

Provider Network Management Quality Review Tool Elements

TGH AGENCY REQUIREMENTS

Licensed by the Louisiana Department of Health (LDH), in accordance with LAC 48:1, Chapter 62, entitled Therapeutic Group Homes, to provide community-based residential services in a home-like setting of no greater than ten beds for the location reviewed.

Licensed by the Louisiana Department of Health (LDH), in accordance with LAC 48:1, Chapter 62, entitled Therapeutic Group Homes, to provide community-based residential services under the supervision and/or oversight of a psychiatrist or licensed psychologist, to children under the age of 21

Accredited by the Commission on Accreditation of Rehabilitation Facilities (CARF), the Council on Accreditation (COA), or The Joint Commission (TJC) for the location reviewed.

Agencies must attain full accreditation within 18 months of the initial accreditation application date.

The agency shall pay all associated accreditation fees prior to being contracted and reimbursed by a Medicaid managed care entity.

New or existing providers must not exceed 10 beds.

TGH must arrange for prior to employment (or contracting, volunteering, or as required by law) individuals pass criminal background checks, including sexual offender registry checks, in accordance with any applicable federal or state laws.

TGH must maintain documentation that prior to employment (or contracting, volunteering, or as required by law) individuals pass criminal background checks, including sexual offender registry checks, in accordance with any applicable federal or state laws.

Criminal background checks are performed no more than 90 days prior to the date of employment

TGH must review the Department of Health and Human Services' Office of Inspector General (OIG) List of Excluded Individuals and Entities (LEIE) prior to hiring or contracting any employee or contractor that performs services that are compensated with Medicaid/Medicare funds, including but not limited to licensed and unlicensed staff, interns and/or contractors.

TGHs must review the LDH State Adverse Actions website prior to hiring or contracting any employee or contractor that performs services that are compensated with Medicaid/Medicare funds, including but not limited to licensed and unlicensed staff, interns and/or contractors.

Agency must, for current employees, check the Department of Health and Human Services' Office of Inspector General (OIG) List of Excluded Individuals and Entities (LEIE) list once a month thereafter to determine if they have been excluded from participation in the Medicaid or Medicare Program by Louisiana Medicaid or the Department of Health and Human Services' Office of Inspector General.

Agency must, for current employees, check the LDH State Adverse Actions list once a month thereafter to determine if there is a finding that an employee or contractor has abused, neglected or extorted any individual or if they have been excluded from participation in the Medicaid or Medicare Program by Louisiana Medicaid or the Department of Health and Human Services' Office of Inspector General.

Arrange for and maintain documentation that all persons, prior to employment, are free from tuberculosis (TB) in a communicable state via skin testing (or chest exam if recommended by physician) to reduce the risk of such infections in members and staff.

TB testing was completed less than 31 days prior to date of employment

Establish and maintain written policies and procedures inclusive of drug testing staff to ensure an alcohol and/or drug-free workplace and/or a workforce free of substance use

Maintain documentation that all direct care staff, who are required to complete first aid training, complete the training within 90 days of hire; Psychiatrists, advanced practical registered nurses (APRNs)/physician assistants (PAs), registered nurses (RNs) and licensed practical nurses (LPNs) are exempt from this training.
Maintain documentation that all direct care staff, who are required to renew first aid training, complete the training within the time period recommended by the American Heart Association; Psychiatrists, advanced practical registered nurses (APRNs)/physician assistants (PAs), registered nurses (RNs) and licensed practical nurses (LPNs) are exempt from this training.
Maintain documentation that all direct care staff, who are required to complete cardiopulmonary resuscitation (CPR) training, complete the training within 90 days of hire; Psychiatrists, advanced practical registered nurses (APRNs)/physician assistants (PAs), registered nurses (RNs) and licensed practical nurses (LPNs) are exempt from this training.
Maintain documentation that all direct care staff, who are required to renew CPR training, complete the training within the time period recommended by the American Heart Association; Psychiatrists, advanced practical registered nurses (APRNs)/physician assistants (PAs), registered nurses (RNs) and licensed practical nurses (LPNs) are exempt from this training.
Maintain documentation of verification of staff meeting professional requirements including licensure (where applicable)
Unlicensed staff rendering services have completed the Standardized Basic Clinical Competency Training Module: MH 101 – Introduction to Serious Mental Illness (SMI) and Emotional Behavioral Disorders.
Unlicensed staff rendering services have completed the Standardized Basic Clinical Competency Training Module: Crisis intervention.
Unlicensed staff rendering services have completed the Standardized Basic Clinical Competency Training Module: Suicide and homicide precautions.
Unlicensed staff rendering services have completed the Standardized Basic Clinical Competency Training Module: System of care overview.
Unlicensed staff rendering services have completed the Standardized Basic Clinical Competency Training Module: Co-occurring disorders.
Unlicensed staff rendering services have completed the Standardized Basic Clinical Competency Training Module: Cultural and linguistic competency (basic).
Unlicensed staff rendering services have completed the Standardized Basic Clinical Competency Training Module: Treatment planning.
Ensure and/or maintain documentation that all unlicensed persons employed by the organization complete annual training in a recognized crisis intervention curriculum prior to handling or managing crisis calls.
Direct care staff must be at least 18 years old
Direct care staff must be at least three years older than an individual under 18 years of age
Direct care staff must have a high school diploma, general equivalency diploma or trade school diploma in the area of human services, or demonstrate competency or verifiable work experience in providing support to persons with disabilities. The human service field is defined as an academic program with a curriculum content in which at least 70 percent of the required courses are in the study of behavioral health or human behavior;

Direct care staff must have a minimum of two years of experience working with children, be equivalently qualified by education in the human services field, or have a combination of work experience and education with one year of education substituting for one year of experience;
All unlicensed staff must be under the supervision and oversight of a psychiatrist or psychologist;
Employees and/or Contractors pass drug screening tests as required by agency's policies and procedures;
Staffing schedules must reflect overlap in shift hours to accommodate information exchange for continuity of youth treatment
A TGH shall have a minimum of two staff on duty per shift in each living unit with at least one being direct care staff when there is a client present
A TGH shall have the ability to call in as many staff as necessary to maintain safety and control in the facility, depending upon the needs of the current population at any given time
A ratio of not less than one staff to five clients is maintained at all times
The TGH shall employ a supervising practitioner which shall be one of the following: i. a physician with an unrestricted license to practice in Louisiana and who meets all of the following qualifications: (a). an unrestricted drug enforcement agency (DEA) and Louisiana controlled substance license; (b). if the physician holds an additional license(s) in another state or jurisdiction, that license(s) shall be unrestricted and be documented in the employment record; (c). board-certification in general psychiatry; and (d). satisfactory completion of a specialized psychiatric residency training program accredited by the Accreditation Council for Graduate Medical Education (ACGME), ii. a psychologist/medical psychologist shall have the following: (a). an unrestricted license to practice psychology in Louisiana issued by the Louisiana State Board of Examiners of Psychologists or an unrestricted license to practice medical psychology issued by the Louisiana State Board of Medical Examiners; (b). unrestricted DEA and Louisiana controlled substance licenses, if the supervising practitioner is a medical psychologist; (c). demonstrated competence and experience in the assessment, diagnosis, and treatment of children and adolescents who have mental and emotional disorders or disabilities, alcoholism and substance abuse.
The supervising practitioner must provide 24-hour on call coverage, seven days a week
The TGH clinical director shall be an LMHP practicing within the scope of their license
The TGH therapist shall be an LMHP or an individual with a Master's degree in social work, counseling, psychology or a related human services field.
There shall be a licensed registered nurse operating within his/her scope of practice who shall supervise the nursing services of the TGH.
The TGH shall have a licensed registered nurse who shall have documented experience and training in the treatment of children or adolescents.
The house manager shall be at least 21 years of age.
The house manager shall be at least 3 years older than the oldest client.

<p>The house manager shall possess one of the following:</p> <p>(a). a Bachelor’s degree in a human services field and one year of documented employment with a health care provider that treats clients with mental illness; or</p> <p>(b). two years of course work toward a Bachelor’s degree in a human services field and two years of documented employment with a health care provider that treats clients with mental illness.</p>
<p>All direct care staff shall be certified in crisis prevention/management (example: CPI, Mandt, etc.)</p>
<p style="text-align: center;"><i>PRTF AGENCY REQUIREMENTS</i></p>
<p>Licensed by the Louisiana Department of Health (LDH), in accordance with LAC 48:1, Chapter 90, entitled Psychiatric Residential Treatment Facilities for the location reviewed.</p>
<p>Accredited by the Commission on Accreditation of Rehabilitation Facilities (CARF), the Council on Accreditation (COA), or The Joint Commission (TJC) for the location reviewed.</p>
<p>PRTF must arrange for prior to employment (or contracting, volunteering, or as required by law) individuals pass criminal background checks, including sexual offender registry checks, in accordance with any applicable federal or state laws.</p>
<p>PRTF must maintain documentation that prior to employment (or contracting, volunteering, or as required by law) individuals pass criminal background checks, including sexual offender registry checks, in accordance with any applicable federal or state laws.</p>
<p>Criminal background checks are performed no more than 90 days prior to the date of employment</p>
<p>PRTFs must review the Department of Health and Human Services’ Office of Inspector General (OIG) List of Excluded Individuals and Entities (LEIE) prior to hiring or contracting any employee or contractor that performs services that are compensated with Medicaid/Medicare funds, including but not limited to licensed and unlicensed staff, interns and/or contractors.</p>
<p>PRTFs must review the LDH State Adverse Actions website prior to hiring or contracting any employee or contractor that performs services that are compensated with Medicaid/Medicare funds, including but not limited to licensed and unlicensed staff, interns and/or contractors.</p>
<p>Agency must, for current employees, check the Department of Health and Human Services’ Office of Inspector General (OIG) List of Excluded Individuals and Entities (LEIE) list once a month thereafter to determine if they have been excluded from participation in the Medicaid or Medicare Program by Louisiana Medicaid or the Department of Health and Human Services’ Office of Inspector General.</p>
<p>Agency must, for current employees, check the LDH State Adverse Actions list once a month thereafter to determine if there is a finding that an employee or contractor has abused, neglected or extorted any individual or if they have been excluded from participation in the Medicaid or Medicare Program by Louisiana Medicaid or the Department of Health and Human Services’ Office of Inspector General.</p>
<p>Arrange for and maintain documentation that all persons, prior to employment, are free from tuberculosis (TB) in a communicable state via skin testing (or chest exam if recommended by physician) to reduce the risk of such infections in members and staff.</p>
<p>TB testing was completed less than 31 days prior to date of employment</p>
<p>Establish and maintain written policies and procedures inclusive of drug testing staff to ensure an alcohol and/or drug-free workplace and/or a workforce free of substance use</p>
<p>Maintain documentation that all direct care staff, who are required to complete first aid training, complete the training within 90 days of hire; Psychiatrists, advanced practical registered nurses (APRNs)/physician assistants (PAs), registered nurses (RNs) and licensed practical nurses (LPNs) are exempt from this training.</p>

Maintain documentation that all direct care staff, who are required to renew first aid training, complete the training within the time period recommended by the American Heart Association; Psychiatrists, advanced practical registered nurses (APRNs)/physician assistants (PAs), registered nurses (RNs) and licensed practical nurses (LPNs) are exempt from this training.
Maintain documentation that all direct care staff, who are required to complete cardiopulmonary resuscitation (CPR) training, complete the training within 90 days of hire; Psychiatrists, advanced practical registered nurses (APRNs)/physician assistants (PAs), registered nurses (RNs) and licensed practical nurses (LPNs) are exempt from this training.
Maintain documentation that all direct care staff, who are required to renew CPR training, complete the training within the time period recommended by the American Heart Association; Psychiatrists, advanced practical registered nurses (APRNs)/physician assistants (PAs), registered nurses (RNs) and licensed practical nurses (LPNs) are exempt from this training.
Unlicensed staff rendering services have completed the Standardized Basic Clinical Competency Training Module: MH 101 – Introduction to Serious Mental Illness (SMI) and Emotional Behavioral Disorders.
Unlicensed staff rendering services have completed the Standardized Basic Clinical Competency Training Module: Crisis intervention.
Unlicensed staff rendering services have completed the Standardized Basic Clinical Competency Training Module: Suicide and homicide precautions.
Unlicensed staff rendering services have completed the Standardized Basic Clinical Competency Training Module: System of care overview.
Unlicensed staff rendering services have completed the Standardized Basic Clinical Competency Training Module: Co-occurring disorders.
Unlicensed staff rendering services have completed the Standardized Basic Clinical Competency Training Module: Cultural and linguistic competency (basic).
Unlicensed staff rendering services have completed the Standardized Basic Clinical Competency Training Module: Treatment planning.
Maintain documentation of verification of staff meeting professional requirements including licensure (where applicable)
PRTFs must comply with federal emergency preparedness regulations associated with 42 CFR §441.184 in order to participate in the Medicare or Medicaid program. which includes safeguarding human resources.
PRTFs must comply with federal emergency preparedness regulations associated with 42 CFR §441.184 in order to participate in the Medicare or Medicaid program. which includes maintaining business continuity
PRTFs must comply with federal emergency preparedness regulations associated with 42 CFR §441.184 in order to participate in the Medicare or Medicaid program. which includes protecting physical resources
CMS requires facilities to perform a risk assessment that uses an “all-hazards” approach prior to establishing an emergency plan
CMS requires facilities to develop and maintain an emergency preparedness communication plan that complies with both federal and state laws.
As part of the communication plan, patient care must be well coordinated within the facility to protect patient health and safety in the event of a disaster.

As part of the communication plan, patient care must be well coordinated across healthcare providers to protect patient health and safety in the event of a disaster.

As part of the communication plan, patient care must be well coordinated with state and local public health departments to protect patient health and safety in the event of a disaster.

As part of the communication plan, patient care must be well coordinated with emergency management agencies and systems to protect patient health and safety in the event of a disaster.

CMS requires that facilities develop and implement policies that comply with federal and state law, and that support the successful execution of the emergency plan and risks identified during the risk assessment process

CMS requires that facilities develop and implement procedures that comply with federal and state law, and that support the successful execution of the emergency plan and risks identified during the risk assessment process

CMS requires that facilities develop and maintain an emergency preparedness training and testing program that complies with federal and state law, and that is updated at least annually.

PRTFs staff must complete all required training appropriate to the program model approved by OBH.

