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State/Territory Name: RI

State Plan Amendment (SPA) #: 22-0014

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

January 17, 2023

Ana P. Novais, MA, Acting Secretary Executive Office of Health and Human Services 3 West Road, Virks Building Cranston, RI 02920

Re: Rhode Island State Plan Amendment (SPA) 22-0014 - Technical Correction

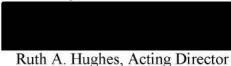
Dear Acting Secretary Novais:

The Centers for Medicare & Medicaid Services (CMS) reviewed your Medicaid State Plan Amendment (SPA) submitted under transmittal number (TN) 22-0014. This amendment proposes to establish a Mental Health Psychiatric Rehabilitation Residences (MHPRR) tier for High Intensity clients.

During a quality review being conducted by CMS, it was discovered that the original approval package sent to Rhode Island included incorrect versions of the 4.19-B pages developed during the review process. RI 22-0014 was approved on December 19, 2022. The enclosed corrected package contains the original signed letter, CMS-179 summary page and the correct SPA pages.

If you have any questions, please contact Joyce Butterworth at (857) 357-6375 or via email at Joyce.Butterworth@cms.hhs.gov.

Sincerely,



Division of Program Operations

Enclosures

cc: Kristin Sousa, Interim Medicaid Program Director Kathryn Thomas, Senior Economic and Policy Analyst



Medicaid and CHIP Operations Group

December 20, 2022

Ana P. Novais, MA, Acting Secretary Executive Office of Health and Human Services 3 West Road, Virks Building Cranston, RI 02920

Re: Rhode Island State Plan Amendment (SPA) 22-0014

Dear Acting Secretary Novais:

The Centers for Medicare & Medicaid Services (CMS) reviewed your Medicaid State Plan Amendment (SPA) submitted under transmittal number (TN) 22-0014. This amendment proposes to establish a Mental Health Psychiatric Rehabilitation Residences (MHPRR) tier for High Intensity clients.

We conducted our review of your submittasl according to statutory requirements in Title XIX of the Social Security Act and implementing regulations 42 CFR §440.130(d). This letter is to inform you that Rhode Island's Medicaid SPA Transmittal Number 22-0014 was approved on December 19, 2022, with an effective date of July 19, 2022.

As described in the state's letter to CMS dated April 29, 2022 regarding its Hospital Licensing Fee (HLF) and in CMS's response letter dated May 19, 2022, please note that CMS's approval of this State Plan Amendment (SPA) whose non-federal share source may include the HLF relates only to the requested change in payment methodology, not the source of non-federal share. Approval of this SPA does not relieve the state of its responsibility to comply with federal laws and regulations, and to ensure that claims for federal financial participation are consistent with all applicable requirements.

Enclosed is a copy of the approved CMS-179 summary page and approved SPA pages to be incorporated into the Rhode Island State Plan.

If you have any questions, please contact Joyce Butterworth at (857) 357-6375 or via email at Joyce.Butterworth@cms.hhs.gov.

Sincerely,



Sophia Hinojosa, Acting Director Division of Program Operations

Enclosures

cc: Kristin Sousa, Interim Medicaid Program Director Kathryn Thomas, Senior Economic and Policy Analyst

CENTERS FOR MEDICARE & MEDICAID SERVICES	OMB No. 0938-0193
TRANSMITTAL AND NOTICE OF APPROVAL OF STATE PLAN MATERIAL FOR: CENTERS FOR MEDICARE & MEDICAID SERVICES	1. TRANSMITTAL NUMBER 2. STATE 2 2 0 0 1 4 R I 3. PROGRAM IDENTIFICATION: TITLE OF THE SOCIAL SECURITY ACT XIX XIX XIX
	SECONITIACI () XIX () XXI
TO: CENTER DIRECTOR CENTERS FOR MEDICAID & CHIP SERVICES DEPARTMENT OF HEALTH AND HUMAN SERVICES	4. PROPOSED EFFECTIVE DATE July 1, 2022 July 19, 2022
5. FEDERAL STATUTE/REGULATION CITATION	6. FEDERAL BUDGET IMPACT (Amounts in WHOLE dollars)
42 CFR 44.90	a FFY 2023 \$ 2,200,000 b. FFY 2024 \$ 5,200,000
7. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT	8. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION
Attachment 4.19B, Page 3.4 Attachment 4.19B, Page 3.4a Attachment 4.19B, Page 3.4b Attachment 3.1-A, Supplement to Page 6, Page 6.19, 6.19a, and 6.19b p6.19 p6.19a	OR ATTACHMENT (<i>If Applicable</i>) Attachment 4:19B; Page 3:4 Att. 3.1-A, Supp. to Page 6, Page 6.19 TN 08-011 P: 6:19 Att. 3.1-A Supp. to Page 6, Page 6.19a NEW Att. 4.19-B, Page 3:4 TN 08-011 Att. 4.19-B, Page 3:4a NEW Att. 4.19-B, Page 3:4b NEW
9. SUBJECT OF AMENDMENT	
Enhanced Mental Health Psychiatric Rehabilitation Residences (MH 10. GOVERNOR'S REVIEW (Check One) Q GOVERNOR'S OFFICE REPORTED NO COMMENT	OTHER, AS SPECIFIED:
O COMMENTS OF GOVERNOR'S OFFICE ENCLOSED NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL	
12. TYPED NAME EC	5. RETURN TO DHHS West Rd. Virks Building ranston, RI 02920
Ana Novais 13. TITLE	
Acting Secretary	
14. DATE SUBMITTED	
September 30, 2022 FOR CMS US	EONLY
	7. DATE APPROVED December 19, 2022
PLAN APPROVED - ONE	
18. EFFECTIVE DATE OF APPROVED MATERIAL	. SIGNATURE OF APPROVING OFFICIAL
July 19, 2022	
20. TYPED NAME OF APPROVING OFFICIAL 21	. TITLE OF APPROVING OFFICIAL
Sophia Hinojosa	Acting Director Division of Program Operations
22. REMARKS Pen & Ink changes to Box 4 to correct effect da 8 to correct pagination issues.	ate, and to Boxes 7 and

