



# Numbered Advisory Memorandum

Ted Strickland, Governor  
Sandra Stephenson, Director

**Date issued:** 10/15/2010

**Number:** 10-FY11-1

**Subject:**  Allocations  
 Certification  
 Licensure  
 Medicaid  
 Policy and/or Procedure  
 Other Critical Information

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**To:**  
Boards  
Shareholders Organizations

**Contact(s):**  
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614-466-1204

**Required Action:**  No  Yes, by this date: Friday November 12, 2010

All ODMH policy memoranda are posted on the ODMH Web site at [mentalhealth.ohio.gov/partner-resources](http://mentalhealth.ohio.gov/partner-resources)

**Title:** Title XX- State Fiscal Year (SFY) 2012-2013 Comprehensive Social Services Plans (CSSP)

**Content:**

Each Board requesting Title XX funding for FFY 2012-2013 is required to submit a proposed tentative Title XX County Service Plan for each county in its service district to the Ohio Department of Mental Health (ODMH). ODMH is responsible for preparing Ohio's mental health portion of the CSSP to apply for federal Title XX funds.

Enclosed within this memorandum are:

1. **Table 1: SFY 2012-2013 Title XX Allocations:**  
These tentative allocations are included for each county to use in completing the Title XX County Service Plans and will be finalized after the total federal Title XX allocation to Ohio is determined. These allocations were calculated by using the assumptions that the amount of Federal Title XX funds available to ODMH will be \$8,285,020 for FFY 2012 and \$8,285,020 for FFY 2013, and that each Board will receive the same percentage of Ohio's allocation as in the previous biennium.
2. **Service Definition Crosswalk:**  
This Crosswalk provides required federal definitions to be used by ODMH and Boards for Title XX Planning and Reporting only. This Crosswalk converts service definitions in ODMH Certification Standards into the required Federal Title XX definitions.

**Establishing mental health as a cornerstone of overall health**

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**DATES FOR REQUIRED ACTION:**

Date	Action
10/15/2010	Each Board will receive an individual e-mail from the ODMH Title XX Coordinator. The e-mail will contain this memorandum and respective Board's Title XX County Service Plan(s) in an Excel pre-programmed template. The individual County Plans are developed by County Departments of Job and Family Services (CDJFS) to document local Title XX eligibility criteria for free services, services with a fee and services without regard to income. Each CDJFS will hold Title XX hearings beginning in January which are open to the public.
11/12/2010	<ol style="list-style-type: none"> <li>1. Please complete a separate Title XX County Service Plan in an Excel form for each county in the Board's service area. The Board will need to complete all applicable yellow cells.</li> <li>2. Using the enclosed Service Definition Crosswalk, determine the Title XX services the board will fund.               <ol style="list-style-type: none"> <li>a. Enter the estimated number of total recipients ("recip") and the estimated costs of each service by the eligibility categories for SFY 2012 and 2013. The last column will automatically sum the total recipients and respective costs.</li> <li>b. If your Board plans to bill Title XX for administrative expenses (optional), please indicate the amount in the appropriate space.</li> <li>c. Please check for accuracy. Once all the forms are completed, the spreadsheet will indicate if the budgeted funds are equal, greater than or less than the projected allocation. Make modifications accordingly.</li> </ol> </li> <li>3. The Executive Director of the Board must then <b>sign</b> the Title XX County Service Plan(s) and <b>forward the original(s)</b> to :               <p style="text-align: center;">Ohio Department of Mental Health                Title XX Coordinator: Mario De Santis                Program &amp; Policy Development                30 East Broad Street, 8<sup>th</sup> Floor                Columbus, OH 43215-3430</p> </li> <li>4. Please forward the completed electronic Title XX County Service Plan in the Excel spreadsheet form to <a href="mailto:mario.desantis@mh.ohio.gov">mario.desantis@mh.ohio.gov</a>. This will allow the projected Title XX Service Plan data to be aggregated electronically for ODMH's Title XX Plan.</li> </ol> <p>Questions may be submitted to <a href="mailto:mario.desantis@mh.ohio.gov">mario.desantis@mh.ohio.gov</a> or 614-466-1204.</p>

cc: Sandra Stephenson, MS, MA, Director  
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**Table 1**  
Tentative Title XX Allocations for State Fiscal Years 2012 and 2013

