
Child and Family Behavioral Health

Presented to
Senate Human Services, Mental Health and Recovery Committee

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Chelsea Holcomb, LCSW
Child and Family Behavioral Health Director



Children's Behavioral Health System

1. **Child and Family → Mental Health and Substance Use Treatment Definition in Oregon**
2. **Continuum of Care overviews**
3. **Applied Behavioral Analysis (ABA) and Behavioral Rehabilitative Services (BRS)**

Treatment definition

OAR 309-019-0105

"Treatment" means the planned, individualized program of medical, psychological, and rehabilitative procedures, experiences, and activities designed to remediate symptoms of a DSM diagnosis that are included in the service plan.

“Behavioral Health Treatment” means treatment for mental health, substance use disorders, and problem gambling.

OAR 410-172-0600

“Behavioral Health Services” means medically appropriate services rendered or made available to a recipient for treatment of a behavioral health diagnosis.

Treatment can be provided in many settings and does not necessarily involve a placement

Assessing a need for behavioral health treatment

At the time of entry, an assessment shall be completed.

- a) Qualified program staff shall complete the assessment as follows:
 - A. A Qualified Mental Health Program (QMHP) in mental health programs;
 - B. Supervisory or treatment staff in substance use disorders treatment programs; or
 - C. Supervisory or treatment staff in problem gambling treatment programs.
- b) Each assessment shall include sufficient information and documentation to justify the presence of a diagnosis that is the medically appropriate reason for services;**

For substance use disorders services, each assessment shall be consistent with the dimensions described in the ASAM and shall document a diagnosis and level of care determination consistent with the DSM and ASAM

Who can complete the assessment?

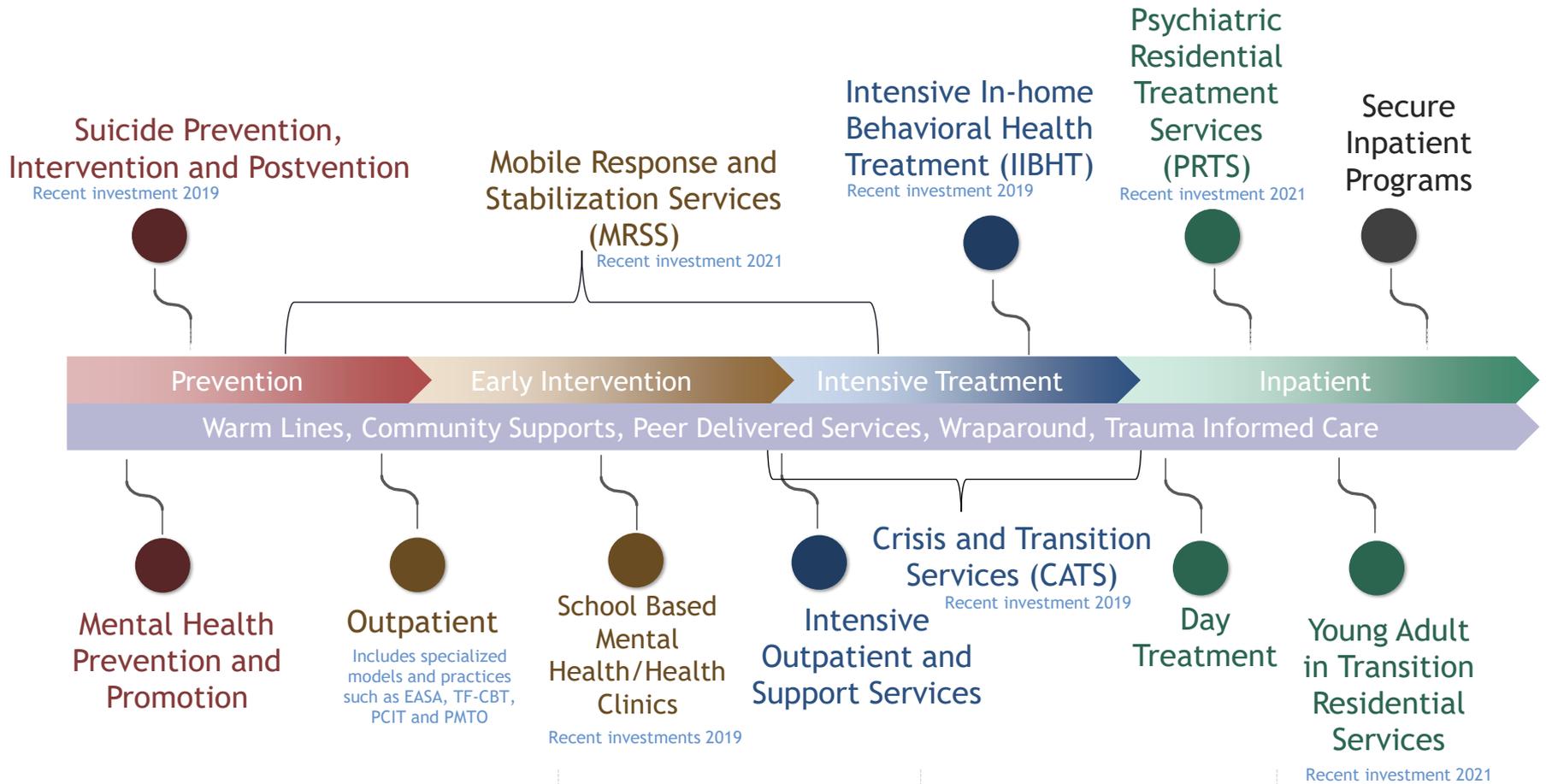
- Mental Health
 - Qualified Mental Health Professional (QMHP) or above
 - DSM 5 Diagnosis
- Substance Use
 - Certified Alcohol Drug Counselor (CADC)
 - DSM 5 Diagnosis + American Society of Addiction Medicine (ASAM)