PRTFs team must include:

- either a board-eligible or board-certified psychiatrist,
- licensed clinical psychologist and a physician licensed to practice medicine or osteopathy; or
- A physician licensed to practice medicine or osteopathy, with specialized training and experience in the diagnosis and treatment of mental diseases and a psychologist who has a master's degree in clinical psychology or who has been licensed by the State psychological association.

PRTFs team must include a licensed clinical social worker (LCSW), A RN with specialized training or one year's experience in treating individuals with mental illness, An occupational therapist who is licensed and who has specialized training or one year of experience in treating individuals with mental illness; or A licensed psychologist or medical psychologist.

Level 3.7 Medically Monitored High Intensity Inpatient Treatment – Adolescent

Licensed by the Louisiana Department of Health (LDH), in accordance with LAC 48:1, Chapter 90, entitled Psychiatric Residential Treatment Facilities for the location reviewed.

The agency must be Physician directed.

Accredited by the Commission on Accreditation of Rehabilitation Facilities (CARF), the Council on Accreditation (COA), or The Joint Commission (TJC) for the location reviewed.

PRTF must arrange for prior to employment (or contracting, volunteering, or as required by law) individuals pass criminal background checks, including sexual offender registry checks, in accordance with any applicable federal or state laws.

PRTF must maintain documentation that prior to employment (or contracting, volunteering, or as required by law) individuals pass criminal background checks, including sexual offender registry checks, in accordance with any applicable federal or state laws.

Criminal background checks are performed no more than 90 days prior to the date of employment

PRTFs must review the Department of Health and Human Services' Office of Inspector General (OIG) List of Excluded Individuals and Entities (LEIE) prior to hiring or contracting any employee or contractor that performs services that are compensated with Medicaid/Medicare funds, including but not limited to licensed and unlicensed staff, interns and/or contractors.

PRTFs must review the LDH State Adverse Actions website prior to hiring or contracting any employee or contractor that performs services that are compensated with edicaid/Medicare funds, including but not limited to licensed and unlicensed staff, interns and/or contractors.

Agency must, for current employees, check the Department of Health and Human Services' Office of Inspector General (OIG) List of Excluded Individuals and Entities (LEIE) list once a month thereafter to determine if they have been excluded from participation in the Medicaid or Medicare Program by Louisiana Medicaid or the Department of Health and Human Services' Office of Inspector General.

Agency must, for current employees, check the LDH State Adverse Actions list once a month thereafter to determine if there is a finding that an employee or contractor has abused, neglected or extorted any individual or if they have been excluded from participation in the Medicaid or Medicare Program by Louisiana Medicaid or the Department of Health and Human Services' Office of Inspector General.

Arrange for and maintain documentation that all persons, prior to employment, are free from tuberculosis (TB) in a communicable state via skin testing (or chest exam if recommended by physician) to reduce the risk of such infections in members and staff.

TB testing was completed less than 30 days prior to date of employment

Establish and maintain written policies and procedures inclusive of drug testing staff to ensure an alcohol and/or drug-free workplace and/or a workforce free of substance use

Maintain documentation that all direct care staff, who are required to complete first aid training, complete the training within 90 days of hire; Psychiatrists, advanced practical registered nurses (APRNs)/physician assistants (PAs), registered nurses (RNs) and licensed practical nurses (LPNs) are exempt from this training.

Maintain documentation that all direct care staff, who are required to renew first aid training, complete the training within the time period recommended by the American Heart Association; Psychiatrists, advanced practical registered nurses (APRNs)/physician assistants (PAs), registered nurses (RNs) and licensed practical nurses (LPNs) are exempt from this training.

Maintain documentation that all direct care staff, who are required to complete cardiopulmonary resuscitation (CPR) training, complete the training within 90 days of hire; Psychiatrists, advanced practical registered nurses (APRNs)/physician assistants (PAs), registered nurses (RNs) and licensed practical nurses (LPNs) are exempt from this training.

Maintain documentation that all direct care staff, who are required to renew CPR training, complete the training within the time period recommended by the American Heart Association; Psychiatrists, advanced practical registered nurses (APRNs)/physician assistants (PAs), registered nurses (RNs) and licensed practical nurses (LPNs) are exempt from this training.

Unlicensed staff rendering services have completed the Standardized Basic Clinical Competency Training Module: MH 101 – Introduction to Serious Mental Illness (SMI) and Emotional Behavioral Disorders.

Unlicensed staff rendering services have completed the Standardized Basic Clinical Competency Training Module: Crisis intervention.

Unlicensed staff rendering services have completed the Standardized Basic Clinical Competency Training Module: Suicide and homicide precautions.

Unlicensed staff rendering services have completed the Standardized Basic Clinical Competency Training Module: System of care overview.

Unlicensed staff rendering services have completed the Standardized Basic Clinical Competency Training Module: Co-occurring disorders.
Unlicensed staff rendering services have completed the Standardized Basic Clinical Competency Training Module: Cultural and linguistic competency (basic).
Unlicensed staff rendering services have completed the Standardized Basic Clinical Competency Training Module: Treatment planning.
Maintain documentation of verification of staff meeting professional requirements including licensure (where applicable)
PRTFs must comply with federal emergency preparedness regulations associated with 42 CFR §441.184 in order to participate in the Medicare or Medicaid program. which includes safeguarding human resources.
PRTFs must comply with federal emergency preparedness regulations associated with 42 CFR §441.184 in order to participate in the Medicare or Medicaid program. which includes maintaining business continuity
PRTFs must comply with federal emergency preparedness regulations associated with 42 CFR §441.184 in order to participate in the Medicare or Medicaid program. which includes protecting physical resources
CMS requires facilities to perform a risk assessment that uses an “all-hazards” approach prior to establishing an emergency plan
CMS requires facilities to develop and maintain an emergency preparedness communication plan that complies with both federal and state laws.
As part of the communication plan, patient care must be well coordinated within the facility to protect patient health and safety in the event of a disaster.
As part of the communication plan, patient care must be well coordinated across healthcare providers to protect patient health and safety in the event of a disaster.
As part of the communication plan, patient care must be well coordinated with state and local public health departments to protect patient health and safety in the event of a disaster.
As part of the communication plan, patient care must be well coordinated with emergency management agencies and systems to protect patient health and safety in the event of a disaster.
CMS requires that facilities develop and implement policies that comply with federal and state law, and that support the successful execution of the emergency plan and risks identified during the risk assessment process
CMS requires that facilities develop and implement procedures that comply with federal and state law, and that support the successful execution of the emergency plan and risks identified during the risk assessment process
CMS requires that facilities develop and maintain an emergency preparedness training and testing program that complies with federal and state law, and that is updated at least annually.
PRTFs staff must complete all required training appropriate to the program model approved by OBH.
PRTFs team must include: <ul style="list-style-type: none"> •either a board-eligible or board-certified psychiatrist, •licensed clinical psychologist and a physician licensed to practice medicine or osteopathy; or •A physician licensed to practice medicine or osteopathy, with specialized training and experience in the diagnosis and treatment of mental diseases and a psychologist who has a master's degree in clinical psychology or who has been licensed by the State psychological association.

PRTFs team must include a licensed clinical social worker (LCSW), A RN with specialized training or one year's experience in treating individuals with mental illness, An occupational therapist who is licensed and who has specialized training or one year of experience in treating individuals with mental illness; or A licensed psychologist or medical psychologist.

PRTFs must ensure that there is a licensed physician, medical director – licensed physician(s) on site as needed for management of psychiatric/medical needs. 24 hour on-call availability;

PRTFs must ensure that there is a licensed psychologist available as needed

PRTFs must ensure that there is licensed nursing staff present – One FTE Supervisor (APRN/NP/RN), 24 hour on-call availability;

PRTFs must ensure that there is one FTE RN/LPN available on duty on site at all times;

PRTFs must ensure that there is a licensed or certified clinician or counselor with direct supervision by an LMHP, or unlicensed professional (UP) under supervision of a clinical supervisor;

Caseloads do not exceed eight members;

PRTFs must ensure that the clinical supervisor is available for clinical supervision when needed and by telephone for consultation;

PRTFs must ensure that An LMHP is available on site 40 hours per week;

The facility shall maintain, in accordance with LAC 48:1 Chapter 90: a minimum ratio of one staff person for four residents (1:4) between the hours of 6 a.m. and 10 p.m. The staff for purposes of this ratio shall consist of direct care staff (i.e. licensed practical nurse (LPN), MHS, MHP, LMHP, etc.);

The facility shall maintain, in accordance with LAC 48:1 Chapter 90: A minimum ratio of one staff person for six residents (1:6) between 10 p.m. and 6 a.m. Staff shall always be awake while on duty. The staff for purposes of this ratio shall consist of direct care staff (i.e. LPN, MHS, MHP, LMHP, etc.).

PRTFs must ensure that there is clerical support staff available – 1 to 2 FTE per day shift;

PRTFs must ensure that there is an activity/occupational therapist – one FTE;

PRTFs must ensure that there is a care coordinator – one FTE per day shift, and/or duties may be assumed by clinical staff;

PRTFs must ensure that Physicians, who are available 24 hours a day by telephone. (A PA may perform duties within the scope of his/her practice as designated by physician). An APRN may perform duties within the scope of his/her practice;

PRTFs must ensure that Licensed, certified or registered clinicians provide a planned regimen of 24-hour, professionally directed evaluation, care and treatment services for members and their families;

PRTFs must ensure that An interdisciplinary team of appropriately trained clinicians, such as physicians, nurses, counselors, social workers and psychologists, is available to assess and treat the individual and to obtain and interpret information regarding the member's needs. The number and disciplines of team members are appropriate to the range and severity of the individual's problems.

FQHC and RHC Agency Requirements

Federally Qualified Health Centers (FQHCs) must be certified by the federal government.

Rural health centers (RHCs) must be licensed by the Louisiana Department of Health (LDH) Health Standards Section (HSS) pursuant to R.S. 40:2197.

Documentation licensed mental health professionals (LMHPs) and/or staff offering behavioral health services in the FQHC/RHC meet qualifications specified for other licensed practitioners and direct care staff in accordance with the current LDH Behavioral Health services manual.

FQHCs and RHCs must comply with federal emergency preparedness regulations associated with 42 CFR §441.184 in order to participate in the Medicare or Medicaid program. which includes safeguarding human resources.
FQHCs and RHCs must comply with federal emergency preparedness regulations associated with 42 CFR §441.184 in order to participate in the Medicare or Medicaid program. which includes maintaining business continuity
FQHCs and RHCs must comply with federal emergency preparedness regulations associated with 42 CFR §441.184 in order to participate in the Medicare or Medicaid program. which includes protecting physical resources
CMS requires facilities to perform a risk assessment that uses an “all-hazards” approach prior to establishing an emergency plan
CMS requires facilities to develop and maintain an emergency preparedness communication plan that complies with both federal and state laws.
As part of the communication plan, patient care must be well coordinated across healthcare providers to protect patient health and safety in the event of a disaster.
As part of the communication plan, patient care must be well coordinated with state and local public health departments to protect patient health and safety in the event of a disaster.
As part of the communication plan, patient care must be well coordinated with emergency management agencies and systems to protect patient health and safety in the event of a disaster.
CMS requires that facilities develop and implement policies that comply with federal and state law, and that support the successful execution of the emergency plan and risks identified during the risk assessment process
CMS requires that facilities develop and implement procedures that comply with federal and state law, and that support the successful execution of the emergency plan and risks identified during the risk assessment process
CMS requires that facilities develop and maintain an emergency preparedness training and testing program that complies with federal and state law, and that is updated at least annually.
<u>Adult Crisis Provider Agency Requirements</u>
Licensure pursuant to La. R.S. 40:2151, et. seq. or La. R.S. 40:2180.12, et. seq. for the location being reviewed.
Accredited by the Commission on Accreditation of Rehabilitation Facilities (CARF), the Council on Accreditation (COA), or The Joint Commission (TJC) for the location reviewed.
Agencies must attain full accreditation within 18 months of the initial accreditation application date.
The agency shall pay all associated accreditation fees prior to being contracted and reimbursed by a Medicaid managed care entity.
Agency must arrange for prior to employment (or contracting, volunteering, or as required by law) individuals pass criminal background checks, including sexual offender registry checks, in accordance with any applicable federal or state laws.
Agency must maintain documentation that prior to employment (or contracting, volunteering, or as required by law) individuals pass criminal background checks, including sexual offender registry checks, in accordance with any applicable federal or state laws.
Criminal background checks are performed no more than 90 days prior to the date of employment

Agency must review the Department of Health and Human Services' Office of Inspector General (OIG) List of Excluded Individuals and Entities (LEIE) prior to hiring or contracting any employee or contractor that performs services that are compensated with Medicaid/Medicare funds, including but not limited to licensed and unlicensed staff, interns and/or contractors.

Agency must review the LDH State Adverse Actions website prior to hiring or contracting any employee or contractor that performs services that are compensated with Medicaid/Medicare funds, including but not limited to licensed and unlicensed staff, interns and/or contractors.

Agency must, for current employees, check the Department of Health and Human Services' Office of Inspector General (OIG) List of Excluded Individuals and Entities (LEIE) list once a month thereafter to determine if they have been excluded from participation in the Medicaid or Medicare Program by Louisiana Medicaid or the Department of Health and Human Services' Office of Inspector General.

Agency must, for current employees, check the LDH State Adverse Actions list once a month thereafter to determine if there is a finding that an employee or contractor has abused, neglected or extorted any individual or if they have been excluded from participation in the Medicaid or Medicare Program by Louisiana Medicaid or the Department of Health and Human Services' Office of Inspector General.

Arrange for and maintain documentation that all persons, prior to employment, are free from tuberculosis (TB) in a communicable state via skin testing (or chest exam if recommended by physician) to reduce the risk of such infections in members and staff.

TB testing was completed less than 31 days prior to date of employment

Establish and maintain written policies and procedures inclusive of drug testing staff to ensure an alcohol and/or drug-free workplace and/or a workforce free of substance use

Maintain documentation that all direct care staff, who are required to complete first aid training, complete the training within 90 days of hire; Psychiatrists, advanced practical registered nurses (APRNs)/physician assistants (PAs), registered nurses (RNs) and licensed practical nurses (LPNs) are exempt from this training.