MENTAL HEALTH				
BOARD	SFY 2012 <sup>1</sup>	SFY 2013 <sup>1</sup>	Total Tentative Biannula Allocation	Allocation Percent
	\$8,285,020.00	\$8,285,020.00	\$16,570,040.00	
	Tentative Allocation	Tentative Allocation		%
ALLEN/AUGLAIZE/HARDIN	\$134,797	\$134,797	\$269,595	0.016270
ASHLAND	\$35,833	\$35,833	\$71,665	0.004325
ASHTABULA	\$81,483	\$81,483	\$162,966	0.009835
ATHENS/HOCKING/VINTON	\$119,246	\$119,246	\$238,493	0.014393
BELMONT/HARRISON/MONROE	\$87,979	\$87,979	\$175,957	0.010619
BROWN	\$33,455	\$33,455	\$66,910	0.004038
BUTLER	\$219,959	\$219,959	\$439,918	0.026549
EASTERN MIAMI (CLARK/GREENE/MADISON)	\$223,107	\$223,107	\$446,215	0.026929
CLERMONT	\$108,012	\$108,012	\$216,024	0.013037
COLUMBIANA	\$85,054	\$85,054	\$170,108	0.010266
CRAWFORD/MARION	\$78,128	\$78,128	\$156,255	0.009430
CUYAHOGA	\$1,147,658	\$1,147,658	\$2,295,315	0.138522
FOUR COUNTY (DEFIANCE/WILLIAMS/FULTON/HENRY)	\$80,423	\$80,423	\$160,845	0.009707
DELAWARE/MORROW	\$82,817	\$82,817	\$165,634	0.009996
ERIE/OTTAWA	\$72,179	\$72,179	\$144,358	0.008712
FAIRFIELD	\$70,008	\$70,008	\$140,017	0.008450
FRANKLIN	\$832,686	\$832,686	\$1,665,372	0.100505
GALLIA/JACKSON/MEIGS	\$90,207	\$90,207	\$180,415	0.010888
GEAUGA	\$44,921	\$44,921	\$89,843	0.005422
HAMILTON	\$648,005	\$648,005	\$1,296,009	0.078214
HANCOCK	\$43,223	\$43,223	\$86,446	0.005217
HURON	\$38,674	\$38,674	\$77,349	0.004668
JEFFERSON	\$66,529	\$66,529	\$133,057	0.008030
LAKE	\$115,485	\$115,485	\$230,970	0.013939
LICKING/KNOX	\$128,559	\$128,559	\$257,117	0.015517
LOGAN/CHAMPAIGN	\$54,988	\$54,988	\$109,975	0.006637
LORAIN	\$191,003	\$191,003	\$382,006	0.023054
LUCAS	\$392,950	\$392,950	\$785,900	0.047429
MAHONING	\$206,529	\$206,529	\$413,058	0.024928
MEDINA	\$77,357	\$77,357	\$154,714	0.009337
MIAMI/DARKE/SHELBY	\$117,821	\$117,821	\$235,643	0.014221
MONTGOMERY	\$419,139	\$419,139	\$838,278	0.050590
MUSKINGUM JOINT(MUSK./COSH./GUERNS./MORG./NOB./PER	\$186,073	\$186,073	\$372,147	0.022459
PORTAGE	\$101,864	\$101,864	\$203,729	0.012295
PREBLE	\$23,132	\$23,132	\$46,264	0.002792
PUTNAM	\$18,202	\$18,202	\$36,404	0.002197
RICHLAND	\$91,939	\$91,939	\$183,878	0.011097
PAINT VALLEY (ROSS/FAY./HIGH./PICKAWAY/PIKE)	\$172,527	\$172,527	\$345,055	0.020824
SCIOTO/ADAMS/LAWRENCE	\$179,942	\$179,942	\$359,885	0.021719
SENECA/SANDUSKY/WYANDOT	\$87,424	\$87,424	\$174,847	0.010552
STARK	\$253,820	\$253,820	\$507,640	0.030636
SUMMIT	\$383,025	\$383,025	\$766,050	0.046231
TRUMBULL	\$160,158	\$160,158	\$320,315	0.019331
TUSCARAWAS/CARROL	\$84,540	\$84,540	\$169,081	0.010204
UNION	\$20,713	\$20,713	\$41,425	0.002500
VANWERT/MERCER/PAULDING	\$50,240	\$50,240	\$100,481	0.006064
WARREN/CLINTON	\$110,804	\$110,804	\$221,608	0.013374
WASHINGTON	\$47,713	\$47,713	\$95,427	0.005759
WAYNE/HOLMES	\$102,552	\$102,552	\$205,104	0.012378
WOOD	\$82,138	\$82,138	\$164,275	0.009914
<b>TOTAL</b>	<b>\$8,285,020.00</b>	<b>\$8,285,020.00</b>	<b>\$16,570,040.00</b>	<b>1.000000</b>