For Medicaid, DSM 5 qualified primary diagnosis - [Above the Line](#)

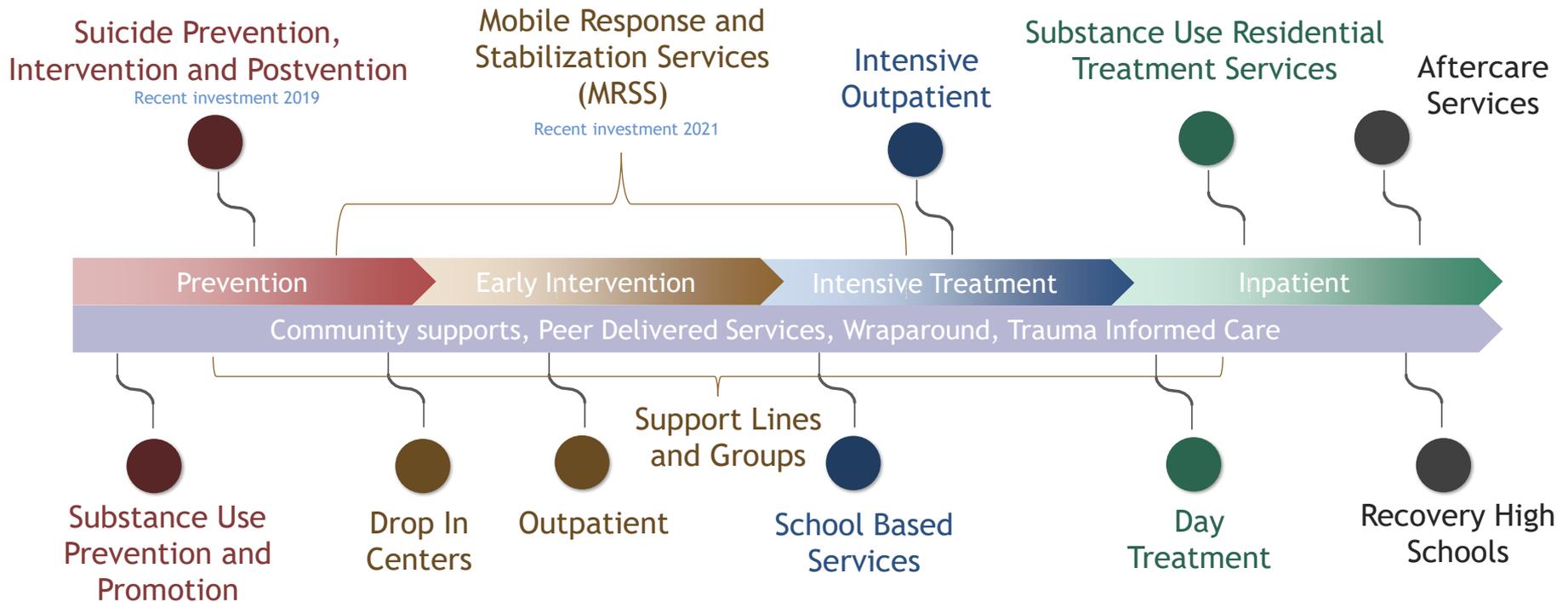
Oregon Administrative Rules

- 309-019 for Outpatient