Maintain documentation that all direct care staff, who are required to renew first aid training, complete the training within the time period recommended by the American Heart Association; Psychiatrists, advanced practical registered nurses (APRNs)/physician assistants (PAs), registered nurses (RNs) and licensed practical nurses (LPNs) are exempt from this training.

Maintain documentation that all direct care staff, who are required to complete cardiopulmonary resuscitation (CPR) training, complete the training within 90 days of hire; Psychiatrists, advanced practical registered nurses (APRNs)/physician assistants (PAs), registered nurses (RNs) and licensed practical nurses (LPNs) are exempt from this training.

Maintain documentation that all direct care staff, who are required to renew CPR training, complete the training within the time period recommended by the American Heart Association; Psychiatrists, advanced practical registered nurses (APRNs)/physician assistants (PAs), registered nurses (RNs) and licensed practical nurses (LPNs) are exempt from this training.

Staff must be at least twenty-four (24) years old;

Unlicensed staff must have a minimum of bachelor's degree (preferred) OR an associate's degree and two (2) years of work experience in the human services field OR meet Recognized Peer Support Specialist (RPSS) qualifications.

Unlicensed staff rendering services have completed the Standardized Basic Clinical Competency Training Module: MH 101 – Introduction to Serious Mental Illness (SMI) and Emotional Behavioral Disorders.
Unlicensed staff rendering services have completed the Standardized Basic Clinical Competency Training Module: Crisis intervention.
Unlicensed staff rendering services have completed the Standardized Basic Clinical Competency Training Module: Suicide and homicide precautions.
Unlicensed staff rendering services have completed the Standardized Basic Clinical Competency Training Module: System of care overview.
Unlicensed staff rendering services have completed the Standardized Basic Clinical Competency Training Module: Co-occurring disorders.
Unlicensed staff rendering services have completed the Standardized Basic Clinical Competency Training Module: Cultural and linguistic competency (basic).
Unlicensed staff rendering services have completed the Standardized Basic Clinical Competency Training Module: Treatment planning.
Complete training curriculum provided by The LSU Center for Evidence to Practice prior to providing the service.
The agency has a medical director.
The agency has an administrator.
The agency has a clinical supervisor
The agency has nursing staff.
Agency has current Crisis mitigation plan to address natural/man made disasters and emergencies.
<u>Mobile Crisis</u>
Medical Director or designated prescriber (physician/psychiatrist, APRN, Medical Psychologist) must be available twenty-four (24) hours a day /seven (7) days a week for consultation and/or medication management;
LMHPs on duty to adequately meet the member’s needs.
RPSS on duty to adequately meet the member’s needs.
<u>Behavioral Health Crisis Care</u>
Medical Director or designated prescriber (physician/psychiatrist, APRN, Medical Psychologist) must be available twenty-four (24) hours a day /seven (7) days a week for consultation and/or medication management;
LMHPs on duty to adequately meet the member’s needs.
Registered nurse or licensed practical nurse on duty to adequately meet the member’s needs.
RPSS on duty to adequately meet the member’s needs.
At least two (2) staff must be present at all times. Clerical staff do not qualify for this requirement
A minimum staff to member ratio of 1:4 must be maintained at all times.
<u>Community Brief Crisis Support</u>
Medical Director or designated prescriber (physician/psychiatrist, APRN, Medical Psychologist) must be available twenty-four (24) hours a day /seven (7) days a week for consultation and/or medication management;
LMHPs on duty to adequately meet the member’s needs.
RPSS on duty to adequately meet the member’s needs.

Outpatient Agency Requirements

Provider must be an LMHP which includes the following individuals who are licensed to practice independently: Medical psychologists ;Licensed psychologists;Licensed clinical social workers (LCSWs);Licensed professional counselors (LPCs);Licensed marriage and family therapists (LMFTs);Licensed addiction counselors (LACs); and Advanced practice registered nurses (APRNs).

Agency must be Licensed per La. R.S. 40:2151 et seq.(Louisiana Behavioral Health Service Providers Licensening Standards).

Agency must arrange for prior to employment (or contracting, volunteering, or as required by law) individuals pass criminal background checks, including sexual offender registry checks, in accordance with any applicable federal or state laws.

Agency must maintain documentation that prior to employment (or contracting, volunteering, or as required by law) individuals pass criminal background checks, including sexual offender registry checks, in accordance with any applicable federal or state laws.

Criminal background checks are performed no more than 30 days prior to the date of employment

Arrange for and maintain documentation that all persons, prior to employment, are free from tuberculosis (TB) in a communicable state via skin testing (or chest exam if recommended by physician) to reduce the risk of such infections in members and staff.

TB testing was completed less than 31 days prior to date of employment

Establish and maintain written policies and procedures inclusive of drug testing staff to ensure an alcohol and/or drug-free workplace and/or a workforce free of substance use

Agency must review the Department of Health and Human Services' Office of Inspector General (OIG) List of Excluded Individuals and Entities (LEIE) prior to hiring or contracting any employee or contractor that performs services that are compensated with Medicaid/Medicare funds, including but not limited to licensed and unlicensed staff, interns and/or contractors.

Agency must review the LDH State Adverse Actions website prior to hiring or contracting any employee or contractor that performs services that are compensated with edicaid/Medicare funds, including but not limited to licensed and unlicensed staff, interns and/or contractors.

Agency must, for current employees, check the Department of Health and Human Services' Office of Inspector General (OIG) List of Excluded Individuals and Entities (LEIE) list once a month thereafter to determine if they have been excluded from participation in the Medicaid or Medicare Program by Louisiana Medicaid or the Department of Health and Human Services' Office of Inspector General.

Agency must, for current employees, check the LDH State Adverse Actions list once a month thereafter to determine if there is a finding that an employee or contractor has abused, neglected or extorted any individual or if they have been excluded from participation in the Medicaid or Medicare Program by Louisiana Medicaid or the Department of Health and Human Services' Office of Inspector General.

Maintain documentation that all direct care staff, who are required to complete first aid training, complete the training within 90 days of hire; Psychiatrists, advanced practical registered nurses (APRNs)/physician assistants (PAs), registered nurses (RNs) and licensed practical nurses (LPNs) are exempt from this training.

Maintain documentation that all direct care staff, who are required to renew first aid training, complete the training within the time period recommended by the American Heart Association; Psychiatrists, advanced practical registered nurses (APRNs)/physician assistants (PAs), registered nurses (RNs) and licensed practical nurses (LPNs) are exempt from this training.

Maintain documentation that all direct care staff, who are required to complete cardiopulmonary resuscitation (CPR) training, complete the training within 90 days of hire; Psychiatrists, advanced practical registered nurses (APRNs)/physician assistants (PAs), registered nurses (RNs) and licensed practical nurses (LPNs) are exempt from this training.
Maintain documentation that all direct care staff, who are required to renew CPR training, complete the training within the time period recommended by the American Heart Association; Psychiatrists, advanced practical registered nurses (APRNs)/physician assistants (PAs), registered nurses (RNs) and licensed practical nurses (LPNs) are exempt from this training.
Unlicensed staff rendering services have completed the Standardized Basic Clinical Competency Training Module: MH 101 – Introduction to Serious Mental Illness (SMI) and Emotional Behavioral Disorders.
Unlicensed staff rendering services have completed the Standardized Basic Clinical Competency Training Module: Crisis intervention.
Unlicensed staff rendering services have completed the Standardized Basic Clinical Competency Training Module: Suicide and homicide precautions.
Unlicensed staff rendering services have completed the Standardized Basic Clinical Competency Training Module: System of care overview.
Unlicensed staff rendering services have completed the Standardized Basic Clinical Competency Training Module: Co-occurring disorders.
Unlicensed staff rendering services have completed the Standardized Basic Clinical Competency Training Module: Cultural and linguistic competency (basic).
Unlicensed staff rendering services have completed the Standardized Basic Clinical Competency Training Module: Treatment planning.
<i>Peer Support Services AGENCY REQUIREMENTS</i>
One (1) RPSS to twenty-five active members.
PSS must be provided under the administrative oversight of licensed and accredited local governing entities (LGEs).
Licensed by the Louisiana Department of Health (LDH) per La. R.S. 40:2151 et seq.; of the location reviewed.
Agency must arrange for prior to employment (or contracting, volunteering, or as required by law) individuals pass criminal background checks, including sexual offender registry checks, in accordance with any applicable federal or state laws.
Agency must maintain documentation that prior to employment (or contracting, volunteering, or as required by law) individuals pass criminal background checks, including sexual offender registry checks, in accordance with any applicable federal or state laws.
Criminal background checks are performed no more than 90 days prior to the date of employment
Agency must review the Department of Health and Human Services' Office of Inspector General (OIG) List of Excluded Individuals and Entities (LEIE) prior to hiring or contracting any employee or contractor that performs services that are compensated with Medicaid/Medicare funds, including but not limited to licensed and unlicensed staff, interns and/or contractors.
Agency must review the LDH State Adverse Actions website prior to hiring or contracting any employee or contractor that performs services that are compensated with Medicaid/Medicare funds, including but not limited to licensed and unlicensed staff, interns and/or contractors.

Agency must, for current employees, check the Department of Health and Human Services' Office of Inspector General (OIG) List of Excluded Individuals and Entities (LEIE) list once a month thereafter to determine if they have been excluded from participation in the Medicaid or Medicare Program by Louisiana Medicaid or the Department of Health and Human Services' Office of Inspector General.

Agency must, for current employees, check the LDH State Adverse Actions list once a month thereafter to determine if there is a finding that an employee or contractor has abused, neglected or extorted any individual or if they have been excluded from participation in the Medicaid or Medicare Program by Louisiana Medicaid or the Department of Health and Human Services' Office of Inspector General.

Arrange for and maintain documentation that all persons, prior to employment, are free from tuberculosis (TB) in a communicable state via skin testing (or chest exam if recommended by physician) to reduce the risk of such infections in members and staff.

TB testing was completed less than 31 days prior to date of employment

Establish and maintain written policies and procedures inclusive of drug testing staff to ensure an alcohol and/or drug-free workplace and/or a workforce free of substance use

Maintain documentation that all direct care staff, who are required to complete first aid training, complete the training within 90 days of hire; Psychiatrists, advanced practical registered nurses (APRNs)/physician assistants (PAs), registered nurses (RNs) and licensed practical nurses (LPNs) are exempt from this training.

Maintain documentation that all direct care staff, who are required to renew first aid training, complete the training within the time period recommended by the American Heart Association; Psychiatrists, advanced practical registered nurses (APRNs)/physician assistants (PAs), registered nurses (RNs) and licensed practical nurses (LPNs) are exempt from this training.

Maintain documentation that all direct care staff, who are required to complete cardiopulmonary resuscitation (CPR) training, complete the training within 90 days of hire; Psychiatrists, advanced practical registered nurses (APRNs)/physician assistants (PAs), registered nurses (RNs) and licensed practical nurses (LPNs) are exempt from this training.

Maintain documentation that all direct care staff, who are required to renew CPR training, complete the training within the time period recommended by the American Heart Association; Psychiatrists, advanced practical registered nurses (APRNs)/physician assistants (PAs), registered nurses (RNs) and licensed practical nurses (LPNs) are exempt from this training.

Ensure and/or maintain documentation that all unlicensed persons employed by the organization complete annual training in a recognized crisis intervention curriculum prior to handling or managing crisis calls.

Staff has a National Provider Identification (NPI) number

Must have lived experience with a mental illness and/or substance use challenge or condition.

Must be at least 21 years of age

Must have a high school diploma or GED

Must successfully complete the LDH/OBH approved training for RPSS

Received 25 hours of documented clinical Supervision in Core Competencies unless employed by their current Agency prior to February 1, 2021.

Must have at least twelve (12) months of continuous recovery, which is demonstrated by a lifestyle and decisions supporting an individual's overall wellness and recovery.

Must complete continuing education in confidentiality requirements
Must complete continuing education in Health Insurance Portability and Accountability Act (HIPAA) requirements
Must complete continuing education in mandated reporting;
Must sign acknowledgement and receipt of Peer Support Specialist Code of Ethics
Three (3) of the ten (10) CEUs must be in the area of Ethics.
Seven (7) of the ten (10) will be in the principles and competencies related to tenets of peer support.
Documentation of completion of the ten approved CEUs shall be submitted to OBH by December 31 each year
Submission to OBH by December 31 each year of annual attestation statement as approved by LDH/OBH indicating compliance with the Code of Ethics and Scope of Practice.
<u>CPST/PSR AGENCY REQUIREMENTS</u>
Accredited by the Commission on Accreditation of Rehabilitation Facilities (CARF), the Council on Accreditation (COA), or The Joint Commission (TJC) for the location reviewed.
Agencies must attain full accreditation within 18 months of the initial accreditation application date.
The agency shall pay all associated accreditation fees prior to being contracted and reimbursed by a Medicaid managed care entity.
The agency has a medical director.
The agency has an administrator.
The agency has a clinical supervisor
The agency has nursing staff.
Agency has current Crisis mitigation plan to address natural/man made disasters and emergencies.
Agency must arrange for and/or maintain documentation that prior to employment (or contracting, volunteering, or as required by law) individuals pass criminal background checks, including sexual offender registry checks, in accordance with any applicable federal or state laws.
Criminal background checks were performed within ninety (90) days prior to the date of employment.
Agency must review the Department of Health and Human Services' Office of Inspector General (OIG) List of Excluded Individuals and Entities (LEIE) prior to hiring or contracting any employee or contractor that performs services that are compensated with Medicaid/Medicare funds, including but not limited to licensed and unlicensed staff, interns and/or contractors.
Agency must review the LDH State Adverse Actions website prior to hiring or contracting any employee or contractor that performs services that are compensated with Medicaid/Medicare funds, including but not limited to licensed and unlicensed staff, interns and/or contractors
Agency must, for current employees, check the Department of Health and Human Services' Office of Inspector General (OIG) List of Excluded Individuals and Entities (LEIE) list once a month thereafter to determine if they have been excluded from participation in the Medicaid or Medicare Program by Louisiana Medicaid or the Department of Health and Human Services' Office of Inspector General.
Agency must, for current employees, check the LDH State Adverse Actions list once a month thereafter to determine if there is a finding that an employee or contractor has abused, neglected or extorted any individual or if they have been excluded from participation in the Medicaid or Medicare Program by Louisiana Medicaid or the Department of Health and Human Services' Office of Inspector General.

