



## II. CT BHP Services Available to You and/or Your Family

An important part of the CT BHP is to use recovery values and language in all aspects of treatment. The result is a system that will be age and gender appropriate, culturally competent, and will be sensitive to issues that impact treatment. We believe that people can and do recover from mental illness and/or addiction.

### PRINCIPLES OF RECOVERY AND RESILIENCY

The process of authorizing services must also be done within the framework of the principles of recovery and resiliency. Adults, families and children will be directly involved in the treatment and discharge planning processes.

<b>Goals, Beliefs and Approaches of a Recovery-Based System of Care</b>		
<b>Goal</b>	<b>Belief and Approach for Adults with Behavioral Health Conditions</b>	<b>Belief and Approach for Children and their Families</b>
Stability	People have a stable living situation in an environment they choose.	Children are safely nurtured in their homes whenever possible.
Safety	People live, work and play in a safe environment.	Children are protected from abuse and neglect and feel safe.
Social Life	People have a social life with meaning and purpose.	Children learn to make friends and feel important.
Work and/or school	People choose, get, and keep a work/school goal(s). They use the services and supports available to help them to achieve their chosen goal(s).	Children participate in school or other learning environments. They use services and supports to help them succeed in learning.
Hope	People have hope for the future, meaning, and purpose in their lives.	Families have hope that their child will achieve what he/she wants out of life. The child has hopes that he/she can have a good life.
Skill Development	People develop new skills for independence.	Children develop skills with friends, school, and family.
Services	The person chooses services that he/she needs to be successful in the community.	Services are wrapped around the child and are provided in partnership with the family and community.
Strengths	People have the strengths that they need to achieve their chosen goals.	Families have the strengths they need to meet their children's needs.

## WHAT ARE MY COVERED BENEFITS?

### **Physical Health, Brief Overview of Medical Coverage**

HUSKY Health members receive general medical care through Community Health Network of Connecticut. CHN CT is the Administrative Services Organization (ASO) responsible for physical health services, hospital medical emergency services as well as supplemental services such as laboratory, radiology and durable medical equipment as needed, for all HUSKY Health members. Limited Benefit members are encouraged to contact the HUSKY Health Program at 1-877-CT-HUSKY (1-877-284-8759) to apply for coverage under HUSKY Health. Individuals who are deaf or hearing impaired can call the TTD/TTY telephone number at: (800) 842-4524 or dial 711.

## ARE YOU ELIGIBLE FOR SERVICES?

The CT BHP is available to members who are enrolled in HUSKY A, HUSKY B, HUSKY C, and HUSKY D and the Limited Benefit Program through the Department of Children and Families. To find out if you, or someone you know, is eligible for any of these plans, please call:

- The HUSKY Health program at (877-284-8759) or (877) CT HUSKY

*Children who do not qualify for HUSKY Health may be eligible to apply for services in the Limited Benefit Program if they have special behavioral health needs and are involved with the Department of Children and Families. For these members, the Partnership services are designed to support (not replace) services provided by a family's commercial insurer.*

## CAN YOU KEEP YOUR PROVIDER?

Yes, if your provider **has already joined** the Connecticut Medical Assistance Program (CMAP). However, if your **provider has not joined**, ask them to call the CT BHP at (877) 552-8247 and we will work with them to get the necessary information to begin the enrollment process.

## PEER BASED SERVICES

Peers are an important part of the care continuum. Talking to a person who has had similar experiences has been found to be helpful for members in recovery. Peers are adults who are in recovery from a behavioral health and/or substance use disorder who utilize their lived experience to provide education and outreach to members. They support engagement in treatment, assist in navigating the service system, and identify natural supports. They may also be parents of children who have experience with the children's behavioral health system. Beacon Health Options implements an extensive training program in cooperation with advocacy agencies to build additional leadership and mentoring skills amongst the Peer staff.

Goals of the Peer team:

- Provide training and assistance for ASO initiatives;
- Improve treatment outcomes by improving treatment engagement;
- Normalize the recovery process for our members;
- Support completing necessary forms and navigating the system
- Support a community of non-traditional services; and
- Lend their voice to the recovery network in Connecticut.

