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# Public Workshop Basic Skills Training (BST)



# Objectives

- What is a Rehabilitative Mental Health Service (RMH)
- What is Basic Skills Training (BST)
- Proposed Changes
  - Tiered structure for services



## What is a Rehabilitative Mental Health Service

- Basic Skills Training (BST) is a Rehabilitative Mental Health (RMH) service.
  - RMH services are goal oriented outpatient interventions that target the maximum reduction of mental and/or behavioral health impairments and strive to restore the recipient's to their best possible mental and/or behavioral health functioning. RMH services must be coordinated in a manner that is in the best interest of the recipient. RMH services may be provided in a variety of community and/or professional settings. The objective is to reduce the duration and scope of care to the least intrusive level of mental and/or behavioral health care possible while sustaining the recipient's overall health.



# What is Therapeutic Design

- **Therapeutic Design**: RMH services are adjunct (enhancing) interventions designed to complement more intensive mental health therapies and interventions. While some rehabilitative models predominately utilize RMH services, these programs must demonstrate the comprehensiveness and clinical appropriateness of their programs prior to receiving prior authorization to provide RMH services. RMH services are time-limited services, designed to be provided over the briefest and most effective period possible. Service limitations are designed to help prevent rehabilitation diminishing return by remaining within reasonable age and developmentally appropriate daily limits. Also taken into consideration are other social, educational and intensive mental health obligations and activities. RMH services are planned and coordinated services.



# What is Basic Skills Training

- BST services are RMH interventions designed to reduce cognitive and behavioral impairments and restore recipients to their highest level of functioning. BST services are provided to recipients with age and developmentally inappropriate cognitive and behavioral skills. BST services help recipients acquire (learn) constructive cognitive and behavioral skills through positive reinforcement, modeling, operant conditioning and other training techniques. BST services teach recipients a variety of life skills.



# BST (continued)

- Basic living and self-care skills: Recipients learn how to manage their daily lives, recipients learn safe and appropriate behaviors;
- Social skills: Recipients learn how to identify and comprehend the physical, emotional and interpersonal needs of others-recipients learn how to interact with others;
- Communication skills: Recipients learn how to communicate their physical, emotional and interpersonal needs to others. Recipients learn how to listen and identify the needs of others;
- Parental training: Parental training teaches the recipient's parent(s) and/or legal guardian(s) BST techniques. The objective is to help parents continue the recipient's RMH care in home and community based settings. Parental training must target the restoration of recipient's cognitive and behavioral mental health impairment needs. Parental training must be recipient centered;
- Organization and time management skills: Recipients learn how to manage and prioritize their daily activities; and/or
- Transitional living skills: Recipients learn necessary skills to begin partial independent and/or fully independent lives.



# What is a Non-BST Service

- RMH services are not custodial care benefits for individuals with chronic conditions but should result in a change in status;
- Custodial care and/or routine supervision: Age and developmentally appropriate custodial care and/or routine supervision including monitoring for safety, teaching or supervising hygiene skills, age appropriate social and self-care training and/or other intrinsic parenting and/or care giver responsibilities;
- Maintaining level of functioning: Services provided primarily to maintain a level of functioning in the absence of RMH goals and objectives, impromptu non-crisis interventions and routine daily therapeutic milieus;
- Case management: Conducting and/or providing assessments, care planning/ coordination, referral and linkage and monitoring and follow-up;
- Habilitative services;
- Services provided to individuals with a primary diagnosis of intellectual disabilities and related conditions (Unless these conditions co-occur with a mental illness) and which are not focused on rehabilitative mental and/or behavioral health;



# What is a Non-BST Service (cont)

- Cognitive/intellectual functioning: Recipients with sub-average intellectual functioning who would distinctly not therapeutically benefit from RMH services;
- Transportation: Transporting recipients to and from medical and other appointments/services;
- Educational, vocational or academic services: General and advanced private, public and compulsory educational programs; personal education not related to the reduction of mental and/or behavioral health problem; and services intrinsically provided through the Individuals with Disabilities Education Improvement Act (IDEA);
- Inmates of public institutions: To include detention facilities, forestry camps, training schools or any other facility operated primarily for the detention of children who are determined to be delinquent;





# What is a Non-BST Service (cont)

- Room and board: Includes housing, food, non-medical transportation and other miscellaneous expenses, as defined below:
  - 1. Housing expenses include shelter (mortgage payments, rent, maintenance and repairs and insurance), utilities (gas, electricity, fuel, telephone, and water) and housing furnishings and equipment (furniture, floor coverings, major appliances and small appliances);
  - 2. Food expenses include food and nonalcoholic beverages purchased at grocery, convenience and specialty store;
  - 3. Transportation expenses include the net outlay on purchase of new and used vehicles, gasoline and motor oil, maintenance and repairs and insurance;
  - 4. Miscellaneous expenses include clothing, personal care items, entertainment and reading materials;
  - 5. Administrative costs associated with room and board;



# What is a Non-BST Service (cont)

- Non-medical programs: Intrinsic benefits and/or administrative elements of nonmedical programs, such as foster care, therapeutic foster care, child welfare, education, child care, vocational and prevocational training, housing, parole and probation and juvenile justice;
- Services under this chapter for a recipient who does not have a covered, current ICD diagnosis;
- Therapy for marital problems without a covered, current ICD diagnosis;
- Therapy for parenting skills without a covered, current ICD diagnosis;
- Therapy for gambling disorders without a covered, current ICD diagnosis;
- Support group services other than Peer Support services;
- More than one provider seeing the recipient in the same RMH intervention with the exception of CI services;
- Respite care;
- Recreational activities: Recreational activities not focused on rehabilitative outcomes;
- Personal care: Personal care services intrinsic to other social services and not related to RMH goals and objectives; and/or
- Services not authorized by the QIO-like vendor if an authorization is required according to policy.



# Proposed Policy Changes

- Change the service limitations for BST services to titrate down over a period of time:
  - Two (2) hours per day for the first 90 days.
  - One (1) hour per day for the next 90 days.
  - Services needed beyond those 180 days would require a Prior Authorization meeting Medical Necessity.
  - Services above the above mentioned Service Limitations would require a Prior Authorization meeting Medical Necessity.
- Service limitations are based on a rolling calendar.
- Services must be based on consecutive months with no break in service, otherwise a Prior Authorization will be required.



Questions?