



483.40 Behavioral Health Services



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Welcome. This is the Behavioral Health Services section of the training.

Behavioral Health Services

Ftag	Tag Subject	Key Change to Regulation or Interpretive Guidelines	Significant Change or Technical Correction
F740	Behavioral Health Services	Removed reference to Appendix P and added reference to Psychosocial Outcome Severity Guide; Added language related to mental health and substance use disorders throughout guidance.	Significant
F741	Sufficient/Competent Staff-Behav Health Needs	Removed reference to Appendix P and added reference to Psychosocial Outcome Severity Guide; Minor change to correct reference to F679; Added language related to history of trauma and/or post-traumatic stress disorder throughout guidance; Added language related to mental health and substance use disorders throughout guidance.	Significant
F742	Treatment/Services for Mental/Psychosocial concerns	Removed reference to Appendix P and added reference to Psychosocial Outcome Severity Guide	Technical
F743	No Pattern of Behavioral Difficulties Unless Unavoidable	Removed reference to Appendix P and added reference to Psychosocial Outcome Severity Guide	Technical
F744	Treatment/Service for Dementia	Removed reference to Appendix P and added reference to Psychosocial Outcome Severity Guide	Technical

All of the tags within the Behavioral Health Services regulatory section were revised, except F745. Changes to tags F742, F743, and F744 were minor and involved removal of reference to Appendix P and the addition of reference to the Psychosocial Outcome Severity Guide.

Key Changes to Behavioral Health Services – F740

- F740 Behavioral Health Services:

Additions included -

- Reference to Preadmission Screening and Resident Review (PASARR) requirements
- Language pertaining to the use of behavioral contracts, including examples of issues that they may address
- Information on schizophrenia and bipolar disorder
- A new severity level 4 example under the Deficiency Categorization section
- Behavioral health care and services resources

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For F740, we added a reference to PASARR requirements specific to residents diagnosed with mental disorders.

Additionally, we discussed the use of behavioral contracts. This included a list of issues that may be addressed in this type of agreement. However, a behavioral contract cannot conflict with resident rights or other requirements of participation.

We also added information on schizophrenia and bipolar disorder, in addition to providing clarification in the paragraphs pertaining to depression and anxiety disorders.

A new severity level 4 example was added in the deficiency categorization section, pertaining to the mental health needs of a resident diagnosed with a substance use disorder.

We also added resources related to behavioral health care and services.

Key Changes to Behavioral Health Services – F741

- F741 Sufficient/Competent Staff-Behavioral Health Needs:
 - Intent: Sufficient staff who possess competencies/skills to meet behavioral health needs of residents, ... including those with a history of trauma and/or post-traumatic stress disorder (PTSD).
 - **Trauma** results from an event, series of events, or set of circumstances that is experienced by an individual as physically or emotionally harmful or life threatening and that has lasting adverse effects on the individual's functioning and mental, physical, social, emotional, or spiritual well-being.
 - **PTSD** occurs in some individuals who have encountered a shocking, scary, or dangerous situation. Symptoms usually begin early, within three months of the traumatic incident, but sometimes they begin years afterward. Symptoms must last more than a month and be severe enough to interfere with relationships or work to be considered PTSD.

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For F741, we added references to residents that have a history of trauma and/or post-traumatic stress disorder.

This was in addition to residents living with mental and psychosocial disorders. This also included the addition of definitions for trauma and post-traumatic stress disorder.

Trauma results from an event, series of events, or set of circumstances that is experienced by an individual as physically or emotionally harmful or life threatening and that has lasting adverse effects on the individual's functioning and mental, physical, social, emotional, or spiritual well-being.

Post-traumatic stress disorder occurs in some individuals who have encountered a shocking, scary, or dangerous situation. Symptoms usually begin early, within three months of the traumatic incident, but sometimes they begin years afterward. Symptoms must last more than a month and be severe enough to interfere with relationships or work to be considered PTSD.

Key Changes to Behavioral Health Services – F741 (continued)

- F741 Sufficient/Competent Staff-Behavioral Health Needs:

Additions included –

- **Substance Use Disorder** is defined as recurrent use of alcohol and/or drugs that causes clinically and functionally significant impairment, such as health problems, disability, and failure to meet major responsibilities at work, school, or home.
- Information pertaining to the use of the facility assessment for behavioral health care needs
- Additional examples of non-pharmacological interventions
- A new severity level 2 example under the Deficiency Categorization section

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We also added references to residents that have a diagnosed mental health and/or substance use disorder.

This included the addition of the definition of substance use disorder.

Substance Use Disorder (or SUD) is defined as recurrent use of alcohol and/or drugs that causes clinically and functionally significant impairment, such as health problems, disability, and failure to meet major responsibilities at work, school, or home.

Guidance was also added related to how the behavioral health care needs of those with a SUD or other serious mental disorder should be part of the facility assessment under §483.70(e) (F838) and the facility should determine if they have the capacity, services, and staff skills to meet the requirements as discussed in this tag.

Additionally, examples of non-pharmacological interventions specific to residents diagnosed with mental health and/or substance use disorders were added.

In addition, a new severity level 2 example was added in the deficiency categorization section, pertaining to the care planned interventions of a resident diagnosed with a substance use disorder who returned from a leave of absence.

We also made a technical correction to F741 to update a reference to F679.

Thank You

If you have questions about this training please send them to:

DNH_TriageTeam@cms.hhs.gov



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If you have questions about this training please send them to the DNH Triage mailbox at: DNH_TriageTeam@cms.hhs.gov

Thank you for your continued efforts towards our shared goal in providing quality care to America's nursing home residents.