

Rehabilitative Services - 42 CFR 440.130(d)

The State assures that all rehabilitative services are provided to or directed exclusively toward the treatment of the Medicaid eligible individuals under age 21. Medically necessary services will be furnished without limitation in accordance with Section 1905(r) of the Social Security Act. The State also assures that rehabilitative services do not include any of the following:

A. Educational, vocational, and job training services;

B. Room and board;

C. Services to inmates in public institutions as defined in 42 CFR §435.1010;

D. Services to individuals residing in institutions for mental diseases as described in 42 CFR §435.1010;

E. Recreational and social activities; and

F. Services that must be covered elsewhere in the West Virginia Medicaid State Plan.

Additional assurances related to Residential Intensive Treatment (RIT) and Specialized Residential Intensive Treatment (SRIT) services under this State Plan and Other Limited Health Benefits:

- The provision of RIT and SRIT services will not restrict an individual's free choice of Medicaid providers.
- The RIT and SRIT services will not be used to restrict an individual's access to other services under the plan.
- Individuals will not be compelled to receive RIT and SRIT services, condition receipt of rehabilitative residential services on the receipt of other Medicaid services, or condition receipt of other Medicaid services on receipt of these RIT and SRIT services.
- Providers of RIT and SRIT services do not exercise the agency's authority to authorize or deny the provision of other services under the plan.
- Payment for RIT and SRIT services under the plan does not duplicate payments made to public agencies or private entities under other program authorities for the same purposes.
- Any individual, group of individuals or entity who meets the State's provider and practitioner qualifications may enroll in Medicaid and furnish the services under the plan.

The treatment includes the services listed below, for maximum reduction of physical or mental disability and restoration of a beneficiary to individual's best possible functional level. RIT and SRIT provide community-based medically necessary rehabilitative residential services recommended by BMS or its designee and under the supervision and oversight of one of the following licensed practitioners operating within the scope of their practice and state licensing: a Medical Doctor (M.D.), Doctor of Osteopathic medicine (DO), Advanced Practice Registered Nurse (APRN) or Physician Assistant (PA).

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STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

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Supplement 2 to Attachment 3.1-A and 3.1-B

Agencies providing RIT and SRIT services are organized and staffed to provide both general and specialized residential (e.g., non-institutional, non-hospital) interdisciplinary services twenty-four (24) hours a day, seven (7) days a week. RIT and SRIT services are organized to provide treatment where the individual resides. Payment for RIT and SRIT does not include room and board payments and is not provided for services received in hospitals, nursing facilities, psychiatric residential treatment facilities, or intermediate care facilities for individuals with Intellectual Disabilities (ICF/IID).

The individual must require treatment that would not be able to be provided at a less restrictive level of care than is being provided on a twenty-four (24)-hour basis with direct supervision/oversight by professional staff.

The following are service components of RIT and SRIT:

<u>Service</u>	<u>Description</u>	<u>Individual Staffing Qualifications</u>
<u>Physician Services</u>	<p><u>Physician services must be available 24 hours per day/7 days per week to:</u></p> <ol style="list-style-type: none"> <u>1. Provide consultation to clinical and residential staff regarding medication targets, risks, side effects, and clinical needs.</u> <u>2. Contribute to Continuous Quality Improvement (CQI) and risk management.</u> <u>3. Provide crisis response.</u> <u>4. Perform observation and assessment of the individual at least once a calendar week.</u> <u>5. Perform assessments to effectively coordinate all treatment, manage medication.</u> <u>6. Provide medical management of all psychiatric and medical problems.</u> <u>7. Participate in treatment team meetings.</u> 	<p><u>M.D., D.O. Board Certified or eligible, APRN, PA</u></p>
<u>Nursing Services</u>	<p><u>Nursing services must be available 24 hours per day/7 days per week to:</u></p> <ol style="list-style-type: none"> <u>1. Perform assessments of medical needs at intake.</u> 	<p><u>Registered nurse (RN), Licensed Practical Nurse (LPN)</u></p>