<p>Arrange for and maintain documentation that all persons, prior to employment, are free from tuberculosis (TB) in a communicable state via skin testing (or chest exam if recommended by physician) to reduce the risk of such infections in members and staff.</p>
<p>TB testing was completed less than 31 days prior to date of employment</p>
<p>Establish and maintain written policies and procedures inclusive of drug testing staff to ensure an alcohol and/or drug-free workplace and/or a workforce free of substance use</p>
<p>Maintain documentation that all direct care staff, who are required to complete first aid training, complete the training within 90 days of hire; Psychiatrists, advanced practical registered nurses (APRNs)/physician assistants (PAs), registered nurses (RNs) and licensed practical nurses (LPNs) are exempt from this training.</p>
<p>Maintain documentation that all direct care staff, who are required to renew first aid training, complete the training within the time period recommended by the American Heart Association; Psychiatrists, advanced practical registered nurses (APRNs)/physician assistants (PAs), registered nurses (RNs) and licensed practical nurses (LPNs) are exempt from this training.</p>
<p>Maintain documentation that all direct care staff, who are required to complete cardiopulmonary resuscitation (CPR) training, complete the training within 90 days of hire; Psychiatrists, advanced practical registered nurses (APRNs)/physician assistants (PAs), registered nurses (RNs) and licensed practical nurses (LPNs) are exempt from this training.</p>
<p>Maintain documentation that all direct care staff, who are required to renew CPR training, complete the training within the time period recommended by the American Heart Association; Psychiatrists, advanced practical registered nurses (APRNs)/physician assistants (PAs), registered nurses (RNs) and licensed practical nurses (LPNs) are exempt from this training.</p>
<p>Unlicensed staff rendering services have completed the Standardized Basic Clinical Competency Training Module: MH 101 – Introduction to Serious Mental Illness (SMI) and Emotional Behavioral Disorders.</p>
<p>Unlicensed staff rendering services have completed the Standardized Basic Clinical Competency Training Module: Crisis intervention.</p>
<p>Unlicensed staff rendering services have completed the Standardized Basic Clinical Competency Training Module: Suicide and homicide precautions.</p>
<p>Unlicensed staff rendering services have completed the Standardized Basic Clinical Competency Training Module: System of care overview.</p>
<p>Unlicensed staff rendering services have completed the Standardized Basic Clinical Competency Training Module: Co-occurring disorders.</p>
<p>Unlicensed staff rendering services have completed the Standardized Basic Clinical Competency Training Module: Cultural and linguistic competency (basic).</p>
<p>Unlicensed staff rendering services have completed the Standardized Basic Clinical Competency Training Module: Treatment planning.</p>
<p>Ensure and/or maintain documentation that all unlicensed persons employed by the organization complete annual training in a recognized crisis intervention curriculum prior to handling or managing crisis calls.</p>
<p>Staff has a National Provider Identification (NPI) number</p>
<p>LMHP has completed LOCUS Training.</p>
<p>LMHP has completed CALOCUS Training</p>

MHR providers are required to have crisis mitigation plans that provides 24-hour on-call telephone assistance to prevent relapse or harm to self or others, to provide referral to other services, and/or to provide support during related crises.

The BHSP's crisis mitigation plan shall include the following:

-Identify steps to take when a client suffers from a medical, psychiatric, medication or relapse crisis

The BHSP's crisis mitigation plan shall include the following:

-Specify names and telephone numbers of staff or contracted entities to assist clients in crisis.

If the provider contracts with another entity to provide crisis mitigation services, the provider shall have a written contract with the entity providing the crisis mitigation services.

CPST Agency

Licensed by the Louisiana Department of Health (LDH) per La. R.S. 40:2151 et seq. as a Behavioral Health Service Provider as a Community Psychiatric Support and Treatment Program for the location reviewed.

Evidence staff has required educational degree(s) and/or credentials as required to provide the associated level of service related to their current job position.

Agencies providing CPST services must employ at least one full-time physician or full-time LMHP to specifically serve as a full-time mental health supervisor to assist in the design and evaluation of treatment plans for CPST services. LMHPs serving in the role of mental health supervisor for CPST services are restricted to medical psychologist, licensed psychologist, licensed clinical social worker (LCSW), licensed professional counselor (LPC), licensed marriage and family therapist (LMFT), or licensed Advanced Practice Registered Nurse (APRN) with a psychiatric specialization. The term "full-time" means employment by the provider agency for at least 35 hours per week.

The agency is credentialed and participating (contracted) in the provider network of the Medicaid managed care entity to be eligible to receive Medicaid reimbursement unless the provider agency is licensed and accredited, and has an executed single case agreement with the Medicaid managed care entity.

The provider adheres to staff ratio requirements One Full Time Employee (FTE) to 15 youth members. (Claims Analysis)

The provider adheres to staff ratio requirements One FTE to 25 adult members. (Claims Analysis)

PSR Agency

Licensed by the Louisiana Department of Health (LDH) per La. R.S. 40:2151 et seq. as a Behavioral Health Service Provider as a Psychosocial Rehabilitation Services Program for the location reviewed.

The agency is credentialed and participating (contracted) in the provider network of the Medicaid managed care entity to be eligible to receive Medicaid reimbursement unless the provider agency is licensed and accredited, and has an executed single case agreement with the Medicaid managed care entity.

Agencies providing PSR services must employ at least one full-time physician or full-time LMHP to specifically serve as a full-time mental health supervisor to assist in the design and evaluation of treatment plans for PSR services. LMHPs serving in the role of mental health supervisor for PSR services are restricted to medical psychologist, licensed psychologist, licensed clinical social worker (LCSW), licensed professional counselor (LPC), licensed marriage and family therapist (LMFT), or licensed Advanced Practice Registered Nurse (APRN) with a psychiatric specialization. The term “full-time” means employment by the provider agency for at least 35 hours per week.

Staff rendering PSR services shall be at least three (3) years older than any individual they serve under the age of eighteen (18).

The provider adheres to staff ratio requirements One Full Time Employee (FTE) to 15 consumers is maximum group size for adults. (Claims Analysis)

The provider adheres to staff ratio requirements One FTE to 8 consumers is maximum group size for youth. (Claims Analysis)

Any individual rendering PSR services for a licensed and accredited provider agency must have a bachelor’s degree from an accredited university or college in the field of counseling, social work, psychology, sociology, rehabilitation services, special education, early childhood education, secondary education, family and consumer sciences, or human growth and development; or have a bachelor’s degree from an accredited university or college with a minor in counseling, social work, sociology, or psychology; or be twenty-one (21) years of age or older as of January 1, 2022, have a high school diploma or equivalency, and have been continuously employed by a licensed and accredited agency providing PSR services since prior to January 1, 2019.

Staff providing direct services to adult members must complete an approved PSR training curricula prior to providing services, which includes training that focuses on Daily and community living skills

Staff providing direct services to adult members must complete an approved PSR training curricula prior to providing services, which includes training that focuses on Socialization skills.

Staff providing direct services to adult members must complete an approved PSR training curricula prior to providing services, which includes training that focuses on Adaptation skills

Staff providing direct services to adult members must complete an approved PSR training curricula prior to providing services, which includes training that focuses on Development of leisure time interests and skills

Staff providing direct services to adult members must complete an approved PSR training curricula prior to providing services, which includes training that focuses on Symptom management skills

Staff providing direct services to adult members must complete an approved PSR training curricula prior to providing services, which includes training that focuses on Identification and management of symptoms of mental illness

Staff providing direct services to adult members must complete an approved PSR training curricula prior to providing services, which includes training that focuses on Compliance with physician's medication orders

Staff providing direct services to adult members must complete an approved PSR training curricula prior to providing services, which includes training that focuses on Education in mental health/mental illness

Staff providing direct services to adult members must complete an approved PSR training curricula prior to providing services, which includes training that focuses on Work readiness activities

Staff providing direct services to youth must have documented training related to the psychosocial rehabilitation model(s) utilized in the program .

Pass a motor vehicle screen (if duties may involve driving or transporting members);

Crisis Intervention (CI)

Licensed by the Louisiana Department of Health (LDH) per La. R.S. 40:2151 et seq. as a Behavioral Health Service Provider as a Crisis Intervention Program for the location reviewed.

Staff must be at least twenty (20) years old

Staff must be at least three (3) years older than an individual under the age of eighteen (18).

Staff must have an associate's degree in social work, counseling, psychology or a related human services field or two years of equivalent education and/or experience working in the human services field.

Pass a motor vehicle screen (if duties may involve driving or transporting members);

Complete a nationally recognized crisis intervention training;

Adolescent/Child Crisis Stabilization (CS)

The agency has a medical director.

The agency has an administrator.

The agency has a clinical supervisor

The agency has nursing staff.

Agency has current Crisis mitigation plan to address natural/man made disasters and emergencies.

Agency must arrange for and/or maintain documentation that prior to employment (or contracting, volunteering, or as required by law) individuals pass criminal background checks, including sexual offender registry checks, in accordance with any applicable federal or state laws.

Criminal background checks were performed within ninety (90) days prior to the date of employment.

Agency must review the Department of Health and Human Services' Office of Inspector General (OIG) List of Excluded Individuals and Entities (LEIE) prior to hiring or contracting any employee or contractor that performs services that are compensated with Medicaid/Medicare funds, including but not limited to licensed and unlicensed staff, interns and/or contractors.

Agency must review the LDH State Adverse Actions website prior to hiring or contracting any employee or contractor that performs services that are compensated with Medicaid/Medicare funds, including but not limited to licensed and unlicensed staff, interns and/or contractors

Agency must, for current employees, check the Department of Health and Human Services' Office of Inspector General (OIG) List of Excluded Individuals and Entities (LEIE) list once a month thereafter to determine if they have been excluded from participation in the Medicaid or Medicare Program by Louisiana Medicaid or the Department of Health and Human Services' Office of Inspector General.

Agency must, for current employees, check the LDH State Adverse Actions list once a month thereafter to determine if there is a finding that an employee or contractor has abused, neglected or extorted any individual or if they have been excluded from participation in the Medicaid or Medicare Program by Louisiana Medicaid or the Department of Health and Human Services' Office of Inspector General.

Arrange for and maintain documentation that all persons, prior to employment, are free from tuberculosis (TB) in a communicable state via skin testing (or chest exam if recommended by physician) to reduce the risk of such infections in members and staff.

TB testing was completed less than 31 days prior to date of employment

Establish and maintain written policies and procedures inclusive of drug testing staff to ensure an alcohol and/or drug-free workplace and/or a workforce free of substance use
Maintain documentation that all direct care staff, who are required to complete first aid training, complete the training within 90 days of hire; Psychiatrists, advanced practical registered nurses (APRNs)/physician assistants (PAs), registered nurses (RNs) and licensed practical nurses (LPNs) are exempt from this training.
Maintain documentation that all direct care staff, who are required to renew first aid training, complete the training within the time period recommended by the American Heart Association; Psychiatrists, advanced practical registered nurses (APRNs)/physician assistants (PAs), registered nurses (RNs) and licensed practical nurses (LPNs) are exempt from this training.
Maintain documentation that all direct care staff, who are required to complete cardiopulmonary resuscitation (CPR) training, complete the training within 90 days of hire; Psychiatrists, advanced practical registered nurses (APRNs)/physician assistants (PAs), registered nurses (RNs) and licensed practical nurses (LPNs) are exempt from this training.
Maintain documentation that all direct care staff, who are required to renew CPR training, complete the training within the time period recommended by the American Heart Association; Psychiatrists, advanced practical registered nurses (APRNs)/physician assistants (PAs), registered nurses (RNs) and licensed practical nurses (LPNs) are exempt from this training.
Unlicensed staff rendering services have completed the Standardized Basic Clinical Competency Training Module: MH 101 – Introduction to Serious Mental Illness (SMI) and Emotional Behavioral Disorders.
Unlicensed staff rendering services have completed the Standardized Basic Clinical Competency Training Module: Crisis intervention.
Unlicensed staff rendering services have completed the Standardized Basic Clinical Competency Training Module: Suicide and homicide precautions.
Unlicensed staff rendering services have completed the Standardized Basic Clinical Competency Training Module: System of care overview.
Unlicensed staff rendering services have completed the Standardized Basic Clinical Competency Training Module: Co-occurring disorders.
Unlicensed staff rendering services have completed the Standardized Basic Clinical Competency Training Module: Cultural and linguistic competency (basic).
Unlicensed staff rendering services have completed the Standardized Basic Clinical Competency Training Module: Treatment planning.
Ensure and/or maintain documentation that all unlicensed persons employed by the organization complete annual training in a recognized crisis intervention curriculum prior to handling or managing crisis calls.
Be at least eighteen (18) years of age, and at least three (3) years older than an individual under the age of eighteen (18) that they provide services
Have a high school diploma, general equivalency diploma or trade school diploma in the area of human services, or demonstrate competency or verifiable work experience in providing support to persons with disabilities
Possess and provide documentation of a valid social security number
Pass a motor vehicle screen (if duties may involve driving or transporting members);

Completion of crisis training curriculum including Solution focused crisis assessments prior to providing crisis stabilization services.

Completion of crisis training curriculum including Crisis communications prior to providing crisis stabilization services.

Completion of crisis training curriculum including Intensive, solution focused interventions prior to providing crisis stabilization services.

Completion of crisis training curriculum including Assisting the youth and family members in developing coping and behavior management skills prior to providing crisis stabilization services.

Completion of crisis training curriculum including Assisting the youth and family members in working collaboratively with any existing service providers to prepare for the youth's return to their home environment prior to providing crisis stabilization services.

Completion of crisis training curriculum including Development of risk management / safety plans prior to providing crisis stabilization services.

MHR providers are required to have crisis mitigation plans that provides 24-hour on-call telephone assistance to prevent relapse or harm to self or others, to provide referral to other services, and/or to provide support during related crises.

The BHSP's crisis mitigation plan shall include the following:

-Identify steps to take when a client suffers from a medical, psychiatric, medication or relapse crisis

The BHSP's crisis mitigation plan shall include the following:

-Specify names and telephone numbers of staff or contracted entities to assist clients in crisis.

If the provider contracts with another entity to provide crisis mitigation services, the provider shall have a written contract with the entity providing the crisis mitigation services.

