


CHAPTER Service Delivery	CHAPTER 02	SECTION 004	SUBJECT 75
SECTION Clinical and Support Services		DESCRIPTION Children's Home Based Services Program	
WRITTEN BY Christina M. Lesnik, M.A. Supervisor	REVISED BY Martha Hall, MA Children's Services Clinical Supervisor & Jenifer Bechtel, Children's Case Management Supervisor	AUTHORIZED BY  Lauren Emmons, ACSW CEO 1/21/24	

APPLICATION:

<input checked="" type="checkbox"/> CMH Staff	<input checked="" type="checkbox"/> Board Members	<input type="checkbox"/> Provider Network	<input checked="" type="checkbox"/> Employment Services Providers
<input checked="" type="checkbox"/> Employment Services Provider Agency	<input checked="" type="checkbox"/> Independent Contractors	<input type="checkbox"/> Students	<input type="checkbox"/> Interns
<input type="checkbox"/> Volunteers	<input checked="" type="checkbox"/> Persons Served		

POLICY:

The Lapeer County Community Mental Health (LCCMH) Home Based Services Program provides intensive home and community based services to children and adolescents with high levels of mental health care needs. Support services are available for families.

STANDARDS:

- A. The Home Based Services Program is a community-based program providing treatment/supports in the home and community by staff identified in the Family/Person-Centered Plan of Service.
- B. The Home-Based Services Program core services are billed as Home-Based Services contacts. Other services may be provided and billed separately. The following activities comprise the core Medicaid Home Based Services:
 - 1. Case management/supports coordination

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2. Individual therapy
 3. Family therapy
 4. Crisis intervention
 5. Identified supportive community agencies (i.e. school, courts, DHS)
- C. The program provides one to five hours of service per week per family. During crisis, additional hours of services are available.
- D. The Family/Person-Centered Plan of Service identifies specific needs of the person served and family and how the provision of services will impact these needs.
- E. Program Goals
1. Promote healthy family functioning.
 2. Support and preserve families.
 3. Keep family units intact whenever possible.
 4. Promote normal development.
 5. Reduce the usage of psychiatric hospitals and other substitute care settings.
 6. Facilitate family reunification in situations where separations have occurred.
 7. Maintain children in the least restrictive and most stable environment in situations where out-of-home placement is necessary.

PROCEDURES:

A. Entry/Re-entry Criteria:

1. Referrals to the program are made to the Children's Clinical Supervisor. If the individual referred has an open case at LCCMH, the primary case holder will review the case with the Children's Clinical Supervisor.

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2. If determined clinically necessary, the case is assigned to a home based clinicians, who develops the Family/Person-Centered Plan of Service in consultation with the other program staff and the family. The family unit is the focus of the treatment.

B. Eligibility Criteria:

Persons served in the Home Based Services Program must be diagnosed with a behavioral and/or mood disorder causing interruptions or limitations in daily life activities. The families served in the Home Based Services Program must meet one or more of the following criteria:

1. An elevated subscale score (20 or greater) on at least two elements of the Child/Adolescent Section of the Child Adolescent Functional Assessment Scale (CAFAS); or
2. An elevated subscale score (20 or greater) on one element of the CAFAS Child/Adolescent Section, combined with an elevated subscale score (20 or greater) on at least one CAFAS element involving Caregiver/Care-giving Resources; or
3. A total impairment score of 80 or more on the CAFAS Child/Adolescent Section.
 - a. A combination of psychiatric symptoms and functional deficits in at least two CAFAS domains:
 1. School / Work
 2. Home
 3. Community
 4. Behavior toward others
 5. Moods / Emotions

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6. Self-harm behaviors
 7. Substance use
 8. Thinking
 9. Family material needs
 10. Family / Social support
- b. A demonstrated history or current difficulty to access service need and/or not making progress and/or recent discharge from residential care to a community living setting needing more support for successful transition due to mental health diagnosis.
4. Person served is at risk for out-of-home placement.
 5. The family / person served support systems are having difficulty relating to and supporting current level of care needed to become successful.
- C. Discharge / Exit Criteria:
1. The following is a list of the discharge criteria for the program:
 - a. The family consistently chooses to not participate in home based services and the development of the Family/Person-Centered Plan of Service.
 - b. The family improves to the point that less intensive programming or case closure is more appropriate.
 - c. The identified person served in the family reaches the age of 18 or 21 (in accordance with the Medicaid Provider Manual) and emancipates from the family.
 2. Discharge planning is a collaborative effort between the home based staff and the family.

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- a. Staff assist the family with arranging the appropriate follow-up services.
 - b. A CAFAS is completed to support a transfer to less intensive LCCMH services or to be closed.
 - c. The primary case holder is responsible for completing an Adverse Benefit Determination letter to show termination of current services. Any decision on decreased services or discharges can be appealed through the agency grievance and appeal process, outlined in LCCMH Policy 04.001.10 Grievance and Appeals and Second Opinion Process.
- D. Home Based Services Program staff must be a Licensed or Limited Licensed Master Social Worker (LMSW or LLMSW) or a Licensed or Limited Licensed Professional Counselor (LPC or LLPC).
1. Bachelor's level mental health professional may assist with case management / supports coordination needs.
 2. An agency prescriber provides medication reviews, psychiatric evaluations, and consultation on a case-by-case basis.
 3. A Parent Support Partner and/or a Youth Peer Support Specialist may provide services as needed.
- E. Home-Based Services staff members engage in assertive outreach measures that assure the person served and family receive the appropriate services and that these services are delivered in collaboration with the family. Close partnerships with other community agencies (i.e., the Michigan Department of Health and Human Services, Public Health Department, Lapeer County Community Collaborative, Family Court, etc.) are maintained to ensure that the services are delivered in coordinated fashion.

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F. The Home-Based Services Program staff members are supervised by the Children's Clinical Supervisor and meet on a weekly basis for case consultation. The Children's Clinical Supervisor meets the requirements of a child mental health professional and reports to the Chief Clinical Officer.

MH & JB:lr

This policy supersedes
#04/11021 dated 04/04/2011.