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	<ol style="list-style-type: none"> 2. <u>Schedule and coordinate medical appointments.</u> 3. <u>Manage the supply of prescription medications.</u> 4. <u>Provide supervision of medication administration.</u> 5. <u>Participate in treatment team meetings.</u> 6. <u>Coordinate medical areas of the discharge planning process.</u> 7. <u>Provide education to staff on medical needs of individuals served.</u> 8. <u>Contribute as needed to CQI and risk management initiatives.</u> 	
<u>Medication administration</u>	<u>Administer medications under the supervision of an Office of Health Facility Licensure and Certification (OHFLAC) approved RN</u>	<u>AMAPs must meet all OHFLAC and WV Medicaid requirements.</u>
<u>Counseling, and treatment planning</u>	<p><u>Clinical staff must be available to provide services and clinical consultation 24 hours per day/7 days per week to:</u></p> <ol style="list-style-type: none"> 1. <u>Complete family and individual assessments.</u> 2. <u>Provide psychotherapy.</u> 3. <u>Provide face-to-face individual, family, and group therapy.</u> 4. <u>Assist with crisis de-escalation and crisis planning.</u> 5. <u>Participate in internal and external team meetings.</u> 6. <u>Contribute as needed to CQI and risk management initiatives.</u> 7. <u>Provide clinical supervision and guidance to address implementing treatment plans and evidence-based interventions.</u> 	<p><u>Licensed Independent Clinical Social Worker (LICSW), Licensed Professional Counselor (LPC), Licensed Graduate Social Worker (LGSW), Licensed Clinical Social Worker (LCSW) and Licensed Psychologists/Supervised Psychologist who have experience working with children and youth.</u></p> <p><u>All clinical staff must meet state licensing rules for supervision and practice and must operate within their scope of practice.</u></p> <p><u>Clinical staff must maintain certifications necessary to adhere to all evidence-based models, assessments, and interventions.</u></p>

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<p><u>Clinical Supervision</u></p>	<p><u>Clinical supervision of counseling and treatment planning</u></p>	<p><u>Licensed Independent Clinical Social Worker (LICSW), Licensed Professional Counselor (LPC), Licensed Graduate Social Worker (LGSW), Licensed Clinical Social Worker (LCSW) and Licensed Psychologists who have experience working with children and youth. All clinical staff must meet state licensing rules for supervision and practice and within their scope of practice.</u></p> <p><u>Clinical staff must maintain certifications necessary to adhere to all evidence-based models, assessments, and interventions</u></p>
<p><u>Discharge Planning</u></p>	<p><u>1. Facilitates activities of daily living, self-help, and socialization skills.</u> <u>2. Provide daily support and intervention, including crisis response, co-facilitating group treatment and community meetings, and implementing individualized plans.</u></p>	<p><u>Staff must have high school diploma or GED and adhere to age eligibility guidelines:</u></p> <p><u>1. The minimum age for serving children aged 13 and older shall be 20 years of age.</u> <u>2. The minimum age for serving children aged 12 years and under shall be 18 years.</u></p>
<p><u>Skills Training and Development</u></p>	<p><u>Skills Training and Development is a combination of structured individual and group therapeutic activities offered to members who have basic skill deficits. These skill deficits may be due to factors, such as history of abuse or neglect, or years spent in institutional settings or supervised living arrangements that did not allow normal development in the areas of daily living skills.</u></p>	<p><u>All staff must be approved by the LBHC credentialing committee.</u> <u>Professional staff must meet one of the following criteria:</u></p> <ol style="list-style-type: none"> <u>1. Physician</u> <u>2. Physician assistant</u> <u>3. APRN</u> <u>4. Licensed psychologist</u> <u>5. Supervised psychologist</u> <u>6. Licensed Professional Counselor</u> <u>7. Licensed Independent Clinical Social Worker</u>

