

Prospective MH Contractor Overview Document

This outline of basic service requirements in accordance with Texas Department of State Health Services (DSHS) and the Texas Health and Human Services Commission (HHSC) service expectations is intended to assist prospective providers interested in contracting with their LMHA to deliver mental health treatment. **The brief overview provided here is not intended to replace specific federal, state, and local requirements identified in current laws, rules, and regulations.**

Who can receive services?

- 1) Target populations –
 - a) Adults – with a diagnosis of Major Depressive Disorder, Schizoaffective Disorder, Bipolar Disorder, Schizophrenia
 - b) Children and Adolescents - children ages 3 through 17 with a diagnosis of mental illness (excluding a single diagnosis of substance abuse, mental retardation, autism or pervasive developmental disorder) who exhibit serious emotional, behavioral or mental disorders and who:
 - i) Have a serious functional impairment; or
 - ii) Are at risk of disruption of a preferred living or child care environment due to psychiatric symptoms; or
 - iii) Are enrolled in a school system’s special education program because of a serious emotional disturbance.
- 2) Adults or children with other diagnoses (priority populations) may be served as determined by clinical judgment. It is not recommended that a large number of these individuals be admitted as they do not count toward service level requirements of DSHS.

What types of services can be provided?

Most public mental health services in Texas are delivered as part of a “service package”. The Resiliency and Disease Management (RDM) Guidelines are used to assign each applicant for services to a service package based on their clinically assessed level of need. This assessment has several parts: the Uniform Assessment (UA) including Texas Recommended Assessment Guidelines (TRAG) results; a determination of medical necessity for treatment; and authorization for services by the LMHA. Each service package requires a minimum number of various types of units of service to be delivered by the provider. Some basic services are listed here:

- Psychiatric Evaluation
- Pharmacological Management
- Rehabilitation Services using a LMHA approved curriculum
- Cognitive Behavioral Therapy
- Crisis Intervention Services
- Multi-Systemic Therapy
- Respite Services

Interested applicants should check the websites and documents listed below for detailed information on Service Packages and service definitions.

Who can deliver services?

- 1) Licensed Practitioner of the Healing Arts (LPHA) – includes : Physician, APN, LCSW, LPC and LMFT
- 2) Qualified Mental Health Professional (QMHP) -Degreed individual in a social services field
- 3) All provider staff must have a criminal background check performed. Some incidents will bar employment.

What training do staff need to have before providing any services?

- 1) DSHS Required Training – all LPHA staff
 - a) Texas Implementation Medication Algorithm (TIMA)
 - b) Resiliency and Disease Management Guidelines
 - c) Medicaid rules
 - d) Uniform Assessment, Treatment Planning & Documentation
 - e) Prevention and Management of Aggressive Behavior
- 2) DSHS required training – all QMHP staff
 - a) Skills training techniques
 - b) Resiliency and Disease Management Guidelines
 - c) Medicaid rules
 - d) Uniform Assessment, Treatment Planning & Documentation
 - e) Prevention and Management of Aggressive Behavior
 - f) Clinical supervision by an LPHA including chart reviews.

What is a valid service?

- 1) Documentation (progress note) requirements
 - a) Name the type of service
 - b) Specific skill(s) trained on and method use to provide training
 - c) Date, start and end time, location
 - d) Treatment plan goal(s) that was focus of service
 - e) Progress or lack progress in achieving treatment plan goals
- 2) Claims submission
 - a) Claims and supporting event data must be submitted by the 10th day of the month following the service per DSHS encounter data requirements.
 - b) Provider must have the ability to
 1. Bill according to DSHS requirements
 2. Accept and reconcile claims
 3. Monitor authorizations
- 3) LMHA authorization of services
 - a) Assessment completed
 - b) Treatment plan completed
 - c) Diagnosis current within the last year
 - d) Determination of medical necessity
 - e) NOTE: Services delivered prior to authorization are not allowed and cannot be paid.
- 4) 3rd party payer authorization (Medicaid HMOs)
 - a) This is in addition to LMHA authorization

Penalties can be assessed by DSHS for failure to deliver the minimum number of services. The LMHA may pass these penalties on to a provider.

Further information on RDM and TIMA, can be found at

- <http://www.dshs.state.tx.us/mhcommunity/LPND/> or
- <http://www.dshs.state.tx.us/mhprograms/RDM.shtm> or <http://www.dshs.state.tx.us/mhprograms/TIMA.shtm> or
- the Local Mental Health Authority's Local Service Delivery Plan or
- Procurement documents issued by the Local Authority