

APPENDIX I



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Supervisory Certification Certification Attestation Application

Supervisory Certification are a major component of a wider workforce development strategy for the State of New Mexico's Behavioral Health service delivery system. The purpose of this certification process is for Behavioral Health Agencies (BHAs) to demonstrate that there is ongoing education, learning and oversight of clinical supervisors and non-independently licensed (NIL) practitioners relative to consultation and supervision, rendering services, and in order to be eligible for reimbursement for services from Medicaid and non-Medicaid Funds.

Below is a checklist of specific criteria required under the Supervisory Certification policy. Each area is subject to review and should be substantiated by an organization's identified processes as delineated in policy and procedures (P&Ps), employee handbook, and/or training curriculum. The glossary at the end of this application will further define terminology used herein.

Be sure to follow all of the application's instructions and provide the section and page number that demonstrates compliance with each criteria that can be found in your policies and procedures, handbooks, and/or training manual. There is also a comments field to elaborate on how supervisory expectations and training is operationalized by supervisors and NILs so to integrate it effectively into daily clinical practice. This certification application, once approved, will result in a site visit and meeting with the organization's CEO and Clinical Supervisors.

Organization / Agency Information

Agency/Provider Organization: _____

Administrative Office Address: _____

Main Contact/Clinical Director or CEO: _____

Email: _____ Phone: _____

Agency Medicaid Enrollment ID: _____
(Must be enrolled as a BHA-432 prior to August 31, 2015)

Agency NPI: _____

General instructions

*Please respond to all items (#1- 14) and complete the roster. For those items requiring a P&P please attach your P&P and delineate the **section and page number** of your P&P where you have operationalized each of the items. Please use as much space as necessary to adequately respond to each item.*

AGENCY

1. Provide a summary of services provided by your agency (age of clients, type of interventions, specialty populations, specialty interventions, etc.). If you have identified a specialty please describe additional training and/or certification attained in according to state or national requirements/guidelines.

2. **Submit P&P** with a detailed description of your process for verifying and tracking appropriate level licensures noted for each of the Clinical Supervisors and NILs. Include time frames for these activities and specific activities (verifying on the Licensing Registry, CEU requirements for supervision, renewal dates etc.) _____pg./sec. reference
3. **Submit P&P** addressing record keeping process for employee/contractors files. Please include in your description the contents and maintenance of records (background checks, qualifications, transcripts, licensure, job description, written contract etc.) _____pg./sec. reference
4. **Submit P&P** describing the process by which the appropriate clinical supervision will be provided and documented. Address in this P&P adherence to guidelines specified per applicable licensing board or regulatory entity. Include specifics as to frequency, duration, group supervision (# of participants/supervisees allowed), individual supervision to be provided. _____pg./sec. reference

CLINICAL PRACTICE/TRAINING

5. **Submit P&P** describing the ongoing education and training of NILs. Please reference where in P&P each item below is identified. Include in policy the following required training/education to be provided to Nils and supervisors:
 - treatment planning (intake to discharge)
 - crisis planning with consumers
 - documentation (requirements)
 - clinical reasoning/case formulation
 - clinical practice (roles and responsibilities)

- cultural awareness
- trauma informed care
- critical incident reporting/ abuse, neglect and exploitation
- resource information and referral
- crisis management/local, state and national help/hotlines, county emergency plans and procedures
- boundaries with clients
- code of ethics as applicable from associations APA, ACA, or, NASW, state regulations, and national standards
- continuum of care (Termination of Care, Referral, End of life Care, advance directives, psychiatric advance directives)
- rendering services in alignment with applicable state laws and regulations (Medicaid and non-Medicaid funds), documentation requirements, service definitions, and CPT code allowances
- self-care
- Informed Consent and Disclosure of protected information guidelines
- Maintaining privacy/confidentiality
- Client Records (securing client information-record keeping)

6. **Submit P&P** describing the ongoing evaluation of NILs and supervisors. Include in policy timeframes for evaluation and creation of a professional development plan. Describe how demonstrate competency and provide details on how you will evaluate Nils and Supervisors.

