

**Community Mental Health Services**  
**Evidence Based Supported Employment (EBSE) QUESTIONS 09/23/10**  
**REVISED (11/29/10)**

1. As part of EBSE, many clients receive benefits counseling to help them make important decisions about how their work income will affect their benefits. If an employment specialist accompanies a client to a meeting with a trained work incentives (or benefits) counselor, in the community, can the employment specialist bill for EBSE if they are working with the client to manage symptoms so that the client can understand the information? **The symptom management services should not be provided during another appointment for benefits counseling. Assist the individual prior to the appointment by reviewing some of the symptom management strategies you and other team members have been working on. Also, agencies and/or individuals providing benefits counseling services to persons with disabilities should possess the skills necessary to provide the supports needed during the appointment.**
  
2. If an employment specialist or Supported Employment (SE) team leader is a trained work incentive (or benefits) counselor and they are directly providing this information to the client, e.g. how earning \$500 a month would affect their Social Security Disability Income (SSDI), then would the employment specialist or SE team leader be able to bill EBSE for this service? **No, New Hampshire (NH) Medicaid does not pay for the benefits counseling component of EBSE. Vocational Rehabilitation provides work incentives or benefits counseling for open VR clients, whose plan includes benefits counseling, in the Manchester and Portsmouth area where NH VR has hired their own work incentives counselors. In other regions, under the same circumstances, Vocational Rehabilitation may purchase this service from GSIL. GSIL is the state WIPA (work incentives and planning assistance). For individuals receiving social security benefits who are not open with VR, GSIL can provide work incentives benefits counseling.**  
  
**The Bureau of Behavioral Health (BBH) strongly encourages Community Mental Health Centers (CMHC's) to contract with The Division of Vocational Rehabilitation as a CRP for job placement, job development and job retention.**
  
3. If an employment specialist works with a client, in advance of a work incentive (or benefits) counselor meeting, to help pull information together and identify questions the client may want to ask, would the employment specialist be able to bill EBSE for that time? **No, this component of EBSE is not billable to NH Medicaid.**
  
4. Would the employment specialist need to document symptom management strategies used to help the client with these tasks to be able to bill? **If the employment specialist is working on (and documents) symptom management**

**as required in the Individual Service Plan (ISP), the service may be covered by NH Medicaid as EBSE, as long as all other requirements are met. The interventions must be intended to restore or maintain the individuals functioning which has been limited due to the symptoms of mental illness.**

5. It seems that He-M 426 now restricts the billing of EBSE services only to services provided in the community? Is that correct? **The billing of symptom management supports is limited to community-based activities in the setting of the individual's choosing. This is not new; it has been required since NH Medicaid covered EBSE.**
6. Are there times that important EBSE services may be provided in the office or CMHC? **BBH recognizes that many components of the EBSE model may occur in the office, such as interview techniques and/or work incentives counseling. It is important to understand which components NH Medicaid covers and which they do not. Only community based symptom management services are billable to NH Medicaid as EBSE. Other referral and linkage activities may meet the case management service definition. BBH strongly encourages CMHC's to contract with Division of Vocational Rehabilitation as a CRP for job placement, job development and job retention.**
7. Is Illness Management and Recovery (IMR) covered by NH Medicaid when provided to individuals under age 21? **IMR is covered for persons 18 and older in accordance with New Hampshire Administrative Rule requirements. IMR is intended for individuals who, as a result of one of the major disorders outlined in the rule, have a severe mental illness. In accordance with New Hampshire Administrative rule He-M 401.05, eligibility criteria for adults with a severe or severe and persistent mental illness applies to persons 18 and older.**