

BHS Policies and Procedures



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POLICY/PROCEDURE REGARDING: **Credentialing and Service/Billing Privileges in Specialty Mental Health Services for Mental Health Rehabilitation Specialists & Mental Health Workers**

Manual Number:2.01-3

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References: CCR Title 9, Chapter 11; CCR Title 9, §532.6, §630 and §1810.435; California State Plan Amendment 12-025; Mental Health Plan Implementation Plan (2017)

Effective Date: July 1, 2017

New Policy

This policy communicates an official change in the credentialing criteria for two categories of Specialty Mental Health Services (SMHS) providers in the CBHS Mental Health Plan (MHP): (a) Mental Health Rehabilitation Specialist (MHRS) and (b) Mental Health Worker (MHW; formerly known as “Mental Health Advocate”).

Background

The establishment of provider selection criteria is a required activity of County MHPs (CCR, Title 9, §1810.435). MHPs are authorized to establish additional requirements “as part of a credentialing or other evaluation process” [§1810.435(b)(6)].

This memo clarifies and specifies the required credentials for MHRS and MHW (formerly, “Mental Health Advocate”) that currently appear in the BHS Policy 6.00-01 (*CBHS Electronic Signatures*), Appendix 3 (*Staffing Qualifications for Service Delivery and Documentation*).

Policy

BHS uses CCR Title 9 §630 criteria for credentialing MHRS staff and uses the State Plan Amendment (SPA # 12-025; “Qualification of Providers”) for credentialing MHW staff. These definitions appear below. In instances where guidance/authority is vague, BHS provides clarification and specification to ensure providers meet compliance and quality standards.

Mental Health Rehabilitation Specialist: A mental health rehabilitation specialist shall be an individual who has a baccalaureate degree and four years of experience in a mental health setting as a specialist in the fields of physical restoration, social adjustment, or vocational adjustment. Up to two years of graduate professional education may be substituted for the experience requirement on a year-for-year basis; up to two years of post associate arts clinical experience

may be substituted for the required educational experience in addition to the requirement of four years' experience in a mental health setting (CCR, Title 9, §630).

Other Qualified Provider: An individual at least 18 years of age with a high school diploma or equivalent degree determined to be qualified to provide the service by the county mental health department (SPA # 12-025; "Qualification of Providers").

BHS Policy Clarification- MHRS Definition (CCR, Title 9, §630)

BHS clarifies the following:

1. The **Baccalaureate degree** described in §630 does not specify or limit the degree to a particular field, like psychology, or type, like a bachelor's of science.
 - a. BHS adopts the same criteria and does not specify or limit the Baccalaureate degree.
2. The **four years of experience** described in §630 does not specify the type (paid vs. volunteer), amount (full time vs. part time) or tasks (working with clients vs. file clerk).
 - a. BHS is obligated to verify candidates' education and professional experiences and thus, requires the following clarifications to §630:
 - i. "*Experience*" is defined as verifiable experience, either paid/unpaid, including "practicum" experiences gained in professional training programs.
 - ii. "*Experience*" is defined as full-time or full-time equivalence.
 - iii. "*Specialist*" is defined as a role primarily working with/providing services to clients.
3. The **graduate professional education** which is substituted for experience (described in §630) does not specify a particular field or type.
 - a. BHS clarifies that the requirement is graduate professional education in a clinical professional field: Social Work (MSW), Marriage Family Therapy (MFT), Clinical Counseling (LPCC), Psychology (PhD/PsyD), etc.
 - b. BHS adopts the criteria of "up to two years of graduate professional education may be substituted for the experience requirement on a year-for-year basis."
4. The **two years of post associate arts clinical experience** described in §630 requires a sequence where first, an Associate degree is obtained and second, clinical experience is obtained.
 - a. BHS adopts the same criteria. Staff who have an Associate degree may substitute clinical experience (up to two years) accrued after the completion of the Associate.
 - b. BHS requires the following clarifications to the "clinical experience"
 - i. "*Experience*" is defined as verifiable experience, either paid/unpaid, including "practicum" experiences gained in professional training programs.
 - ii. "*Experience*" is defined as full-time or full-time equivalence.
 - iii. "*Clinical Experience*" is defined as a role primarily working with/providing services to clients.

