

Comprehensive Community Services Program — Service Array

The CCS program provides individuals with psychosocial rehabilitation services. All CCS programs must provide the services covered under the CCS benefit that a member needs as determined by the assessment of all the domains in Wis. Admin. Code § DHS 36.16(4). The assessment domains included in Wis. Admin. Code § DHS 36.16(4), are: (a) life satisfaction, (b) basic needs, (c) social network and family involvement, (d) community living skills, (e) housing issues, (f) employment, (g) education, (h) finances and benefits, (i) mental health, (j) physical health, (k) substance use, (l) trauma and significant life stressors, (m) medications, (n) crisis prevention and management, (o) legal status, and (p) any other domain identified by the CCS program. The service array describes the services that are covered under the CCS benefit. All services must be in compliance with Wis. Admin. Code § [DHS 36](#). All services should be person-centered and developed in partnership with the member.

Comprehensive Community Services Program — Service Array		
Service Category (Most Applicable DHS Wis. Admin. Code Sections)	Allowable Services	Allowable Provider Types
1. Screening and Assessment (Wis. Admin. Code §§ DHS 36.03 , 36.13-36.16)	<p>Screening and assessment services include: completion of initial and annual functional screens and completion of the initial comprehensive assessment and ongoing assessments as needed. The assessment must cover all the domains, including substance use, which may include using the Uniform Placement Criteria or the American Society of Addiction Medicine Criteria. The assessment must address the strengths, needs, recovery goals, priorities, preferences, values, and lifestyle of the member and identify how to evaluate progress toward the member's desired outcomes.</p> <p>Assessments for minors must address the minor's and family's strengths, needs, recovery and/or resilience goals, priorities, preferences, values, and lifestyle of the member including an assessment of the relationships between the minor and his or her family. Assessments for minors should be age (developmentally) appropriate.</p>	<p>Providers described in Wis. Admin. Code § DHS 36.10(2) (g)1-22. * †</p> <p>All providers are required to act within their scope of practice.</p>
2. Service Planning (Wis. Admin. Code §§ DHS 36.03 , 36.16(7) , 36.17)	<p>Service planning includes the development of a written plan of the psychosocial rehabilitation services that will be provided or arranged for the member. All services must be authorized by a mental health professional and a substance abuse professional if substance abuse services will be provided. This can be a single professional for whom mental health and substance abuse services are in scope. The service plan is based on the assessed needs of the member. It must include measureable goals and the type and frequency of data that will be used to measure progress toward the desired outcomes. It must be completed within 30 days of the member's application for CCS services. The completed service plan must be signed by the member, a mental health or substance abuse professional, and the service facilitator.</p> <p>The service plan must be reviewed and updated based on the needs of the member or at least every six months. The review must include an assessment of the progress toward goals and member satisfaction with the services. The service plan review must be facilitated by the service facilitator in collaboration with the member and the recovery team.</p>	<p>Providers described in Wis. Admin. Code § DHS 36.10(2) (g)1-22. * †</p> <p>All providers are required to act within their scope of practice.</p>