- 309-018 and 022 for Behavioral Health Intensive Treatment Services

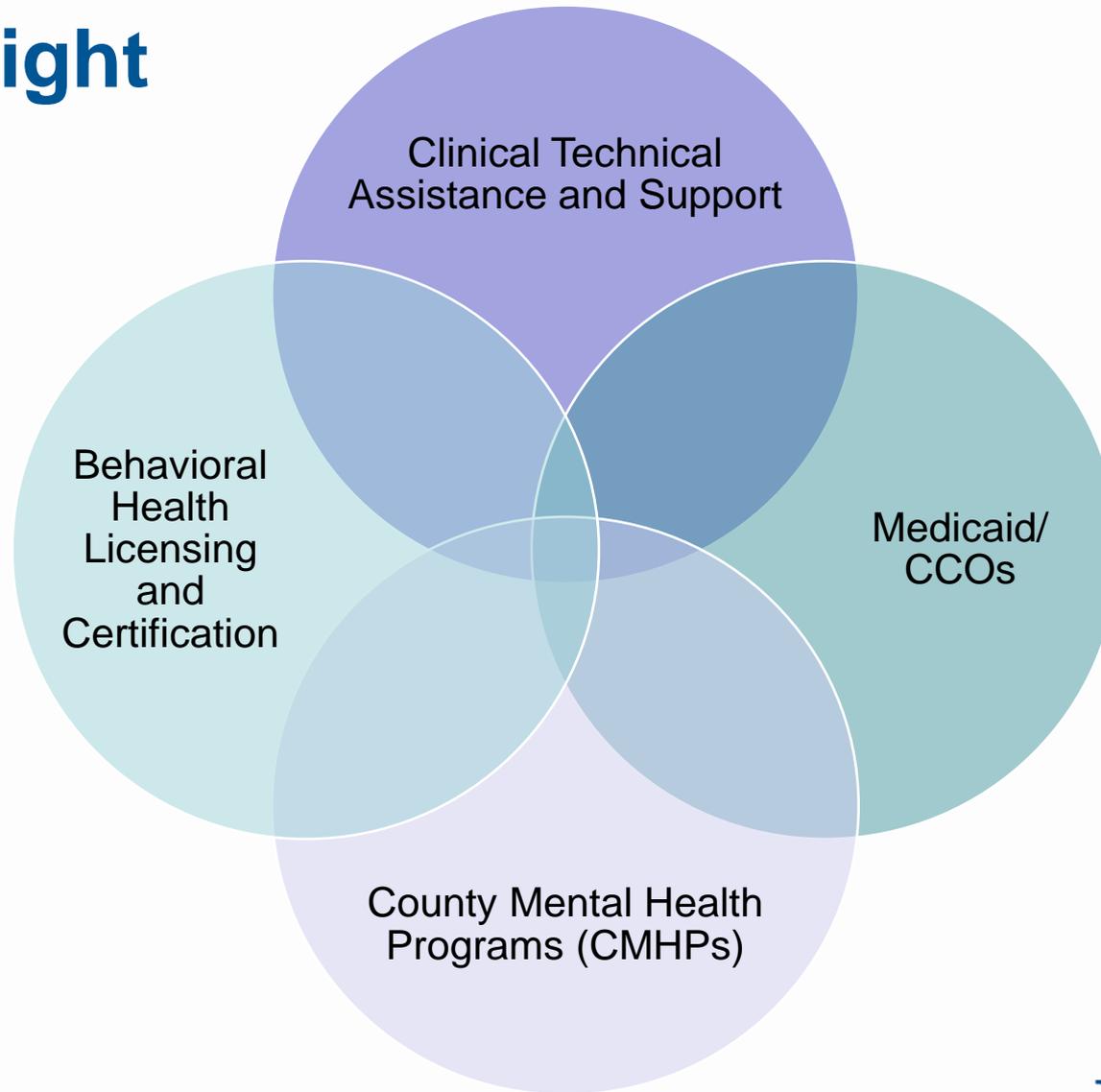
Child and Family Mental Health Continuum