5. The **Associate degree** described by DHCSⁱ in its clarification of §630 does not specify or require a particular field, like psychology, or type, like an Associate of science.
 - a. BHS adopts the same criteria. Staff may qualify for the MHRS criteria with an Associate degree;

BHS Policy Clarification-MHW Definition (SPA # 12-025; “Qualification of Providers”)

BHS specifies the following:

1. **The “determined to be qualified”** language in SPA# 12-025 is not further defined.
 - a. BHS clarifies that staff are “determined to be qualified” when the program provides and documents:
 - i. a specific plan of supervision and
 - ii. at least 20 hours of in-service training per year for the employee to ensure the ongoing qualifications of the individual to perform the jobⁱⁱ.
 - b. BHS will continue to specify the frequency, content and other details of the supervision and training requirements for MHW qualifications.

BHS Policy Clarification-Service, Billing & Documentation Privileges for MHRS and MHW

DPH Compliance & Privacy affairs publishes the *Mental Health Staffing Qualifications for Service and Billing Privileges* matrix and the document has been updated to reflect the information described in this Memo. The table below summarizes the core guidance for MHRS and MHW staff.

Domain	MHRS (within scope of practice)	MHW (within scope of practice)
Service/Billing Privileges	<p><i>INTENT: the educational and work requirements equip the MHRS staff to identify and intervene with a client's basic mental health needs and behaviors.</i></p> <p><u>Assessment & Plan Development:</u> MHRS staff have limited privileges. They may contribute through the collection of data, creation of documents, but LPHA staff signature is required for the Assessment and TPOC documents. Mental status examination and diagnosis is not in the scope of practice for an MHRS.</p> <p><u>Therapy:</u> therapy is legally restricted to specific professions. MHRS staff are not permitted to deliver or bill for any type of psychotherapy;</p> <p><u>Collateral, Rehabilitation, Targeted Case Management:</u> MHRS staff are permitted to provide these services;</p> <p><u>Crisis Intervention:</u> MHRS staff are permitted to provide portions of this “bundled service” that are commensurate with their scope of practice, including 5150 detainment given staff/site certification. However, the formal lethality assessment activities (i.e., danger to self; danger to others) should be conducted by LPHA staff;</p> <p><u>Day Treatment (Rehabilitation, Intensive), Adult Residential, Crisis Residential & Crisis Stabilization-Urgent Care:</u> MHRS staff may deliver this service.</p>	<p><i>INTENT: MHW staff are equipped to implement activities under the direction of an MHRS and/or LPHA staff including: monitoring/supervising clients, basic behavioral interventions and skills development, service brokering/linking, and collection of basic, historical, non-clinical information for assessment and care planning;</i></p> <p><u>Assessment & Plan Development:</u> MHW staff are not permitted to conduct clinical behavioral health assessment and/or care planning activities. Mental status examination and diagnosis is not in the scope of practice for an MHW.</p> <p><u>Therapy:</u> same as MHRS;</p> <p><u>Collateral, Rehabilitation, Targeted Case Management:</u> When under the direction of an MHRS and/or LPHA staff, an MHW may provide these services;</p> <p><u>Crisis Intervention:</u> When under the direction of an MHRS and/or LPHA, the MHW may deliver the non-clinical components of this service (e.g., monitoring behaviors for safety and 5150 detainment given staff/site certification);</p> <p><u>Day Treatment (Rehabilitation, Intensive), Adult Residential*, Crisis Residential* & Crisis Stabilization-Urgent Care:</u> When under the direction of an MHRS and/or LPHA, the MHW may deliver this service.</p>
Documentation Privileges in Outpatient Services	<p><u>Documents/Forms:</u> MHRS may create SMHS Assessment and TPOC document/form if a LPHA staff member signs the document/form;</p> <p><u>Progress notes</u> when appropriately authored by an MHRS, progress notes do not require a signature by LPHA. This includes Assessment, Plan Development, Rehabilitation, Collateral, Targeted Case Management, Crisis Intervention, Day Treatment (Weekly Summary/Daily Note), Adult Residential (Weekly Summary), Crisis Residential (Daily Note), Crisis Stabilization (Daily Note, per hour of service).</p>	<p><u>Documents/Forms:</u> MHWs are not permitted to create SMHS Assessment or TPOC documents/forms;</p> <p><u>Progress notes</u> MHW staff work under the direction of an MHRS and/or LPHA and thus, must have the signature of the MHRS and/or LPHA who directs the services. This includes Rehabilitation, Collateral, Targeted Case Management, Crisis Intervention, Day Treatment (Weekly Summary/Daily Note), Adult Residential (Weekly Summary), Crisis Residential (Daily Note), Crisis Stabilization (Daily Note, per hour of service).</p>
<p>* If a non-hospital program provides 24-hour-based, bundled services, with an interdisciplinary team, then MHW staff can collect basic, historic client information that will contribute to the assessment and care planning processes. This practice standard is appropriate given the nature of this level of care and setting. However, the LPHA staff who finalizes the assessment and treatment plan of care documents is ultimately the responsible party, accountable for the contents & the processes through which the information was collected and documented.</p>		

