

## [Staffing \(pdf\)](#)

1. When the rule speaks of Advanced Practice Nurses in section 132.150, what is the definition of advanced practice nurse. I am assuming this is a Psychiatric APN correct? The rule does not provide this definition.
  - **Answer:** The rule defines LPHA as "...an advanced practice nurse with psychiatric specialty licensed under the Nurse Practice Act..."
2. Will the state provide support in development of a staffing formula?
  - **Answer:** Staffing requirements are listed under each service definition in Rule 132.
3. Occupational Therapists have always been expert at many of the areas highlighted in the Recovery Model: teaching independent living skills, vocational skills, strengths-based approach, experiential learning, community reintegration, holistic view, etc. Why are they not the recommended service providers?
  - **Answer:** Occupational therapists are eligible to provide interventions and receive reimbursement as Qualified Mental Health Professionals for all Rule 132 services (see 132.25). Occupational Therapist Assistants are included in the rule as a Mental Health Professional.
4. Two Part Question: 1) Can agencies bill for psychological testing done by practicum students, interns or postdoctoral candidates under the supervision of a licensed clinical psychologist? According to the Medicaid rule "...a master's level professional may assist." 2) Can an intern without a master's degree be deemed a master's level professional?
  - **Answer:** No. Master's level means possessing a master's degree. Billing for Psychological evaluation services must be consistent with the Clinical Psychologist Licensing Act (225 ILCS 15). The practice of clinical psychology is regulated, and includes the use of psychological testing and assessment. A person represents him/herself to be a "clinical psychologist" when s/he renders clinical psychological services for remuneration. No one, without a valid license as a clinical psychologist, shall in any manner render or offer to render clinical psychological services. Providers may employ practicum students, interns or postdoctoral candidates to assist in the rendering of services, provided that such employees function under the direct supervision, order, control and full professional responsibility of a licensed clinical psychologist. 59 IAC 132.148b), 225 ILCS 15, 68 IAC 1400.
5. I am looking for clarification on the number of hours that constitutes one year of supervised experience. Can contact hours for seminars and workshops or college credit hours can be included in that number?
  - **Answer:** 1500 hours constitutes one year. No, contact hours for seminars, workshops or college credits may not be included those hours. It is 1500 hours of supervised WORK experience. This work experience may be accumulated over a period of time greater than 12 months.
6. An ACT Team leader must be a QMHP and have a license. What type of license? Would an RN satisfy the license requirement?
  - **Answer:** The definition of licensed clinician included in Rule 132 is: An individual who is either a licensed practitioner of the healing arts (LPHA); a licensed social worker (LSW) possessing at least a master's degree in social work and licensed under the Clinical Social Work and Social Work Practice Act [225 ILCS 20] with specialized training in mental health services or with at least two years experience in mental health services; a licensed professional counselor (LPC) possessing at least a master's degree and licensed under the Professional Counselor and Clinical Professional Counselor Licensing Act [225 ILCS 107] with specialized training in mental health services or with at least two years experience in mental health services; a registered nurse (RN) licensed under the Nurse Practice Act [225 ILCS 65] with at least one year of clinical experience in a mental health setting or who possesses a master's degree in psychiatric nursing; or an occupational therapist (OT) licensed under the Illinois Occupational Therapy Practice Act [225 ILCS 75] with at least one year of clinical experience in a mental health setting.

7. What is an acceptable number of non-licensed staff for group supervision by an LPHA or QMHP (132.70 d)?
  - **Answer:** The rule sets no limit. It must be decided by the L or Q as to what is an appropriate number of staff for whom they can provide simultaneous supervision.
8. There is a new expectation that non-licensed staff receive at least one hour of clinical supervision per month. Our agency has many hours-to-be-reported staff who provide a minimal number of hours of service to clients (for example they work one 8-hour shift per week, are part time respite workers, or work overnight when clients are sleeping.) Is the expectation for supervision the same for these staff as for full-time clinical employees?
  - **Answer:** Yes.
9. We have 2 new MHPs, both with master's degrees and 600 hours practicum. Must we wait a full year before moving them to QMHP, or can we allow their practicum hours and status them as QMHP after they complete an additional 400 hours here?
  - **Answer:** If the master's degree and 600 hours of practicum are relevant, an additional 400 hours would fulfill the 1,000-hour requirements.
10. Is it correct that the 1hr/mo of clinical supervision for non-licensed staff can be completed by either a QMHP (not necessarily licensed) or an LPHA?
  - **Answer:** Supervision of non-licensed staff must be provided by a QMHP or LPHA.
11. Why doesn't the State of Illinois recognize Certified Psychiatric Rehabilitation Practitioners (CPRP) through the United States Psychiatric Rehabilitation Association (USPRA), formerly IAPSRs? Individuals with this credential are better credentialed/trained to provide psychiatric rehabilitation services than other licensed persons.
  - **Answer:** CPRPs have a wide range of education and experience. Those levels of credentials may be recognized as an RSA, MHP or QMHP as appropriate.
12. Are LPNs required to receive the one hour training per month by a Q-RN?
  - **Answer:** No. They are licensed.
13. How can we provide clinical supervision for staff who don't have a primary caseload, i.e., residential staff providing monitoring & assistance services such as community support?
  - **Answer:** By supervising the services they provide.
14. How is the "Plan for clinical supervision of all non-licensed staff" of "1 hour per month" requirement billed & reimbursed to the provider agency? If it is not staff development and training, what is it, from a billing aspect?
  - **Answer:** It is not a 132 billable service.
15. Does the 1 hr/mo supervision for non-licensed staff include people without client contact such as medical records staff?
  - **Answer:** No.
16. Does documentation of clinical supervision need to include only that supervision took place or does it require documentation of the content of that supervision?
  - **Answer:** It requires documentation of the content of the supervision.
17. Who is defined as LPHA within the nursing field?
  - **Answer:** An advanced practice nurse with psychiatric specialty licensed under the Nursing and Advanced Practice Nursing Act [225 ILCS 65].
18. Why are RNs with Master's degree and extensive MH experience not included as LPHA/not allowed to determine medical necessity?