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	<p><u>Therapeutic activities are focused on Skills Training and Development Services which are elementary, basic, and fundamental to higher-level skills and are designed to improve or preserve a member's level of functioning. Therapeutic activities may be provided to a member in his/her natural environment through a structured program as identified in the goals and objectives described in the service plan. Therapeutic activities include but are not limited to learning and demonstrating personal hygiene skills; managing living space; manners; sexuality; social appropriateness; and daily living skills.</u></p>	<p>8. <u>Alcohol and Drug Counselor with master's degree in clinical field, only for substance abuse therapy treatment issues</u></p> <p>9. <u>Registered Nurse (some services)</u></p> <p>10. <u>Master's degree in an unlicensed human services field with 20 hours verified documented training specific to the target population served</u></p> <p><u>Paraprofessional staff must meet the following minimum criteria:</u></p> <ol style="list-style-type: none"> 1. <u>Be at least 18 years old</u> 2. <u>A high school diploma or Graduate Equivalent Degree OR Bachelor's level degree in a human services field with at least one year of specific experience providing services to the target population served</u> 3. <u>Be currently certified in Standard First Aid and Adult/Child Cardiopulmonary Resuscitation</u> 4. <u>Successfully completed Behavioral Health agency training in all the following criteria:</u> <ol style="list-style-type: none"> a. <u>Various aspects of developmental disabilities</u> b. <u>Instructional techniques necessary to achieve objectives of individual's program plans</u> c. <u>Health related issues</u> d. <u>Recognition of abuse and neglect</u>
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		<p>e. <u>Individuals' rights and confidentiality</u></p> <p>f. <u>Awareness of, and sensitivity to, family and individual's needs</u></p> <p>g. <u>Non-aversive behavior intervention techniques for those providers who are implementing behavior support and intervention plans.</u></p>
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Services provided by RIT and SRIT practitioners are intended to provide treatment for individuals exhibiting severe functional disturbance in one or more of the following areas:

1. Severe disturbances in behavior and/or emotions; unable to function in multiple areas of their life including school, home, and/or community.
2. Severely impaired social functioning deficits including difficulty forming healthy peer relationships, social communication barriers, and antisocial behaviors.
3. Psychiatric disorder or substance abuse disorder which significantly disrupts the attainment of age-appropriate developmental abilities and precludes living in a less restrictive (i.e., home or family based) environment.
4. Complex trauma needs – including traumatic grief, hyper-arousal, re-experiencing, avoidance, adjustment, disassociation, and numbing that lead to significant functional impairment that cannot be addressed in a community-based setting.
5. Persistent and unpredictable aggression, which may include serious sexual acting-out Behavior.
6. Patterns of disruptive behavior, not a reaction to single events, that have not responded to less restrictive interventions.

SRIT services provide treatment for individuals exhibiting serious emotional or behavioral disorders or disturbances with severe and persistent challenges in social, emotional, behavioral, and/or psychiatric functioning that often manifest in externalized behaviors, including violent, sexually abusive, and/or sexualized behaviors beyond the capacity of a RIT setting. Providers specializing in treatment for these targeted populations of individuals needing SRIT services will reflect the treatment needs and evidence-based interventions of the SRIT target populations. SRIT is provided to an individual with a co-occurring mental health diagnosis, who meet medical necessity for SRIT, and present with one of the following conditions provided by practitioners employed or contracted by the SRIT are expected to address specific intensive treatment needs beyond treatment available in a RIT setting:

- **Severe Aggressive and/or Violent Behaviors**

SRIT Severe Aggressive and/or Violent Behaviors services are needed to treat individuals presenting with mental health needs with co-occurring disorders of significant anger, aggression, violence, danger to others (or expected to result in serious physical harm), oppositional behavior, cruelty to animals, sexualized behaviors, and fire-setting. The individual exhibits a chronic pattern of behaviors that cannot be managed in the community because of the nature and/or frequency of their violence and aggression.

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• **Problematic Sexual Behaviors (PSB)**

SRIT PSB treatment is needed for individuals who exhibit sexually abusive and offending behaviors. Individuals with sexually abusive and offending behaviors include both aggressive sexual behavior and sexual behavior in which the individual takes advantage of another person, including a younger or less powerful individual through seduction, coercion, or force. This population presents with mental health needs with co-occurring disorders of significant anger, aggression, violence, danger to others (or expected to result in serious physical harm), oppositional behavior, and cruelty to animals.

