

Endorsement Criteria and Service Definitions Sub-Group Of the Community Support Steering Committee

Charge- The sub group is charged with the development of recommendations for the revisions to the endorsement check sheets and instructions for four definitions: Community Support Team, PSR, Intensive In-Home, and Children and Adolescent Day Treatment (MH/SA). The revised documents should provide a strengthened endorsement process that will promote higher quality of service providers.

Task Completion The sub group completed recommendations for the revision of the Check Sheets for each of the Services indicated.

Discussion- The sub group had several discussions throughout the course of the meetings as noted in minutes. The discussions were unable to yield a group consensus for the purpose of the presentation since the group was ever changing in its composition. Additionally, there were many expectations that were different for this meeting and the variety of people definitely wanted different outcomes not all of which resulted in 'improving the quality of services. It stands to reason that there were many competing agendas, from so many different directions, making this work exceedingly difficult for such a large group. Some of the topics discussed that might be considered for further exploration by the Divisions included:

- Lack of Consistency of LMEs in the Endorsement processes from LME to LME
- To ensure quality treatment for consumers consideration of a Clinical Interview as a component of the endorsement process for local site and service specific endorsements and at the Comprehensive Provider level should that emerge as a type of provider in our system.
- Redefining what is meant by "site" in the current endorsement policy.
- Consideration of the use of fundamental business practices such as Cost and Market Analysis as components of endorsement both at the local site and service specific level and Comprehensive provider level.
- Lack of LME experience in the enhanced service definitions applications.
- Consideration to apply the same Access to Care time frame requirements for Urgent, Emergent and Routine that are in the LME performance contract to the endorsement of providers for enhanced services at the local site and service specific level.
- Include in the program/clinical section of the endorsement check sheet for all definitions the requirements for the provider to integrate primary health care and behavioral health consistent with state policy and a demonstration of evidence of compliance with integration at the consumer level on the 60 day follow up.
- Lack of enforcement of requirements for other payer mixes other than Medicaid contract for many providers resulting in financially unstable provider communities.