There is documentation noting the supervisor made an onsite visit to the member's home to evaluate the DSW's ability to perform their assigned duties in order to determine whether member is receiving the services that are written in the plan of care

There is documentation noting the supervisor made an onsite visit to the member's home to evaluate the DSW's ability to perform their assigned duties in order to verify that the DSW is actually reporting to the home according to the frequency ordered in the plan of care

There is documentation noting the supervisor made an onsite visit to the member's home to evaluate the DSW's ability to perform their assigned duties in order to determine member's satisfaction with the services member is receiving

Center Based Respite Care

Licensed as a home and community-based services (HCBS) provider/
Center-Based Respite per La. R.S. 40:2120.1 et seq. and Louisiana
Administrative Code (LAC) 48:I.Chapter 50 found at the following website:
<http://www.doa.la.gov/Pages/osr/lac/Code.aspx>

Crisis Receiving Center

Licensed per La. R.S. 40:2180.12 and LAC 48:I. Chapters fifty-three (53) and fifty-four (54) found at the following website:

<http://www.doa.la.gov/Pages/osr/lac/Code.aspx>

Child Placing Agency

Licensed as a Child Placing Agency by Department of Children and Family Services under the Specialized Provider Licensing Act (La. R.S. 46:1401-46:1430) and LAC 67:V.Chapter 73, found at the following website:

http://www.dcfslouisiana.gov/assets/docs/searchable/Licensing/Residential/201603_ChildPlacing.pdf;

SUD Core Requirements

Residential substance use treatment facilities must be accredited by the Commission on Accreditation of Rehabilitation Facilities (CARF), the Council on Accreditation (COA), or The Joint Commission (TJC) for location reviewed.

Residential substance use treatment facilities must attain full accreditation within 18 months of the initial accreditation application date.

The agency shall pay all associated accreditation fees prior to being contracted and reimbursed by a Medicaid managed care entity.

Services must be provided under the supervision of a licensed mental health professional (LMHP) or a physician who is acting within the scope of his/her professional license and applicable state law. The term "supervision" refers to clinical support, guidance and consultation afforded to non-licensed staff, and should not be confused with clinical supervision of bachelor's or master's level individuals or provisionally licensed individuals pursuing licensure.

Agency must arrange for prior to employment (or contracting, volunteering, or as required by law) individuals pass criminal background checks, including sexual offender registry checks, in accordance with any applicable federal or state laws.

Agency must maintain documentation that prior to employment (or contracting, volunteering, or as required by law) individuals pass criminal background checks, including sexual offender registry checks, in accordance with any applicable federal or state laws.

Criminal background checks are performed no more than 90 days prior to the date of employment

Agency must review the Department of Health and Human Services' Office of Inspector General (OIG) List of Excluded Individuals and Entities (LEIE) prior to hiring or contracting any employee or contractor that performs services that are compensated with Medicaid/Medicare funds, including but not limited to licensed and unlicensed staff, interns and/or contractors.

Agency must review the LDH State Adverse Actions website prior to hiring or contracting any employee or contractor that performs services that are compensated with Medicaid/Medicare funds, including but not limited to licensed and unlicensed staff, interns and/or contractors

Agency must, for current employees, check the Department of Health and Human Services' Office of Inspector General (OIG) List of Excluded Individuals and Entities (LEIE) list once a month thereafter to determine if they have been excluded from participation in the Medicaid or Medicare Program by Louisiana Medicaid or the Department of Health and Human Services' Office of Inspector General.

Agency must, for current employees, check the LDH State Adverse Actions list once a month thereafter to determine if there is a finding that an employee or contractor has abused, neglected or extorted any individual or if they have been excluded from participation in the Medicaid or Medicare Program by Louisiana Medicaid or the Department of Health and Human Services' Office of Inspector General.

Arrange for and maintain documentation that all persons, prior to employment, are free from tuberculosis (TB) in a communicable state via skin testing (or chest exam if recommended by physician) to reduce the risk of such infections in members and staff.

TB testing was completed less than 31 days prior to date of employment

Establish and maintain written policies and procedures inclusive of drug testing staff to ensure an alcohol and/or drug-free workplace and/or a workforce free of substance use

Maintain documentation that all direct care staff, who are required to complete first aid training, complete the training within 90 days of hire; Psychiatrists, advanced practical registered nurses (APRNs)/physician assistants (PAs), registered nurses (RNs) and licensed practical nurses (LPNs) are exempt from this training.

Maintain documentation that all direct care staff, who are required to renew first aid training, complete the training within the time period recommended by the American Heart Association; Psychiatrists, advanced practical registered nurses (APRNs)/physician assistants (PAs), registered nurses (RNs) and licensed practical nurses (LPNs) are exempt from this training.

Maintain documentation that all direct care staff, who are required to complete cardiopulmonary resuscitation (CPR) training, complete the training within 90 days of hire; Psychiatrists, advanced practical registered nurses (APRNs)/physician assistants (PAs), registered nurses (RNs) and licensed practical nurses (LPNs) are exempt from this training.

Maintain documentation that all direct care staff, who are required to renew CPR training, complete the training within the time period recommended by the American Heart Association; Psychiatrists, advanced practical registered nurses (APRNs)/physician assistants (PAs), registered nurses (RNs) and licensed practical nurses (LPNs) are exempt from this training.

Maintain documentation of verification of staff meeting professional requirements including licensure (where applicable)

Ensure and/or maintain documentation that all unlicensed persons employed by the organization complete annual training in a recognized crisis intervention curriculum prior to handling or managing crisis calls.

Licensed professional staff must be at least 18 years of age, with a high school diploma or equivalent according to their areas of competence as determined by degree.

Licensed professional staff must be at least 18 years of age, with a high school diploma or equivalent according to their areas of competence as determined by required levels of experience as defined by State law and regulations and departmentally approved guidelines and certifications.

Unlicensed professional staff must be at least 18 years of age, with a high school diploma or equivalent according to their areas of competence as determined by degree.

Staff must be at least three years older than any client served under 18 years of age.

Unlicensed professional staff must be at least 18 years of age, with a high school diploma or equivalent according to their areas of competence as determined by required levels of experience as defined by State law and regulations and departmentally approved guidelines and certifications.

Pass a motor vehicle screen (if duties may involve driving or transporting members);
Unlicensed staff rendering services have completed the Standardized Basic Clinical Competency Training Module: MH 101 – Introduction to Serious Mental Illness (SMI) and Emotional Behavioral Disorders.
Unlicensed staff rendering services have completed the Standardized Basic Clinical Competency Training Module: Crisis intervention.
Unlicensed staff rendering services have completed the Standardized Basic Clinical Competency Training Module: Suicide and homicide precautions.
Unlicensed staff rendering services have completed the Standardized Basic Clinical Competency Training Module: System of care overview.
Unlicensed staff rendering services have completed the Standardized Basic Clinical Competency Training Module: Co-occurring disorders.
Unlicensed staff rendering services have completed the Standardized Basic Clinical Competency Training Module: Cultural and linguistic competency (basic).
Unlicensed staff rendering services have completed the Standardized Basic Clinical Competency Training Module: Treatment planning.
The provider shall ensure that its medical director is a licensed physician, who is an addictionologist; or meets all of the following: Is board-eligible or board-certified; Has two years of qualifying experience in treating addictive disorders; and Maintains a consulting relationship with an addictionologist.
The provider shall ensure that its clinical supervisor who, with the exception of opioid treatment programs, is an LMHP that maintains a current and unrestricted license with its respective professional board or licensing authority in the state of Louisiana.
The provider shall ensure that its clinical supervisor who, with the exception of opioid treatment programs, shall be on duty as needed.
The provider shall ensure that its clinical supervisor who, with the exception of opioid treatment programs, shall be on call as needed.
The provider shall ensure that its clinical supervisor who, with the exception of opioid treatment programs, has two years of qualifying clinical experience as an LMHP in the provision of services provided by the provider.
The LMHP providing addiction treatment services shall have documented credentials, experience and/or training in working with clients who have addictive disorders, which shall be maintained in the individual's personnel record.
Unlicensed addiction providers must meet at least one of the following qualifications as evidenced by documentation maintained in the individual's personnel record: <ul style="list-style-type: none"> • Be a master's-prepared behavioral health professional that has not obtained full licensure privileges and is participating in ongoing professional supervision. When working in addiction treatment settings, the master's-prepared UP must be supervised by an LMHP, who meets the requirements of this Section; • Be a registered addiction counselor; • Be a certified addiction counselor; or • Be a counselor-in-training (CIT) that is registered with ADRA and is currently participating in a supervision required by the Addictive Disorders practice act.
A residential substance use provider shall have a house manager.

The house manager shall be at least 21 years old.
The house manager shall have at least two years qualifying experience working for a provider that treats clients with mental illness and/or addictive disorders.
A house manager is required to supervise activities of the facility when the professional staff is on call, but not on duty.
The house manager shall perform clinical duties only if licensed to do so.
The house manager shall report allegations of abuse, neglect and/or misappropriation to the medical director.
The house manager shall identify, respond to and/or report any crisis situation to the clinical supervisor when it occurs.
The house manager shall coordinate with the clinical staff as needed.
The house manager shall consult with the clinical staff as needed.
<u>ASAM Level 1 Requirements</u>

Licensed by the Louisiana Department of Health (LDH) per La. R.S. 40:2151 et seq. as a Behavioral Health Service Provider as an Outpatient Addiction Outpatient Treatment Program (ASAM Level I) for the location reviewed.

Program offers fewer than nine clinical service hours per week for adults.
Program offers fewer than six hours a week for adolescents.
Each LMHP or UP caseload does not exceed a ratio of 1:50 active members. (Claims Analysis)
Provider must ensure physician services are available as needed to manage psychiatric needs either provided in house or with outside contractor (must have documentation of agreement).
Provider must ensure physician services are available as needed to manage medical needs either provided in house or with outside provider (must have documentation of agreement).
The provider must ensure that A clinical supervisor is available on-site for supervision as needed.
The provider must ensure that A clinical supervisor is available on call at all times.
The provider must ensure that There is at least one LMHP or UP under the supervision of an LMHP on-site when clinical services are being provided.
The provider must ensure that nursing services are available as needed to meet the nursing needs of the members. Services may be provided directly by the provider or may be provided or arranged via written contract, agreement, policy, or other document. The provider must maintain documentation of such arrangement.
An LMHP must be available (defined as on-site or available by phone) at all times for crisis intervention.
<u>ASAM Level 2.1 Requirements</u>

Licensed by the Louisiana Department of Health (LDH) per La. R.S. 40:2151 et seq. as a Behavioral Health Service Provider as an Intensive Outpatient Treatment Program (ASAM Level II.1) for the location reviewed.

Minimum 9 clinical contact hours per week for adults at a minimum of three days per week with a maximum of 19 hours per week.
Minimum of 6 clinical contact hours per week for adolescents at a minimum of three days per week with a maximum of 19 hours per week.
A physician is on-site as needed for the management of psychiatric needs

A physician is on-site as needed for the management of medical needs
A physician is on call 24 hours per day, seven days per week.
The provider must ensure that there is a clinical supervisor on-site 10 hours a week.
The provider must ensure that there is a clinical supervisor on call 24 hours per day, seven days per week.
The provider must ensure that there is at least one LMHP or UP under the supervision of an LMHP on-site when clinical services are being provided.
Each LMHP/UP caseload does not exceed a ratio of 1:25 active members.
The provider must ensure that there are nursing services available as needed to meet the nursing needs of the members.
The provider must ensure that nursing services may be provided directly by the provider or may be provided or arranged via written contract, agreement, policy, or other document. The provider must maintain documentation of such arrangement.
An LMHP must be available (defined as on-site or available by phone) at all times for crisis intervention.
An LMHP, who is a qualified clinical supervisor must be available for clinical supervision as needed and by telephone for consultation
<u>ASAM Level 2-WM Requirements</u>

Licensed by the Louisiana Department of Health (LDH) per La. R.S. 40:2151 et seq. as a Behavioral Health Service Provider as an Ambulatory Detoxification with Extended on-site monitoring Program (ASAM Level II-D) for the location reviewed.

Evidence service is provided in conjunction with ASAM level 2.1 intensive outpatient treatment services.
The provider must ensure a physician is on-site at least 10 hours per week during operational hours.
The provider must ensure that a physician is on call 24 hours per day, seven days per week.
The provider must ensure a physician must be available to assess The individual within 24 hours of admission (or earlier, if medically necessary).
The provider must ensure a physician is available to provide on-site monitoring of care on a daily basis
The provider must ensure a physician is available to provide further evaluation on a daily basis.
The provider must ensure that a clinical supervisor is available on-site for supervision as needed.
The provider must ensure that a clinical supervisor is available on call at all times.
The provider must ensure There is an LMHP or UP under The supervision of an LMHP on-site 40 hours per week.
Each LMHP/UP caseload does not exceed a ratio of 1:25 active members.
The provider must ensure There is a licensed nurse on call 24 hours per day, seven days per week.
The provider must ensure There is a licensed nurse on-site no less than 40 hours a week.
The provider must ensure a nurse must be responsible for overseeing The monitoring of The individual's progress.
The provider must ensure a nurse must be responsible for overseeing The monitoring of The individual's medication.

The provider must ensure appropriately licensed and credentialed staff is available to administer medications in accordance with physician orders.

The provider must ensure There is a RN on-site as needed to perform nursing assessments.

An LMHP, who is a qualified clinical supervisor must be available for clinical supervision as needed

An LMHP, who is a qualified clinical supervisor must be available by telephone for consultation

ASAM Level 2-WM Requirements

Licensed by the Louisiana Department of Health (LDH) per La. R.S. 40:2151 et seq. as a Behavioral Health Service Provider as an Ambulatory Detoxification with Extended on-site monitoring Program (ASAM Level II-D) for the location reviewed.

Evidence service is provided in conjunction with ASAM level 2.1 intensive outpatient treatment services.

The provider must ensure a physician is on-site at least 10 hours per week during operational hours.

The provider must ensure that a physician is on call 24 hours per day, seven days per week.

The provider must ensure a physician must be available to assess The individual within 24 hours of admission (or earlier, if medically necessary).

The provider must ensure a physician is available to provide on-site monitoring of care on a daily basis

The provider must ensure a physician is available to provide further evaluation on a daily basis.

The provider must ensure that a clinical supervisor is available on-site for supervision as needed.

The provider must ensure that a clinical supervisor is available on call at all times.

The provider must ensure There is an LMHP or UP under The supervision of an LMHP on-site 40 hours per week.

