

LAPEER COUNTY COMMUNITY MENTAL HEALTH**Date Issued** 04/04/2011**Date Revised** 12/21/11; 09/02/14; 07/10/15; 5/14/18; 1/9/23; 11/19/24;
04/15/25; 05/20/25

CHAPTER Service Delivery	CHAPTER 02	SECTION 004	SUBJECT 75
SECTION Clinical and Support Services		DESCRIPTION Children's Home Based Services Program	
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APPLICATION:

<input checked="" type="checkbox"/> CMH Staff	<input checked="" type="checkbox"/> Board Members	<input type="checkbox"/> Provider Network	<input checked="" type="checkbox"/> Employment Services Providers
<input checked="" type="checkbox"/> Employment Services Provider Agency	<input checked="" type="checkbox"/> Independent Contractors	<input type="checkbox"/> Students	<input type="checkbox"/> Interns
<input type="checkbox"/> Volunteers	<input checked="" type="checkbox"/> Persons Served		

POLICY:

Lapeer County Community Mental Health (LCCMH) provides intensive home-based services to children and their families with multiple service needs who require access to an array of mental health services.

STANDARDS:

- A. Home-Based Services (HBS) is a community-based program providing treatment/supports in the home and community by staff identified in the Family/Person-Centered Plan of Service.
- B. HBS's core services are billed as HBS contacts. Other services may be provided and billed separately. The following activities comprise the core Medicaid HBS:
 1. Case management/supports coordination
 2. Individual therapy

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3. Family therapy
 4. Crisis intervention
 5. Identified supportive community agencies (i.e., school, courts, Michigan Department of Health and Human Services)
- C. HBS provides one to five hours of service per week per family. During crisis, additional hours of services are available.
- D. The Family/Person-Centered Plan of Service identifies specific needs of the person served and their family and how the provision of services impact these needs.
- E. Program goals include:
1. Promoting healthy family functioning
 2. Supporting and preserving families
 3. Keeping family units intact whenever possible
 4. Promoting normal development
 5. Reducing usage of psychiatric hospitals and other substitute care settings
 6. Facilitating family reunification in situations where separations have occurred
 7. Maintaining children in the least restrictive and most stable environment in situations where out-of-home placement is necessary

PROCEDURES:

A. Entry/Re-entry Criteria:

1. Referrals to HBS are made to the Children's Clinical Supervisor (CCS). If the individual referred has an open case at LCCMH, the primary case holder reviews the case with the CCS.

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2. If determined clinically necessary, the case is assigned to a home-based clinician, who develops the Family/Person-Centered Plan of Service in consultation with other program staff and the family. The family unit is the focus of the treatment.

B. Eligibility Criteria:

Persons served in HBS must be diagnosed with a behavioral and/or mood disorder causing interruptions or limitations in daily life activities. The families served in HBS must meet one or more of the following criteria:

1. The Michigan Child and Adolescent Needs and Strengths (MichiCANS) screener is used to determine medical necessity.
 - a. Determinations made for ages six and older.
 - b. All dimensions, as well as family voice and choice, are considered when determining if a child is eligible for home-based services.
 - c. Demonstrated history, current difficulty in accessing service, not making progress, and/or recent discharge from residential care to a community living setting needing more support for successful transition due to mental health diagnosis.
2. Person served is at risk for out-of-home placement.
3. The family/person served's support systems have difficulty relating to and supporting current level of care needed to become successful.

C. Discharge/Exit Criteria:

1. The family consistently chooses to not participate in HBS and the development of the Family/Person-Centered Plan of Service.
2. The family improves to the point less intensive programming or case closure is more appropriate.

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3. The identified person served reaches the age of 18 or 21 (in accordance with the Medicaid Provider Manual) and emancipates from the family.
 4. Discharge planning is determined by family-driven and youth-guided decision making to maintain continuity of treatment and ensure stability. Staff assists the family with arranging the appropriate follow-up services.
 5. A MichiCANS is completed to support a transfer to less intensive LCCMH services or to support case closure.
- D. The primary case holder is responsible for completing an Adverse Benefit Determination letter to show termination of current services. Any decision on decreased services or discharges can be appealed through the agency grievance and appeal process, outlined in LCCMH Policy 04.001.10 Grievance and Appeals and Second Opinion Process.
- E. HBS staff must be a Licensed or Limited Licensed Master Social Worker (LMSW or LLMSW) or a Licensed or Limited Licensed Professional Counselor (LPC or LLPC).
1. Bachelor's level mental health professional may assist with case management/supports coordination needs.
 2. An agency prescriber provides medication reviews, psychiatric evaluations, and consultation on a case-by-case basis.
 3. A Parent Support Partner and/or a Youth Peer Support Specialist may provide services as needed.
- F. HBS staff engage in assertive outreach measures to ensure the person served and family receive the appropriate services and these services are delivered in collaboration with the family. Close partnerships with other community agencies (i.e., the Michigan Department of Health and Human Services, Public Health Department, Lapeer County Community Collaborative, Family Court, etc.) are maintained to ensure the services are delivered in coordinated fashion.

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G. HBS staff members are supervised by the CCS and meet on a weekly basis for case consultation. The CCS meets the requirements of a child mental health professional and reports to the Chief Clinical Officer.

DEFINITIONS:

Licensed Master Social Worker (LMSW): professional social worker who has earned a master's degree in social work (MSW) and has obtained licensure from a state or regulatory board, meeting specific educational and clinical requirements.

Licensed Professional Counselor (LPC): mental health professional who has earned a graduate degree in counseling or a related field and has obtained licensure to practice counseling independently. LPCs are trained to provide therapy and counseling services to individuals, couples, and groups to address a wide range of mental health, emotional, and behavioral issues.

Limited Licensed Master Social Worker (LLMSW): individuals who have completed a master's degree in social work (MSW) and are licensed to practice social work under supervision but are not yet fully licensed to practice independently. This license typically applies to those who have met the educational requirements and passed the required exams but are still in the process of gaining the necessary clinical experience for full licensure.

Limited Licensed Professional Counselor (LLPC): counselor who has completed the necessary educational requirements (usually a master's degree in counseling or a related field) and passed the required licensing exam but is not yet fully licensed to practice independently. This designation allows the counselor to work under supervision while gaining the clinical experience needed for full licensure as a Licensed Professional Counselor (LPC).

Michigan Child and Adolescent Needs and Strengths (MichiCANS): a collaborative tool crafted to explore and communicate the needs and strengths of the child/youth and family. It is made up of domains focusing on important areas of the child's/youth's life and ratings to help the provider, child/youth, and family understand where intensive or immediate action is most needed and where a child/youth has strengths to become a major part of the treatment or service plan.

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REFERENCES:

LCCMH Policy 04.001.10 Grievance and Appeals and Second Opinion Process

MH & JB:lr & rb

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