

School Based Mental Health (SBMH) Consultation Frequently Asked Questions

1. What are consultation services?

"[Consultation service](#)" means a formal and systematic information exchange between an agency and a person other than a client, which is directed towards the development and improvement of individualized service plans and/or techniques involved in the delivery of mental health services. Consultation service can also be delivered to a system (e.g., school or workplace) in order to ameliorate conditions that adversely affect mental health. Consultation services shall be provided according to priorities established to produce the greatest benefit in meeting the mental health needs of the community. The agency shall maintain a record of all consultation services provided, including the name of the person or system to which the service was provided, the nature of the consultation, and the outcome of the consultation. Consultation service shall be provided and supervised by staffs that are qualified according to rule [5122-29-30](#) of the Administrative Code.

2. What is the purpose for Consultation services within the school?

Consultation services are intended to support the behavioral health needs of the district by allowing a master's level licensed clinician to use up to four different types of consultation codes to provide targeted supports. The primary purpose of consultation services are to screen students for behavioral health needs and connect students to appropriate services.

3. Once a school contracts with StarkMHAR, what does the district pay for?

School districts that contract with StarkMHAR receive consultation services based upon the number of contracted days of services per week throughout the school year. There is a shared cost model utilized between the school district and StarkMHAR to ensure access to high quality behavioral health consultation while keeping costs manageable for districts.

4. What does a day of consultation service provide to the district?

One contracted day of consultation provides the district with a full day of on-site staffing by a master's level licensed clinician. Each day includes a blend of the following:

- Two hours of billable consultation (using the eligible consultation codes)
- Remaining hours dedicated to the clinician's open treatment clients

Providers are expected to be present in the school for the full contracted day and follow the same general schedule as school staff.

5. Who can bill consultation services?

Only master's level licensed clinicians may bill for consultation services.

6. What do the 3 consultation hours per student include?

Up to three hours of consultation per student per year may be billed. The three hours represent a total annual limit across all consultation billing codes.

7. How many times can a student be seen and billed under consultation service?

Consultation billing is based on time spent and not the number of contacts. The maximum amount of billable consultation time per student is three hours per school year, inclusive of all consultation codes.

8. When can you begin to bill consultation for school-based services and when does the billing period end?

For funding awarded during the normal RFP funding cycle, providers can bill consultation services on the start of the contract date, which normally coincides with the school year start date. The exception to this includes open houses, which typically occur the week to two weeks prior to the start of the school year. The billing period ends on the contract end date, which is typically on the last day of school. There should be no billing for consultation services after the last day of school and/or contract date.

9. What is the importance of Pseudo UCIs (Unique Client Identifiers)?

For all Board approved SBMH locations, providers will receive a location-based Pseudo UCI. A provider cannot bill for services until a Pseudo UCI is in place and not before the Pseudo UCI start date on the provider rate sheet.

10. What kind of documentation needs to be provided through consultation?

Documentation needs to show the intervention as well as the result of the intervention per student. If providers cannot document interventions on a per student basis in NextGen or other electronic health record, they will have to utilize paper documentation. All documentation should be grouped per student. Please refer to provider contract 7.6.4. for additional details.

11. How are referrals made to school-based services?

All referrals made to SBMH services should be made through school district counselors. Referrals from teachers, Family Support staff, Care Team, or other school staff should be sent to the school counseling staff to monitor referrals.

12. How can another location that is not in the RFP be funded?

If a school is not listed in the current year RFP, providers must first reach out to StarkMHAR before discussion of providing services.

13. Can providers receive funding for SBMH services directly from a school district?

Yes. However, in those cases, StarkMHAR would not allocate additional funding to the provider.