



## MISSION STATEMENT

The mission of the Richland County Mental Health and Recovery Services

Board is to facilitate and maintain collaborative, trauma-informed, recovery oriented services for individuals seeking treatment for mental health or substance use issues, their families, and the community. The Board shall provide planning, funding, and evaluation of the development of high-quality, cost-effective, and comprehensive services. These services will adapt to the changing needs of the community and those seeking services, fulfill the mandates of Ohio Revised Code and promote a person's voice and choice, while advocating for the continued development of person-centered mental health and addiction services with a focus on growing and preserving a legacy of hope and success within our community.



For questions regarding this benefits plan, please contact :  
**The Richland County Mental Health and Recovery Services Board**

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# **BENEFITS PLAN FOR MENTAL HEALTH AND ADDICTION SERVICES IN RICHLAND COUNTY**

*Keeping quality services  
affordable and attainable for  
all Richland County Residents.*

*Revised 7/1/19*

## Board Sponsored Services

The following services are offered to Richland County Residents at no out of pocket expense. If you have Medicaid or Private Insurance, The Board will cover any required Co-Pay. If you do not have a third party payer the Board will pay the service in full.

- MH/SUD Psychiatric Diagnostic Evaluation-90791 and H0001
- Psychotherapy Crisis– 90839
- Community Psychiatric Supportive Treatment - H0036
- Therapeutic Behavioral Services - H2019
- Psychosocial Rehabilitation– H2017
- SUD Case Management—H0006
- Board Contracted Room and Board
- Brief Screening

## Board Subsidized Services

The following services will be subjected to a **sliding fee scale** in order to determine what portion of the fee will be the clients responsibility and what portion will be funded through Board Subsidy;

- Psychiatric Diagnostic Evaluation With Medical
- MH/SUD Nursing Services and Evaluation and Management
- Individual Psychotherapy
- Family Psychotherapy
- SUD Individual Counseling
- Group Psychotherapy
- Multi-Family Group Psychotherapy
- SUD Group Counseling
- Lab Urinalysis
- Withdrawal Management ASAM level 2 and 3 Services
- Residential ASAM Level 3 Services
- Peer Recovery Support Services

## Sliding Fee Scale

- If a person's income level is at or **below 138%** of Federal Poverty Level and has no third party payer (Medicaid, Medicare or private insurance) **they will qualify for Medicaid. The Board will cover 100% of the fee for the Board Subsidized Service for up to 60 days following the Assessment.** During that time the agency will work with the client to apply and obtain Medicaid as a primary or secondary insurance. **If the client chooses not to apply for Medicaid he or she will be considered a "full fee" client at the end of the 60 day period.**
- If an income level is determined to be between **138% and 200%** of Federal Poverty Level and has no third party payer (Medicaid, Medicare or private insurance) the individual will be responsible for a **10% copay** for all subsidized services.

*Revised and Effective for all services on or after July 1, 2019*