• **Neurodevelopmental and Comorbid Conditions (NACC)**

SRIT NACC treatment is needed for individuals presenting with mental health needs who have a combination of lower cognitive function, developmental delays, and serious behavioral and emotional concerns.

• **Autism Spectrum Disorder (ASD)**

SRIT ASD treatment is needed to treat individuals presenting with mental health needs and co-occurring ASD.

Eligible Providers:

All RIT and SRIT providers must be an LBHC, deemed by OHFLAC, and have provider agreement with BMS and may not be an Institution for Mental Diseases (IMD).

All RIT and SRIT providers must provide twenty-four (24) hours/day, seven (7) days/week structured and supportive living environment. Integration with community resources is provided to plan and arrange access to a range of educational and therapeutic services.

RIT and SRIT services are provided according to an individualized person-centered treatment plan, which may be subject to prior approval by BMS or its designee. The activities included in the service must be intended to achieve identified treatment plan goals or objectives of the Medicaid eligible child. The treatment plan should be developed in a person-centered manner with the active participation of the individual, family, and practitioners and be based on the individual's condition and the standards of practice for the provision of these specific rehabilitation services.

An agency providing RIT and/or SRIT must coordinate with the child's community resources including Medicaid community-based providers, when possible, with the goal of transitioning the child out of the RIT or SRIT as soon as possible and appropriate. Discharge planning begins upon admission with concrete plans for the child to transition back into the community beginning within the first thirty (30) days of admission and every ninety (90) days after with clear action steps and target dates outlined in the treatment plan. The treatment plan must include measurable discharge goals.

All RIT and SRIT providers must have a current accreditation by Commission on Accreditations of Rehabilitation Facilities (CARF), The Joint Commission (TJC), Council on Accreditation (COA), or another independent Health and Human Services (HHS) approved organization.

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Preventive Services - 42 CFR 440.130(c) (EPSDT)

The State assures that all preventive services are provided to or directed exclusively toward the treatment of the Medicaid eligible child. Medically necessary services will be furnished to those under age 21 without limitation in accordance with Section 1905(r) of the Social Security Act. The State also assures that preventive services do not include any of the following:

A. Educational, vocational and job training services;

B. Room and board;

C. Services to inmates in public institutions as defined in 42 CFR §435.1010;

D. Services to individuals residing in institutions for mental diseases as described in 42 CFR §435.1010;

E. Recreational and social activities; and

F. Services that must be covered elsewhere in the West Virginia Medicaid State Plan.

Additional assurances related to Residential Intensive Treatment (RIT) and Specialized Residential Intensive Treatment (SRIT) services under this State Plan and Other Limited Health Benefits:

- The provision of RIT and SRIT services will not restrict an individual's free choice of Medicaid providers.
- The RIT and SRIT services will not be used to restrict an individual's access to other services under the plan.
- Individuals will not be compelled to receive RIT and SRIT services, condition receipt of preventive residential services on the receipt of other Medicaid services, or condition receipt of other Medicaid services on receipt of these RIT and SRIT services.
- Providers of RIT and SRIT services do not exercise the agency's authority to authorize or deny the provision of other services under the plan.
- Payment for RIT and SRIT services under the plan does not duplicate payments made to public agencies or private entities under other program authorities for the same purposes.
- Any individual, group of individuals or entity who meets the State's provider and practitioner qualifications may enroll in Medicaid and furnish the services under the plan.

RIT and SRIT provides medically necessary preventive residential services recommended by BMS or its designee and under the supervision and oversight of one of the following licensed practitioners operating within the scope of their practice and state licensing: a Medical Doctor (M.D.), Doctor of Osteopathic medicine (DO), Advanced Practice Registered Nurse (APRN) or Physician Assistant (PA). RIT and SRIT should prevent disease, disability, and other health conditions or their progression to address the health issues identified in the treatment plan.

