

Service Name: Apex Program

Service Definition

The Georgia Apex Program is a DBHDD-funded partnership between community-based behavioral health providers and local school districts. The program utilizes a school-based behavioral health framework to increase access to behavioral health services among school-aged youth (Pre-K through 12th grade) throughout the state. The Program provides preventive interventions and adjunct support for the provision of DBHDD services in designated public school settings.

Apex Program Goals:

1. Prevention and early detection of child and adolescent behavioral health needs;
2. Increase statewide access to behavioral health services for children and adolescents; and
3. 3. Encourage sustainable coordination between Georgia's community behavioral health providers and their local schools/school districts.

The Apex Program helps to support program development, relationship building, and embedding providers in schools, and aligns with other types of school-based behavioral health support programs such as Positive Behavioral Interventions and Supports. The Program utilizes a Multi-Tiered System of Support (MTSS) framework for delivering services to students, and while providers implement services across all three tiers, they prioritize delivering services to youth represented in MTSS Tier III.

- MTSS Tier I interventions promote universal prevention benefiting the entire school.
- MTSS Tier II refers to targeted early interventions for at-risk students with emerging behavioral health needs.
- MTSS Tier III refers to individualized intervention for students identified as living with a behavioral health diagnosis.

Within these tiers, providers may implement preventative community outreach and educational activities related to behavioral health (MTSS Tier I), as well as facilitate the provision of early intervention services for youth and families with risk factors for/early indications of emerging behavioral health challenges (MTSS Tier II). In addition to prevention and early intervention, Apex offers adjunct supports for the provision of DBHDD services (named below) to youth with an established behavioral health need (MTSS Tier III). Such supports are based on individual need, and could include (but are not limited to) the coordination of DBHDD services with school and community services/supports, and financial assistance to help offset the costs of an approved provider's staff time for non-billable activities such as travel, meeting and conference attendance, trainings, individual teacher-based needs assessment/education/skill building regarding behavioral health conditions and classroom interventions, and other related activities.

Specific allowable DBHDD behavioral health services (see the Service Definition/Requirements for each service listed below in this Provider Manual):

1. Behavioral Health Assessment;
2. Diagnostic Assessment;
3. Service Plan Development;
4. Crisis Intervention;

5. Individual Counseling;
6. Group Counseling/Training;
7. Family Counseling/Training;
8. Community Support;
9. Psychiatric Treatment;
10. Medication Administration; and
11. Nursing Assessment and Health Services

Admission Criteria

1. Youth must be enrolled in a designated public-school setting; and
2. Youth must meet the Core Customer criteria for child and adolescent services in the DBHDD's Provider Manual for Community Based Behavioral Health Providers, Part I, Section I; and
3. The youth's level of functioning does not preclude the provision of services in an outpatient milieu.

Continuing Stay Criteria

1. Youth continues to meet admission criteria; and
2. Youth demonstrates documented progress relative to goals identified in their Individualized Recovery Plan, but goals have either not yet been achieved, or new service needs have been identified.

Discharge Criteria

1. Youth no longer meets admission criteria; or
2. Goals of the Individualized Recovery Plan have been substantially met; or
3. Youth or their parent/legal guardian requests that the youth no longer participate in the Apex Program and/or associated DBHDD behavioral health services; or
4. Transfer to another service is warranted due to a change in the youth's condition and/or needs.

Clinical Exclusions

1. Severity of cognitive impairment precludes provision of services.
2. Individuals with the following conditions are excluded from admission unless there is clearly documented evidence of a behavioral health condition overlaying the diagnosis: Intellectual/Developmental Disabilities, Autism, Neurocognitive Disorder and Traumatic Brain Injury.

Required Components

1. The Apex Program may only be implemented in designated public-school settings.
2. The Apex Program is administered by approved DBHDD service providers (DBHDD Provider Tiers 1 and 2).
3. DBHDD services provided via the Apex Program must utilize evidence-informed practices (where these exist).
4. DBHDD services provided via the Apex Program must adhere to all DBHDD service definitions and requirements for each service provided.

5. Each Apex Program provider must have an established referral process, which is documented in the Provider's internal Policies and Procedures.
6. The Apex Program must be offered year-round, including during the summer.
7. Providers must obtain and maintain commitment by the school leadership to support school based behavioral health services (e.g., designated space for treatment and confidential file storage, communication plan for parents and teachers to announce and coordinate the implementation of services, evidence that student support professionals support the new service and will collaborate with the mental health professional(s) assigned to their school, etc.).
8. Providers must coordinate any needed treatment with the student, their family and teacher, and other resources, as indicated (e.g. probation officer, student support teams and response to intervention teams, natural supports, physician; school student support professionals including professional school counselors, school psychologists, school social workers, school nurses; or Local Interagency Planning Teams [LIPTs]).

Staffing Requirements

1. One FTE Apex Program Coordinator;
2. Provider must adhere to the Staffing Requirements section of the Service Definition/Requirements for the specific DBHDD service being provided, as well as to all other staffing/professional requirements found elsewhere in the DBHDD's Provider Manual for Community Based Behavioral Health Providers;
3. Supervisees/trainees must work alongside a practitioner who is independently licensed while inside the school.

Program Accessibility

1. The Program encourages access to behavioral health services for youth and families who may otherwise not become engaged due to externalities such as transportation challenges, parental work schedules, etc. In addition, this program is offered in a school-based setting in order to identify and engage with youth in a familiar environment where they spend much of their time.
2. DBHDD behavioral health services may be provided via telemedicine as may be allowable per the Service Definition/Requirements for each particular service.

Documentation Requirements

1. Provider must adhere to the Documentation Requirements section of the Service Definition/Requirements for the specific DBHDD service being provided, as well as to Part II, Section III of the DBHDD's Provider Manual for Community Based Behavioral Health Providers.
2. For services provided/activities engaged in as part of the Apex Program, but which are not defined DBHDD behavioral health services (e.g. travel, conference attendance, meetings with school/community stakeholders, etc.), provider must meet the documentation requirements established through the Georgia State COE evaluation process, as well as DBHDD's monthly progress report process.

Billing & Reporting Requirements

1. DBHDD service provision, billing, and reporting must adhere to all DBHDD and Georgia Collaborative ASO requirements.

2. Provider must submit a monthly invoice, and invoice justification/supporting documentation (as needed) to their designated DBHDD contract manager.
3. Providers are required to maximize utilization of alternative funding streams, including third party payers (e.g., Medicaid, private insurance, etc.), public targeted and competitive grants, and private foundation funds.
4. To promote program sustainability, a target threshold of sixty percent (60%) billable direct-service time per clinical staff member has been established, and providers should make a good faith effort to reach this target as quickly and efficiently as possible. However, during the first contract-term of service provision, staff are required to meet a minimum threshold of forty percent (40%) billable time.
5. Apex may also provide up to 60 days of reimbursement for DBHDD services delivered by Tier 2 providers who cannot bill DBHDD state-funds for uninsured individuals served.
6. Outpatient services that are identified in the service definition above may be authorized and billed in accordance with Part I, Section II of this manual via the Non-intensive Outpatient Services Type of Care.