

U.S. Department of Health and Human Services Health Resources and Services Administration

NHSC Behavioral Health Program Notification

The National Health Service Corps (NHSC) announced two new policies for behavioral health participants and sites with the launch of the FY 2016 Loan Repayment Program (LRP) Application and Program Guidance (APG). Behavioral health providers applying to the NHSC, beginning with the FY 2016 LRP application cycle, must adhere to the new requirements. The key changes impact both NHSC behavioral health participants' clinical practice and site requirements. They are summarized below:

1. NEW Clinical Practice Requirements

Full-time behavioral health providers must work a minimum of 40 hours/week, for a minimum of 45 weeks/service year. At least 32 hours/week are spent providing patient care at the approved service site(s); of which no more than 8 hours/week may be spent in a teaching capacity. The remaining 8 hours/week are spent providing patient care at the approved site(s), providing patient care in alternative settings (e.g., hospitals, nursing homes, shelters) as directed by the approved site(s), and as an extension of care at the approved site(s), or performing clinical-related administrative activities.

Half-Time behavioral health providers must work a minimum of 20 hours/week, for a minimum of 45 weeks/service year. At least 16 hours/week are spent providing patient care at the approved service site(s); of which no more than 4 hours/week may be spent in a teaching capacity. The remaining 4 hours/week are spent providing patient care at the approved site(s), providing patient care in alternative settings (e.g., hospitals, nursing homes, shelters) as directed by the approved site(s), and as an extension of care at the approved site(s), or performing clinical-related administrative activities.

Activities	Full-Time Hours	Half-Time Hours
Patient care at approved site(s). May include no more than	Minimum of 32	Minimum of 16
8 hours (4 hours for half-time) in a teaching capacity.	hours/week	hours/week
Combination of the following:		
 Patient care at the approved site(s) 	Maximum of 8	Maximum of 4
 Patient care in alternative settings as directed by site(s) 	hours/week	hours/week
Clinical-related administrative activities		
Total	Minimum of 40	Minimum of 20
Total	hours/week	hours/week

2. NEW Community-Based Comprehensive Behavioral Health Services Requirement

NHSC behavioral health providers are required to practice in a community-based setting that provides access to comprehensive behavioral health services. NHSC sites that do not offer all required services must demonstrate a formal affiliation with a comprehensive communitybased primary behavioral health setting or facility to provide these services.

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.¹ 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.

POLICY IMPLEMENTATION AND IMPLICATIONS FOR NHSC PARTICIPANTS AND SITES

To help NHSC participants and sites come into alignment with the new behavioral health policies, the following implementation steps will begin immediately:

- A. All NHSC-approved sites must support behavioral health clinicians in meeting the new clinical practice requirements. These new requirements reflect a reduction in the amount of time that can be spent providing patient care in alternative settings. This policy applies to all behavioral health participants awarded a new FY 2016 LRP contract and any future (new or continuation) LRP contracts, as well as to behavioral health participants in the Scholarship Program (SP) and Students to Service (S2S) Program who are awarded beginning in FY 2017. Participants awarded under a previous APG will be held to the terms of their current contract. It is the responsibility of the clinician and the site to notify BHW if an applicant or participant cannot or does not meet their contract requirements.
- **B.** 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 sites² must verify (using the *NHSC Behavioral Health Services Checklist*³ on pages 7-9 and supporting documentation) that they offer comprehensive primary behavioral health care services including, but 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/emergency services (including 24-hour crisis call access); consultative services; and care coordination 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 to provide these services. Note that NHSC-approved sites

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

² 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.

³ HRSA is requesting OMB approval for the *NHSC Behavioral Health Services Checklist*. Pending OMB approval, the *NHSC Behavioral Health Services Checklist* included in this program notification may be used as an example of the information that NHSC behavioral health service sites must verify in order to be in compliance with the Community-Based Comprehensive Behavioral Health Services Requirement.

must provide the following services directly, not through affiliation or referral: screening and assessment, treatment plans, and care coordination and case management.

