

Children’s SPA Service Provisions

SUMMARY

Children’s State Plan Amendment (SPA) services are Rehabilitative services under the EPSDT benefit and available to children/youth under the age of 21 who are Medicaid eligible. All SPA services can be delivered in the community where the child/youth lives.

The following table summarizes important provisions of the descriptions of the six new SPA services that will be Medicaid-reimbursable for children who meet eligibility requirements with Other Licensed Practitioner (OLP) service starting in March 2017 and the remaining services starting in October 2017.

***Please note that as of December 2016, medical necessity guidelines, billing methodology and coding structure are still under development.**

| Service | Description | Modality | Location | Staff Qualifications/ Requirements | Training Requirements | Limitations/Exclusions |
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| Other Licensed Practitioner (OLP) | <p>Eligible non-physician licensed behavioral health practitioners (NP-LBHPs) may provide BH services within their scope of service</p> <p>Services may include NYS-approved evidence-based outpatient psychotherapy and behavioral health assessments, evaluations, testing, and intervention services</p> <p>Recipients are not required to have a behavioral health diagnosis to receive services under OLP</p> | Face-to-face (or remote via telemedicine within NYS guidelines) with child/youth, family or group | On-site or off-site, in the most appropriate setting (including home or community) | <p>Must be a NP-LBHP. NP-LBHPs include:</p> <ul style="list-style-type: none"> • Licensed Psychoanalysts; • Licensed Clinical Social Worker (LCSW); • Licensed Marriage & Family Therapist; • Licensed Mental Health Counselor; and • Licensed Master Social Worker (LMSW) under the supervision of a psychiatrist, psychologist, or LCSW | All Evidence-Based Practices (EBP) must receive prior approval and designation by NYS and comply with ongoing fidelity reviews | <p>Groups cannot exceed more than 6-8 members</p> <p>Services may not be billable in certain institutional settings:</p> <ul style="list-style-type: none"> • Inpatient hospitals are only covered when ordered by a physician. • Nursing facilities are only covered if a Preadmission Screening and Resident Review (PASRR) indicates necessity, and social work services are excluded. • Services in IMDs and ICFs are not covered |

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| Crisis Intervention (CI) | <p>Activities provided in the event of a behavioral health crisis to achieve the following goals: engagement, symptom reduction, stabilization, functional restoration, and prevention of future crises</p> <p>Teams are expected to have the capacity to respond within one hour of a call, 24/7</p> | <p>Face-to-face, with the child/youth (under the age of 21) or caregiver as required. Follow-up expected in person or by phone</p> | <p>On-site or off-site, in the most appropriate setting (including home or community)</p> | <p>CI should be provided by a team of at least two professionals:</p> <p><u>Member 1</u>: Psychiatrist, physician, psychologist, psychoanalyst, LCSW, LMSW, LMHC, LMFT, psychologist, or NP with BH experience</p> <p><u>Member 2</u>: One of the above or an alcoholism/substance abuse counselor, peer support specialist, rehabilitation counselor, or RPN, with an appropriate credential</p> <p>Teams must be supervised by an appropriate behavioral health professional with at least 2-3 years of work experience</p> | <p>All CI providers must have training in the following areas prior to delivery of service: First Aid; CPR; Mandated Reporting, Crisis De-escalation, Resolution and Debriefing; Suicide Prevention, Crisis Plan Development; and Substance Use Disorders</p> <p>Peer support providers must either be credentialed as an OMH Family Peer Advocate (FPA) or an OASAS Certified Recovery Peer Advocate (CRPA) with a Family specialty</p> | <p>A crisis episode has a defined 72-hour timeframe; if it exceeds 72 hours, it will be considered a new CI episode, or is expected to be transferred to a longer-term service. The child's chart must reflect resolution of the crisis within the final 72-hour episode</p> <p>In general, habilitative services are excluded (e.g., financial management, supportive employment, supportive housing, etc.)</p> |
| Community Psychiatric Supports and Treatment (CPST) | <p>Behavioral health supports focused on achieving particular goals set forth in the child's treatment plan. CPST services include: Rehabilitative Psychoeducation, Intensive Interventions, Strengths-Based Treatment Planning, Rehabilitative Supports, Crisis Avoidance, and Intermediate term Crisis Management</p> <p>CPST is designed for children who have not benefited fully from site-based programs</p> | <p>Face-to-face, with the child/youth</p> <p>Face-to-face groups of up to 8 members are permitted for Rehabilitative Supports</p> <p>Collateral contact is permitted for CPST service delivery</p> | <p>On-site or off-site, in the most appropriate setting (including home or community)</p> | <p>Staff must meet minimum educational and experience requirements that vary by the CPST activity:</p> <p>Rehabilitative Psychoeducation, Strengths-Based Treatment Planning, and Rehabilitative Supports only: Bachelor's degree with at least two years of applicable experience in children's mental health, addiction, and/or foster care/child welfare/juvenile justice or equivalent</p> <p>All others: Must have either a bachelor's degree and certification in a relevant EBP approved by NYS, or a master's degree and either a) one year of applicable experience, or b) certification in an EBP</p> | <p>All CPST providers must have training in the following areas:</p> <ul style="list-style-type: none"> • Crisis management and avoidance planning; • Suicide prevention; • Counseling; • Solution-focused interventions; • Emotional, cognitive, and behavior management techniques; and • Evidence-based practice certification <p>All Evidence-based Practices (EBP) must receive prior approval and designation by NYS and comply with ongoing fidelity reviews</p> | <p>A child with a developmental disability (DD) diagnosis without a co-occurring behavioral health condition is ineligible to receive CPST</p> |

