



# MEDICAID SERVICES OVERVIEW HOW DOES EPSDT IMPACT COVERED SERVICES?



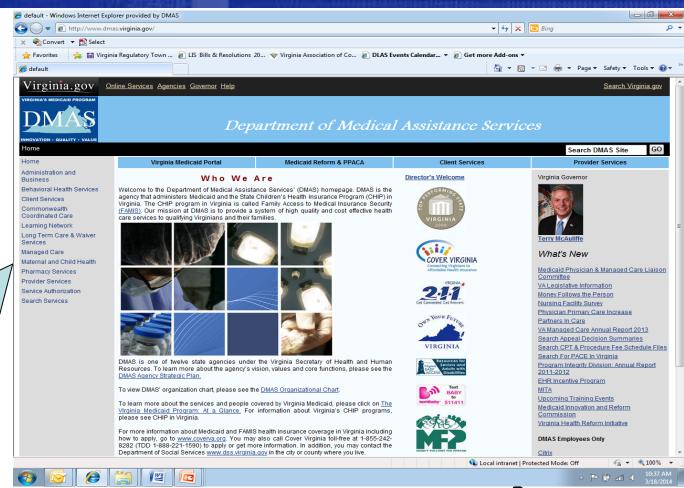
CSA Conference, Roanoke March 25, 2014





## **DMAS Website How To's**

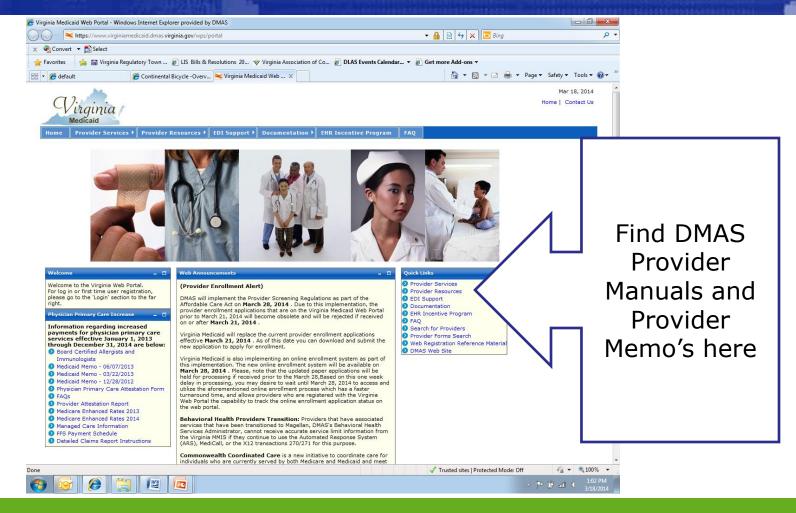
Program
information
on many
programs,
this points
to Maternal
and Child
Health
which
houses
Schools,
BabyCare
and EPSDT







## **DMAS WebPortal**







## Managed Care Resource Guide

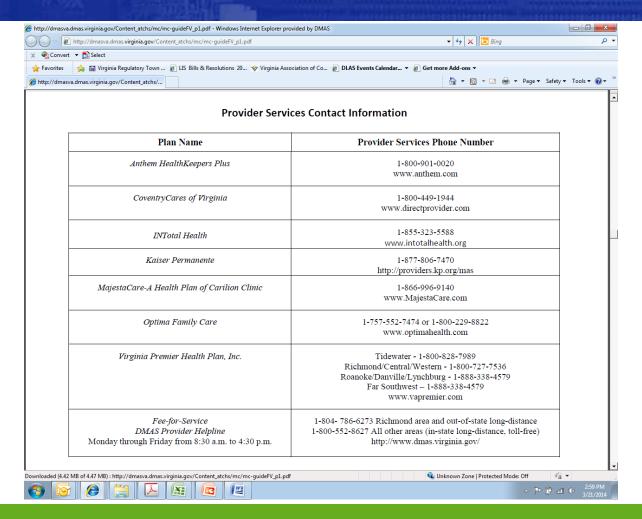
Find the Managed Care Resource Guide here







