Exhibit 12

114.3 CMR DIVISION OF HEALTH CARE FINANCE AND POLICY

114.3 CMR 52.00: RATES OF PAYMENT FOR CERTAIN CHILDREN'S BEHAVIORAL HEALTH SERVICES

Section

52.01: General Provisions52.02: General Definitions52.03: Rate Provisions

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52.01: General Provisions

- (1) Scope, Purpose and Effective Date. 114.3 CMR 52.00 governs the rates effective January 1, 2009 to be used by all governmental units for certain outpatient children's behavioral health services provided by Community Service Agencies and other eligible providers. 114.3 CMR 52.00 does not govern rates for Psychological Testing services, which are governed by 114.3 CMR 29.00: Psychological Services, or rates for Mental Health services, which are governed by 114.3 CMR 6.00: Rates of Payment for Mental Health Services provided by Community Health Centers and Mental Health Centers. In addition, 114.3 CMR 52.00 does not govern rates for other services, care and supplies provided to publicly-aided patients, including, but not limited to, Psychiatric Day Treatment services, Early Intervention services, and Medical services provided in community health centers.
- (2) <u>Disclaimer of Authorization of Services</u>. 114.3 CMR 52.00 is not authorization for or approval of the procedures for which rates are determined pursuant to 114.3 CMR 52.00. Purchasing agencies and insurers are responsible for the definition, authorization, and approval of care and services extended to publicly-aided clients.
- (3) <u>Administrative Bulletins</u>. The Division may issue administrative information bulletins to clarify its policy on and understanding of substantive provisions of 114.3 CMR 52.00.
- (4) Authority. 114.3 CMR 52.00 is adopted pursuant to M.G.L. c. 118G.

52.02: General Definitions

Meaning of Terms. Terms used in 114.3 CMR 52.00 shall have the meaning ascribed in 114.3 CMR 52.02.

Behavior Management Monitoring. This service includes implementation of the behavior treatment plan, monitoring the youth's behavior, reinforcing implementation of the treatment plan by the parent(s)/guardian(s)/caregiver(s), and reporting to the behavior management therapist on implementation of the treatment plan and progress toward behavioral objectives or performance goals. Phone contact and consultation may be provided as part of the intervention. Behavior Management Monitoring is provided by Eligible Providers.

Behavioral Management Therapy. This service includes a behavioral assessment (including observing the youth's behavior, antecedents of behaviors, and identification of motivators); development of a highly specific behavior treatment plan; supervision and coordination of

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interventions; and training other interveners to address specific behavioral objectives or performance goals. This service is designed to treat challenging behaviors that interfere with the child's successful functioning. The behavior management therapist develops specific behavioral objectives and interventions that are designed to diminish, extinguish, or improve specific behaviors related to the child's behavioral health condition(s) and which are incorporated into the behavior management treatment plan and the risk management/safety plan. Behavior Management Therapy is provided by Eligible Providers.

<u>Care Manager</u>. A single care manager who works with the child's parent(s) or guardian(s) to provide Targeted Case Management.

<u>Clinic</u>. A clinic that is licensed by the Department of Mental Health as a provider of mental health clinic services that is not a Community Health Center or a Community Mental Health Center

<u>Community Health Center</u>. A clinic which provides comprehensive ambulatory services and which is not financially or physically an integral part of a hospital.

<u>Community Mental Health Center.</u> A clinic which provides comprehensive ambulatory mental health services and which is not financially or physically an integral part of a hospital.

<u>Community Service Agency.</u> A Community Service Agency (CSA) is a Clinic, Community Health Center, Community Mental Health Center or other provider entity that meets all other requirements established by MassHealth.

<u>Crisis Stabilization</u>. This service is designed to prevent or ameliorate a behavioral health crisis that may otherwise result in a youth being removed from his or her home/community environment, such as being admitted to an inpatient hospital or a psychiatric residential treatment facility. This is a facility based service that is provided for youth who do not require hospital level of care. Crisis stabilization staff continuously evaluate and treat the youth as well as teach, support, and assist the parent(s)/guardian(s)/caregiver(s) to better understand and manage behavior that has resulted in current or previous crisis situations. Crisis stabilization services also link the youth to other appropriate services. Crisis Stabilization is provided by Eligible Providers.

Division. The Division of Health Care Finance and Policy.

