Agenda

• Transition from RSPMI to OBHS
• Substance abuse treatment facility licensure
• Provider Enrollment Requirements
• Updates
  – Embedded assessor process
  – IA for DD waiver/DD waiver waitlist
LICENSURE AND CERTIFICATION PROCESS
RSPMI TRANSITION TO OBHS

Division of Provider Services and Quality Assurance
Dept. of Licensure and Certification
Sherri Proffer, RN
• The Division of Provider Services and Quality Assurance was developed from various divisions within the Department of Human Services. These include Division of Medical Services, Division of Aging and Adult Services, Division of Behavioral Health, Division of Child Care and Division of Developmental Disability Services. The goal of the new division is to ensure consistency in the licensure, certification, survey and enforcement process. The division will also ensure an across-the-board quality assurance and training program is designed and develop and provide a workforce process.

• The division licenses and certifies BHAs, ILPs, EIDTs, ADDTs, ALFs, ADCs, ADHCs and waiver program providers
The transition process to eliminate the Rehabilitative Services for Persons with Mental Illness (RSPMI) program, Licensed Mental Health Practitioner (LMHP) program, and the Substance Abuse Treatment Services (SATS) program was approved and the implementation of the Outpatient Behavioral Health Services program began. Clients currently served by the RSPMI, LMHP, and SATS programs began transitioning to the Outpatient Behavioral Health program July 1, 2017. RSPMI, LMHP and SATS will cease to exist June 30, 2018, and no Arkansas Medicaid payments will occur to any RSPMI, LMHP or SATS provider for a service provided after June 30, 2018.
• Effective July 1, 2018, all RSMPI providers shall transition to OBHS or lose their ability to bill Medicaid.

• The Division of Provider Services and Quality Assurance (DPSQA) has the responsibility of the licensure and certification of all RSPMI providers “grandfathering” into OBHS.

• The current RSPMI provider shall notify DPSQA of their intent to transfer and the transfer date.
Once the current RSPMI provider decides to transfer to an OBHS provider as a Behavioral Health Agency, the provider shall notify DPSQA on the attached form and give DPSQA at least two weeks notice (for smaller providers). The provider shall also notify the DPSQA of their intent to provide additional certification services such as:

1. Acute Crisis Unit
2. Community Reintegration Unit
3. Partial Hospital Unit
4. Therapeutic Community – Level 1 or Level 2
5. Substance Abuse Treatment Facility

The provider shall check the additional certification on the transfer form. DPSQA shall conduct site visits before any additional certification is given. BHAs do not require a site visit.
• Although the RSPMI will be grandfathered into OBHS, the provider will need to notify DPSQA of when they intend to “flip” to OBHS as a Behavioral Health Agency.

• Once DPSQA is notified of the flip, we will send the provider their license and any special certification(s). Each provider site will have a license and/or certification with a unique vendor number (an identification number for our databases) listed on their license and/or certification. Licenses will be good for one year or until their CARF certification review date. The expiration date will be listed on your license.
• DPSQA will then mail the provider their license and/or certification and send a copy of the license and certification and a copy of the provider’s transition form to Beacon and Division of Medical Services (DMS). Beacon and DMS will authorize PAs and review provider numbers to ensure billing can occur as smoothly as possible.

• To ensure a smooth transition, we are requesting those providers with multiple sites give DPSQA at least a 30-day written notice of their intent to flip.

• Please realize that if every provider waits until June, we will not be able to process the applications in a timely manner, thereby delaying your ability to bill and delaying the authorization of services.
Independently Licensed Practitioners (ILPS)

- An ILP is an individual who is licensed to engage in private/independent practice by the appropriate state board. The following licensures can qualify as ILPs:
  - Licensed Certified Social Worker (LCSW)
  - Licensed Marital and Family Therapist (LMFT)
  - Licensed Psychologist (LP)
  - Licensed Psychological Examiner – Independent (LPEI)
  - Licensed Professional Counselor (LPC)

- ILPs may only provide Tier 1 services, and shall not have MHPPs. The expiration date is listed on the license.
• ILPs may have multiple sites, but each shall fill out an application form and each site shall be certified. A site visit shall occur before each site is certified to ensure compliance with the certification manual. Each site shall have its own name and provider number in order to bill Medicaid for services it performs.

• Sites may have more than one ILP working in the office, but each ILP shall have their own office and space to provide private individual counselling. Each ILP shall have their own provider number. Each ILP shall have their own policies and procedures as outlined in the ILP Certification Manual. Multiple ILPs occupying one site may utilize the same policies and procedures, but shall list the individual ILP’s name on each P&P.
• All BHAs and their additional certification sites providing specialized services shall be licensed and certified separately.

• For example, if a BHA has a Community Reintegration site, a Partial Hospital site and an Acute Crisis Unit, all additional certification sites shall have a site visit conducted before certification, meet all the certification requirements for each specific certification site and receive a separate certification for each site.

