

## Revision Notice 16-2

Effective July 1, 2016

| Revised      | Title   | Change  |
|--------------|---|---|
| Definitions  | Definitions   | Added Definitions for:<br>1) HCBS-AMH Comprehensive Provider Agency<br>2) Local Behavioral Authority (LBHA)<br>3) Qualified Credentialed Counselors (QCC) |
| Section 1400 | Introduction  | Updated Jail Diversion requirements   |
| Section 2110 | The Recovery Manager is Responsible to  | Deleted Process Description and Updated Reference Sections  |
| Section 2200 | Roles of the Provider Agency  | Updated verbiage to reflect change in terminology from consumer to HCBS-AMH participant   |
| Section 2400 | The Role of the Comprehensive Provider Agency                                 | Deleted Uniform Assessment information  |
| Section 3100 | Initial Criteria  | Updated verbiage pertaining to Medicaid Benefit   |
| Section 3400 | Evaluation and Eligibility Determination                                      | Updated Renumbering of section  |
| Section 4000 | HCBS-AMH Uniform Assessment (UA)  | Deleted Crisis Uniform Assessment type and added it to Uniform Assessment Status  |
| Section 4500 | Financial Screening   | Included Jail Diversion and Emergency Room information  |
| Section 5000 | Referral and Pre-Enrollment Process   | Updated Pre-Enrollment Process to include "pending status"  |
| Section 5310 | Initial Criteria Report (ICR)   | Updated to more specific language from "Psychiatric hospital" to "Long Term Hospitalization"  |
| Section 5400 | Pre-Enrollment  | Deleted section   |
| Section 5510 | Indigent Waitlist for Individuals Meeting Long-term Stay Needs Based Criteria | Deleted Indigent from Title of this section. Updated verbiage for Long Term Hospitalization and financial eligibility                                     |
| Section 6000 | Enrollment into HCBS-AMH  | Revised Notification responsibilities   |
| Section 6400 | Recovery Management Entity Enrollment Responsibilities                        | Updated Numbering of sections. Included new information concerning RM Enrollment responsibilities. Previous 6400 is now 6430                              |

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| Section 6500  | HCBS-AMH Comprehensive Provider Agency Enrollment Responsibilities           | Updated Section Title name and deleted information relating to RM assisting with Provider Notification  |
| Section 7300  | Initial IRP  | Deleted Provider Selection verbiage   |
| Section 7710  | Submission of the Initial IRP  | Deleted "Provider Selection Form" from the email requirements   |
| Section 7730  | Submission of the Transfer IRP   | Updated Uniform Assessment language   |
| Section 9100  | HCBS-AMH Service Definitions   | Updated content language for Host /Home Companion, Assisted Living, and Supervised Living   |
| Section 9205  | Host Home/Companion Care   | Updated to include no more than 3 HCBS-AMH individuals may be placed at the same time at the same location                                      |
| Section 9300  | HCBS-AMH Provider Qualifications   | Updated verbiage for Community Psychiatric Supports and Treatment to include allowance for supervision of providers who do not have competence. |
| Section 9423  | Coordination with DSHS to Obtain Preauthorization for RM Conversion Services | Updated procedure by adding a link to HCBS-AMH website for more information. Deleted Conversion Process information.                            |
| Section 12500 | Reduction in Services  | New section created to reflect process involved in the event of reduction of services   |
| Section 13420 | Progress Note  | Updated to include TAC reference  |
| Section 13510 | HCBS-AMH Service Reporting   | Updated to include explanation and direction in the Process flow  |
| Section 13530 | Critical Incident Reporting  | Updated to include "Comprehensive" to the "HCBS-AMH Provider" designation   |
| Section 13620 | Credentialing for Service Provision within the State Hospital                | Deleted "License" verbiage for Recovery Manager   |
| Section 20000 | Non-Duplication of Services  | New section created to address Non-Duplication of Services for Medicaid Services  |

