DEPARTMENT OF HUMAN SERVICES

BHH Services Staffing Requirements

Date: April 13, 2022

To: Behavioral health home (BHH) services providers

From: BHH services policy team, Department of Human Services (DHS)

RE: Approval needed for alternative staffing plans

This memo is intended to clarify DHS BHH services staffing requirements, including the use of alternative staffing plans to meet these requirements.

Staff ratio requirements

Providers of BHH services must maintain adequate staffing ratios to deliver the required services that best meet the needs of the Medical Assistance members they serve. Providers can implement the staffing ratios on a pro-rated basis depending on the size and need of the population served. They can increase staffing incrementally based on program growth, as long as they meet and maintain the BHH services staffing ratios outlined in <u>BHH Services Provider Standards</u> <u>3F</u>:

- One full-time equivalent* integration specialist (IS) for every 224 members
- One full-time equivalent systems navigator (SN) for every 56 members
- One full-time equivalent qualified health home specialist (QHHS) for every 56 members

*For the purposes of BHH services, full-time equivalent equals 40 hours per week.

Staff full-time equivalent (FTE) requirements

One FTE integration specialist can be split between two people at 20 hours per week, per person. One FTE for the systems navigator can also be split between two people at 20 hours per week, per person. One FTE for the qualified health home specialist can be split across up to four people, with a minimum of 10 hours per week, per person. Providers can exceed the ratios by up to 25 percent and still be in compliance with the standard.

Providers serving 100 or fewer BHH services members may use an adjusted staffing ratio of a minimum of a half time FTE integration specialist (20 hours per week) and one FTE systems navigator to serve these members.

Alternative staffing plan requirements

Providers with a staffing model that varies from the requirements outlined in the previous section must submit an alternative staffing plan proposal to DHS for review by **May 6, 2022**. Organizations cannot use an alternative staffing model without prior DHS approval. This includes organizations who are currently using an approved alternative staffing variance.

There is no specific form for the alternative staffing plan proposal. To propose an alternative to the staffing ratio or requirements, please submit the following information via email to <u>dhs.bhh.certification@state.mn.us</u> for review:

• the reason for the request;

- the proposed caseload numbers and an overview of team(s) providing services, including a description of the FTE IS, FTE SN, and FTE QHHS roles (if applicable);
- the duration of time for the request; and
- supporting documentation (if applicable).

The DHS BHH services policy team will be in contact with providers about the status of the proposed alternative staffing plan. Please provide up to 30 days for DHS to respond.

If you have any questions about the information in this memo, contact Michaelyn Bruer at: <u>michaelyn.bruer@state.mn.us</u>.