SCOPE OF WORK TEMPLATE

☒ **CONTRACT IS STATE FUNDED**

Name of Program/Services
Transition Management Services (TMS) and Transition Management Services Plus (TMS+)

Description of Services
Transition Management Services (TMS) is a service provided to individuals participating in the Transition to Community Living Initiative (TCLI). TMS is a rehabilitation service intended to increase and restore an individual's ability to live successfully in the community by maintaining tenancy. TMS focuses on increasing the individual's ability to live as independently as possible, managing the illness, and reestablishing his or her community roles related to the following life domains: emotional, social, safety, housing, medical and health, educational, vocational, and legal.

Transition Management Services Plus (TMS+) is a service provided, for up to 90 calendar days, to individuals participating in TCLI who are hospitalized in state psychiatric hospitals. The purpose of the service is to ensure a seamless transition for individuals from hospitalization to community-based treatment services by helping with discharge planning from state psychiatric hospitals, re-connecting individuals with their community-based behavioral health providers, and/or linking individuals to a community-based behavioral health provider for after care.

Required Elements of the Program/Service

Provider is expected to adhere to the current state service definition for TMS except where waivers have been obtained by Alliance Health (noted below).

TMS+: For each individual who is engaged in TCLI and hospitalized in a state psychiatric hospital, provider will work with the hospital, TCLI staff, and community-based providers for up to 90 calendar days to ensure the individual gets re-connected to an existing community-based provider or linked to a community-based provider for after care. Ideally, the transfer from TMS+ to a community-based service, likely Assertive Community Treatment Team (ACTT) or Community Support Team (CST) in many instances, would occur upon the individual's being discharged from the state psychiatric hospital. At the latest, the transfer from TMS+ to a community-based service shall occur within 30 calendar days of an individual's discharge from the state psychiatric hospital.

Target Population and Eligibility Criteria
Eligibility for TMS is based on whether or not the individual meets the clinical criteria for TCLI and accepts an approved DHHS housing slot or expresses interest in a housing slot*. Individuals receiving ACT or CST services are not eligible for TMS. (*DMH approved waiver request pertaining to eligibility criteria on 8/3/2020.)

Individuals who are engaged in TCLI and hospitalized in a state psychiatric hospital (e. g., Central Regional Hospital, Cherry Hospital, or Broughton Hospital) are eligible for TMS+. These individuals will be referred for TMS+ by the TCLI team. Note: Individuals receiving ACT or CST services are not eligible for TMS+.

Transition Plan to Fidelity
Provider is responsible for following the Transition Management Services service definition with the exceptions outlined below:

Training and Experience of staff members

- Staff are to be trained in Tenancy Support within the first 90 days of employment OR by the date of the first available training, if training is not made available within the 90 day employment timeframe.
- Non-licensed TMS staff are to receive at least 3 hours of training on Harm Reduction within 90 days of hire.

Geographic Coverage and Volume (DMH approved waiver request on 8/3/2020)

- Providers may have partially staffed teams (12:1 individual: staff ratio) as they work toward (a) reaching maximum capacity while adding staff accordingly and (b) having geocentric teams
- Providers may have up to 5 FTE's (12:1 individual: staff ratio) as they continue to build capacity that would warranted splitting a team into two teams. Each team will include a QP/team lead.

Response Time and Distance

- Providers are allowed to build to a 30 minute/30mile response time as they build the teams and Alliance increases the numbers of TCLI consumers served.

These exceptions are approved though June 30, 2021 After this date, provider must follow all components of the approved service definition for TMS.

Additional Provider Requirements in addition to TMS Service Definition

- Referrals may only be accepted through Alliance's Transitions to Community Living Initiative (TCLI) Supervisor or TCLI Supervisor designee.
- Provider shall meet all components of the approved TMS service definition no later than June 30, 2021

Reporting Requirements

Provider will submit a completed tenancy checklist for each individual receiving TMS who is in housing . The checklist must be sent to TenancyChecklist@alliancehealthplan.org by the 10th of each month

Collaboration

- Provider will receive and contact referrals made by TCLI staff and communicate directly with Alliance Transition Coordinators for assigned individuals.
- Provider will attend scheduled service collaborative meetings with Alliance related to TMS.
- Provider will collaborate with other appropriate service providers for the purpose of coordinating an individual's care, as well as collaborate with community stakeholders as outlined in the service definition.

Finance
$20.00/unit for TMS (YM120, one unit=15 minutes)
$25.91/unit for TMS+ (YM120 22, one unit=15 minutes)
NOTE: TMS and TMS+ cannot be billed on the same day.

Total UCR Contract Amount: $104,107
Start Date: July 1, 2020
Completion Date: June 30, 2021