



Department of Public Welfare

Department of Health

JUL 05 2004

Dear Single County Authority Director.

We are writing to inform you of revised parameters for administering drug and alcohol services through the Behavioral Health Special Initiative (BHSI).

Initially, you were directed to implement the BHSI using prescriptive eligibility criteria and administrative protocols. These parameters were established to assure the Initiative was implemented as envisioned by the Legislature and the Department of Public Welfare. The Single County Authorities (SCA) have managed this allocation for the past seven years, and we recognize the existing criteria and protocols have become less relevant, and that persons with addictive disorders will be better served if you are afforded greater flexibility in administering BHSI funds. Therefore, we have approved revised protocols for the BHSI as outlined in the attached description.

We recognize the efforts you have made to implement the BHSI as previously directed, and appreciate your ongoing collaboration and cooperation in order to best serve persons in need of behavioral health services. If you have any questions or need further information, please contact Robert Primrose in the Office of Mental Health and Substance Abuse Services at (717) 783-8067, or Terry Matulevich in the Bureau of Drug and Alcohol Programs at (717) 787-2712.

Sincerely,

A handwritten signature in black ink, appearing to read "Joan L. Erney".

Joan L. Erney, J.D.
Deputy Secretary
Office of Mental Health and
Substance Abuse Services

A handwritten signature in black ink, appearing to read "Gene R. Boyle".

Gene R. Boyle
Director, Bureau of Drug
and Alcohol Programs

cc: Ms. Kathy Hubert, PACDAA

BEHAVIORAL HEALTH SPECIAL INITIATIVE
Drug and Alcohol Services
Revised Protocols July 2004

Background The Behavioral Health Special Initiative (BHSI) was created by the Department of Public Welfare in 1996. While there are no published guidelines for the use of these funds, BHSI administrative protocols and eligibility criteria were established by the Bureau of Drug and Alcohol Programs and the Office of Mental Health and Substance Abuse Services in July 1997 and revised in August 2000. They were communicated verbally and through correspondence. In order to allow SCA's greater flexibility in managing services for the BHSI population, specific requirements (age, disability, pregnancy, employment, and dependants) are hereby rescinded. SCAs must continue to use BHSI funds in coordination with requirements for both Act 152 as well as the Bureau of Drug and Alcohol funds. Effective July 2004, the following criteria will apply:

Recipient Eligibility Criteria

BHSI funds should serve those individuals, who are uninsured, who do not have insurance that covers the service they need, or cannot obtain Medical Assistance benefits. SCAs are encouraged to target those persons most in need who, without drug and alcohol treatment, would likely become the responsibility of another system (e.g. criminal justice, child welfare, social services, etc.)

Service Criteria

The intent of BHSI was, and remains, to provide persons in serious need of substance abuse services access to the full continuum of D&A treatment, affording recipients with severe addictive disorders, including co-occurring mental health disorders, an opportunity for recovery, and to stop the revolving door of episodic treatment. BHSI funding is available for administrative care and case management services, including assessment, and the full continuum of care as determined by the Pennsylvania Client Placement Criteria (PCPC) for Adults, or the American Society of Addiction Medicine Criteria (ASAM) for Adolescents, or other criteria for co-occurring mental health and substance use disorders approved by the Department. Since Medicaid rules will not apply- *if no other funds are available*, BHSI can also be used for client support services that will enhance an individual's participation in treatment and prospects for recovery. Examples include relapse prevention, collateral sessions, child care, transportation, physical exams and lab testing required for participation in treatment. BHSI can also be used for the provision of licensed drug and alcohol services in a county jail setting to support continuity of care and reentry into the community.

BHSI funding is not an entitlement, it is a capped allocation: SCAs must carefully monitor expenditures and may find it necessary to implement management strategies to insure some level of funding is available throughout the fiscal year. If counties implement service limits, they must be explained to the recipient prior to placement in treatment.

Reporting Requirements

SCAs must continue to track clients and services funded through BHSI. Quarterly reporting requirements remain unchanged at present.