

| <u>Provider Network Management Quality Review Tool</u> <u>Elements</u> | <u>Met</u> | <u>Not Met</u> |
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| <u>Adult Crisis Provider Agency Requirements</u> | | |
| Licensure pursuant to La. R.S. 40:2151, et. seq. or La. R.S. 40:2180.12, et. seq. for the location being reviewed. | | |
| Accredited by the Commission on Accreditation of Rehabilitation Facilities (CARF), the Council on Accreditation (COA), or The Joint Commission (TJC) for the location reviewed. | | |
| Agencies must attain full accreditation within 18 months of the initial accreditation application date. | | |
| The agency shall pay all associated accreditation fees prior to being contracted and reimbursed by a Medicaid managed care entity. | | |
| Agency must arrange for prior to employment (or contracting, volunteering, or as required by law) individuals pass criminal background checks, including sexual offender registry checks, in accordance with any applicable federal or state laws. | | |
| Agency must maintain documentation that prior to employment (or contracting, volunteering, or as required by law) individuals pass criminal background checks, including sexual offender registry checks, in accordance with any applicable federal or state laws. | | |
| Criminal background checks are performed no more than 90 days prior to the date of employment | | |
| Agency must review the Department of Health and Human Services' Office of Inspector General (OIG) List of Excluded Individuals and Entities (LEIE) prior to hiring or contracting any employee or contractor that performs services that are compensated with Medicaid/Medicare funds, including but not limited to licensed and unlicensed staff, interns and/or contractors. | | |
| Agency must review the LDH State Adverse Actions website prior to hiring or contracting any employee or contractor that performs services that are compensated with Medicaid/Medicare funds, including but not limited to licensed and unlicensed staff, interns and/or contractors. | | |
| Agency must, for current employees, check the Department of Health and Human Services' Office of Inspector General (OIG) List of Excluded Individuals and Entities (LEIE) list once a month thereafter to determine if they have been excluded from participation in the Medicaid or Medicare Program by Louisiana Medicaid or the Department of Health and Human Services' Office of Inspector General. | | |

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| <p>Agency must, for current employees, check the LDH State Adverse Actions list once a month thereafter to determine if there is a finding that an employee or contractor has abused, neglected or extorted any individual or if they have been excluded from participation in the Medicaid or Medicare Program by Louisiana Medicaid or the Department of Health and Human Services' Office of Inspector General.</p> | | |
| <p>Arrange for and maintain documentation that all persons, prior to employment, are free from tuberculosis (TB) in a communicable state via skin testing (or chest exam if recommended by physician) to reduce the risk of such infections in members and staff.</p> | | |
| <p>TB testing was completed less than 31 days prior to date of employment</p> | | |
| <p>Establish and maintain written policies and procedures inclusive of drug testing staff to ensure an alcohol and/or drug-free workplace and/or a workforce free of substance use</p> | | |
| <p>Maintain documentation that all direct care staff, who are required to complete first aid training, complete the training within 90 days of hire; Psychiatrists, advanced practical registered nurses (APRNs)/physician assistants (PAs), registered nurses (RNs) and licensed practical nurses (LPNs) are exempt from this training.</p> | | |
| <p>Maintain documentation that all direct care staff, who are required to renew first aid training, complete the training within the time period recommended by the American Heart Association; Psychiatrists, advanced practical registered nurses (APRNs)/physician assistants (PAs), registered nurses (RNs) and licensed practical nurses (LPNs) are exempt from this training.</p> | | |
| <p>Maintain documentation that all direct care staff, who are required to complete cardiopulmonary resuscitation (CPR) training, complete the training within 90 days of hire; Psychiatrists, advanced practical registered nurses (APRNs)/physician assistants (PAs), registered nurses (RNs) and licensed practical nurses (LPNs) are exempt from this training.</p> | | |
| <p>Maintain documentation that all direct care staff, who are required to renew CPR training, complete the training within the time period recommended by the American Heart Association; Psychiatrists, advanced practical registered nurses (APRNs)/physician assistants (PAs), registered nurses (RNs) and licensed practical nurses (LPNs) are exempt from this training.</p> | | |
| <p>Staff must be at least twenty-four (24) years old;</p> | | |

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| Unlicensed staff must have a minimum of bachelor's degree (preferred) OR an associate's degree and two (2) years of work experience in the human services field OR meet Recognized Peer Support Specialist (RPSS) qualifications. | | |
| Unlicensed staff rendering services have completed the Standardized Basic Clinical Competency Training Module: MH 101 – Introduction to Serious Mental Illness (SMI) and Emotional Behavioral Disorders. | | |
| Unlicensed staff rendering services have completed the Standardized Basic Clinical Competency Training Module: Crisis intervention. | | |
| Unlicensed staff rendering services have completed the Standardized Basic Clinical Competency Training Module: Suicide and homicide precautions. | | |
| Unlicensed staff rendering services have completed the Standardized Basic Clinical Competency Training Module: System of care overview. | | |
| Unlicensed staff rendering services have completed the Standardized Basic Clinical Competency Training Module: Co-occurring disorders. | | |
| Unlicensed staff rendering services have completed the Standardized Basic Clinical Competency Training Module: Cultural and linguistic competency (basic). | | |
| Unlicensed staff rendering services have completed the Standardized Basic Clinical Competency Training Module: Treatment planning. | | |
| Complete training curriculum provided by The LSU Center for Evidence to Practice prior to providing the service. | | |
| The agency has a medical director. | | |
| The agency has an administrator. | | |
| The agency has a clinical supervisor | | |
| The agency has nursing staff. | | |
| Agency has current Crisis mitigation plan to address natural/man made disasters and emergencies. | | |
| <u>Mobile Crisis</u> | <u>Met</u> | <u>Not Met</u> |
| Medical Director or designated prescriber (physician/psychiatrist, APRN, Medical Psychologist) must be available twenty-four (24) hours a day /seven (7) days a week for consultation and/or medication management; | | |
| LMHPs on duty to adequately meet the member's needs. | | |
| RPSS on duty to adequately meet the member's needs. | | |
| <u>Behavioral Health Crisis Care</u> | <u>Met</u> | <u>Not Met</u> |

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| Medical Director or designated prescriber (physician/psychiatrist, APRN, Medical Psychologist) must be available twenty-four (24) hours a day /seven (7) days a week for consultation and/or medication management; | | |
| LMHPs on duty to adequately meet the member's needs. | | |
| Registered nurse or licensed practical nurse on duty to adequately meet the member's needs. | | |
| RPSS on duty to adequately meet the member's needs. | | |
| At least two (2) staff must be present at all times. Clerical staff do not qualify for this requirement | | |
| A minimum staff to member ratio of 1:4 must be maintained at all times. | | |
| <u>Community Brief Crisis Support</u> | <u>Met</u> | <u>Not Met</u> |
| Medical Director or designated prescriber (physician/psychiatrist, APRN, Medical Psychologist) must be available twenty-four (24) hours a day /seven (7) days a week for consultation and/or medication management; | | |
| LMHPs on duty to adequately meet the member's needs. | | |
| RPSS on duty to adequately meet the member's needs. | | |