• Remember, the provider with several BHAs may not bill under one provider number, each site shall have a separate provider number.
• Each BHA and additional certification site shall comply with the licensure and certification regulations for each licensed and certification type.

• BHAs and those specialty certifications shall comply with physical plant, staffing and other requirements outlined in the licensure and certification manuals, Medicaid Manual as well as any applicable city, state, county requirements as well as the Arkansas Fire Prevention Code. The most stringent of each requirement shall be maintained.
Partial Hospitalization

• Providers requesting a partial hospitalization certification in addition to their BHA license shall not provide educational services at their site. Educational services shall be provided at the school as the partial hospitalization site is not authorized to provide services other than those services outlined in the OBHS Medicaid Manual and Licensure/Certification Manual.
Reminder: All RSPMI providers shall notify the Division of Provider Services and Quality Assurance of their intent to transfer to OHBS as a BHA with additional certifications, if applicable, and fill out the transition form notifying DPSQA of their intent to transition and give DPSQA at least two weeks for small providers and at least 30 days for larger providers notice. An individual applying as an ILP shall fill out the required transition form within two weeks of their intent to become an ILP. Both the BHA and the ILP shall send their notification by:

Email: Cindy Corbitt at Cynthia.corbitt@dhs.arkansas.gov

Mail:
Division of Provider Services and Quality Assurance
PO Box 8059, Slot S408
Little Rock, AR, 72204

Fax:
Attention DPSQA, Cindy Corbitt at 501-682-8551

DPSQA website will have the form available soon in a fillable PDF format and you may email the completed form to Cynthia.corbitt@dhs.arkansas.gov
• All BHAs and additional certified specialty units shall be in compliance with administration of medications, storage of medications, documentation of medications (this includes scheduled narcotics) and destruction of medication (and the results of PRN medications) as required by the Arkansas State Board of Nursing (ASBN), the ASBN’s position statements, and the Department of Health Pharmacy regulations and requirements. In addition, all BHAs and ILPs shall have appropriate policies and procedures as outlined in the designated licensure and certification manuals.
• All ILPs, BHAs and their certified specialty units shall abide by the applicable requirements. Failure of the ILP, BHA and certified specialty to follow the licensure, certification and Medicaid manual shall result in a deficient practice. The provider shall receive a statement of deficiency (SOD) identifying the deficient practice. The provider shall provide the Division of Provider Services and Quality Assurance or their designated representative with a plan of correction within the required time frame.

• Failure to provide an acceptable plan of correction to the division within the required time frame shall result in additional remedies.

• The provider does have the option of disputing the SOD as required by law.
Arkansas Department of Human Services

Transition from Rehabilitative Services for Persons with Mental Illness (RSPMI) to Outpatient Behavioral Health Services (OBHS)

To be completed and submitted 2 weeks prior to transition effective date
1 form per site

As stated in the OBHS provider manual section 201.000, RSPMI will cease to exist on June 30, 2018, and no Arkansas Medicaid payments will occur to any RSPMI provider for a service provided after June 30, 2018. This letter will serve as notice that as a currently enrolled RSPMI Medicaid provider, (insert full corporation/legal name/Medicaid ID) will transition the program status from RSPMI to OBHS at the following Medicaid enrolled site:

Name of Site:

Site Medicaid ID:

Additional Certification(s):  □ Partial Hosp.  □ Therapeutic Community Level I  □ Therapeutic Community Level II  □ Acute Crisis Unit  □ Community Reintegration  □ Substance Abuse Tx Center

Chief Executive Officer (or equivalent):

Corporate Compliance Officer (or equivalent):

Site Administrative Address:

Site Physical Address:
Should you have any questions, please contact:

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Division of Provider Services and Quality Assurance
PO Box 8059, Slot 408
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Sherri.proffer@dhs.Arkansas.gov
501.320.6182

or

Cindy Corbitt
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Division of Provider Services and Quality Assurance
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501.320.6415
PROVIDER ENROLLMENT REQUIREMENTS

Ward Hanna
Business Operations Manager
Division of Medical Services
General Overview

• Section I of all manuals
  – Contains universal requirements all provider types must submit
    ▪ Application
    ▪ W9
    ▪ Signed contract
    ▪ Others

• Section II of all manuals
  – Contains specific/additional enrollment requirements for each provider type
Section II OBHS Enrollment

• OBHS Manual Section II (202.000)
  – Providers must be located in the state
  – Certification from DPSQA
    • Certification must be attached to enrollment application
  – Provide monthly staff reports to OMIG of “all covered health practitioners who perform services on behalf of the provider”
Section II OBHS Enrollment

• OBHS Manual Section II (202.200)
  – Each agency site must apply for enrollment
    • Letter with application attesting to the satellite status
      – Name, address, parent company Medicaid ID
    • Annual letter to enrollment contractor from parent company attesting to number of sites
      – June 15 each year
      – Failure to submit letter = suspension
Updates

• Embedded assessor process

• IA for DD waiver/DD waiver waitlist
Questions?