



Connecticut Medical Assistance Program
Policy Transmittal 2019-02

Provider Bulletin 2019-18
May 2019

Roderick L. Bremby, Commissioner

Effective Date: May 2019
Contact: William Halsey

TO: Behavioral Health Clinics, Enhanced Care Clinics, Outpatient Hospital and Behavioral Health Federally Qualified Health Centers (FQHCs), School Based Health Clinics, Medical Clinics

RE: Supervision of Individuals Not Licensed to Practice Independently When Providing Behavioral Health Services in Clinic Settings

The following categories of practitioners who are considered to be “Non-Independent Behavioral Health (BH) Practitioners”, are not licensed to practice independently in accordance with Connecticut law, but may provide services in freestanding behavioral health clinics, behavioral health FQHCs and outpatient hospital behavioral health clinic settings under the Connecticut Medical Assistance Program (CMAP) when they have appropriate professional supervision:

- licensed master social workers (LMSWs);
- individuals certified, but not licensed, in a behavioral health field;
- license-eligible individuals, meaning individuals who have met all the requirements for a license to practice except for passing the applicable licensure exam;
- individuals who are in the process of training in a profession for which there is a license to practice independently; and
- individuals who are not licensed or certified, but who are otherwise qualified to perform services under the applicable clinic licensure category.

Important Note: This bulletin does not apply to individuals in independent or group practice. Please see section titled “Independent/Group Practice” for further information.

Supervision and Documentation Requirements of Non-Independent BH Practitioners

Freestanding behavioral health clinics, behavioral health FQHCs and outpatient hospital behavioral health clinics must ensure that a licensed behavioral health practitioner operating within his or her scope of practice supervises each non-independent behavioral health practitioner in

accordance with the regulations referenced below. Any services rendered by a non-independent BH practitioner that are not properly supervised and documented are not eligible for reimbursement.

Supervision Requirements for BH FQHCs

Section 17b-262-1004(b) of the Regulations of Connecticut State Agencies provides:

For services performed by an LMSW, an unlicensed individual, a non-certified individual or an individual in training, progress notes shall be co-signed by the supervisor at least weekly for each client in care and shall contain the name, credentials and the date of such signature. For services provided by a certified individual, evidence of clinical supervision for each client in care shall be documented in the client’s chart and shall contain the name, credentials and the date of such signature. The supervisor’s signature means that the supervisor attests to have reviewed the documentation.

Section 17b-262-995 of the Regulations of Connecticut State Agencies defines “under the direct supervision” as requiring that supervision be documented in the manner described above at least monthly for certified staff.

Supervision Requirements for Outpatient Hospital Behavioral Health Clinics

Section 17b-262-971(d)(2), which has the force of regulation pending adoption pursuant to section 17b-239 of the Connecticut General Statutes, provides:

An appropriate qualified physician, APRN, physician assistant or licensed behavioral health clinician shall supervise each LMSW, non-

licensed clinical staff, non-certified staff, individual in training and licensed-eligible staff not less than weekly and shall supervise certified staff not less than monthly. The supervising physician, APRN, physician assistant or licensed behavioral health clinician shall accept primary responsibility for services performed by LMSWs, unlicensed, noncertified, license-eligible and certified staff; and shall supervise all staff in accordance with applicable scope of practice requirements.

Section 17b-262-971(i) of the Department's outpatient hospital services operational policy requires the hospital to comply with, among other provisions, section 17b-262-828(g) of the Regulations of Connecticut State Agencies.

Supervision Requirements for Freestanding Behavioral Health Clinics

Section 17b-262-828(g) of the Regulations of Connecticut State Agencies provides:

For services performed by an unlicensed individual or a non-certified individual or an individual in training, progress notes entered pursuant to subsection (b) of this section shall be co-signed by the supervisor at least weekly for each client in care and shall contain the name, credentials and the date of such signature. For services provided by a certified individual, evidence of clinical supervision for each client in care shall be documented in the client's chart and shall contain the name, credentials and the date of such signature. The supervisor's signature means that the supervisor attests to having reviewed the documentation.

Section 17b-262-818 of the Regulations of Connecticut State Agencies defines "under the direct supervision" as requiring that supervision be documented in the manner described above, at least monthly for certified staff.

In order to ensure consistency with the FQHC regulation and outpatient hospital services operational policy, the Department's interpretation of the behavioral health clinic regulation is that progress notes of services provided by LMSWs in a behavioral health clinic must be cosigned by a

qualified supervisor at least weekly (or less frequently if services are provided less than weekly) because the scope of an LMSW license under State law does not authorize independent practice.

Compliance with Licensure and Scope of Practice Requirements, Including LMSWs

All CMAP providers must ensure compliance with all Connecticut scope of practice requirements, including, but not limited to, all applicable licensing, accreditation and certification requirements, which includes compliance with scope of practice under Conn. Agencies Regs. Section 17b-262-524(a)(1).

Accordingly, FQHCs, behavioral health clinics and hospitals must ensure that all individuals employed by, or under contract to, the entity must comply with scope of practice requirements, including appropriate supervision of all categories of non-independent practitioners, documentation requirements cited above, and any other documentation of compliance with scope of practice requirements required by Connecticut statutes and Connecticut Department of Public Health (DPH) requirements.

Compliance with Documentation of Supervision

Notes documenting supervision of a non-independent behavioral health practitioner must be retained, but are not required to be filed in individual medical records.

A supervisor's signature on a progress note that includes all required information (name, date, and credentials) documents that supervision occurred as required, for that visit.

The progress note co-signed by the supervisor documents that the supervisor and the provider agency verify that supervision occurred in compliance with applicable requirements.

Where a non-independent licensed behavioral health practitioner provides services to CMAP clients less frequently than weekly, supervision is required for each visit.

LMSWs

The scope of practice for the LMSW license under state law does not include independent practice; therefore, LMSWs and all other non-independent behavioral health practitioners must be supervised by a qualified behavioral health practitioner. An LMSW's scope of practice is established by Section 20-195s(a) of the Connecticut General Statutes, which provides that an LMSW may:

- (1) Practice clinical social work under professional supervision; and (2) offer a mental health diagnosis provided such diagnosis is offered in consultation with a physician licensed pursuant to chapter 370, an advanced practice registered nurse (APRN) licensed pursuant to chapter 378, a psychologist licensed pursuant to chapter 383, a marital and family therapist licensed pursuant to chapter 383a, a professional counselor licensed pursuant to chapter 383c or a clinical social worker licensed pursuant to this chapter. Except as provided in subsection (c) of section 20-195q, a licensed master social worker may not engage in independent practice.

Independent/Group Practice

Section 17b-262-918(9) of the Regulations of Connecticut State Agencies states that licensed independent behavioral health practitioners (i.e., those providing services outside a clinic setting) may only bill for services that they have personally provided. Solo and group behavioral health practitioners **may not** bill for services provided by individuals who are not licensed to practice independently under Connecticut law. Related, non-independent behavioral health practitioners may not enroll as independent CMAP providers.

If you have any questions regarding this transmittal or claims submission, please contact the Provider Assistance Center, Monday through Friday from 8:00a.m. to 5:00 p.m. at 1-800-842-8440.

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Distribution: This policy transmittal is being distributed to providers of the Connecticut Medical Assistance Program by DXC Technology.

Responsible Unit: DSS, Division of Health Services, Medical Policy and Regulations, William Halsey, Director of Integrated Care at (860) 424-5077.

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