



## NHSC Behavioral Health Certification Information Package

*This guide is for NHSC-approved sites and applicants in meeting NHSC comprehensive behavioral health service requirements.*

### **\*\*Only NHSC Site Administrators are permitted to submit certification documents\*\***

The National Health Service Corps (NHSC) updated its policies for behavioral health participants and sites in FY 2016. This includes changes to clinical practice requirements and clarification to comprehensive behavioral health service requirements. Behavioral health providers applying to the NHSC must adhere to all requirements. Key changes impact both NHSC behavioral health participants' [clinical practice requirements](#).

### **RATIONALE**

According to the Substance Abuse and Mental Health Services Administration (SAMHSA)-Health Resources and Services Administration (HRSA) Center for Integrated Health Solutions, people with mental and substance abuse disorders have higher mortality rates than the average person.<sup>1</sup> This is mostly due to untreated chronic illnesses such as hypertension, diabetes, obesity, and cardiovascular disease aggravated by poor health habits – such as inadequate physical activity, poor nutrition, smoking, and substance abuse. People facing behavioral health problems often leave these illnesses untreated due to barriers in accessing primary care coupled with challenges navigating complex health care systems. There is extensive evidence of the benefits of integrating primary care and behavioral health in terms of health outcomes and decreasing health care costs.

HRSA is building on existing efforts to support integrated medical and behavioral health care through modifications to the NHSC in two key areas: 1) modifying the clinical practice requirements for behavioral health providers to emphasize service in NHSC-approved practice sites; and 2) supporting community-based settings that offer comprehensive behavioral health services.

### **NHSC SITE REQUIREMENTS**

**NHSC-approved sites that provide behavioral health services must certify that they provide access to comprehensive behavioral health services.** All non-exempt NHSC behavioral health service sites<sup>2</sup> must verify (using the *NHSC Behavioral Health Services Checklist* on pages 6-9 and supporting documentation) that they offer comprehensive primary behavioral health care services including, but not limited to: screening and assessment; diagnosis; treatment plans; care coordination; therapeutic services (including psychiatric medication prescribing and management, chronic disease management, Substance Use Disorder Treatment); crisis/emergency services (including 24-hour crisis call access); consultative services; and case management. *If the site does not provide all of these services, they must demonstrate a formal affiliation with a comprehensive community-based primary behavioral health setting or facility*

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<sup>1</sup> SAMHSA-HRSA Center for Integrated Health Solutions - <http://www.integration.samhsa.gov/resource/what-is-integrated-care>, 2015.

<sup>2</sup> The following NHSC-approved sites are exempt from the Comprehensive Behavioral Health Services Certification requirement: FQHCs (Health Center Grantees), FQHC Look-alikes (LALs), Indian Health Service facilities, Tribally-Operated 638 Health Programs, Urban Indian Health Programs, Federal Prisons, State Prisons, and Immigration and Customs Enforcement (ICE) Health Service Corps sites.

to provide these services. Note that NHSC-approved sites must provide the following services directly, not through affiliation or referral: screening and assessment, treatment plans, and care coordination.

## **CERTIFICATION GUIDELINES FOR NHSC BEHAVIORAL HEALTH SITES**

### **\*\*Only NHSC Site Administrators are permitted to submit certification documents\*\***

Sites interested in recruiting behavioral health clinicians through the NHSC must submit the *NHSC Comprehensive Behavioral Health Services Checklist*, documentation to verify services provided and applicable formal affiliation agreements. **For any comprehensive behavioral health service not provided by the NHSC-approved site, the site must submit formal affiliation agreement(s) with a comprehensive community-based primary behavioral health setting or facility to provide the missing service to clients of the certifying site.** Affiliation agreements must accompany the Checklist at time of submission.

- Affiliation agreements must be signed both by the site and the affiliated entity.
- Affiliated entities must provide accessible services and continuity of care to the clients of the certifying site.
- Affiliated entities should accept public insurance and offer NHSC-approved discounts to those with low incomes and agree to see all clients regardless of their ability to pay.

