



State of New Mexico  
Medical Assistance Program Manual  
**Supplement**



DATE: June 23, 2017

NUMBER: 17-06

TO: BEHAVIORAL HEALTH PROVIDERS

FROM: *NSL* NANCY SMITH-LESLIE, DIRECTOR, MEDICAL ASSISTANCE DIVISION

*WL* WAYNE LINDSTROM, DIRECTOR, BEHAVIORAL HEALTH SERVICE DIVISION

SUBJECT: **Comprehensive Community Support Services (CCSS)**  
**I. Revised Service Definition**  
**II: Provider Requirements**

**Effective August 01, 2017**

**I. Service Definition**

The purpose of Comprehensive Community Support Services (CCSS) is to surround individuals and families with the services and resources necessary to promote recovery, rehabilitation and resiliency. Community support activities address goals specifically in the following areas: independent living; learning; working; socializing and recreation. CCSS consist of a variety of interventions based on coaching and addressing barriers that impeded the development of skills necessary for independent functioning in the community. A minimum of 60% shall be conducted in community locations, primarily face-to-face.

Community Support Services also include assistance with identifying and coordinating services and supports identified in an individual's service plan; supporting an individual and family in crisis situations; and providing individual interventions to develop or enhance an individual's ability to make informed and independent choices.

Eligible Population

Individuals who meet one of the following:

- Children meeting NM State criteria for serious emotional/neurobiological/behavioral disorders (SED);
- Adults meeting NM State criteria for severe mental illness (SMI);
- Individuals with chronic substance use disorders; or
- Individuals with a co-occurring disorder (mental illness/substance use) and or dually diagnosed with a primary diagnosis of mental illness.

### Program Requirements

When identifying a need for this service, if the provider agency is utilizing the "Treat First" clinical model, they may be placed in this service for up to four encounters without having had a psychiatric diagnostic evaluation with the utilization of a provisional diagnosis for billing purposes. After 4 encounters, an individual must have a comprehensive needs assessment, a diagnostic evaluation, and a CCSS treatment plan.

#### Treatment Plan:

The CCSS treatment plan must specify the community support and other treatment interventions needed for the individual. CCSS must address the goals identified in the CCSS treatment plan and any comprehensive service plan.

#### Designated agency and community support worker (CSW):

Individuals that meet the target population criteria for CCSS services must have one designated CCSS agency and primary CSW that will have the primary responsibility of assisting the individual and family with implementing the CCSS treatment plan. Within this agency, the CSW will coordinate and may facilitate family team meetings. The CSW will also be a key member of any multi-disciplinary service team within the agency.

#### Activities include:

- Development of a psychiatric advance directive;
- Assessment, support and intervention in crisis situations including the development and use of crisis plans which recognize the early signs of the individual's crisis/relapse, use of interpersonal supports, use of alternatives to emergency departments and inpatient services;
- Revision of the crisis plan over time based on newly identified triggers and what is known to be effective for the individual;
- Individualized interventions, with the following objectives:
  - Coaching in the development of interpersonal, community coping and functional skills including adaptation to home, school and work environments, including:
    - Socialization skills
    - Developmental issues
    - Daily living skills
    - School and work readiness activities
    - Education in co-occurring illness
  - Encouraging the development and eventual succession of natural supports in workplace and school environments;
  - Assistance in learning symptom monitoring and illness self-management skills (e.g. symptom management, relapse prevention skills, knowledge of medication and side effects and motivational/skill development in taking medication as prescribed) in order to identify and minimize the negative effects of symptoms which interfere with the individual's daily living and supports individuals to maintain employment and school tenure;
  - Provide support and coaching to the individual to obtain and maintain stable housing.
- The agency providing CCSS will make every effort to provide services in the community outside of clinic settings.
- The CSW will make every effort to engage the individual in achieving treatment/recovery goals.

## **II. Provider Requirements**

Providers eligible to provide CCSS include:

- FQHCs
- IHS or 638 Tribal Facilities
- Community Mental Health Centers
- Core Service Agencies
- Carelink New Mexico Health Homes

There is no certification process from DOH or CYFD. Instead, an agency must receive CCSS training through the State or UNM, and attest that they have received this training when contacting the State's fiscal agent to add the specialty service 107, CCSS to their existing enrollment in Medicaid.

