

WCHO		<i>Policy and Procedure</i>	
		<i>Co-occurring Provider Certification Policy</i>	
Department: Clinical Services Author: Marci Scalera		Local Policy Number (if used)	
Revision Date	Approval Date	Implementation Date	
	9/6/06		
Archive Information			
Date:			
Reason:			

I. PURPOSE

To establish a designation for providers who apply for and meet specific criteria for Co-Occurring Capable or Co-Occurring Enhanced services within their agencies. To offer an increased rate incentive for providers who earn the specific designation.

II. POLICY

The WCHO encourages the development of certified co-occurring capable or enhanced providers through the provision of training, program verification and designated increased rate incentives as defined by WCHO Board action.

III. APPLICATION

All providers enrolled on the WCHO Substance Abuse Specialty Services Network Panel

IV. DEFINITIONS

Co-Occurring Disorders (Cod): Individuals who have at least one mental disorder as well as an alcohol or drug use disorder. While these disorders may interact differently in any one person, at least one disorder of each type can be diagnosed independently of the other.

Capable Criteria:

- Routinely accept clients who have COD mental and substance related disorders
- Able to meet client needs as long as their psychiatric disorders are sufficiently stabilized and the clients are capable of independent functioning to such a degree that their mental disorders do not interfere with participation in addiction treatment
- Address COD in their policies and procedures, assessment, treatment planning, program content and discharge planning
- Arrangements are in place for coordination and collaboration with mental health services
- Can provide psychopharmacologic monitoring and psychological assessment and consultation on site or by well-coordinated consultation off site

Enhanced Criteria:

- Can accommodate clients with COD who may be unstable or disabled to such an extent that specific psychiatric and mental health support, monitoring and

accommodation are necessary in order for the individual to participate in addiction treatment

- Clients are not so acute or impaired as to present a severe danger to self or others, nor do they require 24 hour psychiatric supervision
- Staffing includes psychiatric and mental health clinicians as well as addiction treatment professionals. Cross training is provided to all staff. Programs tend to have relatively high ratios of staff to clients and provide close monitoring of clients who demonstrate psychiatric instability and disability.
- Policies, procedures, assessment, treatment planning and discharge planning accommodates COD issues
- COD specific and mental health symptom management groups are incorporated into addiction treatment. Motivational enhancement therapies are more likely to be available, particularly in outpatient settings.
- Close coordination or integration with a mental health program that provides crisis back-up services and access to mental health case management and continuing care.

V. EXHIBITS

- A. Attachment A: Application Co-Occurring Capable or Enhanced Program Designation
- B. Attachment B: Substance Abuse Co-Occurring Programs: Guidelines for distinction of Enhanced Rates
- C. Attachment C: Certificates

VI. REFERENCES

Reference:	Check if applies:	Standard Numbers:
42 CFR Parts 400 et al. (Balanced Budget Act)		
45 CFR Parts 160 & 164 (HIPPA)		
42 CFR Part 2 (Substance Abuse)		
Michigan Mental Health Code Act 258 of 1974		
JCAHO- Behavioral Health Standards		
MDCH Medicaid Contract		
MDCH Substance Abuse Contract		
Michigan Medicaid Provider Manual		
PIHP Policy Review Schedule		
Policy Tracking Form		
Co-Occurring Disorders Educational competency Assessment Tool (CODECAT); Zialogic; Innovative Strategies for Behavioral Health Systems; Christie A. Cline, M.D., M.B.A., P.C.	X	

Comorbidity Program Audit And Self-Survey For Behavioral Health Services (COMPASS); Zialogic; Innovative Strategies for Behavioral Health Systems; Christie A. Cline, M.D., M.B.A., P.C.	X	
Us Department Of Health And Human Services; Substance Abuse Mental Health Services Administration, REPORT TO CONGRESS: On the Prevention and Treatment of Co-Occurring Substance Abuse Disorders and Mental Disorders; November 2002	X	

VII. PROCEDURES

WHO

DOES WHAT

Provider	<ol style="list-style-type: none"> 1. Completes an annual COMPASS agency assessment to evaluate the existing capabilities, needs and expertise of the organization. 2. Has key staff complete the CODECAT or other approved self-assessment tool to assess readiness for co-occurring clinical work. 3. Makes necessary adjustments to policies, procedures, staff training, staffing patterns, operational and referral agreements; psychiatric consultation and other agency administrative and clinical modifications as identified in self assessments. 4. Completes the "Application Co-Occurring Capable or Enhanced Program Designation" (Attachment A) and submits to the Provider Relations Unit.
Provider Relations Unit	<ol style="list-style-type: none"> 1. Accepts application and schedules site visit in consultation with the substance abuse clinical review team.
PRU/SA Clinical Review Team	<ol style="list-style-type: none"> 1. Conducts an onsite review of policies, practices and clinical records based on the "Substance Abuse Co-Occurring Programs: Guidelines for distinction of Enhanced Rates" (Attachment B). 2. Verifies that provider meets Co-Occurring Capable or Enhanced criteria. 3. Notifies WCHO Board of provider application and certification level. 4. Adjusts rate according to certification level and makes necessary change in Encompass System, issues a contract amendment. 5. Issues a certificate designating the agency as Co-occurring Capable or Enhanced. 6. Informs WCHO Departments of change in status.