<p>3. Service Facilitation (Wis. Admin. Code §§§ DHS 36.03, 36.10(2)(e) 4, , 36.17)</p>	<p>Service facilitation includes activities that ensure the member receives: assessment services, service planning, service delivery, and supportive activities in an appropriate and timely manner. It also includes ensuring the service plan and service delivery for each member is coordinated, monitored, and designed to support the member in a manner that helps the member achieve the highest possible level of independent functioning. Service facilitation includes assisting the member in self-advocacy and helping the member obtain other necessary services such as medical, dental, legal, financial, and housing services.</p> <p>Service facilitation for minors includes advocating, and assisting the minor's family in advocating, for the minor to obtain necessary services. When working with a minor, service facilitation that is designed to support the family must be directly related to the assessed needs of the minor.</p> <p>Service facilitation includes coordinating a member's crisis services but not actually providing crisis services. Crisis services are provided by Wis. Admin. Code ch. DHS 34, certified programs.</p> <p>All services should be culturally, linguistically, and age (developmentally) appropriate.</p>	<p>Providers described in Wis. Admin. Code § DHS 36.10(2) (g)1-21.* †</p> <p>All providers are required to act within their scope of practice.</p>
<p>4. Diagnostic Evaluations</p>	<p>Diagnostic evaluations include specialized evaluations needed by the member, including, but not limited to, neuropsychological, geropsychiatric, specialized trauma, and eating disorder evaluations. For minors, diagnostic evaluations can also include functional behavioral evaluations and adolescent alcohol/drug assessment intervention program.</p> <p>The CCS program does not cover evaluations for autism, developmental disabilities, or learning disabilities.</p>	<p>Providers described in Wis. Admin. Code § DHS 36.10(2) (g)1-14.*</p> <p>All providers are required to be licensed/certified and acting within their scope of practice.</p>
<p>5. Medication Management</p>	<p>Medication management services for prescribers include:</p> <ul style="list-style-type: none"> • Diagnosing and specifying target symptoms • Prescribing medication to alleviate the identified symptoms • Monitoring changes in the member's symptoms and tolerability of side effects • Reviewing data, including other medications, used to make medication decisions <p>Prescribers may also provide all services the non-prescribers can provide as noted below.</p> <p>Medication management services for non-prescribers include:</p> <ul style="list-style-type: none"> • Supporting the member in taking their medications • Increasing the member's understanding of the benefits of medication and the symptoms it is treating • Monitoring changes in the member's symptoms and tolerability of side effects 	<p>Providers described in Wis. Admin. Code § DHS 36.10(2) (g)1-3, 7-8, and 11.</p> <p>All providers are required to be licensed/certified and acting within their scope of practice.</p> <p>Providers described in Wis. Admin. Code § DHS 36.10(2) (g)1-22.* †</p> <p>All providers are required to act within their scope of practice.</p>

Medication Management Service Array for Dane County CCS*	
Prescriber^{1,2}: MD APNP PA	
Diagnosing and specifying target symptoms.	<ul style="list-style-type: none"> • Direct face to face client contact.
Prescribing medication to alleviate the identified symptoms.	<ul style="list-style-type: none"> • Submitting refill requests. • Pharmacy follow-up. • Completing or confirming re-fills. • Medication changes or titrating.
Monitoring changes in the member's symptoms and tolerability of side effects.	<ul style="list-style-type: none"> • Direct client contact: face to face or telehealth. • Telehealth follow up with client or legal guardian.
Reviewing data, including other medications, used to make medication decisions.	<ul style="list-style-type: none"> • Prescription drug monitoring program tasks which include reviewing all controlled substances client is are prescribed, when and where, prior to providing refills of controlled substances. • Coordination with Primary Care Physician and/ or other medical professionals of client's care team. • Review of Hospital Discharge Summaries, previous medication records.
Supporting the member in taking his or her medications.	<ul style="list-style-type: none"> • Direct client contact: face to face or telehealth. • Submitting refill requests. • Pharmacy follow-up. • Completing or confirming re-fills. • Coordination with schools regarding prescription medication administered at school. • Coordination with Primary Care Physician and/ or other medical professionals of client's care team.
Increasing the member's understanding of the benefits of medication and the symptoms it is treating.	<ul style="list-style-type: none"> • Direct client contact: face to face or telehealth. • Telehealth follow-up with client or legal guardian.

Non-Prescriber: RN	
Monitoring changes in the member's symptoms and tolerability of side effects.	<ul style="list-style-type: none"> • Direct client contact: face to face or telehealth. • Telehealth follow up with client or legal guardian.
Supporting the member in taking his or her medications.	<ul style="list-style-type: none"> • Direct client contact: face to face or telehealth. • Submitting refill requests. • Prescription drug monitoring program tasks, as needed, prior to authorizing refills. • Pharmacy follow-up. • Completing or confirming re-fills. • Coordination with schools regarding prescription medication administered at school. • Review of Hospital Discharge Summaries and coordination of medication f/u post discharge. • Communication with PCP office to coordinate medications
Increasing the member's understanding of the benefits of medication and the symptoms it is treating.	<ul style="list-style-type: none"> • Direct client contact: face to face or telehealth. • Telehealth follow-up with client or legal guardian.