Enrollment Requirements

7. Please describe the agency’s understanding of ensuring clinicians have (for each item identify time frames for completion (i.e. at hire, within 30 days, within 90 days, etc.):
- CAQH
 - NPI per the NPPES
 - Medicaid provider status
 - Rostering with MCO’s

Required Documents

8. Provide a copy of the following:
- Copy of all clinical licenses (independent and non-independent)
 - Proof of clinical supervisor status from the appropriate board

- Policy & Procedure describing the agencies requirements surrounding liability insurance for NILs and supervisors.
- Job Description for Nils (include qualifications)
- Job Description for Supervisor (include qualifications)
- Contract template (documentation of agreement with licensed clinicians to include supervisory duties and scope of services rendered).
- Form to be used in documenting supervision of Nils

9. Describe in detail the orientation process for new employees to ensure that providers have working knowledge of the agency’s policies and procedures. This could include an employee handbook of applicable, and/or other relevant materials? Are these reviewed annually/regularly?

Facility

When conducting site visit, you will be asked to discuss items 10-15. Please describe the measures in place to ensure a safe environment and compliance to the items below. If this is addressed in a P&P please supply the section, page number.

10. Appropriate accommodations and rooms for supervision, monitoring, and maintaining consumer confidentiality.

11. Emergency evacuation routes posted.

12. Walk through the process of intake, view therapy rooms, note any safety issues.

13. How does the environment support trauma informed care (i.e. lighting, client and staff safety, and accessibility)?

14. Demonstrate ADA compliance.

15. Are hours of operation clearly posted? Describe after hour services/emergency services and resources. Describe access to services.

Attestation

I certify that the responses in this attestation and certification application, including referenced information in the document, are accurate, complete, and current as of this date. I and my agency providers have read and understand the BIL4NILs Clinical Supervision Policy, state regulations and statutes relative to rendering and seeking reimbursement for services through the Human Services Department and Behavioral Health Services Division of the State of New Mexico. All supervisors have been trained to provide appropriate clinical supervision on the above listed items and read and understand our agency Policies and Procedures. All providers practicing in the above noted agency are in compliance with the applicable state board licensing regulations according to their licensure.

Rosters and relative attestation must be updated if there is a change in staffing. Updates must occur both with the BHSD and the MCO's with which an agency is contracted according to each MCO's policies and procedures. RETURN FORM and any applicable P&P to: bilfornil.bhsd@state.nm.us

Agency Name and NPI

Print Agency Director/CEO

Signature Agency Director/CEO

Date

Approved by HSD

Mika Tari, LMSW, Clinical Services Manager

Date

Glossary of Terms

Agency – the organization that is licensed as a BHA.

BH – Behavioral Health.

BHA-432 – Behavioral Health Agency-432 as defined by the Medical Assistance Division (MAD) Behavioral Health Provider Type list. The number designation is a part of a provider type classification system that is utilized by MAD for Medicaid enrollment with Xerox.

BHSD – Behavioral Health Services Division. A division of the State of New Mexico Human Services Department (HSD) overseeing BH providers in the state primarily for adult prevention, treatment, and recovery programs and services.

BIL4NILs – Billing for non-independently licensed practitioners.

CAQH – Council for Affordable Quality Healthcare.

Clinical Supervisor – Independently licensed practitioner or clinician. The reference in this document is specific to clinicians who have acquired a valid license to practice and oversee those who are NILs in the field of Behavioral Health by a State of New Mexico official licensing board as outlined by New Mexico Statutes and Scope of Practice and other specific Rules and Laws of the respective board.

Facility – Used interchangeably with Agency or Organization in reference to the physical location of that entity.

LOD – Letter of Direction. These are letters from the State to MCO's or other entities giving instruction on allowances or restrictions in terms of practice and delivery of services within their provider networks or internal practices.

MCO – Managed Care Organization. In the case of BH providers and services, the MCO contracts with the HSD to reimburse for services rendered under Medicaid.

NIL – Non-independently licensed practitioner or clinician. The reference to NILs in this document and BIL4NILs are clinicians who have acquired a valid license to practice in the field of Behavioral Health by a State of New Mexico official licensing board as outlined by New Mexico Statutes and Scope of Practice.

NPI and NPPES – National Provider Identifier and National Plan and Provider Enumeration System.

P&P – Policies and Procedures. As referenced in this document can include the agency policies and procedures, the training curriculum relative to staff orientation, or employee handbook.

Practitioner / Clinician – State of New Mexico boards licensed clinician able to render services under Medicaid or other state funds for specific services within Behavioral Health according to New Mexico state Statute and Licensing board regulations Scope of Practice.

Provider – This term is used interchangeably to refer to an organization/agency or the individual practitioner.