Attachment A

**APPLICATION
CO-OCCURRING CAPABLE OR ENHANCED
PROGRAM DESIGNATION**

PROVIDER:	
PRIMARY CONTACT PERSON:	
PHONE:	
TYPE OF CERTIFICATION YOU ARE REQUESTING:	<input checked="" type="checkbox"/> CAPABLE <input checked="" type="checkbox"/> ENHANCED
TYPE OF SERVICES PROVIDED:	<input type="checkbox"/> OUTPATIENT <input type="checkbox"/> INTENSIVE OUTPATIENT <input type="checkbox"/> INTENSIVE OUTPATIENT WITH DOMICILE <input type="checkbox"/> DETOX <input type="checkbox"/> SHORT TERM RESIDENTIAL <input type="checkbox"/> LONG TERM RESIDENTIAL <input type="checkbox"/> METHADONE MAINTENANCE <input type="checkbox"/> OTHER:
POPULATIONS SERVED:	<input type="checkbox"/> WOMEN'S SPECIFIC <input type="checkbox"/> ADOLESCENTS <input type="checkbox"/> ADULTS <input type="checkbox"/> GERIATRIC <input type="checkbox"/> OTHER --DESCRIBE:
COMPASS SCORE	
WELCOMING: Describe your agency's efforts to provide a "welcoming" environment:	
POLICIES: Describe policy(s) relative to COD	
PSYCHIATRIST: Describe type of psychiatric support	<input type="checkbox"/> Consultant (call when need arises) <input type="checkbox"/> Staff Psychiatrist (has office hours) <input type="checkbox"/> Referral agreement with clinic or other mental health program
LEVEL OF	<input type="checkbox"/> Board Certified in Addictions

PHYSICIAN TRAINING	<input type="checkbox"/> Board Certified Psychiatry with Addictions Experience <input type="checkbox"/> Board Certified Psychiatry <input type="checkbox"/> Other																																	
STAFFING: List staff working with the COD population and their qualifications																																		
STAFF COMPETENCY ASSESSMENT: How many of your staff has completed a self assessment? What kind and when?	<table border="1"> <thead> <tr> <th data-bbox="435 504 623 533">Staff:</th> <th data-bbox="623 504 1159 533">Self Assessment?</th> <th data-bbox="1159 504 1385 533">When?</th> </tr> </thead> <tbody> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> </tbody> </table>	Staff:	Self Assessment?	When?																														
Staff:	Self Assessment?	When?																																
STAFF TRAINING: List number of staff and type of training provided for knowledge of Psychiatric medications																																		
MEDICATIONS: How does your agency handle meds for clients?																																		
SYMPTOM MONITORING: Describe process for managing symptoms																																		
CASE MANAGEMENT: Describe case management process																																		
CRISIS INTERVENTION: Describe your CI process																																		
CONTINUED CARE: Describe how you will manage the continued need for aftercare or post																																		

resolution of the addiction issues	
REFERRAL AGREEMENTS: List any agreements with mental health agencies and hospitals	
If you are a Co—Occurring Capable provider, what would you need to become Enhanced?	
OTHER INFORMATION:	

Attachment B:

**SUBSTANCE ABUSE
CO-OCCURRING PROGRAMS
Guidelines for Distinction of Enhanced Rates**

CAPABLE PROGRAM	ENHANCED PROGRAM
Compass Score <u> 2-3 </u> (rated independently)	Compass Score <u> 4-5 </u> (rated independently)
Organization emphasizes a welcoming, empathetic, integrated approach	Organization always emphasizes a welcoming, empathetic, integrated approach
Policies should address co-occurring issues	Policies would routinely accept co-occurring clients
Assessment process involves a brief mental health assessment	Mental health assessment is incorporated into bio-psychosocial that is designed for both MH and SA
Psychiatric Consultation to advise program staff; program can refer client out and coordinate psychiatric services; staff must be able to assess behaviors and symptoms	Staff Psychiatrist who can manage clients at the site has office hours during week. Should have experience in treating addictive disorders.
Medications: can accept clients with prescribed mental health meds; can assist client in obtaining scripts from consultant or other psychiatrist in the community	Medications: Can assist client in obtaining meds prescribed by program psychiatrist; able to connect with patient assistance; has sample meds...
Staff has knowledge of medications or agency has an identified person who can offer information about medication	All staff working with COD's have documented training on psychiatric medications and information about use and purpose
Symptom monitoring: able to monitor MI symptoms and make appropriate referral	Symptom Monitoring: able to manage symptoms in house where appropriate, i.e. psychomotor agitation, thought disorder; labile affect; etc.
Case management: able to coordinate with mental health case manager or monitor connection to services in the community	Case management: Provides case management services i.e. linking and coordinating with external resources; monitoring involvement in activities.
Counselors meet minimum requirements Bachelors with CAC; has training in mental health services	Masters level clinicians provide direct care; has documented experience in substance abuse and Mental Health (knowledge and skills to work with both populations)
Specialty Groups: provides or refers out for specialty groups i.e. trauma; symptom management; bipolar group; etc.	Specialty Groups: Provides specialty groups; may be able to provide groups outside of the main site. Hosts alumni groups/self-help groups.
Can refer to Mental health services once substance abuse problems are resolved.	Able to provide longer term supportive therapy once substance abuse is stabilized.

ATTACHMENT C:

