



Behavioral Health and Developmental Disabilities Administration

Communication #20-11

Essential Behavioral Health Services in the COVID-19 Context: Updated Guidance

Date of Issuance: July 8, 2020

For Questions Please Contact:

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This guidance replaces the following documents:

1. **Essential Behavioral Health Services and Stay Home Stay Safe** Executive Order 2020-21, BHDDA Communication #20-01 Issued 3/25/20; and
2. **Guidance for Specific Clinically Essential Face to Face Encounters in Behavioral Health Clinics, Substance Use Services, and Residential Settings in the COVID-19 Context**, BHDDA Communication #20-02, Issued 3/25/20.

This guidance is being issued in response to the lifting of the Governor's Executive Order 2020-21 (COVID-19) Temporary requirement to suspend activities that are not necessary to sustain or protect life (Stay Home Stay Safe Order) and is directed to Pre-Paid Inpatient Health Plans (PIHPs), Community Health Service Programs (CMHSPs), their provider agencies and direct care workers that provide home and community based behavioral health care and supports or direct care clinical services to individuals with serious mental illness, children with serious emotional disturbance, individuals with intellectual and developmental disabilities, substance use disorders, and all other individuals served by the public behavioral health system or experiencing a behavioral health crisis. This guidance addresses considerations with the Governor's plan for re-opening of Michigan in the context of the COVID-19 pandemic.

All behavioral health services are essential to sustain and protect life and therefore must continue to be provided. Behavioral health services shall continue to be provided in homes, residential or clinical settings. Services should continue to be performed telephonically or through other virtual methods where appropriate and safe. For all persons served there should be an ongoing rebalancing with good-faith clinical assessments on an individual and family-centered basis. This assessment should include a review of whether the services provided require more in-person contacts, a balanced combination of in-person and virtual, or can continue solely through electronic means or connect with persons served in any way

necessary to sustain and protect life. Face-to-face, home-based or clinic-based services are necessary to sustain and protect life if, based on a provider's good faith clinical judgment, are necessary for the individual to remain in the least restrictive environment, are required for assistance with activities of daily living, instrumental activities of daily living (IADLs), be sustained on life-preserving medication, as well as those services necessary to maintain behavioral or psychiatric stability.

Essential services that do not require face-to-face home-based or clinic-based intervention may therefore continue to be done telephonically or through other virtual methods. The clinical rationale for the modality used, including face-to-face, or the use of telephonic or virtual services shall be made with input from individual(s) served and must be documented on an individualized basis. Such rationale shall be reviewed and updated regularly as the individual's needs and the public health crisis evolves.

Guidance if Individuals are Presenting Behavioral Health and Safety Concerns During the COVID-19 Crisis

Consultation with a clinical supervisor is advised if the behavioral health needs of the individual raise separate health and safety concerns distinct from the health and safety concerns related to COVID-19. It is recommended that individuals served and their families work out a crisis management plan in the event that there is escalated risk of COVID-19 related issues or if there is escalated risk of behavioral health emergencies during the COVID-19 crisis. Such plans should be done in consultation with providers. If in-person contact cannot occur, staff should utilize any and all other available resources to make contact with the individual being served, including but not limited to phone calls, skype, facetime, or other technology that allows verification of the individual's safety and the ability to address concerns about the individuals well-being.

Guidance for an Individual who is reasonably believed to be a Person Requiring Treatment with and without COVID-19 symptoms, history or elevated COVID-19 risk due to exposure:

A petition for certification by a Community Mental Health Services Program (CMHSP) should be completed if there is a reasonable basis to believe that an individual may need psychiatric hospitalization as a person requiring treatment. Although unrelated to the issues pursuant to a petition, given the risk of exposure of others who might encounter the respondent to the petition, the petition should be accompanied by information on COVID-19 status of the individual, if known.

Reviewed by: Behavioral Health COVID-19 Response Team (BHCRT): Jeffery Wierich, Kim Batsche-McKenzie, Jody Lewis, Price Pullins, Jon Villasurda, Larry Scott, Leslie Asman, Raymie Postema, Dr. Debra Pinals, Allen Jansen

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