### **MCO Provider Contacts**







## Magellan of Virginia Website







## What Does Medicaid Cover?

- Medicaid offers a comprehensive array of service options for enrollees under the age of 21
- Service packages can be designed to provide wrap around benefits tailored to the persons health and chronic care needs
- It is best to review covered services according to the needs of the enrollee





## Find Manuals

#### Helpful Hint:

- Chapter 2 is always
  - Provider requirements/enrollment criteria
- Chapter 4 is always
  - Covered Services





## Medicaid Covered Services Examples

Children with Special Health Care Needs

Durable Medical Equipment
Rehabilitation
Pharmacy
Long Term Care Waiver Services
EPSDT





## Medicaid Covered Services Examples

- Children with Substance Abuse and Behavioral Disorders
  - Psychiatric
- Community Mental Health Rehabilitation
  - Hospital
  - Pharmacy
  - Children's Mental Health Program
    - EPSDT





## What is EPSDT?

- Early and Periodic Screening, Diagnosis and Treatment Program
- Most of the program involves providing Medicaid funded Well Child Visits and traditional preventive healthcare services and treatment services
- Diagnostic and screening services are the backbone of the program
- The "correct and ameliorative" aspects of the program are included in many of the services that DMAS provides for children





## Medicaid/FAMIS Plus

- EPSDT is the benefit package for Medicaid/FAMIS Plus enrollees under 21 years of age.
- EPSDT is available to all FAMIS Plus enrollees under the age of 21 enrolled in Managed Care Organizations or Fee-for-Service (FFS) Medicaid.





## Individualized Clinical Reviews

- Treatment is considered for medical necessity in how that service may effectively treat/ameliorate the targeted health or mental health condition
  - Individualized clinical review must consider:
  - "That treatment, for that child, for that condition"
- This process must be completed before any service is denied for children enrolled in FAMIS Plus/Medicaid





## **Preventive Care**

- Medicaid covers EPSDT/Well child services, vaccinations and routine well visit care for members under the age of 21
  - EPSDT Supplement
  - MCO Covered
- Pregnant women also receive routine OBGYN preventive care related to their pregnancy





## Pharmacy

- Pharmacy is covered according to the criteria defined in the pharmacy manual.
- Reviews of specific drug prescriptions occur through the
- MCO Covered





## **Durable Medical Equipment**

- Assistive Devices such as wheelchairs, speech devices, incontinence supplies, therapy supplies
  - MCO Covered Service
  - EPSDT Impact: customizations allowed if medically necessary, frequency limits bypassed if medically necessary
  - Related Services: hearing aids and assistive technology items allowed under EPSDT





## Rehabilitation Services

- Speech Therapy
- Physical Therapy
- Occupational Therapy
- Intensive Rehabilitation (Inpatient)
  - MCO Covered Service
  - EPSDT Impact: frequency limits may be bypassed if medically necessary
  - Related: Audiology services allowed under EPSDT





## **Medicaid Waivers**

- DMAS offers waiver services to individuals who meet the eligibility criteria for those waivers
  - EPSDT impact: none on the waiver services
  - Members also qualify for Medicaid as a result of the waiver and may receive all Medicaid and EPSDT specialized services





## Community MH Rehabilitation

- Services such as Intensive In Home and Therapeutic Day Treatment are technically EPSDT services since they are offered to persons under the age of 21.
- The medical necessity criteria must be met, services may be extended if medically necessary
- Denials are made when the medical criteria is not met.