Note that the NHSC Comprehensive Behavioral Health Services Certification requirement is part of the Site Application, in order for the NHSC to verify the provision of comprehensive behavioral health services. For more information on the NHSC Site Application process, review the [NHSC Site Reference Guide](#).

### **Exempt Sites**

NHSC-approved sites that are exempt from the Comprehensive Behavioral Health Services Certification process will not be required to submit the NHSC Behavioral Health Services Checklist. However, exempt practice sites with NHSC behavioral health clinicians are expected to provide an appropriate practice setting and verify that NHSC behavioral health participants meet the behavioral health hour requirements as outlined in this information package and NHSC Application and Program Guidance

The following NHSC-approved sites are exempt from the Comprehensive Behavioral Health Services Certification process: Federally-Qualified Health Centers (FQHCs), FQHC Look-alikes, American Indian Health Service Facilities (including Indian Health Facilities, Tribally-Operated 638 Health Programs, and Urban Indian Health Programs, commonly referred to as ITUs), Federal Prisons, State Prisons, and Immigration and Customs Enforcement (ICE) Health Service Corps sites.

### **Behavioral Health Checklist and Supporting Documentation Submission Instructions**

All non-exempt sites that provide behavioral and mental health services must submit documents during any Site Application and Recertification to verify compliance with the NHSC Comprehensive Behavioral Health Services requirements by following the instructions below:

- 1) Review the NHSC Behavioral Health Program Notification and Comprehensive Behavioral Health Services Certification requirements.
- 2) Prepare and sign documentation that verifies compliance with the Comprehensive Behavioral Health Services Certification requirements. Sites must submit:
  - a. The “NHSC Comprehensive Behavioral Health Services Checklist,” and

- b. Documentation that verifies all information included in the Checklist (which services provided on site and which through formal affiliation agreements).
- 3) Collect any applicable formal affiliation agreements and documentation of services.
- 4) Log in to your [BHW Customer Service Portal](#).
  - a. Upload the documentation into NHSC New Site or Recertification Application verifying compliance with the NHSC Comprehensive Behavioral Health Services Requirement, including all documents that verify checklist responses, including applicable formal affiliation agreements.
  - b. Add as “Other Documentation Requested by the NHSC or State Primary Care Office (PCO).”
  - c. In the *Comment* section, type “Comprehensive Behavioral Health Services Certification” and any other relevant comments.

#### **TECHNICAL ASSISTANCE**

NHSC sites or sites interested in seeking NHSC site approval may contact their BHW [State Lead](#) to obtain technical assistance on the new policy requirements and/or on submitting documentation to demonstrate compliance with this policy requirement.

#### **RESOURCES**

[SAMHSA Criteria for Certified Community Behavioral Health Clinics \(CCHBCs\)](#)

[SAMHSA-HRSA Center for Integrated Health Solutions](#)

[SAMHSA Medicaid Handbook: Interface with Behavioral Health Services](#)

[Sample Affiliation Agreements, Contracts & MOUs](#)

## **NHSC PROGRAM DEFINITIONS**

***Comprehensive Community-Based Primary Behavioral Health Setting or Facility*** – Site that provides comprehensive primary behavioral health care services as defined by NHSC. Site must function as part of a system of care to ensure continuity of patient-centered, comprehensive, and coordinated care. The site must offer or ensure access to ancillary, inpatient, and specialty referrals.