<sup>1</sup> Total is 8,310,019.59 and \$25,000 is deducted for ODMH administration cost

## Section III

**Goals -** The Mental Health Title XX Program utilizes the services set forth in this section to accomplish one or more of the following national goals.

Goals	Short Title	Definition
I	Self-Support	Achieving or maintaining economic self-support to prevent, reduce or eliminate dependency.
II	Self-Sufficiency	Achieving or maintaining economic self-sufficiency including reduction or prevention of dependency.
III A	Preventing Neglect, Abuse, Exploitation	Preventing or remedying neglect, abuse, or exploitation of children, or adults unable to protect their own interests.
III B	Preserving Families	Preserving, rehabilitating, or reuniting families.
IV	Community Based Care	Preventing or reducing inappropriate institutional care by providing for community based care, or other forms of less intensive care.
V	Institutional Care	Securing referral or admission for institutional care when other forms of care are not appropriate or providing services to individuals in institutional.

### **Certification Standards –**

The Ohio Department of Mental Health (ODMH) has promulgated administrative rules which set forth certification criteria for all services that are funded through the community mental health system. The mental health Title XX services that are defined in this section must comply with these certification requirements. The sections of the Ohio Administrative code are noted within each specific service definition.

### **Uniform Federal Service Definitions –**

All services must be reported to the federal government using service definitions that have been established by the federal government. Because all publicly funded community mental health organizations must use the services and definitions identified in the ODMH Certification Standards referenced above, ODMH will collect the required Title XX recipient and expenditure information using the Ohio Administrative Code definitions use the following crosswalk in reporting the information to the federal government.

## Service Definition Crosswalk

Uniform Federal TXX Definition	Ohio Administrative Code Definition: Ohio Department of Mental Health Service Definitions
Case Management	Community Psychiatric Supportive Treatment (O.A.C 5122-29-17)
Counseling Services	Behavioral Health Counseling and Therapy (O.A.C 5122-29-03)
Employment Services	Employment/Vocational Service (O.A.C 5122-29-11)
Recreational Services	Social & Recreational Service (O.A.C 5122-29-14)
Residential Treatment Services	Residential Care (O.A.C. 5122-29-27)
Transportation Services	Transportation Services (O.A.C. 5122-29-27)
Other Services	Crisis Intervention Mental Health Services (O.A.C 5122-29-10) Mental Health Assessment (non-physician) (O.A.C 5122-29-04) Psychiatric Diagnostic Interview (Physician) (O.A.C 5122-29-04) Partial Hospitalization, less than 24 hr. (O.A.C 5122-29-06) Adult Education (O.A.C 5122-29-13) Occupational Therapy Service (O.A.C 5122-29-24) Pharmacological Management* (O.A.C 5122-29-05) Self Help/Peer Support (O.A.C 5122-29-15) Consumer Operated Service (O.A.C 5122-29-16) Intensive Home Based Treatment Services (O.A.C 5122-29-28) Assertive Community Treatment (O.A.C 5122-29-29)

\* All purely medical components of this service are ineligible for Title XX reimbursement unless the

Services are integral and subordinate to other behavioral health services

## Section IV – Mental Health Service Definitions

A crosswalk in Section III details the relationship between Federal Title XX Definitions and Mental Health Service Definitions in Ohio's Revised Code.

