



COLORADO

**Department of Health Care
Policy & Financing**

Benefits Collaborative:
Draft Service & Coverage Standards
Children's Habilitation Residential Waiver
Intensive In-Home Therapeutic Support

Disclaimer: Deliberative Document

This **working draft document** is provided for policy development and discussion purposes only. The notes, discussions, comments, suggestions, and recommendations made in this document should not be seen as, or be interpreted as, having any effect or change whatsoever in the current or future waiver services as currently or ultimately written; neither should they be seen as representative of the positions, comments, or feelings of all or a majority of the State of Colorado, the Department of Health Care Policy & Financing, the Office of Community Living, the Policy, Innovation & Engagement Division, or the Complex Needs Program Development and Evaluation Unit, individually or collectively. The service and coverage standards detailed below are subject to change, and may change significantly over the course of the project.

Complex Needs Program Development and Evaluation Unit
Policy, Innovation, & Engagement Division
Office of Community Living

CMS CORE SERVICE DEFINITION- CONSULTATIVE CLINICAL AND THERAPEUTIC SERVICES

Clinical and therapeutic services that assist unpaid caregivers and/or paid support staff in carrying out individual treatment/support plans, and that are not covered by the Medicaid State Plan and are necessary to improve the individual's independence and inclusion in their community. Consultation activities are provided by professionals in psychology, nutrition, counseling and behavior management. The service may include assessment, the development of a home treatment/ support plan, training and technical assistance to carry out the plan and monitoring of the individual and the provider in the implementation of the plan. This service may be delivered in the individual's home or in the community as described in the service plan.

Intensive In-Home Support Therapeutic Support

COVERED SERVICES AND LIMITATIONS

SERVICE DEFINITION

The In-Home Therapeutic Support service includes strategies to support the child/youth and family to prevent the need for out of home placement prior to or during a crisis. The In-Home Therapeutic Support will:

1. Identify unique strengths, abilities, preferences, desires, needs, expectations, and goals of the child/youth and family.
2. Include an assessment of crisis contributing factors, including, but not limited to:
 - a. Identification of the cause(s) of crisis and possible triggers that could lead to crisis
 - b. Physical and behavioral health factors
 - c. Education services
 - d. Family dynamics
 - e. Schedules and routines
 - f. Police involvement
 - g. Medical and behavioral health hospitalizations
 - h. Triggers for crisis
 - i. Current services

- j. Adaptive equipment needs
 - k. Past interventions and outcomes
 - l. Immediate need for resources
 - m. Predictive risk factors
 - n. Increased risk factors
3. Identify and connect to services and supports needed.
 4. Create a Crisis Mitigation Plan to prevent and manage future crisis.
 5. Coordinate current service providers, caretakers, natural supports, professionals, and case managers required to implement the crisis mitigation plan.
 6. Disseminate Crisis Mitigation Plan to all involved in plan implementation.
 7. Provide In-Home Support.
 8. Identify follow-up services.
 9. Follow-up services may include:
 - a. Monitoring to ensure that triggers to crisis have been addressed.
 - b. Ensure that follow-up appointments are made and kept.

Crisis is an event or events of greater than normal severity that become outside the manageable range for the child/youth and/or their caregivers and poses a danger to self, family, community. Crisis may be self-identified, family identified, and/or identified by an outside party.

CRISIS MITIGATION PLAN

1. The development and implementation of a Crisis Mitigation Plan will be guided and supported by the child/youth, their family, and their crisis support team.
2. The crisis support team is selected by the child/youth and their family and may be composed of case managers, medical professionals, behavioral health professionals, therapeutic support professionals, representatives from education, and other relevant parties involved in supporting/treating the child/youth or their family.