***Comprehensive Primary Behavioral/Mental Health Services*** – Services that include, but are not limited to: screening and assessment; diagnosis; treatment plans; therapeutic services (including psychiatric medication prescribing and management, chronic disease management, and substance use disorder treatment); crisis care (including 24-hour crisis call access); case management, consultative services; and care coordination. Sites providing such services must function as part of a system of care to ensure continuity of patient-centered, comprehensive, and coordinated care. The site must also offer or ensure access to ancillary, inpatient, and specialty referrals. Service definitions include:

***Care Coordination*** – The practice of navigating and integrating the efforts primary care, specialty health care and social service providers to support a patient’s health, wellness and independence. It is further defined by the Agency for Healthcare Research & Quality (2014) as “deliberately organizing consumer care activities and sharing information among all of the participants concerned with a consumer’s care to achieve safer and more effective care. This means the patient’s needs and preferences are known ahead of time and communicated at the right time to the right people, and that this information is used to provide safe, appropriate, and effective care to the patient.”

***Case Management*** - The practice of assisting and supporting patients in developing their skills to gain access to needed health care, housing, employment, social, educational and other services essential to meeting basic human needs and consistent with their health care treatment, symptom management, recovery and independent functioning. Case management is integral in helping individuals understand: (1) their health situation, (2) how to access physical and behavioral health treatment options available to them, and (3) ways in which they can access other community supports. Case management should provide cohesion to an individual’s team of providers, regardless of whether those providers actually work together. It also helps to avoid duplication of treatments. Without case management, an individual who is seeking services might lack knowledge about the range of treatment options and the variety of providers that are available. Case management can be thought of as the “glue” that keeps an individual’s care coordinated.

***Consultative Services*** - The practice of collaborating with health care and other social service providers (e.g., education, child welfare, and housing) to identify the biological, psychological, medical and social causes of behavioral health distress, to determine treatment approach(s), and to improve patient functioning. For example, these services are sought during treatment planning about special emphasis problems, including for treatment planning purposes (e.g., trauma, eating disorders) ([SAMHSA Criteria for Certified Community Behavioral Health Clinics \(CCHBCs\)](#)).

***Crisis/Emergency Services*** (including, but not limited to, 24-hour crisis call access) – The method(s) used to offer immediate, short-term help to individuals who experience an event that

produces emotional, mental, physical, and behavioral distress or problems. In some instances, a crisis may constitute an imminent threat or danger to self, to others, or grave disability. (*Note: generic hotline, hospital emergency room referral, or 911 is not sufficient*).

**Diagnosis** - The practice of determining a patient's emotional, socio-emotional, behavioral or mental symptoms as a diagnosable disorder in accordance with the Diagnostic and Statistical Manual of Mental Disorders (DSM; most current edition) and International Classification of Disease (ICD; most current edition).

**Screening and Assessment** – Screening is the practice of determining the presence of risk factors, early behaviors, and biomarkers which enables early identification of behavioral health disorders (e.g., warning signs for suicide, substance abuse, depression) and early access to care. **Assessment** is a structured clinical examination that analyzes patient bio-psych-social information to evaluate a behavioral health complaint.

**Therapeutic Services** (including but not limited to, psychiatric medication prescribing and management, chronic disease management, and Substance Use Disorder Treatment) – Broad range of evidence-based or promising behavioral health practice(s) with the primary goal of reducing or ameliorating behavioral health symptoms, improve functioning, and restore/maintain a patient's health (e.g., individual, family, and group psychotherapy/counseling; psychopharmacology; and short/long-term hospitalization).

**Treatment Plan** – A formalized, written document that details a patient's current clinical symptoms, diagnosis, and outlines the therapeutic strategies and goals that will assist the patient in reducing clinical symptoms and overcoming his or her behavioral health issues. The plan also identifies, where indicated, clinical care needs and treatment(s) to be provided by affiliated health and behavioral health care providers and settings.

**Core Comprehensive Primary Behavioral Health Services** – NHSC sites *must* provide the following services onsite and not through affiliation agreements: screening and assessment, treatment plans, and care coordination.