Child and Family Substance Use Disorder Continuum



Oversight



Applied Behavioral Analysis (ABA)

OAR 410-172

- Prior to receiving services, individuals receiving ABA services for the treatment of autism spectrum disorder (ASD) shall have an evaluation by a licensed practitioner, described in OAR 410-172-0760(1)(a–d), experienced in the diagnosis and treatment of autism using the current DSM criteria
- Also includes substantial testing and documentation for a prior authorization



SB 365 (2013)

CCO Contract (2017)

SB 358 (2021)

Oversight for ABA

There are current over 60 ABA providers in Oregon

OHA current oversight of ABA programs include proactive and retroactive:

- Prior Authorization
- Medicaid Billing Oversight
- Complaint Response

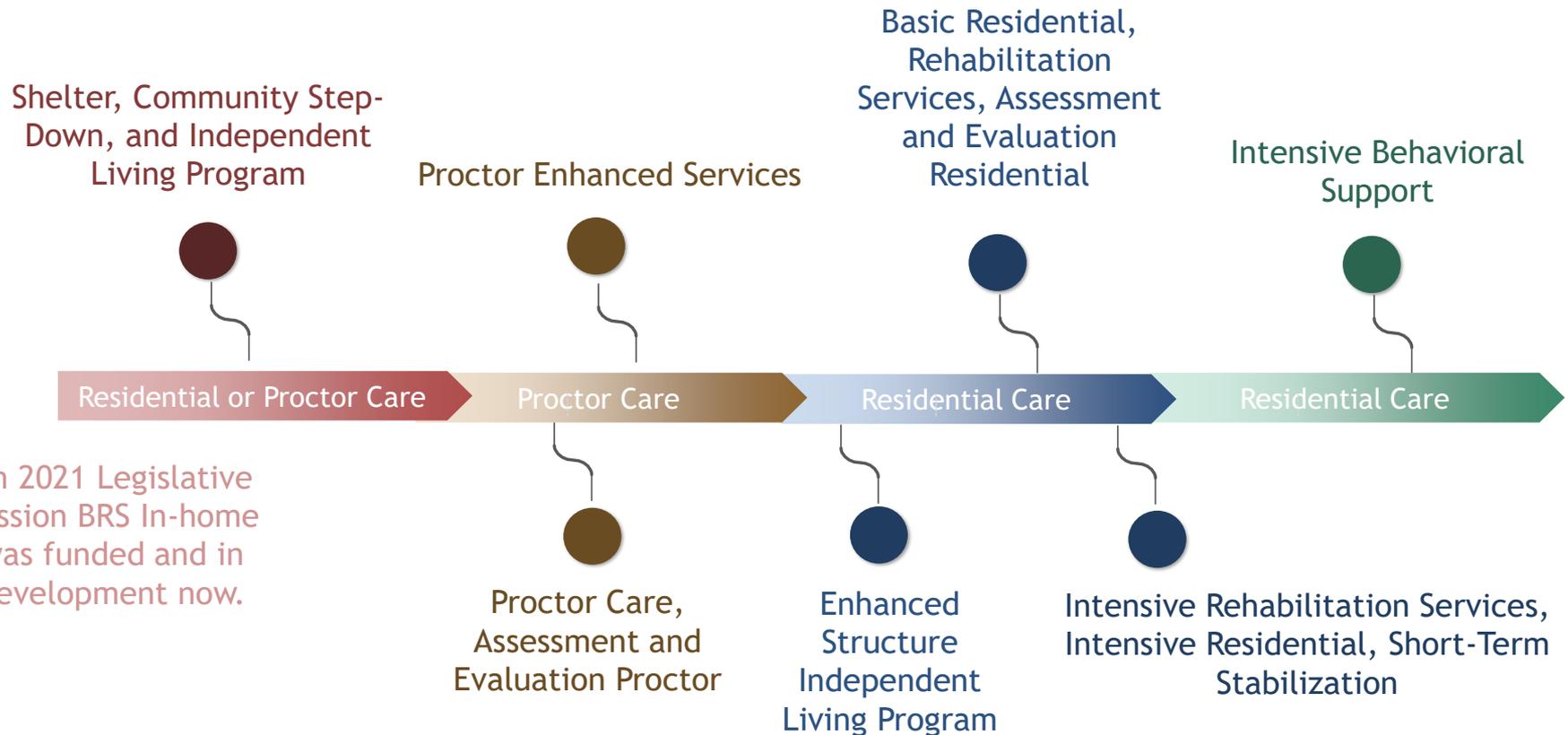
OHA does not have current program licensing or OAR oversight directed at ABA facilities

Behavioral Rehabilitative Services (BRS)

OAR 410-170-0020

“Behavior Rehabilitation Services (BRS) Program” means a program that provides services and placement-related activities to the BRS client to address their debilitating psychosocial, emotional, and behavioral disorders in a community placement utilizing either a residential care model or a proctor care model.

Child and Family Behavioral Rehabilitation Services Continuum



*In 2021 Legislative Session BRS In-home was funded and in development now.

Proctor Care - means services and placement-related activities provided to the BRS client who resides in the home of an approved proctor foster parent.

Residential Care - means that services and placement-related activities are provided to the BRS client in a residential community setting and not in the home of an approved proctor foster parent.

Behavioral Rehabilitative Services (BRS)

410-170-0010