## **Psychiatric**

- Outpatient
  - MCO covered
  - EPSDT impacts: extend frequency limits if needed





## **Psychiatric**

- Inpatient
  - MCO Covered
  - EPSDT may extend duration of stay or offer extended services to individuals with nonpsych primary diagnoses as specialized services





## **Psychiatric**

- Residential Treatment
  - RTC Carved out/Excluded from MCO
  - EPSDT may extend duration of stay or offer extended services to individuals with nonpsych primary diagnoses as specialized services





## Scope of Services

- Individualized health care, diagnostic services, and "treatment" as listed in the Federal Medicaid statute, must be provided when medically necessary to correct and ameliorate physical and mental conditions discovered during screening services whether or not included in the state plan
- The program does not cover services that are experimental or investigational





## Safety Net Function

- EPSDT covers treatments that are:
  - Not available to certain disability groups
  - Not covered by Medicaid

#### Examples:

- Residential Substance Abuse Treatment
- In Home Behavioral Therapy for children with DD/MR such as ABA

## **Specialized Services**

#### All Require pre authorization

- Personal Care
  - (MCO Carve out, request services at KePRO)
- Hearing Aids
  - Request services at MCO/KePRO
- Private Duty Nursing
  - Request services at MCO/KePRO
- Assistive Technology
  - Request services at MCO/KePRO
- Inpatient Treatment
  - Request services at MCO/DMAS
- Specialized Residential Treatment
  - (MCO Exclusion, request services at DMAS)
- Substance Abuse Residential Treatment
  - (MCO Exclusion, request services at Magellan)
- Behavioral Therapy
  - (MCO Carve out, request services at Magellan)





## What is Not Covered?

- Services must be deemed as medically necessary
  - Ex: Personal care would be medically necessary if a child meets the EPSDT personal care criteria

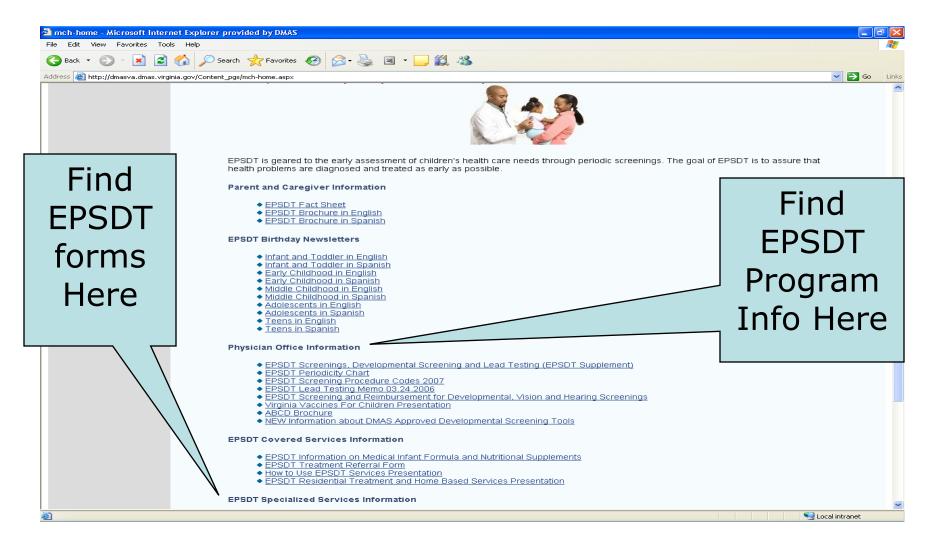
- Certain services may not be covered by EPSDT
  - Respite
  - Environmental Modifications

## Specific Program Guidelines

Please refer to the EPSDT website for more information about these services

http://dmasva.dmas.virginia.gov/Content\_p
gs/mch-home.aspx

#### http://dmasva.dmas.virginia.gov/Content\_pgs/mchhome.aspx







## **ASSISTIVE TECHNOLOGY**





## **Assistive Technology (AT) Definition**

- Assistive Technology consists of items that demonstrate a therapeutic effect or directly enable individuals to increase their abilities to perform ADLs or to perceive, control, or communicate with the environment in which they live.
- Assistive Technology items are portable and do not manage the "environment" of the individual.
- Can allow for items that are not covered under the DME program criteria





## **AT Criteria**

- A reasonable and medically necessary part of a treatment plan;
- Consistent with the recipient's diagnosis and medical condition, particularly the functional limitations and symptoms exhibited by the recipient;
- Not furnished solely for the convenience of the family, attending physician, or other practitioner or supplier;
- Consistent with generally accepted professional medical standards (i.e., not experimental or investigational); and
- Provided at a safe, effective, and cost-effective level that is suitable for use by the enrollee.