**Formal Affiliation Agreement** – Written agreement that sets forth the terms and conditions under which two organizations agree to furnish integrated services to better meet patient and client needs. All affiliated entities for primary behavioral health care should accept applicable public insurance and offer NHSC-approved discounts to those with low incomes and agree to see all patients regardless of their ability to pay. Affiliation agreements must include the following:

- 1) Signatures from both parties and a description of the formal relationship.
- 2) Process for sharing pertinent medical information through a shared electronic health record or other administrative process. Entities should utilize signed authorizations for release of information.
- 3) Demonstration of continuity of care through: a) Written procedures and/or assigned personnel for care coordination and case management; b) Processes for tracking and follow-up of referral appointments; and c) Processes for scheduling consultation or care coordination meetings with affiliated site providers.

- 4) Assurance that the affiliated entity is accessible to clients of the site (affordability, accepting new patients, etc.)

For examples of formal affiliation agreements, visit the [SAMHSA-HRSA Center for Integrated Health Solutions](#).

***Patient Care for Behavioral Health Providers*** – Time spent providing one or more of the comprehensive primary behavioral/mentalhealth services defined above.

**APPENDIX A:**

**Sample AFFILIATION AGREEMENT**

<b>(NHSC Site) Name</b>	<b>(Affiliate Agency) Name</b>
_____	_____
<b>Address</b>	<b>Address</b>
_____	_____
<b>City, State, Zip</b>	<b>City, State Zip</b>
_____	_____

**(NHSC Site)** provides mental health services to everyone in the mental health HPSA they serve regardless of the patient’s ability to pay. **(Affiliate Agency)** is a behavioral healthcare organization that can provide these additional services:

- \_\_\_ 1. Diagnosis
- \_\_\_ 2 a. Psychiatric Medication Prescribing and Management
- \_\_\_ 2 b. Substance Use Disorder Treatment
- \_\_\_ 2 c. Short/long-term hospitalization
- \_\_\_ 2 d. Other (Please list) \_\_\_\_\_
- \_\_\_ 3. Crisis/Emergency Services 24/7 access
- \_\_\_ 4. Consultative Services
- \_\_\_ 5. Case Management

Both agencies will comply with the following:

1. Individually maintain full responsibility for all clinical services delivered by their employees or contract providers and carry professional liability insurance.
2. Provide services to all patients, regardless of ability to pay, race, color, sex, national origin, disability, religion, age, , sexual orientation, or gender identify.
3. Orient and train their respective staff on any issue(s) deemed relevant to this affiliation.
4. Have a process for sharing pertinent medical information through shared health records or other administrative processes through authorizations for release of information.
5. Demonstrate continuity of care with patients referred by following written procedures and/or assigning personnel for care coordination and case management as outlined below:
  - a. [NHSC Site] will:
  - b. [Affiliate Agency] will:
6. Personnel at [INSERT NHSC Site and/or Affiliate Agency] involved in care coordination will track and follow up on referral appointments and will schedule consultation or care coordination meeting between providers involved in referred patient care.
7. If there is a professional liability claim that involves services provided under the auspices of this Agreement, then each party will cooperate in any investigation into such matter by providing access to records, documents and witnesses.
8. The parties (and their employees, agents, and contractors) shall maintain the confidentiality of all patient and/or individual party information in accordance with all applicable state and federal laws including HIPPA and regulations regarding the confidentiality of such information. The parties (and their employees, agents, and contractors) shall not divulge such confidential information to any third parties without the patient’s or party’s prior written consent, except,

as to patients, unless required by law or as necessary to treat such patient.

- 9. This Agreement may be terminated immediately upon written notice to all other parties.
- 10. Any dispute arising under this agreement first shall be resolved by informal discussions among the parties.

This Agreement is effective \_\_\_\_\_ and shall be automatically renewed from year to year under the same terms and conditions.

**NHSC Site**

**Affiliate Agency**

\_\_\_\_\_  
Chief Executive Officer

Date \_\_\_\_\_

\_\_\_\_\_  
Chief Executive Officer

Date \_\_\_\_\_