The Peers' role is to:

- Share ways to cope with distressing symptoms;
- Provide support and encouragement from the perspective of someone who has lived with a similar experience;
- Provide educational mentoring;
- Promote recovery and resiliency by providing outreach services while serving as a role model/mentor supporting children and families that need assistance in accessing services or engaging treatment;
- Provide training for providers, adult members, families, community collaborative groups and the ASO staff;
- Help promote skill development;
- Support active participation in treatment process;
- Manage a directory of statewide peer support resources;
- Develop and distribute educational materials for providers, members and the ASO staff;
- Coordinate educational efforts for families, schools, faith based communities, social and medical health care providers; and
- Work with community collaborative groups and advocacy agencies to support family and community-based resources that are culturally competent which embrace and promote the principles of recovery and resiliency.

Recovery and resiliency is not merely a philosophy, the fundamentals are woven through the fabric of the work we do and identified in our services. The ASO has included Peers in an array of services that are offered directly or on behalf of members. Peers are embedded within the CT BHP and ensure recovery and resiliency is not only supported, but encouraged from outreach to outcome. Peers fully exemplify for others that there are multiple pathways to recovery.

## **OVERVIEW OF BEHAVIORAL HEALTH SERVICES COVERED THROUGH THE CT BHP**

For questions related to services you and your family are eligible to receive you can call the local DSS office or check out ConnectCT at <https://connect.ct.gov>. The following is a sample of covered behavioral health services:

- Psychiatric hospitalization;
- 23-hour observation;
- Detoxification;
- Partial hospitalization;
- Extended day treatment;
- Crisis Stabilization Bed (CARES unit);
- Psychiatric Residential Treatment Facility (PRTF);

- Residential Treatment Center for Children through DCF;
- Adult Group Homes through DMHAS;
- Child Group Homes through DCF;
- Home-based services for Ages 21 and under
- 1:1 Specializing for Children in Congregate Care for DCF;
- Case management for < 19 years of age;
- Outpatient Services;
- Intensive Outpatient Services;
- Electro Convulsive Therapy (ECT);
- Methadone Maintenance;
- Ambulatory Detoxification;
- Autism Spectrum Disorder Services
- Psychological Testing; and
- Home Health Services for Behavioral Health issues.

### **Freestanding Outpatient Medical Clinic Services**

- Behavioral health evaluation and treatment services provided in freestanding primary care/medical clinics. You must have a primary behavioral health diagnosis and the services must be provided by a licensed behavioral health professional.

### **Hospital Outpatient Psychiatric Services**

- Evaluation and treatment services at all levels of care, including outpatient, intensive outpatient, extended day treatment and partial hospitalization services.
- Psychiatric evaluation and treatment services that are related to a medical diagnosis. (For example, the benefit would include psychological testing for a member with traumatic brain injury.)

### **Freestanding Mental Health and Ambulatory Substance Use Clinic Services**

- All Mental Health and Substance Use Clinic Services, regardless of the person's diagnosis.

### **Emergency and Inpatient Psychiatric Hospitalization Services**

Services are covered if they relate to care for a behavioral health diagnosis:

- Observation stays of 23 hours or less;
- All psychiatric hospital services and all associated charges billed by a psychiatric hospital, regardless of diagnosis;
- Inpatient and residential detox (inpatient-hospital or inpatient-freestanding) when the substance use diagnosis is primary;
- Inpatient general hospital services when the behavioral health diagnosis is primary;
- Professional psychiatric services that are provided in an emergency department by a community psychiatrist will be reimbursed by the CT BHP if the psychiatrist is enrolled in CMAP as an independent solo or group practitioner and bills under the solo or group practice ID;
- Professional services associated with a behavioral health diagnosis that are provided during a medical stay.

### **Individual Practitioner Services**

Behavioral health evaluation and treatment services such as Outpatient services, Autism Services, Psychological and Developmental Testing, Consultation, and Case

Management that are provided to people who have a primary behavioral health diagnosis. The services must be provided by a licensed behavioral health professional.