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| Psychosocial Rehabilitation (PSR) | Rehabilitation counseling and other activities to help children reduce functional deficits and deal with other barriers (e.g., interpersonal and social problems) caused by their BH condition | Face-to-face, with the child/youth or in groups of up to 8 members. Collateral contact is permitted for PSR | On-site or off-site, in the most appropriate setting (including home or community) | <p>Must be 18 years old and a high school graduate or equivalent with a minimum of three years' experience in children's mental health, addiction and/or foster care</p> <p>Unlicensed staff must be supervised by an appropriate licensed BH practitioner</p> | <p>All PSR providers must have training in the following areas:</p> <ul style="list-style-type: none"> • Engagement and follow-through; • Group facilitation; • Identification and delivery or functional skill building interventions | A child with a DD diagnosis without a co-occurring behavioral health condition is ineligible to receive PSR |
| Family Peer Support Services (FPSS) | <p>A credential peer advocate provides a variety of formal and informal supports to the caregiver(s) of a child with BH needs, such as:</p> <ul style="list-style-type: none"> • Engagement, bridging, and transition support • Self-advocacy, self-efficacy, and empowerment • Parent skill development • Community connections and natural supports | Face-to-face, with the child/youth or in groups of no more than 12 members | On-site or off-site, in the most appropriate setting (including home or community) | <p>Staff must be OMH credentialed Family Peer Advocates (FPA) or OASAS Certified Recovery Peer Advocates with a Family Specialty (CRPA-Family). In general, these credentials require:</p> <ul style="list-style-type: none"> • Lived experience as a parent or primary caregiver of children with BH needs, or as a family member impacted by youth substance use disorders; • Completion of required training and continuing education; and • A high school diploma or equivalent <p>Staff will be supervised by either:</p> <ul style="list-style-type: none"> • Individuals with four years of experience providing FPSS services, including one year as a credentialed FPA/CRPA; <u>or</u> • A mental health professional with training in FPSS. Efforts should be made to transition to supervision by experienced FPAs/CRPAs <p>Supervisors must have access to clinical consultation as needed</p> | <p>Must meet all criteria required for NYS-credentialed FPAs or CRPAs with a Family specialty</p> | <p>A child with a DD diagnosis without a co-occurring behavioral health condition is ineligible to receive FPSS.</p> <p>The following services, among others, are excluded under FPSS:</p> <ul style="list-style-type: none"> • Peer-led 12-step programs; • General outreach and education; and • Habilitative services |

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| Youth Peer Support and Training (YPST) | <p>A youth peer advocate provides a variety of formal and informal supports to youth with BH needs, such as:</p> <ul style="list-style-type: none"> • Skill building • Coaching • Self-advocacy, self-efficacy, and empowerment • Community connections and natural supports | <p>Face-to-face, with the child/youth or in groups</p> | <p>On-site or off-site, in the most appropriate setting (including home or community)</p> | <p>Staff must be credentialed Youth Peer Advocates (YPA) or Certified Recovery Peer Advocates (CRPA-Youth). In general, these credentials require individuals to:</p> <ul style="list-style-type: none"> • Be aged between 18 and 30; • Self-identify as a recipient of BH services, special education services, or foster care, or have lived experience having been impacted by or in recovery from substance use disorder; • Complete required training and continuing education; and • Have a high school diploma or equivalent <p>Staff will be supervised by either:</p> <ul style="list-style-type: none"> • Individuals with four years of experience providing FPSS or YPST services, including one year as a credentialed FPA/YPA/CRPA, and training in YPST and the role of YPAs; <u>or</u> • A mental health professional with training in YPST | <p>Must complete the State approved Level One and Level Two YPA training OR comparable training approved by the Youth Peer Support Services Council and State</p> | <p>A child with a DD diagnosis without a co-occurring behavioral health condition is ineligible to receive FPSS. Groups should not exceed more than 12 members</p> <p>The following services, among others, are excluded under FPSS:</p> <ul style="list-style-type: none"> • Peer-led 12-step programs; • General outreach and education; and • Habilitative services |