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

Residential Rehab Services

Definition:

Residential services are services provided in facilities of no more than sixteen (16) beds that provide 24hour 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, that are recommended by a physician, and necessary for the resident to attain recovery.
 - "Rehabilitation service" means a service specifically tailored to assist a person to
 restore physical, psychosocial. 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;
 - Family therapy involves participation of non-Medicaid eligible person for the direct benefit of the beneficiary. The service must actively involve the beneficiary in the sense of being tailored to the beneficiary's individual needs. There may be times when, based on clinical judgment, the beneficiary is not present during the delivery of the service, but remains the focus of the service.
- Behavioral Management means any intervention or treatment that utilizes positive 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;
- Nutrition education and counseling;
- Skill training regarding health and hygiene;
- Budgeting skills training and/or assistance;
- Crisis intervention means short-term emergency mental health services, available on a twentyfour-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;

In addition to the services above, enhanced Mental Health Psychiatric Rehabilitative Residences (E-MHPRRs) will provide a safe and less restrictive environment for individuals with high intensity and acuity service needs. These individuals do not require hospital inpatient psychiatric services but have care needs that exceed existing MHPRR services. Providers that meet the E-MHPRR certification standards will provide planned and integrated medical and behavioral supports through person centered treatment and -p. 6.19-

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.

E-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 the State 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.

Enhanced MHPRRs will have a 3:3:2 staffing pattern and will have the following additional full-time staff positions:

- Licensed Occupational Therapist
 - The licensed occupational therapist will provide services that include but are not limited to:
 - The evaluation and provision of treatment in consultation with he individual, family, or other appropriate persons;
 - Interventions directed toward developing, improving, sustaining, or restoring daily living skills, including self-care skills and activities that involve interactions with others and the environment, work readiness or work performance, play skills or leisure capacities or educational performance skills;
 - Developing, improving, sustaining, or restoring sensorimotor, oral-motor, perceptual or neuromuscular functioning; or emotional, motivational, cognitive, or psychosocial components of performance; and

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- Education of the individual, family, or other appropriate persons in carrying out appropriate interventions.
- These services may encompass evaluation of need and the design, development, adaptation, application, or training in the use of assistive technology devices; the design, fabrication or
- Application of rehabilitative technology, such as selected orthotic devices; training in the functional use of orthotic or prosthetic devices; the application of therapeutic activities, modalities, or exercise as an adjunct to or in preparation for functional performance; the application of ergonomic principles; the adaptation of environments and processes to enhance daily living skills; or the promotion of health and wellness.
- Licensed RN Residential Manager
 - Assigned only to the Enhanced 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 behavioral health related field. Experience may be considered in lieu of a bachelor's degree

-p. 6.19b-

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 whether on or off-site. This would include therapeutic services to enhance basic skills and 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: Enhanced Mental Health Psychiatric Rehabilitative Residences

The 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 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), those who have suffered a traumatic brain injury (TBI) with a dual mental health related diagnosis, persons who have exhibited serious self-injurious behaviors or violence against others; those who have been convicted of sexual offenses or who exhibit sex offender behaviors, and fire starters. The three (3) categories of Enhanced MHPRR are:

- <u>Medically Intensive MHPRR</u>: Individuals diagnosed with mental illness and complex medical conditions, requiring increased medical monitoring, personal care assistance, and specialized environmental modifications.
- 2. <u>Intensive Behavioral MHPRR</u>: 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:
 - <u>a.</u> <u>Intensive Fire Safety MHPRR</u>: 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.

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Approval Date: <u>12/19/2022</u>

Effective Date: July 19, 2022

- <u>b.</u> <u>Sex Offender MHPRR:</u> Provides a safe and therapeutic environment for individuals who have been convicted of a sexual offense and/or who are at risk for offending.
- Intensive Forensic Supportive MHPRR: Individuals who are no longer clinically severely symptomatic but must be provided with a highly structured and secure environment for prolonged periods of time awaiting the resolution of criminal proceedings. This category includes two subspecialty groups:
 - a. <u>Intensive Fire Safety MHPRR</u>: 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. <u>Sex Offender MHPRR</u>: Provides a safe and therapeutic environment for individuals who have been convicted of a sexual offense and/or are at risk for offending.

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 Enhanced Mental Health Psychiatric Rehabilitative Residences rate is effective January 1, 2023

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.

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Superesdes	
TN No: 08-0011	

Approval Date: <u>12/19/2022</u>

Effective Date: July 19, 2022

STATE OF RHODE ISLAND

Date of Effective Rates:

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

Approval Date: <u>12/19/2022</u>