### **Home Health Care Services**

Home Health services are included as a benefit in some circumstances. It may be covered depending on certain things.

The medical Administrative Services Organization is responsible for the authorization and management of home health services when:

- The home health service is for medical diagnoses alone;
- The home health services are required for medical and behavioral diagnoses, and the medical diagnosis is primary; or
- The member's medical treatment needs cannot be safely and effectively managed by the psychiatric nurse or aide.

CT BHP is responsible for the authorization and management when:

- The home health services are required for the treatment of behavioral health diagnoses alone;
- Home health services are required to treat both medical and behavioral diagnoses, and the behavioral diagnosis is primary; or
- The individual's behavioral health issues are so complicated that the medical treatment cannot be safely and effectively managed by the medical nurse or aide; or
- The member has a diagnosis of autism as one of the first three diagnoses.

### **Other Services**

- Methadone clinics for methadone maintenance services provided to HUSKY Health enrollees.
- Laboratory costs for tests related to methadone chemistry (quantitative analysis). These costs are covered under the CT BHP if they are included as part of the costs of the methadone maintenance providers. Methadone chemistry testing is not covered if it is billed by an independent laboratory.
- Behavioral health assessment and treatment services that are billed by school-based health centers.
- Adult Mental Health Group Homes.
- DCF funded Residential Treatment Centers and Therapeutic Group Homes.
- Autism Treatment Services, such as; Diagnostic Evaluation, Behavior Assessment and Treatment Planning and Direct Intervention.

## **BEHAVIORAL HEALTH RESOURCES FOR CHILDREN AND ADOLESCENTS**

### **Limited Benefit Program**

The Limited Benefit Program is for children or adolescents who are not eligible for HUSKY A or B. Under this program, those children or adolescents may be able to access some of the services offered within the CT BHP. If DCF is involved with a child or family who is not eligible for benefits under HUSKY and determines that there are complex needs for behavioral health services, then this program offers limited coverage. Currently, the only service offered through the Limited Benefit Program is Intensive Home-based Child and Adolescent Psychiatric Services (IICAPS). As the program grows, additional services may be added to the Limited Benefit Program.

### **DCF Voluntary Services Program**

The Voluntary Services program is a DCF operated program for children and youth with serious emotional disturbances, mental illnesses and/or substance dependency. This program is only for families who are not abusive or neglectful. The Voluntary Services Program emphasizes a community-based approach and attempts to coordinate service delivery across multiple agencies. Parents and families are critical participants in this program and are required to participate in the planning and delivery of services for their child or youth. The Voluntary Services Program promotes positive development and reduces reliance on restrictive forms of treatment and out-of-home placement.

DCF may provide, on a voluntary basis (at the request of the family), casework, community referrals and treatment services for children who are not committed to the Department. These are youth who do not require protective services intervention, but may require any of the services offered, administered by, under contract with or otherwise available to the Department of Children and Families due to emotional or behavioral difficulties.

The Voluntary Services Program is designed for children and youth who have behavioral health needs and who are in need of services that they do not otherwise have access to. Parents do not have to relinquish custody or guardianship under this program. The DCF policy outlines eligibility requirements for this program.

For additional information about the Voluntary Service program or to request an application, contact the DCF Care line number at (800) 842-2288. If you would like assistance in understanding the process, you can contact the CT BHP Member Service line for help at (877) 552-8247.

### **Connecticut's Community Collaboratives**

In 1997, the state of Connecticut adopted a "System of Care" model for its state mental health plan for children. This federally supported model of service delivery is based on the idea that children with behavioral health challenges do better when they can receive services in their community and when those services involve their parents/caregivers. The Community Collaboratives (Systems of Care) in Connecticut are groups of service providers, advocates, and family members who meet together on a regular basis. They help families locate needed services and develop treatment plans with input from the family. Each of the 25 Community Collaboratives has workers called Care Coordinators and Family Advocates. Those people work with a family to help identify the child's service needs and help the family decide the kind of service they want. Families do not need to be involved with DCF or be eligible for HUSKY to receive help from the Community Collaborative. However, some services that are recommended may require the family to enroll in HUSKY or in DCF's Voluntary Services program. To learn more about the Community Collaboratives, and to view a current list of meeting times and locations, visit the website at [www.wrapct.org](http://www.wrapct.org)

