

## **Bulletin ID- No. 8 - Configuring eCura to Reflect ACT-CBI as Clinical Home**

### Background

Under the existing MHRS standards, ACT and CBI providers have responsibility for treatment planning with respect to those services.[1] Treatment planning is defined to encompass completion of a diagnostic/assessment and preparation of a IRP/IPC.[2] Accordingly, the present MHRS standards treat the ACT and CBI provider as the consumer's clinical home. Historically, CBI providers and ACT providers who are not also CSAs could not enter authorizations for those services, however. Because the present MHRS standards support allowing ACT and CBI providers to act as the consumer's clinical home, DMH has configured the eCura system to allow both ACT and CBI providers to authorize services as permitted by the MHRS standards. This change in the configuration of eCura is expected to facilitate the treatment planning process.

### Who is affected?

The change immediately affects ACT providers. It is also intended to benefit CBI Level II and III providers, after such providers are certified by DMH, pursuant to the requirements described in the proposed rules published in the DC Register on April 21, 2006 (53 DC REG. 3276 ), that are expected to be revised and final on or about October 1, 2006.

### When will it change?

August 17, 2006.

### What is changing?

ACT providers will now be able to enter authorizations into eCura for ACT, Community Support, and Diagnostic Assessment for consumers not currently in services with a CSA. Upon publication of the final rules, CBI Level II and III providers will be able to enter authorizations into eCura for CBI, Community Support, and Diagnostic Assessment for consumers not currently in services with a CSA. This change will not apply to consumers already enrolled in a CSA, unless those consumers choose the ACT/CBI provider as their clinical home.

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[1] See 22A DCMR § 3407( “the treatment planning process for consumers authorized to receive: (a) CBI shall be coordinated by the consumer's CBI provider; and (b) ACT services shall be coordinated by the consumer's ACT provider”).

[2] Id. at 3407.2 “(The treatment planning process for consumers shall, at a minimum, include: (a) The completion of a Diagnostic/Assessment service and required components as described in § 3415;(b) Development of an IRP/IPC as described in § 3408.”)