Each LMHP/UP caseload does not exceed a ratio of 1:25 active members.

The provider must ensure There is a licensed nurse on call 24 hours per day, seven days per week.

The provider must ensure There is a licensed nurse on-site no less than 40 hours a week.

The provider must ensure a nurse must be responsible for overseeing The monitoring of The individual's progress.

The provider must ensure a nurse must be responsible for overseeing The monitoring of The individual's medication.

The provider must ensure appropriately licensed and credentialed staff is available to administer medications in accordance with physician orders.

The provider must ensure There is a RN on-site as needed to perform nursing assessments.

An LMHP, who is a qualified clinical supervisor must be available for clinical supervision as needed

An LMHP, who is a qualified clinical supervisor must be available by telephone for consultation

ASAM Level 3.1 Requirements

Licensed by the Louisiana Department of Health (LDH) per La. R.S. 40:2151 et seq. as a Behavioral Health Service Provider as a Clinically Managed Low-Intensity Residential Treatment Program (Halfway House) (ASAM Level III.1) for the location reviewed.

ASAM Level 3.1 Requirements (Adolescents)

Minimum of 5 hours per week of a combination of low-intensity clinical and recovery-focused services.

The provider shall have a clinical supervisor available for clinical supervision
The provider shall have a clinical supervisor available by telephone for consultation
For adolescents, LMHP or UP under supervision of an LMHP caseload shall not exceed 1:8 active clients.

At least one LMHP or UP is on duty at least 40 hours a week when majority of individuals are awake and/or on-site.

The provider shall have a house manager

The provider shall have at least two direct care aides (two FTE) on duty during each shift.

There shall be a ratio of 1:8 direct care aides during all shifts.

There shall be a ratio of 1:5 direct care aides on therapy outings.

There shall be a care coordinator and/or duties may be assumed by clinical staff.

An LMHP, who is a qualified clinical supervisor must be available for clinical supervision as needed

An LMHP, who is a qualified clinical supervisor must be available by telephone for consultation

Level 3.1 Clinically Managed Low-Intensity Residential Treatment – Adult

Minimum of 5 hours per week of a combination of low-intensity clinical and recovery-focused services.

The provider shall have a clinical supervisor available for clinical supervision

The provider shall have a clinical supervisor available by telephone for consultation

Each LMHP/UP caseload does not exceed a ratio of 1:25 active members.

At least one LMHP or UP is on duty at least 40 hours a week when majority of individuals are awake and/or on-site.

The provider shall have a house manager

The provider shall have at least one direct care aides (one FTE on all shifts; additional staff as needed) on duty during each shift

There shall be a care coordinator and/or duties may be assumed by clinical staff.

An LMHP, who is a qualified clinical supervisor must be available for clinical supervision as needed

An LMHP, who is a qualified clinical supervisor must be available by telephone for consultation

A house manager is required to supervise activities of the facility when the professional staff is on call, but not on duty.

ASAM Level 3.2-WM Requirements

Licensed by the Louisiana Department of Health (LDH) per La. R.S. 40:2151 et seq. as a Behavioral Health Service Provider as a Clinically Managed Residential Detoxification Program (Social Detoxification ASAM Level III.2D) for the location reviewed.

ASAM Level 3.2-WM Adolescent

The provider must ensure that a physician is on call 24 hours per day, seven days per week.

There is a physician on duty as needed for management of psychiatric needs of the client

There is a physician on duty as needed for management of medical needs of the client

There is a physician on duty as needed to Triage medical needs at admission.

There is a physician on duty as needed to Triage medical needs through course of stay for all members

An LMHP, who is a qualified clinical supervisor, must be available for clinical supervision as needed

An LMHP, who is a qualified clinical supervisor, must be available by telephone for consultation.

A minimum of one LMHP or UP under supervision of an LMHP available on-site at least 40 hours per week.

Each LMHP/UP's caseload must not exceed a ratio of 1:16.

There shall be two direct care aides (two full time employees) per shift with additional as needed, not to exceed a ratio of 1:10.

There shall be at least one clerical support staff per day shift.

There shall be a care coordinator (One full time employee per day shift), and/or duties may be assumed by clinical staff).

ASAM Level 3.2-WM Adult ASAM Requirements

The provider must ensure that a physician is on call 24 hours per day, seven days per week.

There is a physician on duty as needed for management of psychiatric needs of the client

There is a physician on duty as needed for management of medical needs of the client

There is a physician on duty as needed to Triage medical needs at admission.

There is a physician on duty as needed to Triage medical needs through course of stay for all members

An LMHP, who is a qualified clinical supervisor, must be available for clinical supervision as needed

An LMHP, who is a qualified clinical supervisor, must be available by telephone for consultation.

A minimum of one LMHP or UP under supervision of an LMHP available on-site at least 40 hours per week.

Each LMHP/UP's caseload must not exceed a ratio of 1:25.

The provider must ensure that there shall be one direct care aide (one full-time employee) per shift with additional as needed.

There shall be at least one clerical support staff per day shift.

There shall be a care coordinator (One full time employee per day shift), and/or duties may be assumed by clinical staff).

The provider must ensure that An LMHP, who is a qualified clinical supervisor must be available for clinical supervision as needed.

The provider must ensure that An LMHP, who is a qualified clinical supervisor must be available by telephone for consultation.

ASAM Level 3.3 Requirements

Licensed by the Louisiana Department of Health (LDH) per La. R.S. 40:2151 et seq. as a Behavioral Health Service Provider as a Clinically Managed Medium-Intensity Residential Treatment Program (adult only ASAM Level III.3) for the location reviewed.

The provider must ensure that a physician is on call 24 hours per day, seven days per week.

There is a physician on duty as needed for management of psychiatric needs of the client

There is a physician on duty as needed for management of medical needs of the client

The provider must ensure that Clinical supervisor is available for clinical supervision when needed

The provider must ensure that Clinical supervisor is available by telephone for consultation

The provider must ensure there is an LMHP or UP under supervision of an LMHP on-site 40 hours a week to provide direct client care.

The provider must ensure each LMHP/UP caseload shall not exceed 1:12.

The provider must ensure there is 24 hour on-call availability by an RN to meet the professional nursing requirements.

A licensed nurse on duty whenever needed to meet the professional nursing requirements.

The provider must ensure there is at least one direct care aide on duty.

The provider must ensure additional aides as needed.
The provider must ensure there shall be a care coordinator (one FTE per 50 members per day shift, and/or duties may be assumed by clinical staff).
The provider must ensure there shall be a clerical support staff (One FTE per day shift).
The provider must ensure that An LMHP, who is a qualified clinical supervisor must be available for clinical supervision as needed.
The provider must ensure that An LMHP, who is a qualified clinical supervisor must be available by telephone for consultation.
<i>Additional Provider Requirements for ASAM Level 3.3 - Women with Dependent Children Program</i>
Licensed by the Louisiana Department of Health (LDH) per La. R.S. 40:2151 et seq. as a Behavioral Health Service Provider as a Mothers with Dependent Children Program (Dependent Care Program) for the location reviewed.
Staff members are at least 18 years of age
Staff members have infant CPR certification
Staff members have at least eight hours of training in the following areas prior to supervising children: i. Chemical dependency and its impact on the family; ii. Child development and age-appropriate activities; iii. Child health and safety; iv. Universal precautions; v. Appropriate child supervision techniques; vi. Signs of child abuse; or vii. A licensed day
The provider shall maintain a staff-to-child ratio that does not exceed 1:3 for infants (18 months and younger).
The provider shall maintain a staff-to-child ratio that does not exceed 1:6 for toddlers and children.
The provider shall employ a Child Specialist, who is available to provide staff training.
The provider shall employ a Child Specialist, who evaluates effectiveness of direct care staff.
The provider shall employ a Child Specialist, who plans activities for at least one hour per week per child.
The provider shall maintain a personnel file of the Child Specialist that has documentation verifying the required minimum 90 clock hours of education and/or training in child development and/or early childhood education.
The provider shall maintain verification that the Child Specialist has a minimum of one year documented experience providing services to children.
If child supervision is provided by a licensed daycare provider, verification of a written agreement is needed between the program and the licensed daycare provider..
<i>ASAM Level 3.5 Requirements</i>
Licensed by the Louisiana Department of Health (LDH) per La. R.S. 40:2151 et seq. as a Behavioral Health Service Provider as a Clinically Managed High-Intensity Residential Treatment Program (ASAM Level III.5) for the location reviewed.
<i>ASAM Level 3.5 Adolescent Requirements</i>
There is a physician on call 24 hours per day, seven days per week
There is a physician on duty as needed for management of psychiatric needs of the clients

There is a physician on duty as needed for management of medical needs of the clients
The provider must ensure there is a psychologist available when needed.
The provider must ensure that Clinical supervisor is available for clinical supervision when needed
The provider must ensure that Clinical supervisor is available by telephone for consultation
The provider must ensure there shall be at least one LMHP or UP under the supervision of an LMHP on duty at least 40 hours per week.
The provider must ensure each LMHP/UP's caseload shall not exceed 1:8.
The provider must ensure there is one licensed RN on call 24/7 to perform nursing duties for the facility.
The provider must ensure nursing availability on-site whenever needed to meet the nursing needs of the members.
Provider must ensure nursing services are available as needed to manage nursing needs either provided in house or with outside contractor (must have documentation of agreement).
The provider must ensure there shall be at least two direct care aides on duty (two FTE) during all shifts with additional as needed.
The provider must ensure the ratio of aides to clients shall not exceed 1:8.
The provider must ensure on therapy outings, the ratio of aides to clients shall be at least 1:5.
The provider must ensure there shall be a care coordinator (one FTE per day shift, and/or duties may be assumed by clinical staff).
The provider must ensure there shall be a clerical support staff (One FTE per day shift).
The provider must ensure that An LMHP, who is a qualified clinical supervisor must be available for clinical supervision as needed.
The provider must ensure that An LMHP, who is a qualified clinical supervisor must be available by telephone for consultation.
<u>ASAM Level 3.5 Adult Requirements</u>
There is a physician on call 24 hours per day, seven days per week
There is a physician on duty as needed for management of psychiatric needs of the clients
There is a physician on duty as needed for management of medical needs of the clients
The provider must ensure there shall be at least one LMHP or UP under the supervision of an LMHP on duty at least 40 hours per week.
For adults, LMHP/UP's caseload shall not exceed 1:12.
The provider must ensure the provider shall have one licensed RN on call 24/7 to perform nursing duties for the provider.
The provider must ensure There shall be at least one licensed nurse on duty during the day and evening shifts to meet the nursing needs of the members.
Provider must ensure nursing services are available as needed to manage nursing needs either provided in house or with outside contractor (must have documentation of agreement).
The provider must ensure there shall be at least one direct care aide on duty on all shifts with additional as needed.
The provider must ensure there shall be a care coordinator (one FTE per day shift, and/or duties may be assumed by clinical staff).
The provider must ensure there shall be a clerical support staff (One FTE per day shift).
The provider must ensure that An LMHP, who is a qualified clinical supervisor must be available for clinical supervision as needed.

The provider must ensure that An LMHP, who is a qualified clinical supervisor must be available by telephone for consultation.

ASAM Level 3.7 Requirements

Licensed by the Louisiana Department of Health (LDH) per La. R.S. 40:2151 et seq. as a Behavioral Health Service Provider as a Medically Monitored Intensive Residential Treatment Program (adult only ASAM Level III.7) for the location reviewed.

There is a physician on call 24 hours per day, seven days per week

There is a physician on duty as needed for management of psychiatric needs of the clients

There is a physician n duty as needed for management of medical needs of the clients

The provider must ensure that Clinical supervisor is available for clinical supervision when needed

The provider must ensure that Clinical supervisor is available by telephone for consultation

The provider must ensure there shall be at least one LMHP or UP under the supervision of an LMHP on duty at least 40 hours per week.

The provider must ensure each LMHP/UP caseload shall not exceed 1:10;

The provider must ensure there is one licensed RN on call 24/7 to perform nursing duties for the facility.

The provider must ensure the provider shall have at least one licensed nurse is on duty during all shifts with additional licensed nursing staff to meet the nursing needs of the clients.

The provider must ensure on-site nursing staff is solely responsible for the 3.7 program and does not provide services for other levels of care at the same time.

The provider must ensure there is at least one direct care aide on duty on all shifts with additional as needed.

The provider must ensure there is an activity or recreational therapist on duty at least 15 hours per week.

The provider must ensure there shall be a care coordinator (one FTE per day shift, and/or duties may be assumed by clinical staff).

The provider must ensure there shall be a clerical support staff (One FTE per day shift).

The provider must ensure an interdisciplinary team of appropriately trained clinicians, such as physicians, nurses, counselors, social workers and psychologists is available to assess the individual.

The provider must ensure an interdisciplinary team of appropriately trained clinicians, such as physicians, nurses, counselors, social workers and psychologists is available to treat the individual.

The provider must ensure an interdisciplinary team of appropriately trained clinicians, such as physicians, nurses, counselors, social workers and psychologists is available to obtain information regarding the patient's needs.

The provider must ensure an interdisciplinary team of appropriately trained clinicians, such as physicians, nurses, counselors, social workers and psychologists is available to interpret information regarding the patient's needs.

The provider must ensure the number and/or disciplines of team members are appropriate to the range and severity of the individual's problems.

ASAM Level 3.7-WM Requirements

Licensed by the Louisiana Department of Health (LDH) per La. R.S. 40:2151 et seq. as a Behavioral Health Service Provider as a Medically Managed Residential Detoxification (Medically Supported Detoxification- adult only-ASAM Level III.7D)
for the location reviewed.