### **RESIDENTIAL TREATMENT SERVICES**

Residential care is a very specialized service that is used only after other treatment services have been tried and have not helped. If you believe that your child needs this type of care, you must apply to the Department of Children and Families for the Voluntary Services Program (see page 10, "DCF Voluntary Services Program"). A

Voluntary Services worker will help you collect information from the doctors, counselors and other providers you have worked with. That will help determine what kind of residential care your child may need. The Voluntary Service worker also may be able to help you find another kind of specialized treatment so your child can remain at home. You can call and request an application for Voluntary Services by contacting the DCF Hotline number at (800) 842-2288. If you are uncertain about the process, you can call the CT BHP Customer Services line for help at (877) 552-8247.

## **BEHAVIORAL HEALTH RESOURCES FOR ADULTS**

The following list of resources may help individuals and/or their caregivers find services in their community:

**Department of Mental Health and Addiction Services: To access DMHAS website go to:**  
[www.ct.gov/dmhas](http://www.ct.gov/dmhas)

The DMHAS website gives a wealth of resource information. From the homepage click on "Programs and Services" then click on the service you seek. To find services in your town or region, click on "Finding Mental Health and/or Addiction Services" and click your region or scroll down and click your town then choose the services you are seeking in your area.

**Local Mental Health Authority (LMHAs). To locate an LMHA in your area go to:**  
[www.ct.gov/dmhas](http://www.ct.gov/dmhas) click on *Agency Directories* then click on: [Local Mental Health Authorities \(LMHAs\)](#)

The Department of Mental Health and Addiction Services (DMHAS) operates and/or funds Local Mental Health Authorities (LMHAs) throughout Connecticut. The LMHAs manage the mental health services within specific geographic areas. They offer a wide range of therapeutic recovery-oriented programs, including employment and supportive housing programs, as well as crisis intervention services. There are also many DMHAS operated, or DMHAS-funded programs at [private non-profit agencies](#) that you can access.

**Department of Social Services (DSS). To learn more about what services are provided by DSS go to: – [www.ct.gov/dss](http://www.ct.gov/dss)**

The Department of Social Services (DSS) provides a broad range of services to the elderly, people with disabilities, families, and individuals who need assistance in maintaining or achieving their full potential for self-direction, self-reliance and independent living. DSS also administers federal programs, including the Rehabilitation Act, the Food Stamp Act, the Older Americans Act, and the Social Security Act. DSS is also a public housing agency which administers the Section 8 program under the federal Housing Act.

**National Alliance on Mental Illness. NAMI-CT website – [www.namict.org](http://www.namict.org)**

NAMI-CT is a grassroots family and consumer organization dedicated to improving the lives of people with serious mental illnesses and their families. NAMI-CT serves

thousands of people largely through the volunteer efforts of dedicated family members and consumers. NAMI hosts many organized support groups and educational opportunities throughout the state. Their advocacy on behalf of people living with mental illness is known nationally. Visit their website to find out more about how NAMI-CT can help.

**Connecticut Community for Addiction Recovery. CCAR website – [www.ccar.us](http://www.ccar.us)**

CCAR envisions a world where the power, hope and healing of recovery from alcohol and other drug addiction is thoroughly understood and embraced. CCAR is organizing the recovery community including those in recovery, family members, friends and allies in order to “put a face on recovery”. Their Telephone Recovery Support Program (TRS), Recovery Oriented Employment Service (ROES), recovery centers and legion of volunteers give hope to those suffering from addictions of all kinds. Visit their website to find out more about how CCAR can help.

**Advocacy Unlimited. AU website – [www.advocacyunlimited.org](http://www.advocacyunlimited.org)**

Advocacy Unlimited, Inc. (AU) is a private, non-profit organization that offers advocacy training, peer support certification training, intentional living workshops, mind/body focus, wellness center and community events, and resource support to individuals who have received mental health services and for the community at large. AU's programs include: Advocacy Education Course, Recovery University, "Super Advocacy" Young Adult Program, Toivo, Problem Gambling, Latino Initiative and "Join Rise Be."