Children, Youth and Family Department (CYFD) will provide background checks for CCSS direct service and clinical staff for child/youth CCSS programs.

### **Staffing:**

Clinical services and supervision by licensed behavioral health practitioners must be in accord with their respective licensing board regulations.

Minimum staff qualifications for the Community Support Worker (CSW) are:

Must be at least 18 years old; and

- Hold a bachelor's degree in a human service field from an accredited university and have one year relevant experience with the target population; or,
- Hold an associate's degree and have a minimum of two (2) years of experience working with the target population; or
- Associates Degree in approved curriculum in behavioral health coaching; not experience necessary; or
- Be a high school graduate or have a general educational development (GED) test and a minimum of three (3) years of experience working with the target population; or
- Be certified as a Peer or Family Support Worker

Minimum staff qualifications for Certified Peer Support Workers:

Must be 18 years of age or older; and

- Have a high school diploma or GED; and
- Be self-identified as a current or former consumer of mental health and/or substance abuse services, and have at least two years of mental health and/or substance abuse recover; and
- Have received certification as a Certified Peer Support Worker

Minimum staff qualifications for Certified Family Support Workers (CFSW):

Must be 18 years of age or older; and

- Have a high school diploma or GED; and

- Have personal experience navigating any of the child/family-servicing systems and/or advocating for family members who are involved with the child/family behavioral health systems. Must also have an understanding of how these systems operated in New Mexico; and
- Have received certification as a Certified Family Support Worker or CPSW with a family support specialty.

Minimum staff qualifications for the CCSS Supervisor:

- Must hold a Bachelor's Degree in a human services field from an accredited university; and
- Have four (4) years relevant experience in the delivery of case management or CCSS with the target population; and
- Have one (1) year demonstrated supervisory experience.

Minimum staff qualifications for the Clinical Supervisor:

- Must be a licensed independent practitioner (i.e. psychiatrist, psychologist, LISW, LPCC, LMFT, psychiatrically certified clinical nurse specialist or clinical nurse practitioner practicing under the scope of their NM licensure);
- Have one (1) year demonstrated supervisory experience
- Provide documented clinical supervision on a regular basis to the CSW, CPS and CFS.

Note: The Clinical Supervisor and the CCSS Program Supervisor may be the same individual.

Staff Training:

Minimum staff training requirements for a Community Support Worker includes:

An **initial training** comprised of twenty (20) hours of documented education drawn from an array of the following areas, to be completed within the first 90 days of employment as a CSW:

- CCSS training as per state approved curriculum
- Clinical and psychosocial needs of the target population
- Managing side effects of psychiatric medication and communicating with your clinician
- Principles of states of change
- Principles of motivational interviewing
- Crisis management
- Principles of recovery, resiliency and empowerment
- Cultural considerations
- Ethics and professionalism
- Enhancing interpersonal supports
- Mental Health/Developmental Disabilities Code
- Children's Code
- Client/family-centered practice
- Treatment and discharge planning with an emphasis on recovery and crisis planning
- Psychiatric Advance Directive
- Strategies for engagement in services

Documentation of **ongoing training** comprised of twenty (20) hours is required of a CSW every year, after the first year of hire, with content of the education based upon agency assessment of staff need.

Minimum staff training requirements for supervisors:

- The same twenty (20) hours of documented training or continuing education as required for the CCSS community support worker.
- An attestation of training related to providing clinical supervision of non-clinical Staff

Documentation Requirements:

In addition to the standard client record documentation requirements for all services, the following is required for CCSS: Case notes identifying all activities and location of services; duration of service span (e.g., 1:00-2:00 pm); and description of the service provided with reference to the comprehensive service plan and related service goal and objective.

Service Exclusions:

This service may not be billed in conjunction with the following:

- Multi-systemic therapy
- Assertive community treatment
- Resource development (NMCD)

For discharge planning this service may only be billed to a maximum of 16 units per each discharge concurrently with the following services:

- Accredited residential treatment
- Residential treatment services
- Group home services
- Inpatient hospitalization
- Partial hospitalization
- Treatment foster care
- Transitional living services