CERTIFICATION GUIDELINES FOR NHSC BEHAVIORAL HEALTH SITES

Upon final approval by the Office of Management and Budget (OMB), sites interested in recruiting behavioral health clinicians through the NHSC must submit the NHSC Comprehensive Behavioral Health Services Checklist and all 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 supplements 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, please review the NHSC Site Reference Guide.

Site Inactivation

Non-exempt behavioral health NHSC-approved sites that do not submit the information included in the NHSC Comprehensive Behavioral Health Services Checklist (the checklist may be used as an example pending OMB approval) and supporting documentation, or are not verified by BHW as meeting the new policy requirements, will be inactivated no later than December 31, 2017. Current NHSC clinicians, who are otherwise meeting the conditions of their NHSC contract, will be allowed to remain at a site inactivated under this policy and complete their current service commitment. NHSC clinicians may not enter a new or continuation contract at, or transfer to, an inactive site.

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 hour requirements as outlined in this Program Notification and NHSC APG.

The following NHSC-approved sites are exempt from the Comprehensive Behavioral Health Services Certification process: FQHCs (Health Center Grantees), FQHC Look-alikes, 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.

COMPREHENSIVE BEHAVIORAL HEALTH SERVICES CHECKLIST				
CERTIFICATION TIMELINES				
	(non-exempt sites)			
Behavioral Health Practice Site	Certification Process	Timeline		
All private practice sites (solo/group) with FY 2016 LRP applicants	Must verify compliance with the Comprehensive Behavioral Health Services Requirement. The Bureau of Health Workforce (BHW) will reach out directly to private practice behavioral health sites with LRP applicants to verify compliance. LRP applicants at private practice sites that do not meet the practice requirements are ineligible and will not receive a 2016 award.	Verify by May 30, 2016		
All active sites with FY 2017 LRP Continuation applicants	Must submit the Checklist and supporting documentation through the <u>Customer Service Portal</u> and be certified by BHW before a clinician can be awarded for a continuation award. For a timeline of continuation contract application deadlines, visit the NHSC <u>website</u> .	Based on LRP Continuation Application Deadlines <u>August-December:</u> Submit by September 1, 2016 <u>February-June:</u> Submit by December 1, 2016		
All new <i>or</i> inactive sites (formally approved)	Must submit the Checklist and supporting documentation through the <u>Customer Service Portal</u> . NHSC Site Applications and Recertifications will not be considered for approval unless comprehensive behavioral health services have been certified by BHW.	Submit by October 4, 2016		
All active sites with FY 2017 LRP applicants	Must submit the Checklist and supporting documentation through the <u>Customer Service Portal</u> and be certified by BHW before a clinician will be considered for an NHSC LRP award.	Submit by March 1, 2017		
All active sites interested in hiring an NHSC Scholar or S2S psychiatrist in 2017	Must submit the Checklist and supporting documentation through the <u>Customer Service Portal</u> and be certified by BHW before an NHSC clinician can be placed.	Submit by March 1, 2017		
All active sites (not included above)	Must submit the Checklist and supporting documentation through the <u>Customer Service Portal</u> . NHSC behavioral health sites that do not submit by the deadline or are not certified by BHW will be inactivated by December 31, 2017.	Submit by October 4, 2017		

TECHNICAL ASSISTANCE

NHSC sites or sites interested in seeking NHSC site approval may contact their BHW <u>State Lead</u> to obtain technical assistance on the new policy requirements and/or on submitting documentation to demonstrate compliance with this policy requirement. BHW will conduct outreach in spring/summer 2016 to NHSC private practice sites, with particular emphasis on those with FY 2016 LRP applicants, to ensure understanding and compliance with new requirements.