- **Answer:** An LPHA, within the scope of State law, must have the ability to independently make a clinical assessment, certify a diagnosis and prescribe treatment for persons with a mental illness.
19. In my experience, persons in active recovery are at times too close to the problem to be effective staff members. Would you recommend a specific period of recovery time prior to hire, or perhaps a specialized training for persons in recovery?
- **Answer:** No. We encourage you to review the Recovery Services Resource Handbook on the DMH website.
20. Can an LSW supervisor without a master's degree provide clinical supervision to non-licensed staff and meet the intent of the new monthly supervision requirement?
- **Answer:** The requirement for supervision is that it must be done by an LPHA or QMHP. Anyone who qualifies as either may do the supervision.
21. Does "RSA" include paid clerical staff at an agency?
- **Answer:** Only if they are providing and billing for Part 132 services as an RSA.
22. Define clinical supervision - specifically in regard to providing it to direct line staff in a residential treatment setting who are not clinically trained or without a clinical background.
- **Answer:** Supervision would be oversight assuring that what they are doing is clinically appropriate.
23. Licensure requires only a bachelor's degree, hours of supervision and passing the exam. Therefore, is an LPC without a master's degree still eligible as a QMHP?
- **Answer:** No. The definition in 59 Ill. Adm. Code 132 includes an LPC in the definition of QMHP as follows: an LPC "possessing at least a master's degree and licensed under the Professional Counselor and Clinical Professional Counselor Licensing Act [225 ILCS 107] with at least two years experience in mental health services."
24. Is monthly clinical supervision required for staff who only provide crisis intervention services for dually-diagnosed (DD primary, residential) clients?
- **Answer:** Rule 132 requires staff supervision of all QMHPs, MHPs and RSAs who provide Rule 132 services. Crisis intervention is a Rule 132 service. Therefore, monthly staff supervision of the staff that provide crisis services is required.
25. Does DMH recognize degrees conferred in foreign countries when a degree is required in Rule 132?
- **Answer:** Yes, DMH recognizes such a degree. However, when a licensed professional is required, the license must be granted in Illinois. (5/31/11)
26. Does it matter if the year of clinical experience under the supervision of a QMHP occurs before or after the master's degree is obtained?
- **Answer:** No, it doesn't. (5/31/11)
27. Are 132 community providers required to hire psychologists?
- **Answer:** DMH doesn't require community providers to hire psychologists. However, when something must be done by a psychologist, such as psychological evaluation, it must be done by a psychologist. (5/31/11)
28. Would passing of the exam for a Certified Recovery Support Specialist and having one year of experience qualify me to bill as an MHP under Medicaid Rule 132?
- **Answer:** As long as you meet the definition of MHP in Rule 132, you would qualify. (9/1/11)
29. May a physician assistant administer medications?