There is a physician on call 24 hours per day, seven days per week
There is a physician on duty as needed for management of psychiatric needs of the clients
There is a physician on duty as needed for management of medical needs of the clients
The provider must ensure there is one licensed RN on call 24/7 to perform nursing duties for the facility.
The provider must ensure at least one licensed nurse is on duty during all shifts.
Additional licensed nursing staff to meet the nursing needs based upon the provider's census and the clients' acuity levels.
The provider must ensure there shall be a RN on-site no less than 40 hours per week who is responsible for conducting nursing assessments upon admission.
The provider must ensure there shall be a RN on-site no less than 40 hours per week who is responsible for delegating staffing assignments to the nursing staff based on the assessments and the acuity levels of the clients.
The provider must ensure that its on-site nursing staff is solely responsible for 3.7- WM program and does not provide services for other levels of care at the same time.
The provider must ensure the nursing staff is responsible for monitoring member's progress.
The provider must ensure the nursing staff is responsible for administering medications in accordance with physician orders.
The provider must ensure that Clinical supervisor is available for clinical supervision when needed
The provider must ensure that Clinical supervisor is available by telephone for consultation
The provider must ensure the LMHP or UP under the supervision of an LMHP caseload shall not exceed 1:10.
The provider must ensure at a minimum of one LMHP or UP under supervision of an LMHP is available onsite at least 40 hours per week.
The provider must ensure there shall be at least one direct care aide on all shifts with additional as needed based upon the provider's census and the clients' acuity levels.
The provider must ensure there shall be a care coordinator (one FTE per day shift, and/or duties may be assumed by clinical staff).
The provider must ensure there shall be a clerical support staff (One FTE per day shift).
The provider must ensure that An LMHP, who is a qualified clinical supervisor must be available for clinical supervision as needed.
The provider must ensure that An LMHP, who is a qualified clinical supervisor must be available by telephone for consultation.
The provider must ensure appropriately licensed and credentialed staff are available to administer medications in accordance with physician orders.
<u>OTP</u>

Licensed by the Louisiana Department of Health (LDH) per La. R.S. 40:2151 et seq. as a Behavioral Health Service Provider as an Opioid Treatment Program for the location reviewed.

OTPs must maintain an up-to-date disaster and emergency plan, which has been approved by the SOTA.
OTPs must coordinate access to the Methadone Central Registry for employees who provide direct member care.
Licensed by the Louisiana Department of Health (LDH) per La. R.S. 40:2151 et seq. (Behavioral Health Services Provider Licensing Law); of location being reviewed.
Accredited by the Commission on Accreditation of Rehabilitation Facilities (CARF), the Council on Accreditation (COA), or The Joint Commission (TJC) for the location being reviewed.
Agency must arrange for prior to employment (or contracting, volunteering, or as required by law) individuals pass criminal background checks, including sexual offender registry checks, in accordance with any applicable federal or state laws.
Agency must maintain documentation that prior to employment (or contracting, volunteering, or as required by law) individuals pass criminal background checks, including sexual offender registry checks, in accordance with any applicable federal or state laws.
Criminal background checks are performed no more than 90 days prior to the date of employment
Agencies must review the Department of Health and Human Services' Office of Inspector General (OIG) List of Excluded Individuals and Entities (LEIE) prior to hiring or contracting any employee or contractor that performs services that are compensated with Medicaid/Medicare funds, including but not limited to licensed and unlicensed staff, interns and/or contractors.
Agencies must review the LDH State Adverse Actions website prior to hiring or contracting any employee or contractor that performs services that are compensated with Medicaid/Medicare funds, including but not limited to licensed and unlicensed staff, interns and/or contractors.
Agency must, for current employees, check the Department of Health and Human Services' Office of Inspector General (OIG) List of Excluded Individuals and Entities (LEIE) list once a month thereafter to determine if they have been excluded from participation in the Medicaid or Medicare Program by Louisiana Medicaid or the Department of Health and Human Services' Office of Inspector General.
Agency must, for current employees, check the LDH State Adverse Actions list once a month thereafter to determine if there is a finding that an employee or contractor has abused, neglected or extorted any individual or if they have been excluded from participation in the Medicaid or Medicare Program by Louisiana Medicaid or the Department of Health and Human Services' Office of Inspector General.
TB testing was completed less than 31 days prior to date of employment
Establish and maintain written policies and procedures inclusive of drug testing staff to ensure an alcohol and/or drug-free workplace and/or a workforce free of substance use
Maintain documentation that all direct care staff, who are required to complete first aid training, complete the training within 90 days of hire; Psychiatrists, advanced practical registered nurses (APRNs)/physician assistants (PAs), registered nurses (RNs) and licensed practical nurses (LPNs) are exempt from this training.
Maintain documentation that all direct care staff, who are required to renew first aid training, complete the training within the time period recommended by the American Heart Association; Psychiatrists, advanced practical registered nurses (APRNs)/physician assistants (PAs), registered nurses (RNs) and licensed practical nurses (LPNs) are exempt from this training.

Maintain documentation that all direct care staff, who are required to complete cardiopulmonary resuscitation (CPR) training, complete the training within 90 days of hire; Psychiatrists, advanced practical registered nurses (APRNs)/physician assistants (PAs), registered nurses (RNs) and licensed practical nurses (LPNs) are exempt from this training.
Maintain documentation that all direct care staff, who are required to renew CPR training, complete the training within the time period recommended by the American Heart Association; Psychiatrists, advanced practical registered nurses (APRNs)/physician assistants (PAs), registered nurses (RNs) and licensed practical nurses (LPNs) are exempt from this training.
Unlicensed staff rendering services have completed the Standardized Basic Clinical Competency Training Module: MH 101 – Introduction to Serious Mental Illness (SMI) and Emotional Behavioral Disorders.
Unlicensed staff rendering services have completed the Standardized Basic Clinical Competency Training Module: Crisis intervention.
Unlicensed staff rendering services have completed the Standardized Basic Clinical Competency Training Module: Suicide and homicide precautions.
Unlicensed staff rendering services have completed the Standardized Basic Clinical Competency Training Module: System of care overview.
Unlicensed staff rendering services have completed the Standardized Basic Clinical Competency Training Module: Co-occurring disorders.
Unlicensed staff rendering services have completed the Standardized Basic Clinical Competency Training Module: Cultural and linguistic competency (basic).
Unlicensed staff rendering services have completed the Standardized Basic Clinical Competency Training Module: Treatment planning.
Ensure and/or maintain documentation that all unlicensed persons employed by the organization complete annual training in a recognized crisis intervention curriculum prior to handling or managing crisis calls.
Quarterly trainings must be documented on a quarterly basis
Quarterly trainings must be submitted to the SOTA on a quarterly basis
Licensed professional staff must be at least 18 years of age.
Licensed professional staff must have a high school diploma or equivalent according to their areas of competence as determined by required levels of experience as defined by State law and regulations and departmentally approved guidelines and certifications.
Unlicensed professional staff must be at least 18 years of age
Unlicensed professional staff has a high school diploma or equivalent according to their areas of competence as determined by required levels of experience as defined by State law and regulations and departmentally approved guidelines and certifications.
Staff must be at least three years older than any member served under 18 years of age.

All direct care staff shall receive orientation and training for and demonstrate knowledge of the following, including, but not limited to:

- a. Symptoms of opiate withdrawal;
- b. Drug screen testing and collections;
- c. Current standards of practice regarding opiate addiction treatment;
- d. Poly-drug addiction; and
- e. Information necessary to ensure care is provided within accepted standards of practice.

The caseload of each LMHP or UP shall not exceed 75 active members.

An opioid treatment program that dispenses prescription medication on-site shall employ or contract with a pharmacist or dispensing physician to assure that any prescription medication dispensed on-site meets the requirements of applicable state statutes and regulations.

The provider shall maintain a nursing staff to meet the needs of the clients.

The provider shall maintain a sufficient number of LMHPs to meet the needs of its clients

There is at least one LMHP or UP on site when clinical services are being provided.

The provider shall have UPs sufficient to meet the needs of the clients.

There shall be a physician or APRN who is on-site as needed or on-call as needed during hours of operation.

The provider shall ensure that its medical director is a licensed physician with a current, valid unrestricted license to practice in the state of Louisiana with two years of qualifying experience in treating psychiatric disorders.

Clinical supervisor is an LMHP that maintains a current and unrestricted license with its respective professional board or licensing authority in the state of Louisiana

Clinical supervisor is an LMHP that has two years of qualifying clinical experience as an LMHP in the provision of services provided by the provider

Assertive Community Treatment (ACT)

ACT agencies must be licensed pursuant to La. R.S. 40:2151, et. seq. (Behavioral Health Services Provider Licensing Law) for behavioral health service providers for the location reviewed.

Accredited by the Commission on Accreditation of Rehabilitation Facilities (CARF), the Council on Accreditation (COA), or The Joint Commission (TJC) for the location reviewed.

Agencies must attain full accreditation within 18 months of the initial accreditation application date.

The agency shall pay all associated accreditation fees prior to being contracted and reimbursed by a Medicaid managed care entity.

ACT teams must meet national fidelity standards as evidenced by the SAMHSA Assertive Community Treatment (ACT) Evidence-Based Practices (EBP) Toolkit.

Agency must arrange for prior to employment (or contracting, volunteering, or as required by law) individuals pass criminal background checks, including sexual offender registry checks, in accordance with any applicable federal or state laws.

Agency must maintain documentation that prior to employment (or contracting, volunteering, or as required by law) individuals pass criminal background checks, including sexual offender registry checks, in accordance with any applicable federal or state laws.

Criminal background checks are performed no more than 30 days prior to the date of employment

Arrange for and maintain documentation that all persons, prior to employment, are free from tuberculosis (TB) in a communicable state via skin testing (or chest exam if recommended by physician) to reduce the risk of such infections in members and staff.

TB testing was completed less than 31 days prior to date of employment

Establish and maintain written policies and procedures inclusive of drug testing staff to ensure an alcohol and/or drug-free workplace and/or a workforce free of substance use

Agency must review the Department of Health and Human Services' Office of Inspector General (OIG) List of Excluded Individuals and Entities (LEIE) prior to hiring or contracting any employee or contractor that performs services that are compensated with Medicaid/Medicare funds, including but not limited to licensed and unlicensed staff, interns and/or contractors.

Agency must review the LDH State Adverse Actions website prior to hiring or contracting any employee or contractor that performs services that are compensated with Medicaid/Medicare funds, including but not limited to licensed and unlicensed staff, interns and/or contractors.

Agency must, for current employees, check the Department of Health and Human Services' Office of Inspector General (OIG) List of Excluded Individuals and Entities (LEIE) list once a month thereafter to determine if they have been excluded from participation in the Medicaid or Medicare Program by Louisiana Medicaid or the Department of Health and Human Services' Office of Inspector General.

Agency must, for current employees, check the LDH State Adverse Actions list once a month thereafter to determine if there is a finding that an employee or contractor has abused, neglected or extorted any individual or if they have been excluded from participation in the Medicaid or Medicare Program by Louisiana Medicaid or the Department of Health and Human Services' Office of Inspector General.

Maintain documentation that all direct care staff, who are required to complete first aid training, complete the training within 90 days of hire; Psychiatrists, advanced practical registered nurses (APRNs)/physician assistants (PAs), registered nurses (RNs) and licensed practical nurses (LPNs) are exempt from this training.

Maintain documentation that all direct care staff, who are required to renew first aid training, complete the training within the time period recommended by the American Heart Association; Psychiatrists, advanced practical registered nurses (APRNs)/physician assistants (PAs), registered nurses (RNs) and licensed practical nurses (LPNs) are exempt from this training.

Maintain documentation that all direct care staff, who are required to complete cardiopulmonary resuscitation (CPR) training, complete the training within 90 days of hire; Psychiatrists, advanced practical registered nurses (APRNs)/physician assistants (PAs), registered nurses (RNs) and licensed practical nurses (LPNs) are exempt from this training.

Maintain documentation that all direct care staff, who are required to renew CPR training, complete the training within the time period recommended by the American Heart Association; Psychiatrists, advanced practical registered nurses (APRNs)/physician assistants (PAs), registered nurses (RNs) and licensed practical nurses (LPNs) are exempt from this training.

Ensure and/or maintain documentation that all unlicensed persons employed by the organization complete annual training in a recognized crisis intervention curriculum prior to handling or managing crisis calls.
The provider agency must maintain documentation of completion of required training for staff employed or contracted with the agency.
Each ACT team shall have a staff-to-member ratio that does not exceed 1:10.
All professional staff must be currently and appropriately licensed by the applicable professional board.
Each ACT team shall include at least: One (1) ACT team leader, who is a full time LMHP who must have both administrative and clinical skills;
Each ACT team shall include at least: One (1) prescriber, who can be either a board-certified or board-eligible psychiatrist, a medical psychologist, or an advanced practice registered nurse (APRN) with specialty in adult mental health and meeting the medical director requirements of licensure for Behavioral Health Service (BHS) providers; In the event a medical psychologist or APRN are utilized, the team must be able to consult with psychiatrists.
Each ACT team shall include at least: Two (2) nurses, at least one (1) of whom shall be a RN with experience in carrying out medical functioning activities such as basic health and medical assessment, education and coordination of health care, psychiatric medical assessment and treatment, and administration of psychotropic medication
Each ACT team shall include at least: One other LMHP
Each ACT team shall include at least: One substance use specialist, who has a minimum of one (1) year specialized substance use training or supervised experience;
Each ACT team shall include at least: One employment specialist, who has at least one (1) year of specialized training or supervised experience;
Each ACT team shall include at least: One housing specialist, who has at least one (1) year of specialized training or supervised experience
Each ACT team shall include at least: One peer specialist, who is self-identified as being in recovery from mental illness and/or substance use disorders who has successfully completed OBH required training and credentialing requirements as a peer specialist
Providers are required to have crisis mitigation plans that provides 24-hour on-call telephone assistance to prevent relapse or harm to self or others, to provide referral to other services, and/or to provide support during related crises.
The crisis mitigation plan shall include the following: -Identify steps to take when a client suffers from a medical, psychiatric, medication or relapse crisis
The crisis mitigation plan shall include the following: -Specify names and telephone numbers of staff or contracted entities to assist clients in crisis.
If the provider contracts with another entity to provide crisis mitigation services, the provider shall have a written contract with the entity providing the crisis mitigation services.
<i>MultiSystemic Therapy (MST)</i>
MST agencies must be licensed pursuant to La. R.S. 40:2151, et. seq. (Behavioral Health Services Provider Licensing Law) for behavioral health service providers for the location reviewed.