Rule or Regulation – New Mexico State or Federally applicable legal Statutes, Administrative Codes, including State Departmental Policies and Procedures for licensing or certification purposes.

SOW/SOP – Scope of Work or Scope of Practice.

Supplement – A Supplement is an add-on of information or a directive to a contract obligation between a state entity and for example the MCOs.

BIL4NILs Clinical Supervision Oversight

RESOURCES AND INFORMATION

For NM Behavioral Health (BH) Providers

State of New Mexico Behavioral Health Services Site – Network of Care

<http://newmexico.networkofcare.org/mh/>

Featuring:

State-wide services and provider directory with interactive map

(It is important for all providers to ensure that their information is entered and updated as appropriate)

New Mexico Behavioral Health Collaborative information

New Mexico Prevention

Consumer and Family Services

BH Provider Guide for Clinical Practice in NM – *(currently under construction)*

For veterans:

<http://newmexico.networkofcare.org/Veterans/>

Behavioral Health Provider Association of New Mexico (BHPA)

The provider's voice and attendance at regular meetings with the NM HSD/BHSD to discuss system relevant topics and updates. To inquire about membership please contact: Behavioral Health Providers Association of NM, RE: Membership, 2400 Wellesley Drive, NE., Albuquerque, NM 87107

New Mexico Crisis and Access Line / Peer Warm-line

<http://www.nmcrisisline.com/>

There may be applications available for agencies for after-hours-coverage. For information contact bilfornil.bhsd@state.nm.us

Human Services Department Provider Information

<http://www.hsd.state.nm.us/providers/Default.aspx>

Medical Assistance Division (MAD)

http://www.hsd.state.nm.us/Medical_Assistance_Division.aspx

Trauma Informed Care and Organizational Assessments

<http://www.bhc.state.nm.us/BHTools/Trauma%20Informed%20Care.html>

Care Coordination

Care Coordination is a contracted service through the MCO's. Please contact your MCO's for more information on how this service can assist in helping your clients navigate appropriate services.

BECOMING A BH PUBLIC SYSTEM PROVIDER IN NEW MEXICO

Overview of basic steps for an individual:

1. Completion of required training or a degree to acquire a license to practice within the field of Behavioral Health through one of the State of New Mexico Licensing Boards as outlined by New Mexico Statute for Scope of Practice. This can include acquiring certification to provide services within a specific type of facility/organization for a specific service as outlined in State Medicaid Regulations or other State Department specific rules.
2. Acquire an NPI number.
3. Acquire a Medicaid Enrollment ID number.
4. Register and credential with CAQH.
5. Roster with your agency's contracted MCO(s).

1. Licensing and Certification Boards

Licensure Boards

New Mexico Medical Board <http://www.nmmb.state.nm.us/>

Board of Psychologist Examiners http://www.rld.state.nm.us/boards/psychologist_examiners.aspx

Counseling and Therapy Practice Board http://www.rld.state.nm.us/boards/counseling_and_therapy_practice.aspx

Social Work Examiners Board http://www.rld.state.nm.us/boards/social_work.aspx

New Mexico Board of Nursing <http://nmbon.sks.com/>

Certification Boards and Para-Professionals

New Mexico Credentialing Board for New Mexico Professionals <http://www.nmcbbhp.org/>

Office of Community Health Workers <http://nmhealth.org/about/phd/hsb/ochw/>

2. National Provider Identifier (NPI) by NPPES

The Administrative Simplification provisions of the *Health Insurance Portability and Accountability Act of 1996 (HIPAA)* mandated the adoption of standard unique identifiers for health care providers and

health plans. The purpose of these provisions is to improve the efficiency and effectiveness of the electronic transmission of health information. The *Centers for Medicare & Medicaid Services (CMS)* has developed the *National Plan and Provider Enumeration System (NPPES)* to assign these unique identifiers. The website for NPPES is: <https://nppes.cms.hhs.gov/NPPES/Welcome.do>

3. Medicaid Enrollment ID

The process of acquiring a State of New Mexico provider Medicaid ID is done through the Medical Assistance Division (MAD) Medicaid Portal (Xerox). If the application is completed with all the required information, the process should take no more than 7-10 business days.

Website: <https://nmmedicaid.acs-inc.com/static/index.htm>

4. Provider Credentialing with CAQH

Provider credentialing is a process that is done through the CAQH Universal Provider Datasource (CAQH ProView – developed by the Council for Affordable Quality Healthcare). This is a combined effort and requirement between the MCOs and CAQH. All MCO's will require credentialing. Their process can take upwards of 45 days provided that the credentialing information is complete.

