



## INPATIENT MENTAL HEALTH SERVICES FOR INDIVIDUALS WITH INTELLECTUAL DISABILITIES

### **PURPOSE**

Performance specifications are intended to enhance MassHealth Enrollee experience and outcomes by promoting transparency and consistency across Plans and providers. Performance specifications are expectations imposed on providers who contract for these specific and related services. Information contained in this document is based on publicly available documents, Plan expectations, your contract, and MassHealth guidance. This information should be and will look materially like any other MassHealth contracted Plan. Performance specifications, your provider manual, and other requirements can be found at [providerexpress.com](http://providerexpress.com).

Providers contracted for this level of care or service are expected to comply with applicable regulations set forth in the Code of Massachusetts Regulations, and all requirements of these service-specific performance specifications. In addition, providers of all contracted services are held accountable to the General Performance Specifications. Where there are differences between the service-specific

### **OVERVIEW**

**Inpatient Mental Health Services for Individuals with Intellectual Disabilities (ID)** are specialized inpatient services for Enrollees with co-occurring mental health conditions and intellectual disabilities. In addition to all the clinical service components provided within Inpatient Mental Health Services, the program provides clinical expertise and intervention specifically pertaining to this population.

The following Inpatient Mental Health Services for Individuals with ID performance specifications are a subset of the Inpatient Mental Health Services performance specifications. As such, Inpatient Mental Health Services for Individuals with ID providers agree to adhere to both the Inpatient Mental Health Services performance specifications and to the Inpatient Mental Health Services for Individuals with ID performance specifications contained within. Where there are differences between the Inpatient Mental Health Services and Inpatient Mental Health Services for Individuals with ID performance specifications, these Inpatient Mental Health Services for Individuals with ID take precedence.

### **SERVICE COMPONENTS**

1. The provider ensures that all service components required in the Inpatient Mental Health Services performance specifications are provided to Enrollees enrolled in Inpatient Mental Health Services for Individuals with ID. Additionally, the provider ensures the following service components are provided:

- a) Neurological assessment
  - b) Neuropsychological testing
  - c) Behavioral assessment and behavioral treatment planning
2. The program has the capacity to provide, or refer to the following, as clinically indicated:
    - a) Speech and language assessment
    - b) Endocrinology consultation
    - c) Nutritional consultation
    - d) Smoking cessation assessment
  3. The provider admits and has the capacity to treat Enrollees who have co-occurring mental health conditions and ID. The provider ensures specific staffing, services, and programming to meet the clinical and milieu needs of this population.

## **STAFFING REQUIREMENTS**

1. The provider complies with the staffing requirements of the applicable licensing body, the staffing requirements in the Plan service-specific performance specifications and the credentialing criteria outlined in your provider manual that can be found at [providerexpress.com](http://providerexpress.com).
2. The provider complies with all provisions of the related performance specifications.
3. The provider ensures that the attending psychiatrist has had previous training, experience, and demonstrated expertise in treating individuals with ID, and that he/she is actively engaged in relevant training to maintain current expertise and relevant certification.
4. The program utilizes a multi-disciplinary staff with established skills, training, and/or expertise in the treatment of Enrollees with mental health conditions and ID.
5. The provider has access to medical consultation with expertise in assessing the medical condition and needs of Enrollees with co-occurring disorders, and regularly screens for such conditions, as appropriate.
6. The provider ensures that mandatory trainings related to the clinical needs of this specialty population are provided to all staff directly responsible for providing any treatment component during an Enrollee's stay to ensure clinical competency among the treatment team. Trainings include but are not limited to the assessment and treatment of individuals with ID and learning disorders and common comorbid conditions and concerns (e.g., obesity, Post-Traumatic Stress Disorder, substance use disorders, etc.).
7. The provider maintains staffing levels appropriate to ensuring the safety of Enrollees and treatment intensity to meet Enrollee's clinical needs.

## **SERVICE, COMMUNITY AND OTHER LINKAGES**

1. The provider works collaboratively with their Local Education Authority (LEA) and involves state agencies including but not limited to Department of Developmental Services (DDS), Department of Children and Families (DCF), Department of Mental Health (DMH) and others to coordinate treatment and discharge planning.
2. The provider includes information about community-based services and supports for Enrollees and families, including but not limited to the Federation for Children with Special Needs, the

Association for Retarded Citizens (ARC), DDS resources, and local advocacy and support groups in their wellness and recovery information and resources available to Enrollees and their families.

## **PROCESS SPECIFICATIONS**

### **Assessment, Treatment Planning and Documentation**

1. All required assessments include the consideration of the impact and special needs related to the Enrollee's with ID.
2. All treatment plans and treatment plan reviews and updates include goals and interventions specific to the Enrollee's needs related to their ID.
3. With appropriate consent and as applicable, staff from LEA, DDS, DMH, DCF, and/or other state agencies and providers are included in treatment and discharge planning processes and meetings.

### **Discharge Planning and Documentation**

1. The provider ensures that all discharge planning activities address the Enrollee's needs related to their co-occurring psychiatric conditions and ID, and that the discharge and/or aftercare plan includes aftercare services that offer appropriate services to this population and their caregiving families.

## **QUALITY MANAGEMENT**

1. The provider will develop and maintain a quality management plan that is consistent with their contractual responsibilities to Optum, and which utilizes appropriate measures to monitor, measure, and improve the activities and services it provides.
2. A continuous quality improvement process is utilized and may include outcome measures and satisfaction surveys to measure and improve the quality of care and services delivered to Enrollees, including youth and their families.
3. Clinical outcomes data must be made available to Optum upon request and must be consistent with the performance specifications of this service.
4. Providers must report any adverse incidents and other reportable events that occur to the relevant authorities.