Agencies providing RIT and SRIT services are organized and staffed to provide both general and specialized residential (e.g., non-institutional, non-hospital) interdisciplinary services twenty-four (24) hours a day, seven (7) days a week. RIT and SRIT services are organized to provide

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treatment where the individuals reside. Payment for RIT and SRIT does not include room and board payments and is not provided in hospitals, nursing facilities, psychiatric residential treatment facilities, or intermediate care facilities for individuals with Intellectual Disabilities (ICF/IDD).

The individual must require treatment that would not be able to be provided at a less restrictive level of care than is being provided on a twenty-four (24)-hour basis with direct supervision/oversight by professional staff.

The following are service components of the RIT and SRIT:

<u>Service</u>	<u>Description</u>	<u>Individual Staffing Qualifications</u>
<u>Physician Services</u>	<p><u>Physician services must be available 24 hours per day/7 days per week to:</u></p> <ol style="list-style-type: none"> <u>1. Provide consultation to clinical and residential staff regarding medication targets, risks, side effects, and clinical needs.</u> <u>2. Contribute to Continuous Quality Improvement (CQI) and risk management.</u> <u>3. Provide crisis response.</u> <u>4. Perform observation and assessment of the individual at least once a calendar week.</u> <u>5. Perform assessments to effectively coordinate all treatment, manage medication.</u> <u>6. Provide medical management of all psychiatric and medical problems.</u> <u>7. Participate in treatment team meetings.</u> 	<u>M.D., D.O. Board Certified or eligible, APRN, PA</u>
<u>Nursing Services</u>	<p><u>Nursing services must be available 24 hours per day/7 days per week to:</u></p> <ol style="list-style-type: none"> <u>9. Perform assessments of medical needs at intake.</u> <u>10. Schedule and coordinate medical appointments.</u> <u>11. Manage the supply of prescription medications.</u> 	<u>Registered nurse (RN), Licensed Practical Nurse (LPN)</u>

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	<p>12. <u>Provide supervision of medication administration.</u></p> <p>13. <u>Participate in treatment team meetings.</u></p> <p>14. <u>Coordinate medical areas of the discharge planning process.</u></p> <p>15. <u>Provide education to staff on medical needs of individuals served.</u></p> <p>16. <u>Contribute as needed to CQI and risk management initiatives.</u></p>	
<u>Medication administration</u>	<u>Administer medications under the supervision of an Office of Health Facility Licensure and Certification (OHFLAC) approved RN</u>	<u>AMAPs must meet all OHFLAC and WV Medicaid requirements.</u>
<u>Counseling, and treatment planning</u>	<p><u>Clinical staff must be available to provide services and clinical consultation 24 hours per day/7 days per week to:</u></p> <p>8. <u>Complete family and individual assessments.</u></p> <p>9. <u>Provide psychotherapy.</u></p> <p>10. <u>Provide face-to-face individual, family, and group therapy.</u></p> <p>11. <u>Assist with crisis de-escalation and crisis planning.</u></p> <p>12. <u>Participate in internal and external team meetings.</u></p> <p>13. <u>Contribute as needed to CQI and risk management initiatives.</u></p> <p>14. <u>Provide clinical supervision and guidance to address implementing treatment plans and evidence-based interventions.</u></p>	<p><u>Licensed Independent Clinical Social Worker (LICSW), Licensed Professional Counselor (LPC), Licensed Graduate Social Worker (LGSW), Licensed Clinical Social Worker (LCSW) and Licensed Psychologists/Supervised Psychologist who have experience working with children and youth.</u></p> <p><u>All clinical staff must meet state licensing rules for supervision and practice and must operate within their scope of practice.</u></p> <p><u>Clinical staff must maintain certifications necessary to adhere to all evidence-based models, assessments, and interventions.</u></p>
<u>Clinical Supervision</u>	<u>Clinical supervision of counseling and treatment planning</u>	<u>Licensed Independent Clinical Social Worker (LICSW), Licensed Professional Counselor</u>

