current and recent history of substance use, assessment of intoxication and potential for serious withdrawal;
- History of psychiatric and medical treatment;
- Prescribed medications, including medical, psychiatric and medication for substance use disorders;
- Presenting problem and review of immediate needs; and
- Identification of supports.

Qualifications: A CI Professional or a Credentialed Alcoholism and Substance Abuse Counselor (CASAC) supervised by a CI Professional.

Service Planning

Service Description: With the active involvement of the individual where developmentally appropriate or an individual's family members or other collaterals as necessary for the benefit of the beneficiary, services include:

- Developing, reviewing and modifying a care plan to address the mental health and substance use disorder treatment and support needs of the individual;
- Connecting an individual with identified supports and linkages to community services including referral and linkage to appropriate behavioral health community services as an alternative to more restrictive levels of care; and
- Facilitating timely access to services required to address the crisis-related needs of the individual, including mobile crisis, observation, stabilization, withdrawal management, local SUD services such as open access centers and centers of opioid treatment innovation (COTI), respite, and/or secure access to higher levels of care, if required such as psychiatric or substance use disorder inpatient hospitalization.

Qualifications: A CI Professional or CI Staff member supervised by a CI Professional.

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1905(a)(13) Other Diagnostic, Screening, Preventive, and Rehabilitative Services

Item 13d. Rehabilitative Services: Outpatient and Residential Crisis Intervention Services (continued):

Crisis/Safety Planning

Services description: A service planning and rehabilitative skills training service to assist individuals to effectively avoid or respond to mental health and substance use crises by identifying triggers that risk their remaining in the community or that result in functional impairments. Services assist the individual or family members, or other collaterals as necessary for the benefit of the beneficiary, with identifying a potential psychiatric or personal crisis, developing a crisis management, safety or wellness plan to assist individuals to prevent relapse, identify early warning signs of decompensation, and cope or seek supports to restore stability and functioning.

Qualifications: A CI Professional or CI Staff member supervised by a CI Professional.

Individual, Family, and Group Counseling

Services description: Services include psychotherapy and psychosocial rehabilitation counseling services to remediate psychiatric or substance use symptoms, resolve conflict, de-escalate crises, monitor for and address high-risk behaviors, maintain stabilization following a crisis episode, and prevent escalation of behavioral health symptoms. Services also include clinical consultation with psychiatric prescribers and urgent psychopharmacology intervention, as needed. Crisis intervention services provided in crisis residences also include group counseling.

Qualifications: A CI Professional or a Credentialed Alcoholism and Substance Abuse Counselor (CASAC) may provide Individual, Family and Group Counseling. A CI Staff member may assist a CI Professional providing Individual, Family and Group Counseling during and after a crisis.

Medication Therapy

Service description: Medication Therapy Services include prescribing and administering medication and monitoring the effects and side effects of the medication on an individual's mental and physical health. Services include the process of determining the medication to be utilized during the course of treatment or reviewing the appropriateness of an existing medication regimen.

Qualifications: Prescribing medications, monitoring the effects of medications, evaluating target symptom response to medications is provided by a Physician, Nurse practitioner, or Physician's assistant. Preparing, administering and monitoring the injection of intramuscular medications is provided by a Physician, Nurse practitioner, Physician's assistant, Registered professional nurse or Licensed practical nurse.

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1905(a)(13) Other Diagnostic, Screening, Preventive, and Rehabilitative Services

Item 13d. Rehabilitative Services: Outpatient and Residential Crisis Intervention Services (continued):

Medication Monitoring

Service description: Medication Monitoring Services include appropriate monitoring and supervision associated with the use of medication, including appropriate dosage and frequency. Medication Monitoring Services may also include reviewing of the appropriateness of an existing medication regimen with the prescribing clinician.

Qualifications: A CI Professional.

Medication Assisted Treatment (MAT)

Service description: Services include the evidence-based use of FDA approved medications in combination with counseling and behavioral therapies to comprehensively address and ameliorate the symptoms of substance use disorders. Reimbursement for medications to treat Opioid Use Disorder is covered under the MAT for OUD benefit and medications to treat other addiction disorders is covered under the Medicaid pharmacy benefit.

Qualifications: A CI Professional in compliance with state and federal laws regarding the prescribing of FDA approved medications to treat substance use disorders or CI Staff member under the supervision of a CI Professional.

Mild to Moderate Detoxification Services

Service description: Services include a withdrawal and stabilization regimen to reduce the amount of an addictive substance on which a person is physiologically dependent or to provide reasonable control of active withdrawal symptoms including with the use of FDA approved medications to treat substance use disorders.

Qualifications: A CI Professional in compliance with state and federal laws regarding the prescribing of FDA approved medications to treat substance use disorders or CI Staff member under the supervision of a CI Professional.

Item 13d. Rehabilitative Services: Outpatient and Residential Crisis Intervention Services (continued):

Care Coordination

Service description: Services include:

- Involvement of an individual's natural support network, including identified family and friends to resolve the individual's crisis;
- Follow up and documentation of follow up with the individual and family/caregiver in the case of a child, after the initial contact or response.
- Referral to and facilitation of engagement in outpatient behavioral services, care coordination, medical, health or basic needs related to the original crisis service and other crisis intervention services, if appropriate;
- Confirmation with Medicaid service providers of connections to care and support to the recipient in the community while he or she is awaiting initiation or resumption of services;
- Contact with the individual's existing primary care and behavioral health treatment providers, other entities responsible for services or housing referrals, or care coordinator of the developed crisis plan;
- Referral and engagement or re-engagement with health homes and appropriate behavioral health community and certified peer services to avoid more restrictive levels of treatment; and
- Follow-up with the individual and the individual's family/support network to confirm enrollment in care coordination, outpatient treatment, or other Medicaid community services has occurred or is scheduled.