Website: <http://www.caqh.org/solutions/caqh-proview-faqs>

Provider assistance: Email providerhelp@proview.caqh.org or call: 888-599-1771.

Registration: <https://proview.caqh.org/PR/Registration>

Completing the online form requires five steps:

1. Register with CAQH ProView.
2. Complete the online application and review the data.
3. Authorize access to the information.
4. Verify the data and/or attest to it.
5. Upload and submit supporting documents.

The provider data profile created in CAQH ProView meet the NCQA requirements for credentialing application content in CR3, Element C. NCQA reviews CAQH ProView output against the appropriate elements.

5. Rostering with MCOs

The MCO's each have a provider network manual or handbook that should be consulted as to the appropriate path to rostering providers within an organization. Generally this is done through the CEO or assigned administrative personnel between an agency and the contracted MCO. All MCO's have a common form to roster clinicians who are credentialed to render services under public funds.

NM BH LICENSING STATUTES AND REGULATIONS

Provider licensing by primary boards for NILs

Licensures for behavioral health practitioners are issued by different boards depending on the education and training of the practitioner. Each board has its own regulations starting with New Mexico Statutes Annotated (NMSAs) and more specific New Mexico Administrative Codes (NMACs). These include licensure requirements, approved supervisors, and CEU and renewal criteria.

In general, statutes can be searched and reviewed at:

<http://www.nmonesource.com/nmnxtadmin/nmpublic.aspx>

New Mexico Compilation Commission

Specific rules (NMACs) for licensure requirements and Scopes of Practice, as outlined by Statutes, can be found at the individual Board site pages for Rules and Laws either by clicking on their links for the NM Compilation Commission logo (displayed above) or the icons noted below.

NM Board of Social Work Examiners

Website: http://www.rld.state.nm.us/boards/Social_Work_Rules_and_Laws.aspx

Statute and Scope of Practice for Social Workers: Chapter 61 Occupational and Professional Licensing
> Article 31 Social Work Practice



Counseling and Therapy Practice Board

http://www.rld.state.nm.us/boards/Counseling_and_Therapy_Practice_Rules_and_Laws.aspx

Statute and Scope of Practice for Counselors: Article 9A Counseling and Therapy, 61-9A-1 through 61-9A-30



NM SERVICE DELIVERY RESOURCES AND POLICIES

Rendering services and seeking reimbursement within Medicaid or other state funds has several requirements. Be sure to be familiar with each of them including the policies of the Managed Care Organizations (MCOs) that your agency contracts with. Each MCO has their own provider manual that you will want to be familiar with. Some NMACs below may not apply to all providers or all services. If you have questions, be sure to contact our clinical team, your MCO, or the Medical Assistance Division (MAD).

New Mexico Administrative Codes (NMAC) Search Engine:

<http://164.64.110.239/nmac/cgi-bin/hse/homepagesearchengine.exe>

Access and Links to All HSD Program Rules by Categories:

<http://www.hsd.state.nm.us/providers/rules-nm-administrative-code.aspx>

Billing for Medicaid services.

☐ 8.302.1 NMAC – Social Services, General Provider Policies

- o Eligible providers
- o Provider responsibilities and requirements
- o Eligible Medicaid recipients
- o Nondiscrimination
- o Record keeping and documentation requirements
- o Patient confidentiality
- o Provider disclosure
- o Termination of provider status

☐ 8.302.2 NMAC – Social Services, Billing for Medicaid Services

- o Claims limitations
- o Dual-eligible recipients (Medicare/Medicaid)
- o CPT/HCPCS service unit time frames
- o Co-payments
- o Timely filing

☐ 8.310.2 NMAC – Social Services, Health Care Professional Services, General Benefit Description

☐ 8.321.2 NMAC – Social Services, Specialized Behavioral Health Services, Specialized Behavioral Health Provider Enrollment and Reimbursement

Medicare/Medicaid

There are special regulations governing those who are Medicare eligible and/or dual eligible. While some provider licensure types may not be eligible to provide services under Medicare, it is important not to turn away clients before fully understanding the process for coverage and eligibility within both Medicare and Medicaid. Be sure to contact your contracted MCO and review all applicable regulations at the main HDS website in the “Provider” section, including the following rules for direction:

