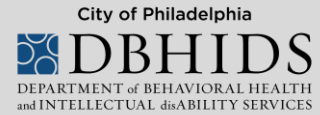




## Provider Bulletin 19-24 December 19, 2019



### Accessing Intensive Behavioral Health Services (IBHS)

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 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). All current BHRS Providers are expected to be compliant with these regulations within 90 days, or by January 19, 2020. Additionally, all providers will be expected to obtain a state-issued license to provide IBHS within the next 365 days, on a rolling basis. This Bulletin will communicate expectations for accessing IBHS for CBH members.

To request IBHS services, effective January 19, 2020, providers must comply with Chapters 1155 and 5240 governing IBHS services. The following pathways are offered as acceptable routes for a member to be authorized for IBHS Individual or IBHS Group Services. Please note that, per Bulletin 19-23, these pathways will also be used to access BHRS programs effective January 19, 2020. All in-network BHRS and IBHS providers must submit requests to CBH electronically. All other providers may submit requests via fax to 215-413-7184.

#### **IBHS Pathway 1: Cross-setting Assessment**

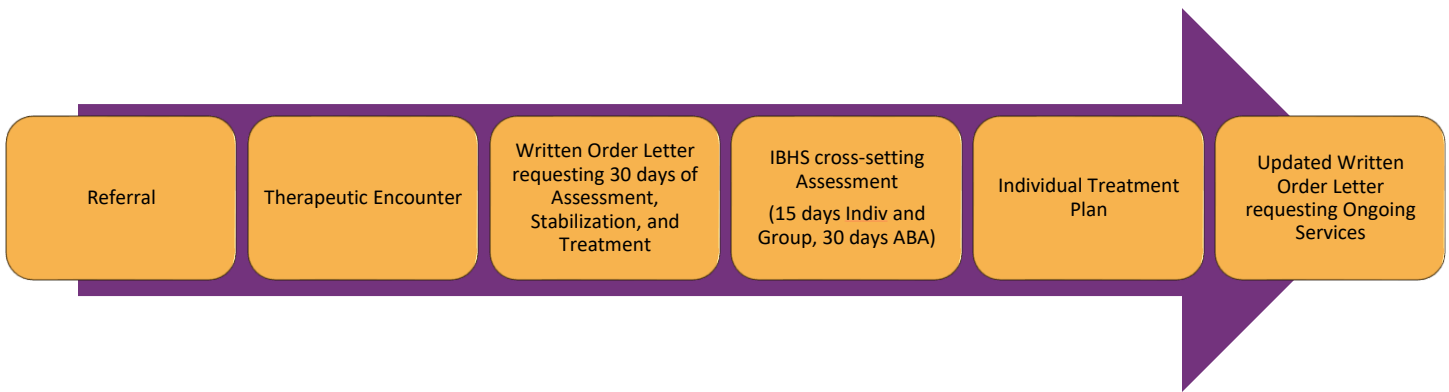
##### **Use Pathway 1 to Request: IBHS Individual Services, ABA, Traditional BHRS, and STS**

To access IBHS for a CBH member, complete Part A of the Written Order Letter for Assessment, Stabilization, and Treatment Initiation (see attachment). Cross-setting assessment is the preferred pathway and most appropriate route for any licensed prescriber to order IBHS services for a CBH member, regardless of that prescriber's experience with directly providing the service. This is also appropriate for licensed prescribers who do not work within behavioral service agencies and may be unfamiliar with the full continuum of care available to children and families.

Part A of the Written Order Letter may be completed by any licensed professional who may prescribe IBHS and will ensure the member receives a comprehensive assessment to determine the most clinically appropriate services and amounts. For providers who do not offer the services that the member is being recommended for, select a service type from the list and submit the completed form to CBH. CBH will then facilitate referral to an appropriate IBHS provider.

Providers who accept referrals for IBHS are expected to initiate the assessment within 14 days of the receipt of the Written Order Letter and follow the timeframes enumerated in 5240.21. Once the assessment is completed, an Individualized Treatment Plan (ITP) meeting must then take place within 15 days. Following the ITP, Part B of the Written Order Letter should be completed and submitted to CBH. This will result in authorization for continued IBHS services beyond the initial assessment and stabilization period, as medically necessary. Please note that any prescription for Therapeutic Support Staff- School (TSS-S), Therapeutic Support Staff- Non-School (TSS-NS), Applied Behavior Analysis Therapeutic Support Staff-School (ABA TSS-S), Applied Behavior Analysis Therapeutic Support Staff-Non School (ABA TSS-NS), Behavioral Health Technician (BHT), or Behavioral Health Technician-Applied Behavior Analysis (BHT-ABA) will minimally require a Functional Behavior Assessment (FBA), Functional Analysis (FA), and/or skills assessment to be completed during the assessment phase.