The purpose of the Behavior Rehabilitation Services (BRS) Program is to remediate the BRS client's debilitating psychosocial, emotional, and/or behavioral disorders by providing services such as behavioral intervention, counseling, and skills-training.

- Services must be delivered integrating a gender-responsive, culturally sensitive, trauma-informed, and developmentally appropriate approach.
- OHA – County Juvenile Department – 8 Programs
- ODHS – Child Welfare – 29 Program
- OYA – 23 Programs

Assessment for BRS

“Licensed Practitioner of the Healing Arts (LPHA)” means a physician or other practitioner licensed in the State of Oregon who is authorized within the scope of the LPHA’s practice, as defined under state law, to diagnose and treat individuals with physical or mental disabilities or psychosocial, emotional, and behavioral disorders.

Components of a BRS assessment include:

- a) Has a primary mental, emotional, or behavioral disorder or developmental disability that prevents the individual from functioning at a developmentally appropriate level in the individual’s home, school, or community;
- (b) Demonstrates severe emotional, social, and behavioral problems, including but not limited to: Drug and alcohol abuse; anti-social behaviors requiring close supervision, intervention, and structure; sexual behavioral problems; or behavioral disturbances;
- (c) Requires out-of-home behavioral rehabilitation treatment to restore or develop the individual’s appropriate functioning at a developmentally appropriate level in the individual’s home, school, or community;
- (d) Is able to benefit from the BRS program at a developmentally-appropriate level;
- (e) Does not have active suicidal, homicidal, or serious aggressive behaviors; and
- (f) Does not have active psychosis or psychiatric instability.