- **Answer:** If the PA qualifies as someone licensed to administer medications through either the Nursing and Advanced Practice Nursing Act or the Medical Practice Act (as stated in Rule 132), then, yes. However, it is important to note that a PA is not recognized by Rule 132 as an LPHA. (9/1/11)
30. If an RN who has 7 years of experience working in a substance abuse facility treating substance abuse problems as a primary but the majority (75%) of these patients have a secondary diagnosis like schizophrenia and bipolar under axis 1 code 2, would this RN meet the rule 132 criteria under licensed clinician for this RN?
- **Answer:** The RN can work as an MHP under the supervision of a QMHP. Following the completion of a year of supervised mental health work, the RN would then qualify as a licensed clinician and as a QMHP. (3/1/12)
31. The definition of QMHP includes, "a licensed professional counselor possessing at least a master's degree and licensed under the Professional Counselor and Clinical Professional Counselor Licensing Act with specialized training in mental health services or with at least two years experience in mental health services." Please define and elaborate on what specialized training in mental health includes and when work experience is also required.
- **Answer:** Specialized training may include classes taken in graduate school such as counseling, abnormal psychology and group and individual counseling. When someone is an LPC with specialized training, they don't also need the two years of experience. If however, an LSW for example has trained to be a social worker in an area other than mental health and hasn't had courses as given in example here, then they would be required to have the mental health work experience. (6/1/12)
32. I am filling out the VO paperwork and note that we have not been certified to bill for sign language and foreign language interpretation. We spend money every month on language interpretation of languages we don't have staff to do. Some is in person and some is using the ATT language line. Can we bill to do this? If so, how do we get certified to do it?
- **Answer:** Interpreter services are not Rule 132 services, and therefore would not be on a 132 certificate. Providers that routinely serve a non-English speaking population must accommodate that need with staff who can communicate with them. That is included as part of the 132 service rates. However, if an unusual need arises for which the provider must hire a specific interpreter, then that may be billed. This is listed in the SDRG with the billing codes and rates. (9/1/12)
33. Please clarify the definition of professional foster parent according to Rule 132. Would this include all licensed foster parents or must they be employed by the agency as a foster parent?
- **Answer:** Professional Foster Parent is not defined in Rule 132. Professional Foster Parents are employed by the foster care agency as staff members. A licensed foster parent who is not an employee of the agency would not be considered a Professional Foster Parent. (9/1/12)
34. Please clarify the requirements in Rule 132 for CRSS certification for persons in recovery who are part of an ACT or CST team.
- **Answer:** Persons in recovery who currently are part of an ACT or CST team, will have 12 months from the date the rule amendments are adopted to become CRSS (or CFPP) certified. Additionally, anyone who is hired as the person in recovery for an ACT or CST team, will have 12 months from the date of hire to become certified. (9/1/12)
35. The definition of QMHP includes, "an individual possessing at least a master's degree....., who has successfully completed an internship that included a minimum of 1,000 hours of supervised direct service..." Does the practicum or internship have to be a part of the master's degree program, or could an appropriate practicum or internship completed as part of a bachelor's degree also count towards the 1,000 hour requirement? For example, a student completes a BSW with a 500 hour internship and then completes and MSW with another 500 hour internship. Could these internships be added together?

- **Answer:** Because there is no specific requirement for the internship/practicum hours in Rule 132, yes, you may combine the 500 and 500 for the required 1,000 hours. (9/1/12)
36. Will clinical staffing suffice as clinical supervision?
- **Answer:** No. (9/1/12)
37. We have a direct service staff working here for almost 7 years under clinical supervision by a QMHP. She has her bachelor's degree and is working on her master's in professional counseling. Would this person qualify as a QMHP or as an MHP?
- **Answer:** A master's degree is required unless someone is an RN with one year of clinical experience in a mental health setting to be considered a QMHP. (12/1/12)
38. Does internship experience count towards the 2 year mental health experience requirement for unlicensed QMHPs?
- **Answer:** According to the Rule 132 definition of a QMHP, once can be licensed as a social worker, counselor, nurse or occupational therapist. Those who are unlicensed as one of these, in order to qualify as a QMHP must have at least a master's degree in counseling, social work, vocational counseling, psychology, pastoral counseling or family therapy or related field and have completed a practicum or internship of 1,000 hours of supervised direct service in a mental health setting or have one year of clinical experience working under the supervision of a QMHP. There is nothing in the rule that speaks to 2 years mental health experience. The 1,000 hour practicum or internship equates to 1 year and the alternative is 1 year of Q supervised clinical work. Both of those requirements apply to someone with an appropriate degree. (12/1/12)
39. We have an applicant for a QMHP position who has a master of public administration degree with no clinical training or course work as part of the degree. The person has worked for a year under the supervision of a QMHP. Am I correct that this person does not qualify as a QMHP?
- **Answer:** You are correct. The rule requires a master's degree in a related field. Public administration is not a related field since it had no clinical training or mental health course work included. A master's degree with a year's experience doesn't override the need for education related to the field. (12/1/12)
40. We have an internship applicant with good credentials who is currently completing a graduate program that would lead to a QMHP credential, but her undergrad BS is in biology. At what level would this intern be able to work within our agency?
- **Answer:** Interns may only work at the level of their current degree/qualifications. (6/1/13)
41. I have an employee who just completed a Master's degree in Applied Forensic Psychology. I believe that this fits the "or related field" portion of the Rule 132 QMHP definition. My question pertains to the fact that this degree didn't include an internship or practicum. The individual has worked for us for a number of years under the supervision of a QMHP. Does the work experience have to be most graduate degree, or is the above experience acceptable?
- **Answer:** Experience and internship/practicum are addressed separately in the rule. Since the individual didn't complete a practicum or internship, the experience portion must be met. The experience received prior to the degree is acceptable. (6/1/13)
42. We would like to know if a person's minor field of study counts when determining what the person's degree is in, e.g., a person with a Bachelor of Arts Degree with a major in General Studies and a minor in psychology?
- **Answer:** The relevant course of study must be the person's major. (6/1/13)
43. Can an APN with a psychiatric specialty work onsite without a psychiatrist also being onsite?
- **Answer:** This will depend upon the agreement that the APN has with a supervising physician. There is no specific requirement in statute that there must be a physician on site to supervise an