**Fig 1. IBHS Pathway 1: Cross-setting Assessment**



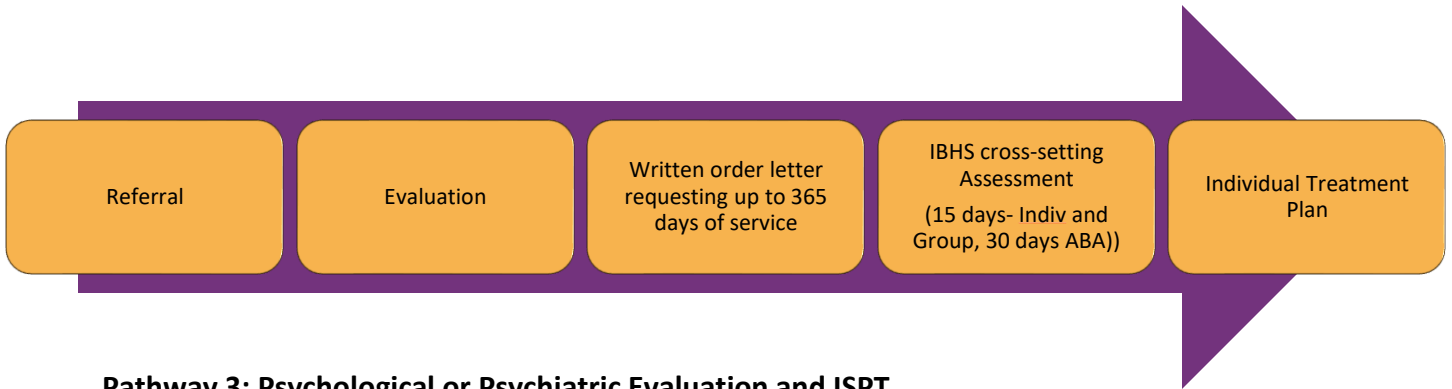
**IBHS Pathway 2: Psychological, Psychiatric, or Master’s Level Evaluation**

**Use Pathway 2 to Request: Professional services only, IBHS individual services, IBHS Group Services, and BHRS Exception Programs (other than STS, Early Childhood Treatment Programs, and CRR-HH)**

Following an office-based, face-to-face assessment, the licensed prescriber may also compete Part A of the Written Order Letter for Assessment, Stabilization, and Treatment Initiation (see attachment). This option should be utilized for members in need of professional services only, particularly evidence-based mobile therapy, IBHS individual services, IBHS group services, or an existing BHRS Exception program.

Per IBHS regulations, additional evaluations will need to take place during the initiation of services in home, school, or community and will inform the development of the ITP, in compliance with 5240.21. No additional time will be authorized for these assessment activities.

**Fig 2. IBHS Pathway 2: Psychological, Psychiatric, or Master’s Level Evaluation**

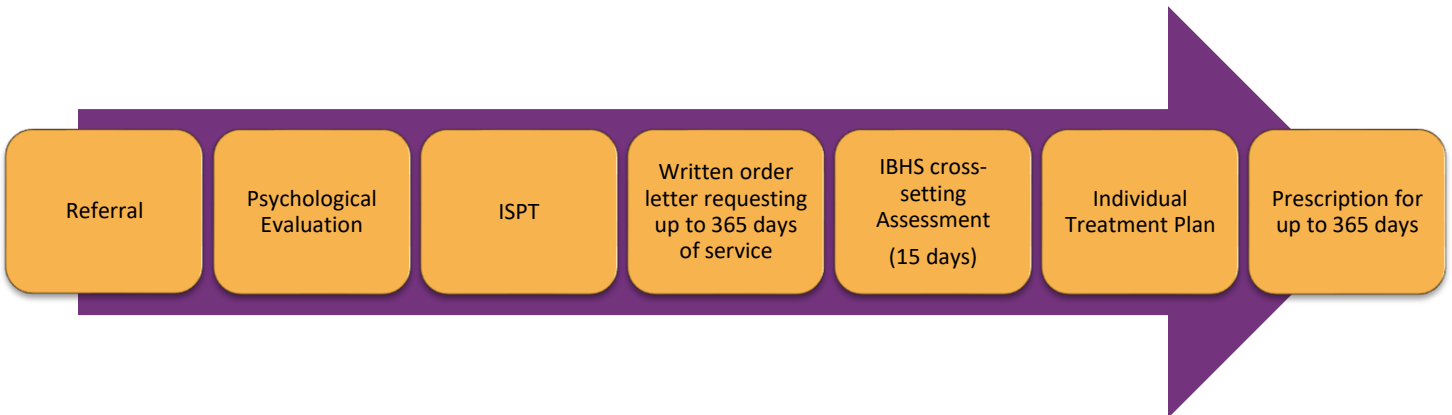


**Pathway 3: Psychological or Psychiatric Evaluation and ISPT**

**Use Pathway 3 to Request: Early Childhood Treatment Programs and CRR-HH**

Part A of the Written Order Letter may be completed following a Psychological or Psychiatric Evaluation and ISPT Meeting. These elements will continue to be required for these levels of care.

**Fig 3. Pathway 3: Psychological or Psychiatric Evaluation and ISPT**



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