



# Provider Notice

**From:** Magellan Healthcare

**Subject:** Clarification of Expectations for Community-Based Rehabilitative Services (CBRS)

## Overview

Magellan is issuing this communication to clarify expectations regarding Skills Building/Community-Based Rehabilitative Services (CBRS) following recent updates to the IBHP Provider Handbook Supplement Appendix C. The information below summarizes the purpose of Skills Building/CBRS, expectations for clinical engagement and supervision, and coordination of care when multiple providers are involved.

Skills Building/CBRS is intended to extend behavioral health treatment into the home and community setting. These services focus on skill building and functional support that complement the clinical behavioral health services provided by licensed or otherwise qualified behavioral health providers e.g., psychiatrist or advanced practice provider who meets Magellan's attestation requirements and/or mental health clinician (i.e., licensed therapist) that is appropriate to the individual treatment needs of the member identified in their treatment plan.

- Skills Building/CBRS supports members in practicing and applying therapeutic skills in real-life settings
- Services focus on improving functioning and reinforcing treatment goals identified through clinical services
- Skills Building/CBRS is not a replacement for clinical behavioral health treatment (i.e. therapy, medication management, etc)

## Prior authorization requirements

As a reminder, please ensure prior authorization requirements are followed for all members receiving services:

- Adults: Prior authorization is required before services begin
- Youth: Prior authorization is required once services exceed 308 units (units reset each calendar year).

## Clinical engagement expectations

As best practice, Skills Building/CBRS should be supported by appropriate clinical engagement.

- The frequency and intensity of clinical services should be determined based on the member's clinical needs
- Clinical services and Skills Building/CBRS may be provided by different agencies or providers, but there should be evidence of collaboration or coordination between agencies to ensure that a treatment plan is consistent and updated across providers.
- Telehealth may be used for clinical services when appropriate
- In rural and frontier areas, Magellan may consider single case agreements with out-of-network providers when needed to ensure access to clinical services
  - For those providers who are interested in a single-case agreement, please reach out to [IdahoProvider@MagellanHealth.com](mailto:IdahoProvider@MagellanHealth.com).

## Roles and responsibilities

Skills Building/CBRS services are delivered by paraprofessional staff under the supervision of licensed clinicians. Because Skills Building/CBRS is an extension of behavioral health treatment into the home and community, appropriate clinical oversight is required.

### Therapist or treating clinician

- Completes the Clinical Diagnostic Assessment (CDA) and functional assessment
  - For more information, please see the first paragraph on pg. 24 of [Appendix C](#) of the IBHP Provider Handbook Supplement.
- Provides clinical behavioral health treatment (e.g., Psychotherapy, Medication Management)
- Identifies treatment goals and clinical needs that Skills Building paraprofessional may help support

### Clinical supervisor (within Skills Building/CBRS agency)

- Provides clinical supervision to Skills Building paraprofessionals consistent with Centers for Medicare and Medicaid Services and state requirements
- Ensures Skills Building/CBRS services align with the member's treatment plan and clinical needs
- Maintains oversight of services delivered under their license

### Skills Building paraprofessional

- Provides skill-building and functional support in the home and community
- Helps members practice and apply skills related to treatment goals
- Does not provide psychotherapy or clinical treatment

## Coordination of care expectations

When members receive services from multiple providers, coordination of care is expected to ensure services are aligned, clinically appropriate, and not duplicative.

For Skills Building/CBRS, an Individualized Skills Building Treatment Plan is developed collaboratively by the treating clinician, Skills Building paraprofessional, the member, and the member's family or authorized representative. This skills building plan uses the teaming approach to develop the individualized Skills Building/CBRS plan which is a requirement of the Skills Building/CBRS service and should be reviewed every ninety (90) calendar days. For additional information, please see "Individualized Skills Building Treatment Plan" in the [IBHP Handbook Supplement, Appendix C](#), starting on page 26.

- The Skills Building/CBRS treatment plan should be reflective of the information contained within the CDA and functional assessment completed by the treating clinician
- Skills Building/CBRS interventions should address the member's identified clinical and functional needs and strengths
- The Skills Building/CBRS agency's supervising clinician should be aware of and oversee the services being delivered under their license
- Regular communication between providers is encouraged to support coordinated care and improved outcomes

## Questions?

Please contact Magellan at [IdahoProvider@MagellanHealth.com](mailto:IdahoProvider@MagellanHealth.com).