APN, but the provider should have a copy of the practice agreement in their files so that they're aware of the scope of the APN authority. (6/1/13)

44. Would you please define supervision relative to an LPN being supervised by an RN? May a physician also supervise an LPN?

- **Answer:** LPN supervision by an RN is detailed in the LPN licensure requirements. Those are available online in the Nursing and Advanced Practice Nursing Act. (6/1/13)

45. Does experience as a Certified Nurse Aide in a nursing home or hospital setting qualify as human service experience sufficient to be an MHA? And, how is clinical experience defined?

- **Answer:** Rule 132 defines "Clinical experience" as "----experience providing mental health services or supports supervised by a Mental Health Professional level professional." The rule then defines MHP as "An individual who provides services under the supervision of a Qualified Mental Health Professional." Therefore, a CNA would have to have 5 years experience in a mental health setting supervised by an MHP who was supervised by a QMHP to qualify, solely on the CNA credential, as an MHP. It is not our experience that many nursing homes or hospitals are mental health settings or that they provide mental health services supervised by a QMHP. (6/1/13)

46. Is a JD (law degree) a "related field" for the purpose of conferring QMHP status assuming all other requirements are met?

- **Answer:** A J.D. degree is not a related field because the coursework required has no mental health clinical training included. (9/1/13)

47. We have a part-time, MHP staff who works full-time at another agency providing Rule 132 services. This person receives supervision at that agency. Do we have to do our own supervision or can we get a copy of the supervision summary from the other agency?

- **Answer:** Each provider is responsible for the supervision of its own staff. It doesn't do you any good to know that the person is doing a good job someplace else, but then not implementing your policies and expectations for treatment while working for you. (9/1/13)

48. Can anyone do the Rule 132 required staff supervision, e.g., I'm an LPHA responsible for supervision of a CILA site and supervising the staff who report to me. I've been asked to do the required supervision for other staff over whom I have no authority and who serve clients I know nothing about. Is it appropriate for me to do this supervision?

- **Answer:** The exact language regarding supervision from Rule 132 is: "Each provider shall develop, implement and maintain a plan for clinical supervision of QMHPs, MHPs and RSAs who perform Part 132 services. Group supervision is acceptable and the size of the group should be conducive to the provision of clinical supervision. Supervision must be documented in a written record. Supervision of staff as noted in this subsection must be for a minimum of one hour per month through face-to-face, teleconference or videoconference.

- 1) QMHPs must be supervised by an LPHA.  
2) MHPs and RSAs must be supervised by, at a minimum, a QMHP.  
3) LPHAs are not required to have clinical supervision under this Section."
- Please note that only QMHPs must have the supervision done by an LPHA. MHPs and RSAs may have the monthly supervision done by a Q. The supervision that is required is in relationship to the provision of Rule 132 services. If you have nothing to do with the provision of Rule 132 services, I don't know how you will provide supervision for anyone in relationship to how they are providing those services. If the MHPs and RSAs are not providing Rule 132 services, then Rule 132 doesn't speak to supervision of them. (12/1/13)

49. Does this person qualify as a QMHP? He has a bachelor's degree in fine arts, a master's degree in education and an Ed.D. He has worked for a community mental health agency for 23 years in different capacities.

**Answer:** The state doesn't make this determination. It is up to each provider to review the requirements in Rule 132 and the determination. Then the documentation that lead to the determination must be kept in the staff person's personnel file. (3/1/14)

50. Our agency employs one OT. She works both on our ACT team and assisting in transitioning Williams class members during which she does OT assessments. How should we be billing her time?

**Answer:** When the OT is doing assessments, it should be billed as Mental Health Assessment and her assessment should become part of the Mental Health Assessment Report and the time spent must be documented according to Rule 132 requirements. When the OT is working as part of the ACT team, that time must be billed as ACT. The OT doesn't have to be a full-time ACT team member. (3/1/14)