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		<p><u>(LPC), Licensed Graduate Social Worker (LGSW), Licensed Clinical Social Worker (LCSW) and Licensed Psychologists who have experience working with children and youth. All clinical staff must meet state licensing rules for supervision and practice and within their scope of practice.</u></p> <p><u>Clinical staff must maintain certifications necessary to adhere to all evidence-based models, assessments, and interventions</u></p>
<p><u>Discharge Planning</u></p>	<p><u>1. Facilitates activities of daily living, self-help, and socialization skills.</u> <u>2. Provide daily support and intervention, including crisis response, co-facilitating group treatment and community meetings, and implementing individualized plans.</u></p>	<p><u>Staff must have high school diploma or GED and adhere to age eligibility guidelines:</u> <u>1. The minimum age for serving children aged 13 and older shall be 20 years of age.</u> <u>2. The minimum age for serving children aged 12 years and under shall be 18 years.</u></p>
<p><u>Skills Training and Development</u></p>	<p><u>Skills Training and Development is a combination of structured individual and group therapeutic activities offered to members who have basic skill deficits. These skill deficits may be due to factors, such as history of abuse or neglect, or years spent in institutional settings or supervised living arrangements that did not allow normal development in the areas of daily living skills.</u></p> <p><u>Therapeutic activities are focused on Skills Training and Development Services which are elementary, basic,</u></p>	<p><u>All staff must be approved by the LBHC credentialing committee.</u> <u>Professional staff must meet one of the following criteria:</u></p> <ol style="list-style-type: none"> <u>1. Physician</u> <u>2. Physician assistant</u> <u>3. APRN</u> <u>4. Licensed psychologist</u> <u>5. Supervised psychologist</u> <u>6. Licensed Professional Counselor</u> <u>7. Licensed Independent Clinical Social Worker</u>

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	<p><u>and fundamental to higher-level skills and are designed to improve or preserve a member's level of functioning. Therapeutic activities may be provided to a member in his/her natural environment through a structured program as identified in the goals and objectives described in the service plan. Therapeutic activities include but are not limited to learning and demonstrating personal hygiene skills; managing living space; manners; sexuality; social appropriateness; and daily living skills.</u></p>	<p>8. <u>Alcohol and Drug Counselor with master's degree in clinical field, only for substance abuse therapy treatment issues</u></p> <p>9. <u>Registered Nurse (some services)</u></p> <p>10. <u>Master's degree in an unlicensed human services field with 20 hours verified documented training specific to the target population served</u></p> <p><u>Paraprofessional staff must meet the following minimum criteria:</u></p> <ol style="list-style-type: none"> 1. <u>Be at least 18 years old</u> 2. <u>A high school diploma or Graduate Equivalent Degree OR Bachelor's level degree in a human services field with at least one year of specific experience providing services to the target population served</u> 3. <u>Be currently certified in Standard First Aid and Adult/Child Cardiopulmonary Resuscitation</u> 4. <u>Successfully completed Behavioral Health agency training in all the following criteria:</u> <ol style="list-style-type: none"> a. <u>Various aspects of developmental disabilities</u> b. <u>Instructional techniques</u>
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		<p><u>necessary to achieve objectives of individual's program plans</u></p> <ul style="list-style-type: none"> c. <u>Health related issues</u> d. <u>Recognition of abuse and neglect</u> e. <u>Individuals' rights and confidentiality</u> f. <u>Awareness of, and sensitivity to, family and individual's needs</u> g. <u>Non-aversive behavior intervention techniques for those providers who are implementing behavior support and intervention plans.</u>
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Services provided by RIT and SRIT practitioners are intended to provide treatment for individuals exhibiting severe functional disturbance in one or more of the following areas:

1. Severe disturbances in behavior and/or emotions; unable to function in multiple areas of their life including school, home, and/or community.
2. Severely impaired social functioning deficits including difficulty forming healthy peer relationships, social communication barriers, and antisocial behaviors.
3. Psychiatric disorder or substance abuse order which significantly disrupts the attainment of age-appropriate developmental abilities and precludes living in a less restrictive (i.e., home or family based) environment.
4. Complex trauma needs – including traumatic grief, hyper-arousal, re-experiencing, avoidance, adjustment, disassociation, and numbing that lead to significant functional impairment that cannot be addressed in a community-based setting.
5. Persistent and unpredictable aggression, which may include serious sexual acting-out Behavior.
6. Patterns of disruptive behavior, not a reaction to single events, that have not responded to less restrictive interventions.