## **AT Limitations**

- Assistive Technology must involve direct patient care
- AT must be for the express purpose of diagnosing, treating or preventing (or minimizing the adverse effects of) illness, injury or other impairments to an individual's physical or mental health.
- AT Services that do not involve direct patient care or environmental services dealing exclusively with an individual's surroundings rather than the individual are not covered.
- Environmental Modifications are not covered





## HEARING/AUDIOLOGY SERVICES





## **Covered Hearing Services**

- MCO Covered Service
- Analog and digital hearing aids are covered
- FM amplification systems are covered as necessary to aid language development
- Cochlear implants are covered for all ages
- New Hearing Program
  - Began January 1, 2008
  - For more information refer to the DMAS Audiology and Hearing Aid manual





## PERSONAL CARE





## **Personal Care**

- EPSDT Personal Care provides care such as: dressing, eating, bathing, etc. .
- Primary Target group: Waiver waitlists
- Consumer-Directed and Agency-Directed Personal Care
- Care need is not solely due to normal developmental milestones





# **EPSDT NURSING**





# **EPSDT Nursing Definition**

- EPSDT nursing is medically necessary private duty nursing care.
- EPSDT nursing differs from home health nursing because the nursing is provided continuously as opposed to the intermittent care provided under either skilled nursing or home health nursing services.
- EPSDT offers multiple levels of nursing care based on the individual's medical needs
- Technology Assisted Waiver offers a higher level of nursing care than EPSDT.





# EPSDT BEHAVIORAL THERAPY

Authorized at Magellan





# **Behavioral Therapy Service Definition**

- "Behavioral therapy" means a behavioral modification strategy for individuals younger than 21 years of age that employs systematic interventions typically provided in the individual's home.
- Behavioral therapy includes, but is not limited to, applied behavior analysis.
- Services are designed to enhance communication skills and decrease maladaptive patterns of behavior which, if left untreated, could lead to more complex problems and the need for a greater or a more restrictive level of care.





# **Behavioral Therapy Service Definition**

- EPSDT Behavioral Therapy allows reimbursement for home based treatment interventions designed to serve individuals with developmental disabilities and behavioral challenges that would not be best served by traditional outpatient psychological services.
- The service goal is to ensure the individual's family is trained to effectively manage the child's behavior in the home using behavioral modification strategies.





### Treatment Coordination

- Services such as speech therapy, occupational therapy or psychiatric care must be coordinated with and integrated with the behavioral treatment plan
- All services must be evidence based, measureable and medically necessary to specifically improve components of adaptive functioning





## Home and the Natural Environment

- EPSDT Behavioral Therapy is available to individuals who reside in their family home.
- Home is defined as the family residence and includes a child living with natural and adoptive parents, relatives, or a guardian, or the family residence of the child's permanent or temporary foster care or pre-adoption placement.





