

Revision Notice 16-2

Effective July 1, 2016

Revised	Title	Change
Definitions	Definitions	Added Definitions for: 1) HCBS-AMH Comprehensive Provider Agency 2) Local Behavioral Authority (LBHA) 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

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 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