BHS Tools & Technical Assistance:

1. Summary Table of MHRS Criteria (Title 9 & BHS)

Element of MHRS Criteria (from CCR, Title 9, §630 and/or DHCS)	Area Requiring Clarification	BHS Mental Health Plan (MHP) Clarification
Baccalaureate degree	§630 does not specify or limit the type/focus of the degree (e.g., BA vs. BS in Psychology vs. Sociology)	As with §630, BHS does not specify or limit the type/focus of the degree
Four years of experience	§630 does not specify the type, amount or tasks of “experience”	<p>BHS must be able to verify education and experience—the following clarifications are made for “experience” and “specialist”:</p> <ul style="list-style-type: none"> • Paid or unpaid work • Full-time or FTE • Direct work with clients
Graduate professional education	§630 does not specify a particular field or type of education	<p>BHS clarifies the following for “graduate professional education”:</p> <ul style="list-style-type: none"> • No requirement to have a degree conferred/granted; • Professional clinical service delivery education (e.g., social work, counseling, marriage/family therapy, clinical/counseling/school psychology, etc.).
Two years of post associate arts clinical experience	§630 requires a sequence for education/experience, but does not specify the type, amount or tasks of “experience”	<p>As with §630, BHS requires a sequence for education (first) and experience (second).</p> <p>BHS clarifies “experience” as paid or unpaid work, full-time/FTE and direct work with clients</p>
Associate degree	DHCS does not specify or limit the type/focus of the degree (e.g., AA vs. AS)	As with DHCS, BHS does not specify or limit the type/focus of the Associate degree