All community mental health services listed below address the Title XX Goals of:

- I Self –Support
- II Self-Sufficiency
- III A Preventing Neglect, Abuse, Exploitation
- IIIB Preserving Families
- IV Community Based Care

### **5122-29-17 Community psychiatric supportive treatment (CPST) service**

- (A) Community psychiatric supportive treatment (CPST) service provides an array of services delivered by community based, mobile individuals or multidisciplinary teams of professionals and trained others. Services address the individualized mental health needs of the client. They are directed towards adults, children, adolescents and families and will vary with respect to hours, type and intensity of services, depending on the changing needs of each individual.

The purpose/intent of CPST services is to provide specific, measurable, and individualized services to each person served. CPST services should be focused on the individual's ability to succeed in the community; to identify and access needed services; and to show improvement in school, work and family and integration and contributions within the community.

### **5122-29-03 Behavioral health counseling and therapy service.**

- (A) Behavioral health counseling and therapy service means interaction with a person served in which the focus is on treatment of the person's mental illness or emotional disturbance. When the person served is a child or adolescent, the interaction may also be with the family members and/or parent, guardian and significant others when the intended outcome is improved functioning of the child or adolescent and when such interventions are part of the ISP.

### **5122-29-11 Employment/vocational service.**

- (A) The purpose and intent of employment/vocational service is to promote recovery and secure/maintain employment by providing training and skill development that is goal-oriented, ability-based, and incorporates individual choice. The outcome of employment/vocational service is that the individual will obtain and maintain employment, learn new job skills, increase self-sufficiency, and contribute to the community.

## **5122-29-14 Social and recreational service**

(A) "Social and recreational service" means a service that includes structured and non-structured activities and support to enhance the quality of life of the person served.

## **5122-29-27 Other mental health services**

(A) "Other mental health services" means services other than those listed under divisions (A) to (Q) of section [340.09](#) of the Revised Code. Other mental health services may include representative payeeship, transportation and other supportive mental health services and may be offered by a variety of entities, including YMCAS, churches, children's cluster or family and children first.

## **5122-29-10 Crisis intervention mental health service**

(A) Crisis intervention is that process of responding to emergent situations and may include: assessment, immediate stabilization, and the determination of level of care in the least restrictive environment in a manner that is timely, responsive, and therapeutic.

Crisis intervention mental health services need to be accessible, responsive and timely in order to be able to safely de-escalate an individual or situation, provide hospital pre-screening and mental status evaluation, determine appropriate treatment services, and coordinate the follow through of those services and referral linkages.

Outcomes may include: de-escalating and/or stabilizing the individual and/or environment, linking the individual to the appropriate level of care and services including peer support, assuring safety, developing a crisis plan, providing information as appropriate to family/significant others, and resolving the emergent situation.

## **5122-29-04 Mental health assessment service**

(A) Mental health assessment is a clinical evaluation provided by an eligible individual either at specified times or in response to treatment, or when significant changes occur. It is a process of gathering information to assess client needs and functioning in order to determine appropriate service/treatment based on identification of the presenting problem, evaluation of mental status, and formulation of a diagnostic impression.

The outcome of mental health assessment is to determine the need for care, and recommend appropriate services/treatment and/or the need for further assessment. Results of the mental health assessment shall be shared with the client.