Eligible Provider. Eligible providers of Targeted Case Management are designated CSAs. Eligible providers of Parent/Caregiver Peer to Peer Support, In-Home Behavior Management Services, In-Home Behavior Monitoring Services, In-Home Therapy Services, Therapeutic Training and Support, Therapeutic Mentoring, Mobile Crisis Intervention, and Crisis Stabilization are providers that meet the conditions of participation established by MassHealth.

<u>Family Partner</u>. A Family Partner must have experience as a caregiver of youth with special needs, preferably youth with mental health needs, experience in navigating any of the youth and family- serving systems, and either a bachelor's degree in a human services field from an accredited academic institution, or an associates degree in a human services field from an accredited academic institution and one year of experience working with children/adolescents/transition age youth and families, or a high school diploma or equivalent and a minimum of two years of experience working with children/adolescents/transition age youth

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and families. If the bachelor's or associate's degree is not in a human services field, additional life or work experience may be considered in place of the human services degree.

<u>Governmental Unit</u>. The Commonwealth of Massachusetts or any of its departments, agencies, boards, commissions or political subdivisions.

Individual Consideration. Payment rates to eligible providers for services authorized in accordance with 114.3 CMR 52.03(2), but not listed herein, or authorized services performed in exceptional circumstances shall be determined on an Individual Consideration basis by the governmental unit or purchaser under M.G.L. c. 152 upon receipt of a bill which describes the services rendered. The determination of rates of payment for authorized Individual Consideration procedures shall be in accordance with the following criteria:

- (a) Time required to perform the service;
- (b) Degree of skill required for service rendered;
- (c) Severity and/or complexity of the client's disorder or disability;
- (d) Policies, procedures, and practices of other third party purchasers of care;
- (e) Such other standards and criteria as may be adopted from time to time by the Division pursuant to 114.3 CMR 52.03(4).

<u>In-Home Therapy.</u> This service is a structured, consistent, therapeutic relationship between a licensed clinician and the youth and family for the purpose of treating the youth's behavioral health needs including improving the family's ability to provide effective support for the youth to promote healthy functioning of the youth within the family. In-Home Therapy is provided by Eligible Providers.

Mobile Crisis Intervention. Mobile crisis intervention services may be delivered using a single crisis worker or a team of professionals trained in crisis intervention. This service provides a short term service that is a mobile, on-site, face-to-face therapeutic response to a youth's experiencing a behavioral health crisis. Its purpose is to identify, assess, treat, and stabilize the situation and reduce the immediate risk of danger to the youth or others consistent with the youth's risk management/safety plan, if any. Mobile crisis intervention services are available 24 hours a day, 7 days a week. Phone contact and consultation may be provided as part of the intervention. Mobile Crisis Intervention is provided by Eligible Providers.

Parent/Caregiver Peer to Peer Support. This service provides a structured one-to-one relationship between a Family Partner and a parent(s) or caregiver(s) for the purpose of resolving or ameliorating the child's emotional and behavioral needs by improving the capacity of the parent(s) or caregiver(s) to parent the child with a serious emotional disturbance. Services may include education, support and training for the parent(s) or caregiver(s). Family Partners do not provide respite care or babysitting services.

<u>Publicly-Aided Individual</u>. A person for whose medical and other services a governmental unit is in the whole or in part liable under a statutory program.

<u>Targeted Case Management (TCM).</u> This service is for individuals under the age of 21 with serious emotional disturbance and includes assessment of the member, development of an individualized care plan, referral and coordination of other services and supports, and monitoring

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and follow-up on the implementation of the care plan. Targeted Case Management is also referred to as Intensive Care Coordination (ICC).

Therapeutic Mentoring. Therapeutic Mentoring services are designed to support age-appropriate social functioning or ameliorate deficits in the youth's age-appropriate social functioning. Therapeutic Mentoring offers structured, one-to-one, strength-based support services between a therapeutic mentor and a youth for the purpose of addressing daily living, social, and communication needs. Therapeutic Mentoring Services include supporting, coaching, and training the youth in age-appropriate behaviors, interpersonal communication, problem-solving and conflict resolution, and relating appropriately to other youth and adults. Therapeutic Mentoring is provided by Eligible Providers.

Therapeutic Training and Support. This service is provided by a Therapeutic Training and Support Staff working under the supervision of an In-Home Therapist to support implementation of the licensed clinician's treatment plan to achieve the goals of that plan. The Therapeutic Training and Support Staff assists the In-Home Therapist in implementing the therapeutic objectives of the treatment plan designed to address the youth's mental health, behavioral and emotional needs. This service includes teaching the youth to understand, direct, interpret, manage and control feelings and emotional responses to situations, and to assist the family to address the youth's emotional, behavioral and mental health needs. Therapeutic Training and Support is provided by Eligible Providers.

