On October 19, 2019, in Part III of the PA Code, the Office of Mental Health and Substance Abuse Services (OMHSAS) promulgated Chapter 1155, Intensive Behavioral Health Services (IBHS). IBHS regulations will now govern the provision of most behavioral health services available to children and youth in Philadelphia which were previously referred to as Behavioral Health Rehabilitation Services (BHRS). This Bulletin will communicate expectations for ending current behavioral health service authorizations over the next 365 days and transitioning to IBHS, if clinically necessary.

Individuals with a current prescription for BHRS that extends past January 19, 2020, will be allowed to continue to receive BHRS services until the end of that authorization period. During the transition, it is important to ensure those individuals previously authorized do not experience service disruption. Following the effective date of IBHS, providers may choose to prescribe continued services for the member under available IBHS categories, if clinically necessary. Providers may continue to prescribe BHRS until they are a licensed IBHS provider.

Since the procedures to access IBHS differ significantly from what was previously required to access BHRS, CBH is aligning the processes by allowing for BHRS to be prescribed with a few changes. Effective January 19, 2020, requests for BHRS shall be made in the same way as IBHS. This is intended to support our providers in adjusting to the new IBHS process and to relieve the pressure of concurrently maintaining two different systems.

Changes to current procedures are as follows:

1. **Authorization Periods:**

   Due to the impending transition to IBHS, effective January 19, 2020, all authorizations for traditional BHRS will last for no more than six months, regardless of a child’s diagnosis. School Therapeutic Services (STS), an exception program under BHRS, can be prescribed and delivered until the last day of the 2019-2020 academic year (e.g. June 12, 2020, for most school districts). CBH will issue instructions for prescribing services in the 2020-2021 academic year at a later date. Other BHRS exception programs (e.g. early childhood programs, host homes, after-school programs) will continue to be authorized for the same time period as is current, per the approved service description and agreement with CBH.
2. **Written Orders and Assessment for IBHS, Traditional BHRS and STS:**

   Effective January 19, 2020, CBH will accept written orders to initiate IBHS, BHRS, and Exception Services. All written orders from in-network providers must be documented on the CBH Written Order Form (see attachment). Providers initiating IBHS, BHRS, and Exception Services must also comply with regulations 5240.21 governing Assessment and 5240.22 related to development of an Individualized Treatment Plan (ITP), including all associated timeframes.

   Please note that a written order, in and of itself, is not a billable service, but may be generated from a face-to-face billable activity with a qualified professional (e.g. 300-1, Psychological Evaluation or 300-51, Non-MD Biopsychosocial Evaluation).

3. **Interagency Service Plan Team Meetings**

   Effective January 19, 2020, Interagency Service Plan Team Meetings (ISPTs) will no longer be required to authorize BHRS. ISPTs shall continue to take place as clinically indicated or at the request of the service recipient or any member of the treatment team. CBH will continue to require ISPTs to take place prior to authorizing Community Residential Rehabilitation—Host Home (CRR-HH) and Early Childhood Treatment Programs due to the more restrictive nature of these programs.

4. **Elimination of Comprehensive Biopsychosocial Evaluations (CBEs) and Re-Evaluations (CBRs)**

   Effective January 19, 2020, CBH will no longer require a CBE or CBR in the Life Domain Biopsychosocial format to access BHRS or IBHS. Only a Written Order is required. The minimal required elements for a Written Order are described in § 1155.31 through 1155.36 and are outlined in the CBH Written Order Form (see attachment). Those minimal elements include:

   1. Written within 12 months prior to the initiation of IBHS
   2. Written by a licensed physician, licensed psychologist, certified registered nurse practitioner, or other licensed professional whose scope of practice includes the diagnosis and treatment of behavioral health disorders and the prescribing of behavioral health services, including IBHS
   3. Includes a current behavioral health disorder diagnosis listed in the most recent version of the DSM or ICD
   4. Clinical information to support the medical necessity of the service(s) ordered
   5. The maximum number of hours of each service(s) per month
   6. The settings in which services may be provided
   7. The measurable improvements in the identified therapeutic needs that indicate when services may be reduced, changed or terminated
The CBE/CBR will be replaced with a series of assessments, including Psychiatric Assessment, Psychological Assessment (non-MD), and Master’s Level Assessment. Please see Bulletin 19-24.

Please submit questions about this Bulletin to your Provider Relations Representative.