

Ryan White Program
Service Area Standards: Mental Health
Revised – January 14, 2014

HRSA Definition: Mental Health Services are the provision of outpatient psychological and psychiatric screening, assessment, diagnosis, treatment, and counseling services offered to clients living with HIV. Services are based on a treatment plan, conducted in an outpatient group or individual session, and provided by a mental health professional licensed or authorized within the state to render such services. Such professionals typically include psychiatrists, psychologists, and licensed clinical social workers.

All subrecipients must meet universal standards requirements in addition to service area standards for which they are funded.

Standard	Measure	Data Source
MH 1: Diagnosis	<p>1.1 Clients of clinical mental health services will have a DSM-5 diagnosis through one of the following:</p> <ul style="list-style-type: none"> a. Diagnosis made by the program clinician b. Documentation of diagnosis made by another licensed clinician. <p>1.2. DSM-5 diagnosis will be reviewed and updated annually or more frequently as client status indicates</p> <p>1.3 One to two diagnostic assessment visits are reimbursable for all clients in need of diagnosis; a third visit is reimbursable for clients who present with symptoms of severe mental illness or complicating comorbidities.</p>	<p>1.1. Client record includes dated, signed documentation of an initial DSM-5 diagnosis by a licensed clinician.</p> <p>1.2. Client record includes dated, signed documentation of a DSM-5 diagnosis review that is no more than one year old.</p> <p>1.3 Client record includes dated, signed documentation of each diagnostic assessment visit and notes client status to justify the number of assessment sessions.</p>
MH 2: Treatment Plan	2.1 Each clinical mental health client will have a detailed treatment plan, based on the diagnosis and clinician and program staff observation of the client's subjective and objective needs and level of function.	2.1 Client record includes a documented treatment plan with measurable objectives that is updated at least quarterly.
MH 3: Assessments, Referrals, and Linkages	<p>3.1. Clients are assessed for whether they have accessed primary HIV medical care every six months and referred if they do not meet standards for being in care.</p> <p>3.2. Clients are referred, as appropriate, to medical case management; client is asked to sign release of information (ROI) to coordinate services with case manager as indicated.</p>	<p>3.1. Form I in MN CAREWare</p> <p>3.2 Client record has dated, signed documentation of coordination of service</p>

Standard	Measure	Data Source
	3.3. Clients are referred, as appropriate, to psychiatric, higher intensity psychological or substance abuse treatment services; client is asked to sign release of information (ROI) to coordinate services with other behavioral health services as indicated..	activities and, if appropriate, ROI. 3.3 Client record has dated, signed documentation of coordination of service activities and, if appropriate, ROI.
MH 4: Culturally Appropriate Services	4.1. Client assessments will include sufficient information about race, ethnicity, faith community, gender and sexual orientation and other cultural indicators to facilitate a plan for clinical mental health services that are culturally accessible by the client.	4.1. Client record has dated, signed documentation of assessment for client cultural needs.
MH 5: Documentation	5.1 A complete, current, secure individual record is maintained for each client receiving mental health services that documents diagnosis, ongoing assessments, progress of treatment plan, referrals and care coordination, all services provided and program/client contacts. 5.2 Client records document and support each Ryan White Program funded service provided.	5.1 Client record has dated, signed hard signed hard copy or electronic documentation as specified for each individual standard. 5.2 a. Each Ryan White Program funded service is entered into MN CAREWare within 30 days. 5.2.b. Individual client records include dated, signed documentation to support each service provided.
MH 6: Provider Qualifications	6.1 All clinical mental health services are provided by one of the following:	6.1.a. Program file contains copies of current licensure

Standard	Measure	Data Source
	<p>a. Licensed mental health professionals who are MA qualified, except allied mental health professionals and adult mental health rehabilitation professionals.</p> <p>b. An individual certified by a tribal council as a mental health professional, serving a federally recognized tribe</p> <p>c. Mental health practitioners who qualify as clinical trainees</p> <p>6.2 Clinical mental health programs may provide additional client support and administrative assistance by staff with knowledge of HIV and skills and experience to provide psychosocial support to clients, coordinated with clinical mental health services.</p>	<p>and MA Provider Agreement (DHS-4138).</p> <p>6.1.c If a graduate clinician provides service, program file contains a copy of the Qualified Mental Health Professional Clinical Supervisor Assurance Statement (DHS-6330).</p> <p>6.2 Program file contains documentation of all current direct service staff qualifications including education, work experience, skills assessment, and relevant certification or licensure where applicable.</p>
MH 7: Third Party Payment	7.1. Programs have documentation of protocols for billing and collection of payments from third party payers, including Medicare and Minnesota Medical Assistance, ensuring that the Ryan White Program is the payer of last resort.	7.1 Program file contains protocols for third party billing and payment collection; financial audits demonstrate that RWP is payer of last resort.