3. This team's role will be to develop and implement a Crisis Mitigation Plan to assist the child/youth in:
 - a. Modifying their environment.
 - b. Learning new adaptive skills.
 - c. Engaging in counseling/behavioral interventions to further stabilize the individual emotionally and behaviorally and decrease the frequency and duration of future behavioral crises.
 - d. Identification of areas of training for supports, paid and unpaid.
 - e. Determine criteria for stabilization in the family home.
 - f. Identify how the plan will fade out once the child/youth has stabilized.
4. The Crisis Mitigation Plan will incorporate relevant supports, services, strategies, and goals from other plans in place to support the child/youth.
5. Medication management and stabilization, medical and/or behavioral health oversight will also be an integral part of the program and will be coordinated with the medical and/or behavioral health provider.
6. Identification of training needs for caregivers, coordination and/or connection to resources for family training.
7. Revision of strategies will be a continuous process by the team in collaboration with the child/youth, until a support regime stabilizes them for return to their usual activities.

IN-HOME SUPPORT

1. Based on the team's assessment of types and amounts of in-home support needed, this delivery of service will begin as soon as possible after the need has been identified.
2. The in-home support will be primarily implemented by Direct Support Professionals.

3. Support includes implementation of therapeutic and/or behavioral support plans, building life skills, providing guidance to the child/youth with self-care, learning self-advocacy, and protective oversight.
4. Service may be provided in the child/youth's home or community.

PREVENTION AND MONITORING

1. The Crisis Prevention Coordinator will provide monitoring of the Crisis Mitigation Plan at a frequency determined by the child/youth's needs. Monitoring will include but is not limited to: visits to the child/youth's home, review of documentation, and coordination with other professionals and/or members of the team to determine progress.
2. As issues arise, the Crisis Prevention Coordinator will further revise the Crisis Mitigation Plan and provide additional staff support as needed in order to avert a crisis.
3. Follow-up after completion of Crisis Mitigation Plan will be determined on an individual basis.
4. Follow-up services post completion of Crisis Mitigation Plan will include status reviews of child/youth's stability and monitoring of predictive and increased risk factors that could indicate a return to crisis.
5. On-going monitoring by the Crisis Prevention Coordinator will support the child/youth and their family in connecting to any additional resources needed to prevent future crisis.

SERVICE LIMITS

Services covered under Medicaid EPSDT, for a covered mental health diagnosis in the Medicaid State Plan, covered by a third-party source or available from a natural support shall not be reimbursed.

There are no limits to the amount, frequency, or duration of this service.

PROVIDER STANDARDS

Eligible Providers

Provider Qualifications

1. Agency
 - a. Certified as a Medicaid provider of In-Home Therapeutic Support services.

2. Crisis Prevention Coordinator

- a. Bachelor's degree in a human behavioral science or related field of study;

OR

An individual who does not meet the minimum educational requirement may qualify as a case manager under the following conditions: Experience working with Long-Term Services and Supports (LTSS) populations, in a private or public social services agency may substitute for the required education on a year for year basis.

When using a combination of experience and education to qualify, the education must have a strong emphasis in a human behavioral science field.

AND

- b. Certification in crisis prevention training
 - i. Training must encompass:
 1. Trauma informed care
 2. Youth mental health first aid
 3. Crisis supports and planning
 4. Positive Behavior Supports, behavior intervention, and de-escalation techniques
 5. Cultural and linguistic competency

6. Family and youth servicing systems
7. Family engagement
8. Child and adolescent development
9. Accessing community resources and services
10. Conflict resolution
11. Mental health topics and services
12. Substance abuse topics and services
13. Psychotropic medications
14. Motivational interviewing
15. Prevention, detection and reporting of mistreatment, abuse, neglect, and exploitation

AND

- c. Complete re-certification in crisis prevention training at least every other year or as dictated by crisis prevention training course.

3. Direct Support Professional

- a. Be at least 21 years of age.

AND

- b. At least 40 hours of training in Crisis Prevention, De-escalation, and Intervention.
 - i. Training must encompass:
 1. Trauma informed care
 2. Youth mental health first aid
 3. Positive Behavior Supports, behavior intervention, and de-escalation techniques
 4. Cultural competency
 5. Family systems and family engagement
 6. Child and adolescent development
 7. Mental health topics and services
 8. Substance abuse topics and services
 9. Psychotropic medications
 10. Prevention, detection, and reporting of mistreatment, abuse, neglect, and exploitation

AND

- c. Complete annual refresher courses on the above training topics.

Entity Responsible for Verification: The Department of Health Care Policy and Financing

Frequency of Verification: Initially and at least every 3 years.

DRAFT