Bureau of Health Workforce



U.S. Department of Health and Human Services Health Resources and Services Administration

NHSC PROGRAM DEFINITIONS

Clinical-Related Administrative, Management or Other Activities – Includes charting, care coordination activities, training, laboratory follow-up, patient correspondence, attending staff meetings, activities related to maintaining professional licensure, and other non-treatment related activities pertaining to the participant's approved NHSC practice. Any time spent in a management role (e.g., medical director) is also considered an administrative activity.

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 Health Services – 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/emergency services (including 24-hour crisis call access); consultative services; and care coordination and case management.

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

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:

- Signatures from both parties and description of the formal relationship.
- 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 followup 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 website: http://www.integration.samhsa.gov/operations-administration/contracts-MOUs.

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



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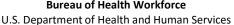
COMPREHENSIVE BEHAVIORAL HEALTH SERVICES CERTIFICATION SUBMISSION INSTRUCTIONS

All NHSC sites that provide behavioral health services must submit the information included in the NHSC Comprehensive Behavioral Health Services Checklist by following the instructions below:

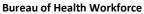
- 1. Review the NHSC Behavioral Health Program Notification and Comprehensive Behavioral Health Services Certification requirements.
- 2. Prepare and sign documentation which verifies compliance with the Community-Based Comprehensive Behavioral Health Services Requirement. Sites may use (1) the example NHSC Comprehensive Behavioral Health Services Checklist, which is pending OMB approval, or (2) other documentation that verifies all information included in the Checklist.
- 3. Collect any applicable formal affiliation agreements.
- 4. Log in to your Customer Service Portal account.
 - a. Click on the name of the applicable site (you must upload one certification for each site location).
 - b. Under Need Assistance, click on Ask a Question about the NHSC.
 - c. Under *Please select a category*, select *Behavioral Health Policy Certification* (or *General* if not available).
 - d. In the *Comment* section, type "Comprehensive Behavioral Health Services Certification" and any other relevant comments.
 - e. Upload the documentation verifying compliance with the NHSC Comprehensive Behavioral Health Services Requirement, including <u>all</u> applicable formal affiliation agreements.
 - f. Click SEND.

BHW will review all submissions.

If you experience technological difficulties, contact the BHW Customer Care Center at 1-800-221-9393 Monday-Friday (except Federal holidays), 8:00 am to 8:00 pm ET. If you have questions on the NHSC Comprehensive Behavioral Health Services Certification requirements, contact your BHW State Lead.



Health Resources and Services Administration





NHSC COMPREHENSIVE BEHAVIORAL HEALTH SERVICES CHECKLIST⁴

Attach all signed affiliation agreements for any service elements not provided onsite.

Name of Site			
Address			
Section I. Core Comprehensive Behavioral Health Service Elements The following three sets of services <i>must</i> be provided onsite; these services cannot be offered through affiliation.	Provide (Selec Yes	d Onsite t One) No	
1. <u>Screening and Assessment</u> : <i>Screening</i> is the <u>practice</u> 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. <i>Assessment</i> is a structured clinical examination that analyzes patient biopsych-social information to evaluate a behavioral health complaint.			
2. <u>Treatment Plan</u> : 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.			
3. <u>Care Coordination and Case Management</u> : Care Coordination is 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. Case Management is 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.			
	T		
Section II. Additional Comprehensive Behavioral Health Service Elements The following four sets of services <i>may</i> be provided onsite or through formal affiliation. Signed affiliation agreements must be uploaded to the <u>Customer Service Portal</u> for any services not provided onsite.		Provided Onsite (Select One) Yes No	
1. <u>Diagnosis</u> : 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).			

⁴ Pending OMB approval, the NHSC Comprehensive Behavioral Health Services Checklist is an example of the information needed to meet the Community-Based Comprehensive Behavioral Health Services Requirement.