**Connecticut FAVOR, Inc. FAVOR website - [www.favor-ct.org](http://www.favor-ct.org)**

Family Advocacy for Children's Mental and Behavioral Health. FAVOR's mission is to provide family-focused, advocacy-based, and culturally sensitive community services that improve outcomes and family wellbeing. FAVOR works to ensure that Connecticut's public policies promote a family driven system of care that is responsive to the needs of the family. FAVOR's programs include: Family Peer Support Program, Family System Manager Program, and THE CT Medical Home Initiative.

**TRANSPORTATION TO YOUR APPOINTMENT**

- HUSKY A, HUSKY C, and HUSKY D members may contact Logisticare at: 888-248-9895 to learn about how to schedule non-emergency transportation rides to and from medical appointments. Members can also make a reservation on-line at <https://member.logisticare.com>
- HUSKY B members are not covered for non-emergency transportation.

***If you are having a problem getting a ride to your appointment after calling the transportation company, please call the CT BHP Member Service line at (877) 552-8247.***



## Question & Answers

### WHAT IF YOU AND/OR YOUR CHILD NEED HELP WHEN TRAVELING OUT OF STATE?

If you are traveling out of state and you and/or your child need mental health or substance use services, call the CT BHP at (877) 552-8247 for help in finding the right provider. However, in an emergency call 911 or go to the nearest hospital.

### WHAT IF YOU MOVE?

To assist in keeping you connected to care, we encourage you to notify any agencies that are currently assisting you, like DCF, DSS DMHAS or LMHA, of your new address to allow for a smoother transition. Also, when you move, you may need to change to a new provider. If that happens, you should ask your old provider to send your medical records to your new provider. This can only be done with signed permission from you. A signed release of information form allows your former provider to give your medical records to your new provider. Without this signed form it is against the law for your previous provider to give such information to your new provider.

### AM I ELIGIBLE FOR CELL SERVICE?

SAFELINK WIRELESS® service is a program for Income eligible households provided by TracFone Wireless, Inc. In order to participate in the SAFELINK WIRELESS® service, persons must meet certain eligibility requirements set by each State where the service is to be provided. These requirements are based on a person's participation in a state or Federal support programs or by meeting the Income Poverty Guidelines as defined by the U.S. Government. SAFELINK WIRELESS® service is limited to one person per household. For more information, call 1-800-977-3768 for services and eligibility guidelines or visit the SafeLink Wireless website at: <https://www.safelinkwireless.com>

### HOW ARE DECISIONS MADE ABOUT MY SERVICES?

Decisions are based on medical necessity, level of care guidelines, and with your input. Your input is very important and we strongly encourage you to share your thoughts, concerns and your desires about treatment with your Provider.

You should get the mental health and/or substance use services when they are necessary and when you need them. Medically Necessary or Medical Necessity means care that is needed to correct or reduce the negative effects of a medical condition or mental/substance abuse illness; to assist you in getting or keeping your best level of health, to evaluate a condition; or to prevent a medical condition from occurring as cited in Connecticut Medicaid Program regulations.

Level of care guidelines and your input help providers and the CT BHP make decisions about the care that would help you. If you would like a copy of the level of care guidelines, please call the Customer Services Line at (877) 552-8247 or go to our web site at [www.CTBHP.com](http://www.CTBHP.com).

## **WHAT IS DISCHARGE PLANNING?**

Discharge planning is important for you and/or your child's care. This is especially true for discharge from intensive services such as emergency department, inpatient, residential, intensive outpatient, and home-based services. The most helpful process is to have a discharge planning meeting in the beginning of the treatment experience. It is best not to wait until the end when you and/or your child are preparing to leave the treatment setting. The purpose of the meeting is to make sure that everyone knows what services and/or support will be needed upon discharge. This meeting should include you and/or family members, natural supports such as friends or clergy, recovery support members, collaborative members, representatives from the school, community mental health care provider(s), DCF, DDS, and DMHAS/LMHA when appropriate. It can be helpful for you to bring a friend, relative, or advocate who can listen to what the staff is recommending as this can be an emotional meeting.