## **5122-29-06 Partial hospitalization service**

(A) Partial hospitalization is an intensive, structured, goal-oriented, distinct and identifiable treatment service that utilizes multiple mental health interventions that address the individualized mental health needs of the client. Partial hospitalization services are clinically indicated by assessment with clear admission and discharge criteria. The environment at this level of treatment is highly structured, and there should be an

appropriate staff-to-client ratio in order to guarantee sufficient therapeutic services and professional monitoring, control, and protection.

The purpose and intent of partial hospitalization is to stabilize, increase or sustain the highest level of functioning and promote movement to the least restrictive level of care.

The outcome is for the individual to develop the capacity to continue to work towards an improved quality of life with the support of an appropriate level of care.

#### **5122-29-13 Adult educational service**

- (A) "Adult educational service" means time-limited and structured educational interventions for adults, such as educational advising, literacy instruction, basic educational instruction or instruction in community and independent living skills.

#### **5122-29-24 Occupational therapy service**

- (A) "Occupational therapy service" means the evaluation of learning and performance skills and analysis, selection and adaptation of activities for individuals whose abilities to cope with daily living are threatened or impaired by developmental deficiencies, the aging process, environmental deprivation, physical, psychological, or social injury or illness.

#### **5122-29-05 Pharmacologic management service**

- (A) Pharmacologic management service is a psychiatric/mental health/medical intervention used to reduce/stabilize and/or eliminate psychiatric symptoms with the goal of improved functioning, including management and reduction of symptoms. Pharmacologic management services should result in well-informed/educated individuals and family members and in decreased/minimized symptoms and improved/maintained functioning for individuals receiving the service. The purpose/intent is to:

- (1) Address psychiatric/mental health needs as identified in the mental health assessment and documented in the client's ISP;
- (2) Evaluate medication prescription, administration, monitoring, and supervision;
- (3) Inform individuals and family regarding medication and its actions, effects and side effects so that they can effectively participate in decisions concerning medication that is administered/dispensed to them;
- (4) Assist individuals in obtaining prescribed medications, when needed; and,
- (5) Provide follow-up, as needed.

#### **5122-29-15 Self-help/peer support service**

- (A) Self-help/peer support service means individual or group interactions conducted by persons receiving services, persons who have received services, or their families or significant others, for the purpose of providing emotional support and understanding, sharing experiences in coping with problems, and developing a network of people that provides on-going support outside the formal mental health service system.

### **5122-29-16 Consumer-operated service**

(A) "Consumer-operated service" means any service or activity that is planned, developed, administered, delivered, and evaluated by persons, a majority of whom are receiving or have received inpatient mental health services or other mental health services of significant intensity and duration.

### **5122-29-28 Intensive home based treatment (IHBT) Service.**

(A) Intensive home based treatment (IHBT) Service is a comprehensive service which includes community psychiatric supportive treatment (CPST) Service, mental health assessment service, crisis response, behavioral health counseling and therapy service, and social services which support the basic needs and functioning of the youth and family. IHBT incorporates components of resilience and system of care principles into all aspects of treatment.

The purpose of IHBT is to provide the necessary services and supports that enable a client with serious emotional disturbance (SED) to live and function successfully in his or her home, school, and community in the least restrictive, most normative environment. These intensive mental health services are designed to prevent the out-of-home placement of youth with SED and to facilitate the successful transition of a youth with SED being reunified to their homes from a more restrictive placement. IHBT is provided in the home, school, and community settings where the youth lives and functions, and is designed to address and improve the mental health functioning of the youth in each of these domains. IHBT services are culturally, ethnically, racially, and linguistically appropriate, and respect and build on the strengths of the child and family's race, culture, and ethnicity.

### **5122-29-29 Assertive community treatment (ACT) Service**

(A) Assertive community treatment (ACT) is a bundled, multidisciplinary team approach that shall include, at a minimum, behavioral health counseling and therapy service, mental health assessment service, pharmacologic management service, community psychiatric supportive treatment (CPST) Service, self-help/peer support service, mental health crisis response service, substance abuse services, and supported employment services.

The purpose/intent of ACT team services is to provide the necessary services and supports which maximize recovery, and promote success in employment, housing, and the community.