¹ <https://www.forwardhealth.wi.gov/kw/pdf/2014-42.pdf>

6. Physical Health Monitoring	<p>Physical health monitoring services focus on how the member's mental health and/or substance abuse issues impact their ability to monitor and manage physical health and health risks.</p> <p>Physical health monitoring services include activities related to the monitoring and management of a member's physical health. Services may include assisting and training the member and the member's family to identify symptoms of physical health conditions, monitor physical health medications and treatments, and develop health monitoring and management skills.</p>	<p>Providers described in Wis. Admin. Code § DHS 36.10(2) (g)1-22.* †</p> <p>All providers are required to act within their scope of practice.</p>
7. Peer Support	<p>Peer support services include a wide range of supports to assist the member and the member's family with mental health and/or substance abuse issues in the recovery process. These services promote wellness, self-direction, and recovery by enhancing the skills and abilities of members to meet their chosen goals. The services also help members negotiate the mental health and/or substance abuse systems with dignity and without trauma. Through a mutually empowering relationship, Certified Peer Specialists and members work as equals toward living in recovery.</p>	<p>Providers described in Wis. Admin. Code § DHS 36.10(2) (g)20.* †</p> <p>Reminder: All CCS peer specialists are required to be Wisconsin Certified Peer Specialists as noted by the † throughout the array. All providers are required to act within their scope of practice.</p>
8. Individual Skill Development and Enhancement	<p>Individual skill development and enhancement services include training in communication, interpersonal skills, problem solving, decision-making, self-regulation, conflict resolution, and other specific needs identified in the member's service plan. Services also include training in daily living skills related to personal care, household tasks, financial management, transportation, shopping, parenting, accessing and connecting to community resources and services (including health care services), and other specific daily living needs identified in the member's service plan.</p> <p>Services provided to minors should also focus on improving integration into and interaction with the minor's family, school, community, and other social networks. Services include assisting the minor's family in gaining skills to assist the minor with individual skill development and enhancement. Services that are designed to support the family must be directly related to the assessed needs of the minor.</p> <p>Skill training may be provided by various methods, including, but not limited to, modeling, monitoring, mentoring, supervision, assistance, and cuing. Skill training may be provided individually or in a group setting.</p>	<p>Providers described in Wis. Admin. Code § DHS 36.10(2) (g)1-22.* †</p> <p>All providers are required to act within their scope of practice.</p>

<p>9. Employment-Related Skill Training</p>	<p>Employment-related skill training services address the member's illness or symptom-related problems in finding, securing, and keeping a job. Services may include, but are not limited to, employment and education assessments; assistance in accessing or participating in educational and employment-related services; education about appropriate job-related behaviors; assistance with job preparation activities, such as personal hygiene, clothing, and transportation; on-site employment evaluation and feedback sessions to identify and manage work-related symptoms; assistance with work-related crises; and individual therapeutic support.</p> <p>The CCS program does not cover time spent by the member working in a clubhouse. The CCS program covers time spent by clubhouse staff in providing psychosocial rehabilitation services, as defined in the service array, for the member if those services are identified in the member's service plan.</p>	<p>Providers described in Wis. Admin. Code § DHS 36.10(2)(g)1-22. * ‡</p> <p>All providers are required to act within their scope of practice.</p>
<p>10. Individual and/or Family Psychoeducation **</p>	<p>Psychoeducation services include:</p> <ul style="list-style-type: none"> • Providing education and information resources about the member's mental health and/or substance abuse issues • Skills training • Problem solving • Ongoing guidance about managing and coping with mental health and/or substance abuse issues • Social and emotional support for dealing with mental health and/or substance abuse issues <p>Psychoeducation may be provided individually or in a group setting to the member or the member's family and natural supports (i.e., anyone the member identifies as being supportive in their recovery and/or resilience process). Psychoeducation is not psychotherapy.</p> <p>Family psychoeducation must be provided for the direct benefit of the member. Consultation to family members for treatment of their issues not related to the member is not included as part of family psychoeducation. Family psychoeducation may include anticipatory guidance when the member is a minor.</p> <p>If psychoeducation is provided without the other components of the Wellness Management and Recovery/Recovery Support Services service category (#11), it should be included under this service category.</p>	<p>Providers described in Wis. Admin. Code § DHS 36.10(2)(g)1-22. * ‡</p> <p>All providers are required to act within their scope of practice.</p>