Section II. Additional Comprehensive Behavioral Health Service Elements The following four sets of services <i>may</i> be provided onsite or through formal affiliation. Signed affiliation agreements must be uploaded to the <u>Customer Service Portal</u> for any services not provided onsite.		Provided Onsite (Select One) Yes No	
2. Therapeutic Services (including, but not limited to, psycomanagement, chronic disease management, and Substationary of evidence-based or promising behavioral health preducing or ameliorating behavioral health symptoms, in restore/maintain a patient's health (e.g., individual, familicounseling; psychopharmacology; and short/long-term health (e.g., individual).	practice(s) with the primary goal of approve functioning, and ly, and group psychotherapy/		
3. <u>Crisis/Emergency Services</u> (including, but not limited to, method(s) used to offer immediate, short-term help to in that produces emotional, mental, physical, and behaviors instances, a crisis may constitute an imminent threat or odisability. (Note: generic hotline, hospital emergency room)	ndividuals who experience an event al distress or problems. In some danger to self, to others, or grave		
4. <u>Consultative Services</u> : 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.			
Section III. Affiliation Agreements for Off-Site Behavioral Health Services For each of the services under Section II that are provided off-site, a formal affiliation agreement(s) must be uploaded to the Customer Service Portal. Under this section, the NHSC-approved site must provide basic information for each entity with which a formal affiliation is in place.			
Affiliated Entity: Address:	Affiliated Entity: Address:		
Services Covered Under Affiliation:	Services Covered Under Affiliation:		
Date Affiliation Agreement Executed:	Date Affiliation Agreement Executed:		
Services available under this agreement are offered to all without regard for the ability to pay? Yes No	Services available under this agreement are offered to all without regard for the ability to pay? Yes No		
Affiliated Entity:	Affiliated Entity:		
Address:	Address:		
Services Covered Under Affiliation:	Services Covered Under Affiliation:		
Date Affiliation Agreement Executed:	Date Affiliation Agreement Executed	l:	
Services available under this agreement are offered to all without regard for the ability to pay? Yes No	Services available under this agreem without regard for the ability to pay		ered to all No

Section IV. Certification of Compliance with Behavioral Health Clinical Practice Requirements Certify that the behavioral health site adheres to the new clinical practice requirements for behavioral health providers under the NHSC and supports NHSC participants in meeting their obligation related to the clinical practice requirements.		Site Meets Criteria (Select One) Yes No	
The site offers employment opportunities that adhere to the NHSC definition of full-tir clinical practice. Full-time clinical practice for behavioral health providers means a mir of 40 hours/week, for a minimum of 45 weeks/service year. At least 32 hours/week are providing patient care at the approved service site(s). Of the minimum 32 hours spent providing patient care, no more than 8 hours/week may be spent in a teaching capacit remaining 8 hours/week are spent providing patient care at the approved site(s), provipatient care in alternative settings (e.g., hospitals, nursing homes, shelters) as directed approved site(s), and as an extension of care at the approved site, or performing clinical related administrative activities.	imum e spent y. The ding by the		
The site offers employment opportunities that adhere to the NHSC definition of half-time clinical practice. Half-time clinical practice for behavioral health providers means a minimum of 20 hours/week, for a minimum of 45 weeks/service year. At least 16 hours/week are spent providing patient care at the approved service site(s). Of the minimum 16 hours spent providing patient care, no more than 4 hours/week may be spent in a teaching capacity. The remaining 4 hours/week are spent providing patient care at the approved site(s), providing patient care in alternative settings (e.g., hospitals, nursing homes, shelters) as directed by the approved site(s), and as an extension of care at the approved site, or performing clinical-related administrative activities.			
Section V. Site Certification: By signing below, the applicant is affirming the truthfulness and accuracy of the inform	ation in th	nis document.	
I,, hereby certify that the information provided above, and all supporting information, is true and accurate. I understand that this information is subject to verification by the NHSC.			
Signature		Date	
OFFICIAL NHSC USE ONLY			
Recommended By: Certified		Not Certified	d
Comments:	•		