Medicaid’s relationship to Medicare – 8.310.2.10 NMAC

Dual eligibility - 8.302.2.12 NMAC

Additional rules that apply to some services and providers

7.20.2 NMAC – Health, Mental Health, Comprehensive Behavioral Health Standards

7.21.1 NMAC – Health, Behavioral Health, General Provisions

7.32.2 NMAC – Health, Alcohol and Drug Abuse, Admission Criteria for Alcohol Substance Service

Level of Care Guidelines (LOCG) and Prior Authorization

Be sure to contact your MCO as to the appropriate forms and processes for both LOCG and Prior Authorization services, including treatment plans and specialty services.

Complete sets of rules under the Human Services Department can be found at:

<http://www.hsd.state.nm.us/providers/rules-nm-administrative-code-.aspx>

Services and Definitions

<http://www.bhc.state.nm.us/BHServices/ServiceDefinition.html>

Critical Incident Reporting

It is important to work with your contracted MCO’s, Optum Health NM, and/or Xerox as appropriate on reporting critical incidents. Each New Mexico State Department may have its own reporting protocols. Anyone billing Medicaid, state, or other federal funds received through the state must report critical incidents. There is a HSD/BHSD state issued BH CIR Protocol issued as of 2015 that all payors have been provided, that protocol is downloadable from the HSD Portal which is an online entry system that requires login. Please use the email address at the portal to request further information about using the portal. The CIR portal can be found at:

<https://criticalincident.hsd.state.nm.us/Login.aspx?ReturnUrl=%2f>

Technical Assistance

You may request Technical Assistance (TA) from either the MCO’s or the State Department from which you are seeking reimbursement to help inform your practice and to understand how the rules above apply and/or should be operationalized.

Email: bilfronil.bhsd@state.nm.us for information on TA for behavioral health related service and program delivery or provider allowances.

IMPORTANT NATIONAL RESOURCES AND POLICIES

CARF – Commission on Accreditation of Rehabilitation Facilities. Website: <http://www.carf.org/home/>

CMS – Center for Medicare and Medicaid Survey and Certification Compliance. Website: https://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/CertificationandCompliance/index.html?redirect=/certificationandcompliance/02_asc.asp

COA – Council on Accreditation. An international, independent, nonprofit, human service accrediting organization. Website: <http://coanet.org/home/>

GPO eCFR – U.S. Government Publishing Office for Electronic Code of Federal Regulation. Website: <http://www.ecfr.gov/cgi-bin/ECFR?page=browse>

Medicaid – Federal Policy Guidelines. Website: <http://www.medicaid.gov/federal-policy-guidance/federal-policy-guidance.html>

Medicare – Information. Website: <https://www.medicare.gov/>

NCQA – National Committee for Quality Assurance sets standards and performance measures for providers and health plan organizations to follow. Website: <http://www.ncqa.org/>

NASADAD NTN – National Association of State Alcohol and Drug Abuse Directors, National Treatment Network. Website: <http://nasadad.org/NTN/>

NREPP – National Registry of Evidence-based Programs and Practices. Website: <http://www.nrepp.samhsa.gov/>

SAMHSA – Substance Abuse and Mental Health Services Administration. Website: <http://www.samhsa.gov/>

The Joint Commission – Accredits provider agencies of programs/services for persons with intellectual and developmental disabilities, including mental health and chemical dependency services. Today, The Joint Commission accredits more than 2,100 behavioral health care organizations under the Comprehensive Accreditation Manual for Behavioral Health Care.

Website: http://www.jointcommission.org/facts_about_behavioral_health_care_accreditation/

The National Council for Behavioral Health – The National Council coordinates the Mental Health First Aid program across the U.S and operates the SAMHSA-HRSA Center for Integrated Health Solutions to provide nationwide technical assistance on integrating primary and behavioral healthcare. We offer the annual National Council Conference featuring the best in leadership, organizational development, and excellence in mental health and addictions practice.

Website: <https://www.thenationalcouncil.org/>

National BH Provider Associations

American Psychiatric Association <http://www.psychiatry.org/>

American Psychiatric Nurses Association <http://www.apna.org>

American Psychological Association <http://apa.org/>

American Counseling Association <https://www.counseling.org/>

National Association of Social Workers <https://www.socialworkers.org/>

National Association of Addiction Professionals <http://www.naadac.org/NCPRSS>