# EPSDT RESIDENTIAL BEHAVIORAL TREATMENT





## **EPSDT Residential**

- EPSDT will review requests that <u>do not</u>:
  - Meet standard RTC level A, B and C criteria
  - Do not benefit from RTC because a standard psychiatric treatment environment is not clinically appropriate to their condition





### **EPSDT Residential Behavioral Treatment**

Examples of conditions served through EPSDT:

- Severe Behavioral problems associated with:
  - Autism
  - Brain Injury





# EPSDT RESIDENTIAL SUBSTANCE ABUSE TREATMENT

Authorized at Magellan





### **EPSDT Substance Abuse Residential Treatment**

- EPSDT will review requests that do not:
  - Meet standard RTC level A, B and C placement criteria when the individual's primary diagnosis or primary need for treatment is a result of a substance abuse disorder
  - American Society of Addiction Medicine (ASAM)
     placement criteria is used to define the necessary level of care





# SPECIALIZED INPATIENT SERVICES





# EPSDT Inpatient Treatment

 The EPSDT program provides inpatient services when the individual requires intensive treatment and also requires management of multiple health conditions that cannot be effectively managed in a less intensive treatment setting.





# EPSDT Inpatient Treatment

Inpatient Settings May Vary According to Treatment Needs

- EPSDT inpatient services may be provided in inpatient settings based on the individual's complex healthcare needs.
- Individuals must be medically unstable due to medical conditions that require inpatient services to manage, treat and stabilize the medical condition and facilitate a return to a lower level of care.





# Inpatient Examples

Some examples of conditions that may benefit from EPSDT inpatient treatment are:

- eating disorders,
- complex neurological conditions,
- acquired brain injury and
- other conditions with medical instability being the prime reason for admission.

### **EPSDT Service Authorization Guide**

Services Authorized at KePRO  FFS Enrolled Members:	Services Authorized at KePRO  MCO Enrolled Members:	Services Authorized at MCO  MCO Enrolled Members:	Services Authorized at DMAS FFS Enrolled Members:	Services Authorized at DMAS  MCO Enrolled Members:
Private Duty Nursing	EPSDT Personal Care and Attendant Care	Private Duty Nursing		
Hearing Aids	N/A	Hearing Aids	Specialized Residential Behavioral Treatment	Specialized Residential Behavioral Treatment
Assistive Technology	N/A	Assistive Technology		
EPSDT Personal Care and Attendant Care	N/A	Specialized Inpatient	Specialized Inpatient	N/A

<sup>\*</sup>Members enrolled in FAMIS MCO coverage are eligible to receive Private Duty Nursing, Hearing Aids, Assistive Technology and Inpatient Services

# **DMAS Service Requests**

Services Authorized at DMAS FFS Enrolled Members:	Services Authorized at DMAS  MCO Enrolled Members:	
Specialized Residential Behavioral	Specialized Residential Behavioral	
Treatment	Treatment	
Residential Substance Abuse	Residential Substance Abuse	
Treatment	Treatment	
Specialized Inpatient	N/A	

# Requests for services may be faxed to:

(804) 612 - 0043





# **KePRO Service Authorization**

- KePRO's website has information related to the service authorization processes for all Medicaid programs they review. Fax forms, service authorization checklists, trainings, methods of submission and much more are on KePRO's website. Providers may access this information by going to <a href="http://dmas.kepro.com">http://dmas.kepro.com</a>.
- KePRO may also be reached by phone at 1-888-827-2884, or via fax at 1-877-OKBYFAX or 1-877-652-9329.





# DMAS Contacts: MCO, Foster Care (MCO) and Behavioral Health

- Managedcarehelp@dmas.virginia.gov
- Fostercare@dmas.virginia.gov
- Cmhrs@dmas.virginia.gov

### **EPSDT Contacts**

**Ashley Harrell** 

Manager, Maternal and Child Health

(804) 786-6134

ashley.harrell@dmas.virginia.gov

For assistance with locating service providers contact:

Marilyn Miller

(804) 786-3712

Marilyn.Miller@dmas.virginia.gov

Service Requests may be mailed to:

DMAS
Maternal and Child Health
Division
600 E. Broad St., Ste
1300
Richmond VA, 23219

Use the Web to find forms and more information!

http://dmasva.dmas.virginia.gov/

http://dmasva.dmas.virginia.gov/Content\_p gs/mch-home.aspx

DMAS Web Portal:

www.virginiamedicaid.dmas.virginia.gov/wps/portal