52.03: Rate Provisions

- (1) <u>Rates as Full Compensation</u>. The rates under 114.3 CMR 52.03 shall constitute full compensation for children's behavioral health services provided by community service agencies to publicly-aided patients, including full compensation for necessary administration and professional supervision associated with patient care.
- (2) Rates of Payment. Payment rates under 114.3 CMR 52.03 shall be the lower of:
 - (a) the Eligible Provider's usual charge to the general public; or
 - (b) the schedule of allowable rates for services as set forth in 114.3 CMR 52.03(3)(a).

(3) Fee Schedule.

(a) Unit of service is per 15 minutes, unless otherwise indicated.

Code	Rate	Service Description
H0038	13.03	Self-help/peer services, per 15 minutes (Parent/Caregiver Peer to
		Peer Support service provided by a Family Partner)
H2011-HN	19.21	Crisis Intervention service, per 15 minutes (Mobile Crisis
		Intervention service provided by a paraprofessional)
H2011-HO	28.66	Crisis Intervention service, per 15 minutes (Mobile Crisis
		Intervention service provided by a Master level clinician)
H2014-HN	12.61	Skills training and development, per 15 minutes (Behavior
		Management Monitoring provided by a Bachelor level clinician)

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Code	Rate	Service Description
H2014-HO	24.81	Skills training and development, per 15 minutes (Behavior
		Management Therapy provided by a Master level clinician)
H2019-HN	12.02	Therapeutic behavioral services, per 15 minutes (Therapeutic
	— =	Training and Support Services provided by a Bachelor level
		clinician)
H2019-HO	18.60	Therapeutic behavioral services, per 15 minutes (In-Home Therapy
		provided by a Master level clinician)
S9485-EP	435.38	Crisis intervention mental health services, per diem (Crisis
	per diem	Stabilization service)
T1017-HN	15.72	Targeted case management, each 15 minutes (service provided by a
		Bachelor level care manager)
T1017-HO	19.09	Targeted case management, each 15 minutes (service provided by a
		Master level care manager).
T1027-EP	12.98	Family training and counseling for child development, per 15
		minutes (Therapeutic Mentoring Service)

- (4) <u>Coding Updates and Corrections</u>. The Division may publish procedure code updates and corrections in the form of an Informational Bulletin. The publication of such updates and corrections will list:
 - (a) codes for which the code numbers only changed, with the corresponding cross-walk;
 - (b) codes for which the code number remains the same but the description has changed;
 - (c) deleted codes for which there is no cross-walk. In addition, for entirely new codes which require new pricing, the Division will list these codes and apply Individual Consideration in reimbursing these new codes until rates are established.
- (5) <u>Billing</u>. Each eligible provider shall bill the governmental unit according to the appropriate fee schedule on a prescribed form. Each specific service must be separately enumerated on the bill.

52.04: Reporting Requirements and Sanctions

- (1) Annual Reports. Each Eligible Provider must file an annual, and complete Uniform Financial Report in accordance with the filing requirements of the Operational Services Division as specified in its Audit and Preparation Manual.
 - (a) Additional Information. Eligible Providers must file such additional information as the Division may require.
- (2) <u>Failure to File Required Reports</u>. The Division may reduce an Eligible Provider's payment rate if the Provider fails to submit accurate and timely information as required above. The Division may reduce the Provider's rate by 5% per month of non-compliance, not to exceed 50%. If the Provider has not filed the required data at such time as the Division adopts revised payment rates that are higher than the penalty-adjusted current rates, the Provider's rates will not be increased. If the revised rates are lower than the

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penalty-adjusted current rates, the revised rate will become effective and subject to further penalty for non-compliance. The Division may also notify the governmental purchasing agency of the Provider's failure to submit required data and request that the Provider be removed from the purchasing agency's list of Eligible Providers.

52.05: Severability of the Provisions of 114.3 CMR 52.00

The provisions of 114.3 CMR 52.00 are severable, and if any provision of 114.3 CMR 52.00 or application of such provision to any community service agency or any circumstances shall be held to be invalid or unconstitutional, such invalidity shall not be construed to affect the validity or constitutionality of any remaining provisions of 114.3 CMR 52.00 or application of such provisions to community service agencies or circumstances other than those held invalid.

REGULATORY AUTHORITY

114.3 CMR 52.00: M.G.L. c. 118G.