

**ARIZONA SUPREME COURT
ADMINISTRATIVE OFFICE OF THE COURTS
JUVENILE JUSTICE SERVICES DIVISION
Contract Year 2009-2010
SERVICE SPECIFICATION
GENERAL MENTAL HEALTH COUNSELING
Service Codes 135, 137, 138, 140, and 146**

SERVICE DEFINITION:

This service provides appropriate interventions to address the youth's cognitive, social or behavioral issues, including a wide range of personal, interpersonal, situational and functional problems. Services may be provided to an individual, a group of persons, a family or multi-family group and be delivered in the office or in the client's home with the exception of group services.

Group counseling may not be used to deliver a curriculum based program. All group counseling services must be process oriented and open entry and exit.

STANDARDS/LICENSURE REQUIREMENTS:

- At a minimum, services will be provided by a person who holds a Masters degree and is licensed at the independent practice level by the Arizona Board of Behavioral Health Examiners or is exempt from licensure pursuant A.R.S. Title 32, Chapter 33.
- Licensure is not required for those persons with a Masters degree in Human Services who are employed by a licensed behavioral health agency.

UNITS OF SERVICE:

One unit equals one hour (50 minutes for therapy and 10 minutes for records documentation).

SERVICE GOAL:

To identify and treat behavioral and emotional needs within the cultural context of the youth. To provide individualized treatment services in the least restrictive environment which addresses therapeutic goals indicated on the individual service plan/treatment plan.

SERVICE TASKS:

1. Review existing social history and other relevant information.
2. With all involved parties, develop a treatment plan and/or individual service plan which must address the needs of the individual.

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3. In accordance with the Individual Service Plan, provide authorized treatment service to the youth or family, if recommended.
4. Legibly document in client's file all services provided, summary of progress, including date, duration, type of service and therapist name, signature, degree and title.
5. Prepare and provide monthly progress reports to probation officer.

Professional Consultation

Provide consultation services to the court which may include, but not be limited to, staffings, training, expert testimony or other assistance as may be required. Client case consultation shall be documented in accordance with Item 4 under Service Tasks. Consultation services will be paid at the individual service rate unless otherwise agreed to in writing on this form.

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I have read and fully understand the requirements to provide general mental health counseling and agree to all requirements and restrictions and propose the following rates:

Proposed Service Rate:

<u>Office Based:</u>	<u>Circle</u>	
Individual (service code 135)	Masters/ Ph.D	\$ _____ / hour
Family (service code 137)	Masters/ Ph.D	\$ _____ / hour
Group (service code 138)	Masters/ Ph.D	\$ _____ / hour / client
<u>Home Based</u> (service code 140)		\$ _____ / hour
<u>Multi-Family Group:</u> (service code 146)		\$ _____ / hour / family
<u>Professional Consultation:</u> (service code 180)		\$ _____ / 15 minutes

Other proposed agreement: _____

Provider Signature / Date

AOC USE ONLY: DO NOT FILL IN BEYOND THIS LINE

Final Contract Rate:

<u>Office Based:</u>	<u>Circle</u>	
Individual (service code 135)	Masters / Ph.D	\$ _____ / hour
Family (service code 137)	Masters / Ph.D	\$ _____ / hour
Group (service code 138)	Masters/ Ph. D	\$ _____ / hour / client
<u>Home Based:</u> (service code 140)		\$ _____ / hour
<u>Multi-Family Group:</u> (service code 146)		\$ _____ / hour / family
<u>Professional Consultation:</u> (service code 180)		\$ _____ / 15 minutes

Other final agreement: _____

Provider Signature / Date

AOC Signature / Date