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Frequently Asked Questions

State-Contracted, Accredited Mental Health Providers

Voucher Program – Reimbursable Services

<p>The grant requires the funds to be a payer of last resort. What is the order of payment given multiple sources with similar restrictions?</p>	<p>Individuals must be South Dakota residents, and attest they do not have another payer for service or have financial hardship considerations that inhibit their ability to pay for services. <i>The goal of this project is to eliminate funding as a barrier for service for individuals seeking assistance.</i></p> <p>Vouchers should only be utilized for clients that are considered non-target populations. Order of payment is as follows:</p> <ol style="list-style-type: none">1 – Insurance / other payer2 – Medicaid3 – Disaster grant funds (residence in targeted county)4 – Emergency COVID treatment grant funds (per eligibility criteria)
<p>How do I discern if someone is eligible for Disaster grant funding or Covid emergency treatment grant funding?</p>	<p>To leverage Disaster grant funds for treatment cost assistance, the client must reside in one of the counties included in either FEMA-DR-4440 or FEMA-DR-4469 AND have been directly or indirectly impacted by the disasters impacting those counties. This is to be determined based on intake conversations and/or information provided by the client that attests to underlying factors contributing to their need for services. Individuals must also attest they do not have another payer for service or have financial hardship considerations that inhibit their ability to pay for services.</p>



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What documentation is required to support an individual's eligibility for services?	Documentation of a client's eligibility will be captured on a simple form that will be available to participating providers. The form will serve as attestation that the services are not covered by public or commercial health insurance for that individual, or that the individual is experiencing financial circumstances that impacts their ability to pay for needed services.
Are services limited to adults?	No - this funding supports services for youth and adults.
What types of services are allowable through a voucher?	<ul style="list-style-type: none">• Any clinically appropriate, evidence-based mental health service for which your agency/clinicians are trained to deliver.• Services are limited to individual sessions (no group) at this time.
Can services be conducted virtually?	Services can be provided via in-person or through telemedicine, pursuant to the signed Executive Order 2020-34 , which extends the telemedicine flexibilities that were granted under Executive Order 2020-07 until June 30, 2021, unless sooner terminated or extended. Note that Audio Only is to be used as a means of last resort, not for the convenience of the provider or recipient.
How will we be reimbursed for services delivered through the voucher program?	Reimbursement will be done on a monthly basis, referencing the voucher number(s) presently being served by your agency. Reimbursement will align with established rates. Payment will be processed from an invoice sent from your agency that will reflect the voucher number, services delivered through that voucher (appointment type, units billed, etc), and will include attestation from you that the data tool was complete. An invoice template will be provided to providers that enroll that they can populate or use to modify their own invoice format should you use an accounting software platform to facilitate billing.



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How many sessions are covered by a voucher?	The number of sessions can vary based on the needs of the client, based on assessment by the provider. One voucher will be issued per client, and that voucher can be invoiced against to support the full needs of that client while in your care.
What are the rates for service?	Rates are based on the currently approved rate structure for Mental Health services as issued by the Division of Behavioral Health, Department of Social Services, with additional funds included to reflect the data collection requirements. See Rate Sheet – Recovery Support Services, and Rate Sheet – Treatment Services.
How much funding will we be able to receive for vouchers?	Contracts will initially support up to \$50,000 for reimbursable services through the voucher program. This amount can and will be adjusted if need exceeds the funding initially obligated.
Who can provide services through the voucher program?	Mental health services can be delivered by 1) any CMHC staff who meets eligibility to deliver therapeutic services in ARSD 67:62:06:03(2); 2) mental health professionals with active licensure in South Dakota, limited to the following credentials: LCSW-PIP, LCSW-PIP candidates, CNS-MH, LPC-MH, LPC working on MH, MFT, LP, Psychiatrists, and other Advanced Practice Providers (APP) working in behavioral health.
What clinical processes do I need to adhere to as a community Mental health center?	Documentation required to support services include: an integrated assessment and treatment plan must be developed in accordance with ARSD 67:62:08:05 and 67:62:08:07 as well as progress note documentation in accordance with ARSD 67:62:08:12-13.



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Voucher Program - Logistics & Data Collection

<p>Where can providers access a voucher for a client?</p>	<p>Providers can request vouchers by calling 211, or by filling out a voucher issuance form which will be available to enrolled providers. This process will generate an email to the provider and to the client indicating a voucher has been issued.</p>
<p>Is data collection required, and what tool?</p>	<p>Yes - the discretionary grants supporting the voucher program each require a data collection tool in compliance with the Government Performance and Results Act (GPRA). Information is required for each client at intake, 6 months post intake and upon discharge from services. The information is captured in the form of an interview with the client, and time spent facilitating that interview and entering the data into the online data collection system is reimbursable. See the Rate Sheet – Treatment Services for Data Collection Add-On Rates.</p> <p>The specific tools include the CSAT GPRA questionnaire and the CMHS NOMs (adult and adolescent).</p>
<p>Where will the data need to be entered?</p>	<p>Web-based data collection systems are. Paper forms may certainly be used during the client interviews, but data must be entered into the online tools for transmission back to the state, who ultimately reports it to SAMHSA.</p> <p>For currently contracted entities, data is NOT entered into STARS.</p>

For More Information

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