Agencies must be licensed to provide MST services by MST Services, Inc. or any of its approved subsidiaries.
An MST agency must be a BH/substance use provider organization, which is a legally recognized entity in the United States.
An MST agency must be a BH/substance use provider organization qualified to do business in Louisiana.
MST agencies must be licensed pursuant to La. R.S. 40:2151, et. seq.(Behavioral Health Services Provider Licensing Law) for behavioral health service providers for the location reviewed.
Agency must arrange for prior to employment (or contracting, volunteering, or as required by law) individuals pass criminal background checks, including sexual offender registry checks, in accordance with any applicable federal or state laws.
Agency must maintain documentation that prior to employment (or contracting, volunteering, or as required by law) individuals pass criminal background checks, including sexual offender registry checks, in accordance with any applicable federal or state laws.
Criminal background checks are performed no more than 90 days prior to the date of employment
Agency must review the Department of Health and Human Services' Office of Inspector General (OIG) List of Excluded Individuals and Entities (LEIE) prior to hiring or contracting any employee or contractor that performs services that are compensated with Medicaid/Medicare funds, including but not limited to licensed and unlicensed staff, interns and/or contractors.
Agency must review the LDH State Adverse Actions website prior to hiring or contracting any employee or contractor that performs services that are compensated with Medicaid/Medicare funds, including but not limited to licensed and unlicensed staff, interns and/or contractors.
Agency must, for current employees, check the Department of Health and Human Services' Office of Inspector General (OIG) List of Excluded Individuals and Entities (LEIE) list once a month thereafter to determine if they have been excluded from participation in the Medicaid or Medicare Program by Louisiana Medicaid or the Department of Health and Human Services' Office of Inspector General.
Agency must, for current employees, check the LDH State Adverse Actions list once a month thereafter to determine if there is a finding that an employee or contractor has abused, neglected or extorted any individual or if they have been excluded from participation in the Medicaid or Medicare Program by Louisiana Medicaid or the Department of Health and Human Services' Office of Inspector General.
Arrange for and maintain documentation that all persons, prior to employment, are free from tuberculosis (TB) in a communicable state via skin testing (or chest exam if recommended by physician) to reduce the risk of such infections in members and staff.
TB testing was completed less than 31 days prior to date of employment
Establish and maintain written policies and procedures inclusive of drug testing staff to ensure an alcohol and/or drug-free workplace and/or a workforce free of substance use
The provider agency must maintain drug testing for staff employed or contracted with the agency.
The provider agency must maintain documentation of completion of required training for staff employed or contracted with the agency. All therapists and supervisors attend a 30-hour (five-day) MST orientation training within two months of hire. Booster trainings are conducted for one and a half days each quarter. The entire MST team attends a full day of booster training (minimum seven hours), while the half-day (minimum three and a half hours) may be attended by the entire team or only the supervisors.

The supervisor for an MST team is an independently licensed master's-level mental health professional with a graduate degree in a clinical mental health field and experience providing mental health treatment.

MST Therapists are master's-level mental health professionals with graduate degrees in a clinical field and a background in family, youth and community service.

Bachelor's level staff must have a degree in social work, counseling, psychology or a related human services field and must have at least three years of experience working with the target population (children/adolescents and their families).

The system supervisor is a master's-level, mental health professional with a graduate degree in a clinical field.

The system supervisor is a master's-level, mental health professional with experience as an MST clinical supervisor.

Staff has a National Provider Identification (NPI) number

Providers are required to have crisis mitigation plans that provides 24-hour on-call telephone assistance to prevent relapse or harm to self or others, to provide referral to other services, and/or to provide support during related crises.

The crisis mitigation plan shall include the following:
-Identify steps to take when a client suffers from a medical, psychiatric, medication or relapse crisis

The crisis mitigation plan shall include the following:
-Specify names and telephone numbers of staff or contracted entities to assist clients in crisis.

If the provider contracts with another entity to provide crisis mitigation services, the provider shall have a written contract with the entity providing the crisis mitigation services.

Functional Family Therapy(FFT/FFT-CW)

Licensed – pursuant to La. R.S. 40:2151, et seq.; for location reviewed.

Agency is certified by the Institute for FFT, LLC for location being reviewed.

The agency has a clinical director

The agency has an administrator.

The agency has a clinical supervisor

The agency has nursing staff.

Providers are required to have crisis mitigation plans that provides 24-hour on-call telephone assistance to prevent relapse or harm to self or others, to provide referral to other services, and/or to provide support during related crises.

The crisis mitigation plan shall include the following:
-Identify steps to take when a client suffers from a medical, psychiatric, medication or relapse crisis

The crisis mitigation plan shall include the following:
-Specify names and telephone numbers of staff or contracted entities to assist clients in crisis.

If the provider contracts with another entity to provide crisis mitigation services, the provider shall have a written contract with the entity providing the crisis mitigation services.

Agency must arrange for and/or maintain documentation that prior to employment (or contracting, volunteering, or as required by law) individuals pass criminal background checks, including sexual offender registry checks, in accordance with any applicable federal or state laws.
Criminal background checks were performed within ninety (90) days prior to the date of employment.
Agency must review the Department of Health and Human Services' Office of Inspector General (OIG) List of Excluded Individuals and Entities (LEIE) prior to hiring or contracting any employee or contractor that performs services that are compensated with Medicaid/Medicare funds, including but not limited to licensed and unlicensed staff, interns and/or contractors.
Agency must review the LDH State Adverse Actions website prior to hiring or contracting any employee or contractor that performs services that are compensated with Medicaid/Medicare funds, including but not limited to licensed and unlicensed staff, interns and/or contractors
Agency must, for current employees, check the Department of Health and Human Services' Office of Inspector General (OIG) List of Excluded Individuals and Entities (LEIE) list once a month thereafter to determine if they have been excluded from participation in the Medicaid or Medicare Program by Louisiana Medicaid or the Department of Health and Human Services' Office of Inspector General.
Agency must, for current employees, check the LDH State Adverse Actions list once a month thereafter to determine if there is a finding that an employee or contractor has abused, neglected or extorted any individual or if they have been excluded from participation in the Medicaid or Medicare Program by Louisiana Medicaid or the Department of Health and Human Services' Office of Inspector General.
TB testing was completed less than 31 days prior to date of employment
Establish and maintain written policies and procedures inclusive of drug testing staff to ensure an alcohol and/or drug-free workplace and/or a workforce free of substance use
Maintain documentation that all direct care staff, who are required to complete first aid training, complete the training within 90 days of hire; Psychiatrists, advanced practical registered nurses (APRNs)/physician assistants (PAs), registered nurses (RNs) and licensed practical nurses (LPNs) are exempt from this training.
Maintain documentation that all direct care staff, who are required to renew first aid training, complete the training within the time period recommended by the American Heart Association; Psychiatrists, advanced practical registered nurses (APRNs)/physician assistants (PAs), registered nurses (RNs) and licensed practical nurses (LPNs) are exempt from this training.
Maintain documentation that all direct care staff, who are required to complete cardiopulmonary resuscitation (CPR) training, complete the training within 90 days of hire; Psychiatrists, advanced practical registered nurses (APRNs)/physician assistants (PAs), registered nurses (RNs) and licensed practical nurses (LPNs) are exempt from this training.
Maintain documentation that all direct care staff, who are required to renew CPR training, complete the training within the time period recommended by the American Heart Association; Psychiatrists, advanced practical registered nurses (APRNs)/physician assistants (PAs), registered nurses (RNs) and licensed practical nurses (LPNs) are exempt from this training.
Unlicensed staff rendering services have submitted attestation documentation to the MCO attesting they have completed the training module: MH 101 – Introduction to Serious Mental Illness (SMI) and Emotional Behavioral Disorders.
Unlicensed staff rendering services have submitted attestation documentation to the MCO attesting they have completed the training module: Crisis intervention.

Unlicensed staff rendering services have submitted attestation documentation to the MCO attesting they have completed the training module: Suicide and homicide precautions.
Unlicensed staff rendering services have submitted attestation documentation to the MCO attesting they have completed the training module: System of care overview.
Unlicensed staff rendering services have submitted attestation documentation to the MCO attesting they have completed the training module: Co-occurring disorders.
Unlicensed staff rendering services have submitted attestation documentation to the MCO attesting they have completed the training module: Cultural and linguistic competency (basic).
Unlicensed staff rendering services have submitted attestation documentation to the MCO attesting they have completed the training module: Treatment planning.
Ensure and/or maintain documentation that all unlicensed persons employed by the organization complete annual training in a recognized crisis intervention curriculum prior to handling or managing crisis calls.
Agency has policies and procedures to ensure screening of clients for medication management needs
Agency has policies and procedures to ensure referral to appropriate community providers for medication management including assistance to the client/family to secure services
Agency has policies and procedures to ensure collaboration with the client's medication management provider as needed for coordination of the client's care
All FFT/FFT-CW therapists must have a background in family, youth and community service
All FFT/FFT-CW therapists must have a minimum of two years' experience working with children, adolescents and families.
Therapists are master's-level staff with graduate degrees in a clinical field or other human service field.
The bachelor's degree must be in a human services field.
Site supervisors are master's-level mental health professionals with graduate degrees in a clinical discipline.
Site supervisors must have a background in family, youth and community service
Site supervisors must have a minimum of two years experience working in these areas.
FFT National Consultant must have been involved in the delivery of FFT services for five years.
FFT National Consultant must have been a site supervisor
FFT National Consultant must be employed by FFT, LLC.
FFT/FFT-CW provider agencies are required to employ or contract with an LMHP.
<u>HomeBuilders (HB)</u>
Licensed – pursuant to La. R.S. 40:2151, et seq.; for location reviewed.
The provider contracts with Institute for Family Development (IFD) for training, supervision and monitoring of services.
The agency has a clinical director
The agency has an administrator.
The agency has a clinical supervisor
The agency has nursing staff.
Providers are required to have crisis mitigation plans that provides 24-hour on-call telephone assistance to prevent relapse or harm to self or others, to provide referral to other services, and/or to provide support during related crises.

<p>The crisis mitigation plan shall include the following: -Identify steps to take when a client suffers from a medical, psychiatric, medication or relapse crisis</p>
<p>The crisis mitigation plan shall include the following: -Specify names and telephone numbers of staff or contracted entities to assist clients in crisis.</p>
<p>If the provider contracts with another entity to provide crisis mitigation services, the provider shall have a written contract with the entity providing the crisis mitigation services.</p>
<p>Agency must arrange for and/or maintain documentation that prior to employment (or contracting, volunteering, or as required by law) individuals pass criminal background checks, including sexual offender registry checks, in accordance with any applicable federal or state laws.</p>
<p>Criminal background checks were performed within ninety (90) days prior to the date of employment.</p>
<p>Agency must review the Department of Health and Human Services' Office of Inspector General (OIG) List of Excluded Individuals and Entities (LEIE) prior to hiring or contracting any employee or contractor that performs services that are compensated with Medicaid/Medicare funds, including but not limited to licensed and unlicensed staff, interns and/or contractors.</p>
<p>Agency must review the LDH State Adverse Actions website prior to hiring or contracting any employee or contractor that performs services that are compensated with Medicaid/Medicare funds, including but not limited to licensed and unlicensed staff, interns and/or contractors</p>
<p>Agency must, for current employees, check the Department of Health and Human Services' Office of Inspector General (OIG) List of Excluded Individuals and Entities (LEIE) list once a month thereafter to determine if they have been excluded from participation in the Medicaid or Medicare Program by Louisiana Medicaid or the Department of Health and Human Services' Office of Inspector General.</p>
<p>Agency must, for current employees, check the LDH State Adverse Actions list once a month thereafter to determine if there is a finding that an employee or contractor has abused, neglected or extorted any individual or if they have been excluded from participation in the Medicaid or Medicare Program by Louisiana Medicaid or the Department of Health and Human Services' Office of Inspector General.</p>
<p>TB testing was completed less than 31 days prior to date of employment</p>
<p>Establish and maintain written policies and procedures inclusive of drug testing staff to ensure an alcohol and/or drug-free workplace and/or a workforce free of substance use</p>
<p>Maintain documentation that all direct care staff, who are required to complete first aid training, complete the training within 90 days of hire; Psychiatrists, advanced practical registered nurses (APRNs)/physician assistants (PAs), registered nurses (RNs) and licensed practical nurses (LPNs) are exempt from this training.</p>
<p>Maintain documentation that all direct care staff, who are required to renew first aid training, complete the training within the time period recommended by the American Heart Association; Psychiatrists, advanced practical registered nurses (APRNs)/physician assistants (PAs), registered nurses (RNs) and licensed practical nurses (LPNs) are exempt from this training.</p>
<p>Maintain documentation that all direct care staff, who are required to complete cardiopulmonary resuscitation (CPR) training, complete the training within 90 days of hire; Psychiatrists, advanced practical registered nurses (APRNs)/physician assistants (PAs), registered nurses (RNs) and licensed practical nurses (LPNs) are exempt from this training.</p>

Maintain documentation that all direct care staff, who are required to renew CPR training, complete the training within the time period recommended by the American Heart Association; Psychiatrists, advanced practical registered nurses (APRNs)/physician assistants (PAs), registered nurses (RNs) and licensed practical nurses (LPNs) are exempt from this training.

Unlicensed staff rendering services have submitted attestation documentation to the MCO attesting they have completed the training module: MH 101 – Introduction to Serious Mental Illness (SMI) and Emotional Behavioral Disorders.

Unlicensed staff rendering services have submitted attestation documentation to the MCO attesting they have completed the training module: Crisis intervention.

Unlicensed staff rendering services have submitted attestation documentation to the MCO attesting they have completed the training module: Suicide and homicide precautions.

Unlicensed staff rendering services have submitted attestation documentation to the MCO attesting they have completed the training module: System of care overview.

Unlicensed staff rendering services have submitted attestation documentation to the MCO attesting they have completed the training module: Co-occurring disorders.

Unlicensed staff rendering services have submitted attestation documentation to the MCO attesting they have completed the training module: Cultural and linguistic competency (basic).

Unlicensed staff rendering services have submitted attestation documentation to the MCO attesting they have completed the training module: Treatment planning.

Ensure and/or maintain documentation that all unlicensed persons employed by the organization complete annual training in a recognized crisis intervention curriculum prior to handling or managing crisis calls.

Agency has policies and procedures to ensure screening of clients for medication management needs

Agency has policies and procedures to ensure referral to appropriate community providers for medication management including assistance to the client/family to secure services

Agency has policies and procedures to ensure collaboration with the client's medication management provider as needed for coordination of the client's care

HB therapist must have a master's degree in psychology, social work, counseling, or a related field, or Bachelor's degree in same fields plus two years of experience working with families.

HB supervisor must have a Master's degree in psychology, social work, counseling or a related field, or Bachelor's degree in same fields plus two years of experience providing the program, plus one year supervisory/management experience.