Child Welfare QRTP Assessment

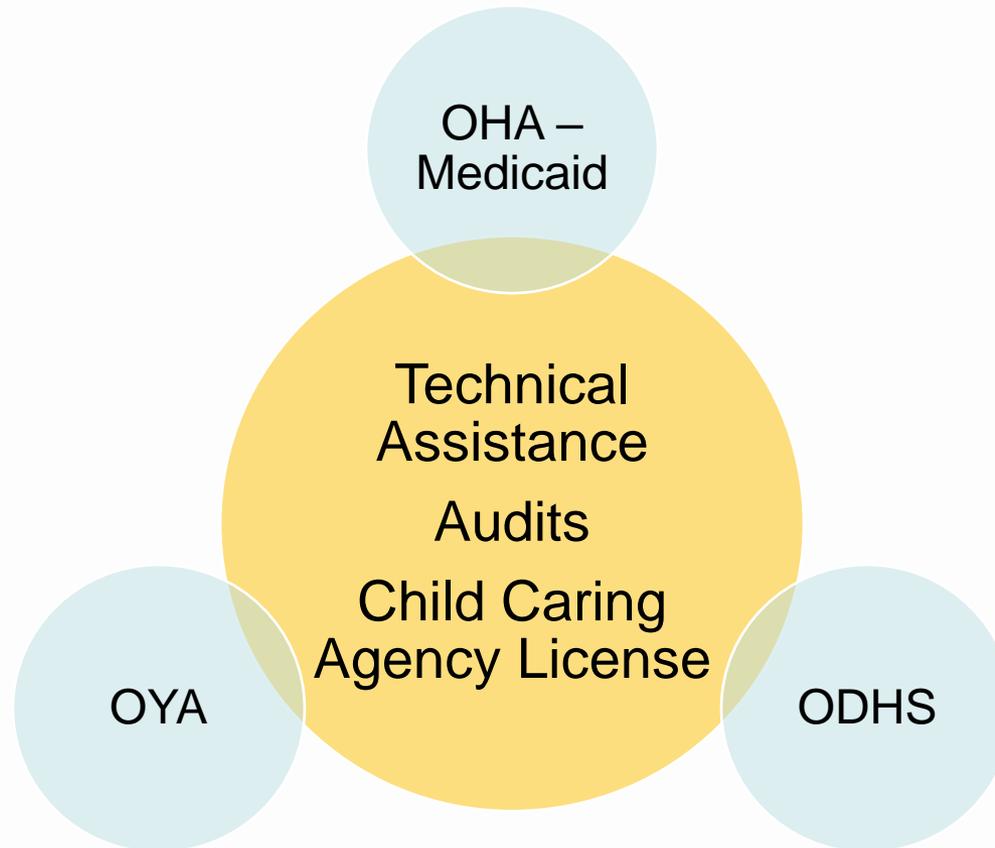
Qualified Residential Treatment Programs (QRTP) Assessment means an assessment of the strengths and needs of a BRS client or a child by a Qualified Individual using the Child and Adolescent Needs and Strengths tool in combination with a review of clinical documentation to determine the most effective and appropriate level of care for the BRS client or child.

“Qualified Individual” means an individual:

- a) Who is a **trained professional or licensed clinician**;
- b) Who is not an employee of the Department or of the Authority; and
- c) Who is not connected to, or affiliated with, any placement setting in which BRS clients are placed by the Department.

This assessment and plan is inclusive of feedback and perspective of the child’s family and permanency team.

BRS – Oversight



Thank you!

Health
Oregon
Authority