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SRIT services provide treatment for individuals exhibiting serious emotional or behavioral disorders or disturbances with severe and persistent challenges in social, emotional, behavioral, and/or psychiatric functioning that often manifest in externalized behaviors, including violent, sexually abusive, and/or sexualized behaviors beyond the capacity of a RIT setting. Providers specializing in treatment for these targeted populations of individuals needing SRIT services will reflect the treatment needs and evidence-based interventions of the SRIT target populations. SRIT is provided to an individual with a co-occurring mental health diagnosis, who meet medical necessity for SRIT, and present with one of the following conditions provided by practitioners employed or contracted by the SRIT are expected to address specific intensive treatment needs beyond treatment available in a RIT setting:

- **Severe Aggressive and/or Violent Behaviors**

SRIT Severe Aggressive and/or Violent Behaviors services are needed to treat individuals presenting with mental health needs with co-occurring disorders of significant anger, aggression, violence, danger to others (or expected to result in serious physical harm), oppositional behavior, cruelty to animals, sexualized behaviors, and fire-setting. The individual exhibits a chronic pattern of behaviors that cannot be managed in the community because of the nature and/or frequency of their violence and aggression.

- **Problematic Sexual Behaviors (PSB)**

SRIT PSB treatment is needed for individuals who exhibit sexually abusive and offending behaviors. Individuals with sexually abusive and offending behaviors include both aggressive sexual behavior and sexual behavior in which the individual takes advantage of another person, including a younger or less powerful individual through seduction, coercion, or force. This population presents with mental health needs with co-occurring disorders of significant anger, aggression, violence, danger to others (or expected to result in serious physical harm), oppositional behavior, and cruelty to animals.

- **Neurodevelopmental and Comorbid Conditions (NACC)**

SRIT NACC treatment is needed for individuals presenting with mental health needs who have a combination of lower cognitive function, developmental delays, and serious behavioral and emotional concerns.

- **Autism Spectrum Disorder (ASD)**

SRIT ASD treatment is needed to treat individuals presenting with mental health needs and co-occurring ASD.

Eligible Providers:

All RIT and SRIT providers must be an LBHC, deemed by OHFLAC, and have provider agreement with BMS and may not be an Institution for Mental Diseases (IMD).

All RIT and SRIT providers must provide twenty-four (24) hours/day, seven (7) days/week structured and supportive living environment. Integration with community resources is provided to plan and arrange access to a range of educational and therapeutic services.

RIT and SRIT services are provided according to an individualized person-centered treatment plan, which may be subject to prior approval by BMS or its designee. The activities included in the service must be intended to achieve identified treatment plan goals or objectives of the Medicaid eligible child. The treatment plan should be developed in a person-centered manner with the active participation of the individual, family, and practitioners and be based on the

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STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: West Virginia

Supplement 2 to Attachment 3.1-A and 3.1-B

individual's condition and the standards of practice for the provision of these specific rehabilitation services.

An agency providing RIT and/or SRIT must coordinate with the child's community resources including Medicaid community-based providers, when possible, with the goal of transitioning the child out of the RIT or SRIT as soon as possible and appropriate. Discharge planning begins upon admission with concrete plans for the child to transition back into the community beginning within the first thirty (30) days of admission and every ninety (90) days after with clear action steps and target dates outlined in the treatment plan. The treatment plan must include measurable discharge goals.

All RIT and SRIT providers must have a current accreditation by Commission on Accreditations of Rehabilitation Facilities (CARF), The Joint Commission (TJC), Council on Accreditation (COA), or another independent Health and Human Services (HHS) approved organization.

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