2. Frequently Asked Questions (FAQ) for MHRS/MHW: an initial list of questions and answers appears below.

Question about MRHS	Answer
<p>Can the Bachelor's or Associate degree be in any area (e.g. Biology, Literature, etc.)?</p>	<p>Yes, the Bachelor's or Associate degree could be from any discipline.</p> <p>Title 9 does not specify the content area of the Bachelor's degree or Associate degree.</p> <p>Note, however, that BHS has specified the content area of professional graduate education.</p>
<p>Does it matter if the staff member accrued experience before obtaining a degree (or vice-versa)? Does the sequence of education and experience determine if a staff member can qualify?</p>	<p>Title 9 specifies one scenario where a sequence of events is required for qualification.</p> <p><u>Scenario:</u></p> <ul style="list-style-type: none"> • Staff member only has an Associate degree • Staff has six or more years of experience <p><u>Required Sequence of Events:</u></p> <ul style="list-style-type: none"> • Staff member obtains Associate degree • Staff member accrues two years of experience after the degree;
<p>Can you give an example of a staff member who <u>does not</u> qualify for the MHRS role because of the sequence of education?</p>	<p><u>Example:</u></p> <ul style="list-style-type: none"> • Staff member obtained a high school diploma (age 20); • Staff member works in an adult residential treatment program for 20 years (age 40) • Staff member completes an Associate degree (age 42) • Staff member applies for MHRS criteria (age 42) <p>The staff member cannot be credentialed because she/he/they need to obtain 2 years of work experience after the Associate degree. That means the staff member will be eligible for the MHRS credential after 2 years of work (i.e., at age 44)</p>
<p>Can you give an example of a staff member who <u>does</u> qualify for the MHRS role with an Associate degree and six years of experience?</p>	<p>Yes, if a staff member uses an Associate degree to qualify, then the following must be true:</p> <ol style="list-style-type: none"> 1. The staff member has at least six years of experience 2. Two of the six years of experience must be accrued after the Associate degree was conferred 3. The remaining four years of experience could have been obtained before or after the date the Associate degree was conferred

Question about MRHS	Answer
<p>If a staff member has a Bachelor's degree and 2 years of professional graduate education, how many years of experience are required to qualify as an MHRHS?</p>	<p>A staff member who has a Bachelor's degree and two years of professional graduate education will meet MHRHS criteria if they have 2 years of experience.</p> <p>Remember—a Bachelor's level staff person needs to have <u>4</u> years of experience, but Title 9 allows you to substitute graduate professional education.</p> <p>In this example 2 years experience + 2 years graduate education = <u>4</u></p>
<p>Regarding the experience requirement, will BHS follow Title 9 description (i.e., "fields of physical restoration, social adjustment, or vocational adjustment")</p>	<p>Yes, BHS accepts experience in the fields of physical restoration, social adjustment or vocational adjustment.</p> <p>Note, however, that BHS requires those experiences to be "primarily working with/providing services to clients."</p> <p><u>Example:</u> Prior experience as a file clerk in a vocational rehabilitation program does not meet the BHS standard because the role is not directly providing services to clients. In contrast, providing vocational rehabilitation services to a client meets the BHS standard because of the client-level interaction and involvement.</p>
<p>Has the BHS credentialing form (<i>Certification and Verification for Staff ID: Attestation for Non-Licensed Staff</i>) been updated?</p>	<p>Yes, the <i>Certification and Verification for Staff ID: Attestation for Non-Licensed Staff</i> form has been updated to reflect these criteria.</p>
<p>Is it sufficient for a staff/program to simply attest that the criteria are met?</p>	<p>No, it is not sufficient to simply attest that the requirements are met.</p> <p>Programs and agencies must verify the staff member's education and experience prior to submitting the credentialing form to BHS.</p> <p>Programs and agencies must maintain this verification and documentation in the event of an audit or review.</p> <p>However, programs and agencies are not required to submit the verification information.</p>
<p>Will BHS provide additional information about the expectations for training and supervision of MHW staff?</p>	<p>BHS plans to provide further guidance on this and to identify basic standards & expectations for initial/ongoing training as well as supervision (in consultation with DHCS, as needed). However, it is the expectation & understanding that the training and supervision activities provided by each agency/organization, and/or obtained through other professional entities/institutions, would already be at the level to meet this general standard as well as be documented for review/verification.</p>

ⁱ <http://www.dhcs.ca.gov/services/MH/Pages/SMART-ScopeOfPracticeFAQs.aspx>

ⁱⁱ Based on CCR Title 9 §532.6

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