Here are some helpful tips to remember. It is important to know that the most successful discharge plans usually occur when the provider, member and/or family works closely together to prepare for the discharge and follow-up care. The plan should include as much information as possible to help the treating team within the facility and in the community understand your needs, or the needs of your child. If medication is being prescribed, you may want to take some additional time to discuss any concerns you may have about the medication in general and whether the amount of medication being prescribed will be enough to last until your first aftercare appointment in the community. For children in care with an Individual Education Plan (IEP), it will be very important that any changes or issues related to the school setting should be addressed and in place, preferably before discharge.

## **WILL YOU HAVE TO PAY FOR SERVICES THAT YOU GET FROM THE CT BHP?**

To find out if you have to pay for services, call the CT BHP at 877-552-8247 to speak with a Customer Services Representative who can explain your coverage.

Note: Providers are not allowed to bill for services that they do not provide, so missed appointment fees are not allowed.

Note: If you are a member of the Limited Benefit Program, your primary insurance company is responsible for any behavioral health service your child uses that is covered in your policy. You may be responsible for a co-pay depending on the terms of your policy. If your insurance company denies the claim for payment of a service authorized by the CT BHP (currently IICAPS) then your provider may bill the Department of Social Services claims vendor, DXC Technology, for the service.

## **WHAT IF YOU GET A BILL?**

If you get a bill for services call the Connecticut Medical Assistance Program's Client Assistance Center at (866) 409-8430 for someone to help research it for you. You can also remind your Provider that he or she will need to bill DXC Technology.

Note: If you are a Limited Benefit Program recipient, and you get a bill for the service provided under the Limited Benefit Program, after January 1, 2006, you can remind your Provider to bill your primary insurance company first. If the insurance company denies payment, and you receive a bill, you can remind the Provider to bill DXC Technology. You can also contact us at (877) 552-8247 and we will be happy to assist you in resolving the matter.

## **WHAT IF YOU WANT A SECOND OPINION?**

You can get a second opinion about your care or diagnosis. Getting a second opinion means seeing a different CT BHP provider. You can see another provider when:

- You don't agree with your doctor or therapist, or
- You want to get a second opinion about a treatment your doctor or therapist has prescribed.

You can ask your current provider for a referral to another CT BHP provider or you can call the Customer Service Line at (877) 552-8247 to get a referral to another CT BHP provider.

## **EARLY AND PERIODIC SCREENING, DIAGNOSTIC AND TREATMENT (EPSDT) SERVICES**

The Early and Periodic Screening, Diagnostic and Treatment (EPSDT) program is a special program for children in HUSKY. Children from birth to their 21<sup>st</sup> birthday get services under the EPSDT program. EPSDT health check-ups, nutrition check-ups, mental health and developmental screenings, baby shots and other tests are done for free and your child can get dental exams twice a year. Regular check-ups are important. They help keep your child healthy. The check-ups can also help you get treatment for health problems in their early stage when the treatment can be more effective.

If your child is enrolled in HUSKY and you would like him or her to get an EPSDT check-up, we encourage you to call your Primary Care Physician (PCP) or call the number on the back of your child's HUSKY card. Your PCP will do the health check. A dental provider will do the dental exam. Autism Treatment Services, such as; Diagnostic Evaluation, Behavior Assessment and Treatment Planning and Direct Intervention are covered as part of EPSDT.

## **PHARMACY AND MEDICATIONS**

If your behavioral health provider prescribes medications for you, the medications should be covered. Prescribers must be enrolled in the CT Medical Assistance Program (CMAP) as an individual practitioner, a performing provider or an Ordering, Rendering, Prescribing (OPR) Provider. Use your gray "connect cards" for prescription coverage. If you have any questions about pharmacy coverage or you need help, please call Pharmacy Services at 866-409-8430.