Qualifications: CI Professional or CI Staff member under the supervision of a CI Professional.

Item 13d. Rehabilitative Services: Outpatient and Residential Crisis Intervention Services (continued):

Peer/Family Peer Support

Service description: Services for adults and children/youth include age-appropriate psychoeducation, counseling, person-centered goal planning, modeling effective coping skills, and facilitating community connections and crisis support to reduce symptomology and restore functionality. Family Peer Support Services also include engagement, bridging support, parent skill development, and crisis support for families caring for a child who is experiencing social, emotional, medical, developmental, substance use or behavioral challenges in their home, school, placement, or community. Services are provided in individual or group settings to promote recovery, self-advocacy, and the development of natural supports and community living skills. Services are directed toward achievement of the specific, individualized, and result-oriented goals contained in an individual's treatment plan developed under the supervision of a competent mental health professional.

Qualifications: Services are provided by certified or provisionally certified Peer Specialists, certified or provisionally certified Recovery Peer Advocates, or credentialed or provisionally credentialled Family Peer Advocates and Youth Peer Advocates under supervision as described in this section.

Psychiatric Crisis Rehabilitation and Skills Training

Service description: Psychiatric Crisis Rehabilitation and Skills Training services are psychosocial rehabilitation and skills training services, including therapeutic communication and interactions to maintain stabilization following a crisis episode and prevent escalation of symptoms, including the proactive involvement of identified family or other collaterals identified by the individual to resolve the crisis. For children, services provide guidance and training in behavior intervention techniques and practice of skills to increase the child's capacity to manage their behavior from everyday life situations to acute emotional stress. Services assist in identifying internal or external stressors and developing coping strategies to address them.

Qualifications: CI Professional or CI Staff member under the supervision of a CI Professional.

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1905(a)(13) Other Diagnostic, Screening, Preventive, and Rehabilitative Services

Item 13d. Rehabilitative Services: Outpatient and Residential Crisis Intervention Services (continued):

Family Psychoeducation and Support

Service description: Family Psychoeducation and Support Services are psychoeducation and skills training services to maintain or facilitate positive relationships with family members and promote skills needed for success in the discharge living environment and to assist families in supporting a child's return to the community, such as implementation of a safety plan, and skills for eliciting positive interactions among family members. Services may involve the facilitation of home visiting and linkages for the family with local community services such as peer support.

Qualifications: CI Professional or CI Staff member under the supervision of a CI Professional.

Co-occurring Disorder Treatment

Service description: A psychosocial rehabilitation service to assist individuals recognize and address alcohol and substance use disorders through education and evidence-based practices such as motivational interviewing, cognitive-behavioral and harm reduction techniques designed to restore functionality and promote recovery for persons with both mental health and substance use disorders. Services also include skills training to identify and manage the symptoms of co-occurring disorders and enable more active participation in social networks and recovery groups.

Qualifications: CI Professional or CI Staff member under the supervision of a CI Professional.

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13d. Rehabilitative Services:

1905(a)(13) Other diagnostic, screening, preventative and rehabilitative services Outpatient and Residential Crisis Intervention Services

42 CFR 440.130(d)

Reimbursement for Outpatient and Residential Crisis Intervention Services as outlined in item 13.d of Attachments 3.1-A and B are paid based upon Medicaid rates established by the State of New York.

Except as otherwise noted in the State Plan, the State-developed fees are the same for both governmental and private providers. Provider agency fees were set as of April 1, 2022, for Outpatient and Residential Crisis Intervention Services and are effective for these services provided on or after that date. Provider agency rates were set as of July 1, 2022, for Mobile Crisis Intervention Services provided by Comprehensive Psychiatric Emergency Programs and are effective for these services provided on or after that date. All fees are published on the Office of Mental Health website.

Mobile Crisis Intervention Services are reimbursed regional fees determined by contact type, practitioner qualifications, and duration of services. Services are reimbursed in either 15 minutes unit increments or daily fees, published on the Office of Mental Health website at: https://www.omh.ny.gov/omhweb/medicaid_reimbursement/excel/crisis_mobile_telephonic.xlsx

Mobile Crisis Intervention Services Provided by Comprehensive Psychiatric Emergency Programs: https://omh.ny.gov/omhweb/medicaid_reimbursement/excel/cpep.xlsx

Crisis Residential Services are reimbursed regional daily fees per individual. Crisis residential services are limited to 28 days per admission, except services for recipients may be reimbursed beyond 28 days if medically necessary and approved by the state. Fees are published on the Office of Mental Health website at:

https://www.omh.ny.gov/omhweb/medicaid_reimbursement/excel/crisis_residential.xlsx

Crisis Stabilization Services are reimbursed a regional daily brief or full fee per individual. Reimbursement is limited to one brief or full claim reimbursement per recipient per day. Fees are published on the Office of Mental Health website at:

https://www.omh.ny.gov/omhweb/medicaid_reimbursement/excel/crisis_stabilization.xlsx

The reimbursement methodology is composed of provider cost modeling, consistent with New York State certified financial reporting and Bureau of Labor Statistics wage data. The following list outlines the major components of the provider cost model:

- Staffing assumptions and staff wages
- Employee-related expenses benefits, employer taxes (e.g., Federal Insurance Contributions Act (FICA), unemployment, and workers compensation)
- Program-related expenses (e.g., supplies)
- Provider overhead expenses, and
- Program billable units.

Fees are developed as the ratio of total annual modeled provider costs to the estimated annual billable units.

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