



Behavioral Health and Developmental Disabilities Administration

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Essential Behavioral Health Services and Stay Home Stay Safe Executive Order 2020-21 in the COVID-19 Context

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For Questions Please Contact:

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Essential Behavioral Health Services and Stay Home Stay Safe Executive Order 2020-21

This guidance is being issued in response to the Governor's Executive Order 2020-21 (COVID-19) Temporary requirement to suspend activities that are not necessary to sustain or protect life (Stay Home Stay Safe Order) and is directed to Pre-Paid Inpatient Health Plans (PIHPs), Community Health Service Programs (CMHSPs), their provider agencies and direct care workers that provide home and community based behavioral health care and supports or direct care clinical services to individuals with serious mental illness, children with serious emotional disturbance, individuals with intellectual and developmental disabilities, substance use disorders, and all other individuals served by the public behavioral health system or experiencing a behavioral health crisis.

All behavioral health services are essential to sustain and protect life and therefore must continue to be provided under the Governor's Stay Home Stay Safe Order. Behavioral health services shall continue to be provided in homes, residential or clinical settings if such services cannot reasonably be performed telephonically or through other virtual methods and are necessary to sustain and protect life. Home-based or clinic-based services are necessary to sustain and protect life if, based on a provider's good faith clinical judgment, are necessary for the individual to remain in the least restrictive environment, are required for assistance with activities of daily living, instrumental activities of daily living (IADLs), be sustained on life-preserving medication, as well as those services necessary to maintain behavioral or psychiatric stability.

Essential services that do not require face to face home-based or clinic-based intervention may be done telephonically or through other virtual methods. Each service should be evaluated on an individual basis and the clinical rationale for telephonic or virtual method must

be documented. The clinical rationale for the use of virtual methods vs home-based or clinic-based intervention given the Governor's Stay Home Stay Safe Order should be based upon the behavioral health needs of the individual and whether or not a home-based or clinic-based intervention is essential to maintain the individual's health and safety and at home and in the least restrictive environment. The clinical rationale for the use of telephonic or virtual services must be reviewed and updated regularly as the individual's needs and the public health crisis evolves.

1. For purposes of this guidance, the delivery of essential services to sustain and protect life involves:
 - a. "Direct care workers" includes but is not limited to personal care workers, community living support providers, private duty nurses, therapy aides, and other direct support professionals (social workers, psychologists, counselors, behavioral technicians, direct support professionals, peer support specialists, peer mentors, peer recovery coach, psychiatrists, nurses, physician extenders, case managers, supports coordinators, substance abuse, treatment specialists and practitioners).
 - b. "Care facilities" refers to licensed nursing homes, adult foster care, specialized residential setting or home for the aged.
 - c. "Crisis stabilization and response services" refers to PA 258 of 1974, Section 206(1)(a) - Crisis stabilization and response including a 24-hour, 7-day per week, crisis emergency service that is prepared to respond to persons experiencing acute emotional, behavioral, or social dysfunctions, and the provision of inpatient or other protective environment for treatment.

Essential services for which there must be a clear determination of when to deliver a face to face in-person encounter vs a virtual encounter include but are not limited to the following services:

- Community crisis stabilization- 24/7 response
- Pre-admission screening for inpatient psychiatric care
- Inpatient psychiatric care
- Intake and access to care services
- Crisis residential
- Intensive crisis stabilization, via mobile or on-site stabilization
- Community living supports – (limited to supporting independent living needs not socialization)
- Private duty nursing
- Personalized care in specialized residential settings
- Overnight health and safety supports
- Psychiatric services – assessments and medication reviews
- Medication administration
- Assertive community treatment
- Individual and group therapies, including home-based services for children,
- Applied Behavioral Analysis (ABA)

- Case management and supports coordination, including wraparound services
- Substance use disorder withdrawal management
- Substance use disorder residential treatment services
- Medication assisted treatment – Opioid treatment programs and office based opioid treatment services
- Adult Peers, Recovery Coaches, Parent Support Partners and Youth Peer Support Specialists
- Recipient Right services

Reviewed by: Behavioral Health COVID-19 Response Team (BHCRT): Jeffery Wieferich, Kim Batsche-McKenzie, Jody Lewis, Price Pullins, Jon Villasurda, Leslie Asman, Raymie Postema, Dr. Debra Pinals, Allen Jansen

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