<p>11. Wellness Management and Recovery**/Recovery Support Services</p>	<p>Wellness management and recovery services, which are generally provided as mental health services, include empowering members to manage their mental health and/or substance abuse issues, helping them develop their own goals, and teaching them the knowledge and skills necessary to help them make informed treatment decisions. These services include psychoeducation, behavioral tailoring, relapse prevention, development of a recovery action plan, recovery and/or resilience training, treatment strategies, social support building, and coping skills. Services can be taught using motivational, educational, and cognitive-behavioral strategies.</p> <p>If psychoeducation is provided without the other components of wellness management and recovery, it should be included under the Individual and/or Family Psychoeducation service category (#10).</p> <p>Recovery support services, which are generally provided as substance abuse services, include emotional, informational, instrumental, and affiliated support. Services include assisting the member in increasing engagement in treatment, developing appropriate coping strategies, and providing aftercare and assertive continuing care. Continuing care includes relapse prevention support and periodic follow-ups and is designed to provide less intensive services as the member progresses in recovery.</p>	<p>Providers described in Wis. Admin. Code § DHS 36.10(2) (g)1-22. * ‡</p> <p>All providers are required to act within their scope of practice.</p>
<p>12. Psychotherapy</p>	<p>Psychotherapy includes the diagnosis and treatment of mental, emotional, or behavioral disorders, conditions, or addictions through the application of methods derived from established psychological or systemic principles for the purpose of assisting people in modifying their behaviors, cognitions, emotions, and other personal characteristics, which may include the purpose of understanding unconscious processes or intrapersonal, interpersonal, or psychosocial dynamics.</p> <p>Psychotherapy may be provided in an individual or group setting.</p>	<p>Providers described in Wis. Admin. Code § DHS 36.10(2) (g)1-10, 14, 22.*</p> <p>All providers are required to be licensed/certified and acting within their scope of practice.</p>
<p>13. Substance Abuse Treatment</p>	<p>Substance abuse treatment services include counseling of persons affected by problems related to the abuse of alcohol or drugs including individual, group, and family counseling. Substance abuse treatment services can be provided in day treatment (Wis. Admin. Code § DHS 75.52), outpatient (Wis. Admin. Code §§ DHS 75.49, 75.50, or 75.51), and residential (Wis. Admin. Code § DHS 75.54 or Wis. Admin. Code § DHS 75.53) settings. Substance abuse treatment services can be in an individual or group setting.</p> <p>The other categories in the service array also include psychosocial rehabilitation substance abuse services that support members in their recovery.</p> <p>The CCS program does not cover Operating While Intoxicated assessments, urine analysis and drug screening, detoxification services, medically managed inpatient treatment services, or narcotic treatment services (opioid treatment programs). Some of these services may be covered under Medicaid and BadgerCare Plus outside the CCS program.</p>	<p>Providers described in Wis. Admin. Code §§ DHS 36.10(2) (g)1, 2 (with knowledge of addiction treatment),4 (with knowledge of psychopharmacology and addiction treatment) and 16.</p> <p>Substance abuse professionals include:</p> <ul style="list-style-type: none"> • Licensed Psychotherapists • Certified Substance Abuse Counselor • Substance Abuse Counselor • Certified Psychotherapists with MPSW (Marriage & Family Therapy, Professional Counseling & Social Worker) Examining Board 1.09 specialty <p>All providers are required to be licensed/certified and acting within their scope of practice.</p>

* Type I QTTs (qualified treatment trainees) are described in Wis. Admin. Code § [DHS 36.10\(2\)\(g\)22.](#), (clinical students) and Type II QTTs are described in Wis. Admin. Code § [DHS 36.10\(2\)\(g\)9.](#), (certified social workers, certified advance practice social workers, and certified independent social workers). Type I and Type II QTTs are required to be working through a Wis. Admin. Code § [DHS 35](#), certified outpatient clinic. For the purposes of the CCS program, all clinical students are required to be Type I QTTs. For the purposes of Medicaid reimbursement, APSWs (advanced practice social workers) and ISWs (independent social workers) are required to enroll as certified psychotherapists.

** Information for these service categories is based on information provided by the federal SAMHSA (Substance Abuse and Mental Health Services Administration).

‡ Wis. Admin. Code § DHS 36.10(2)(g)20, describes peer specialists. For the purposes of the CCS program, all CCS peer specialists are required to be Wisconsin Certified Peer Specialists. Individuals who are not Wisconsin Certified Peer Specialists could potentially act as rehabilitation workers if they meet the requirements described in Wis. Admin. Code § [DHS 36.10\(2\)\(g\)21.](#) Refer to the service array for which services rehabilitation workers can provide.