



UPDATES FOR MEDICAID COVERED RESIDENTIAL TREATMENT SERVICES

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Focus on Positive Outcomes for Children

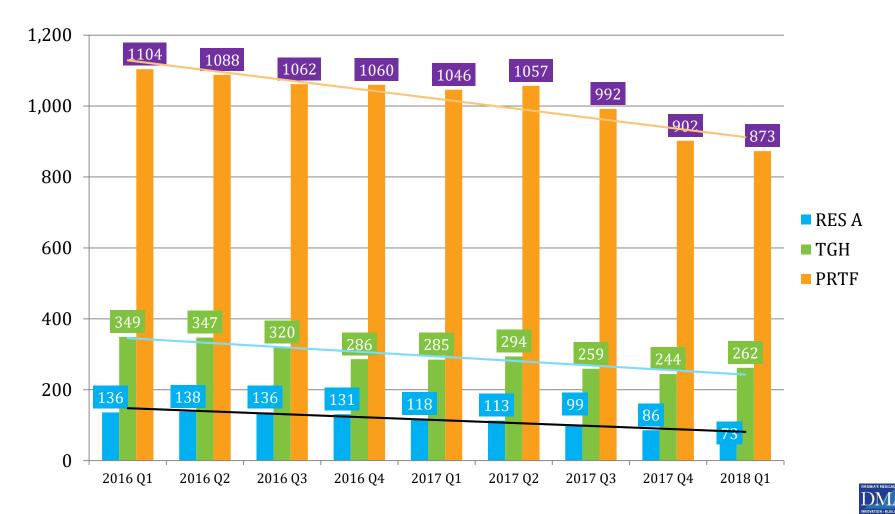
Goals for the Medicaid Residential Treatment Services Program

- Use models with evidence based treatment approaches, standardized medical necessity criteria, and specific program requirements.
- Youth and family focused system that will match future Managed Care administration structures, oversight and contracting requirements.
- Efficient service model that yields better outcomes to Medicaid enrollees using shorter lengths of stay and higher intensity services.
- Care coordination before, during and after placements that helps to ensure effective programming and a successful return to the community and home settings.
- Involvement of youth and families in all aspects of care to achieve long term outcomes.
- Promote community engagement and tenure.
- Services are individualized, short term, and focused on comprehensive discharge planning.



Unduplicated Members by Quarter by Service

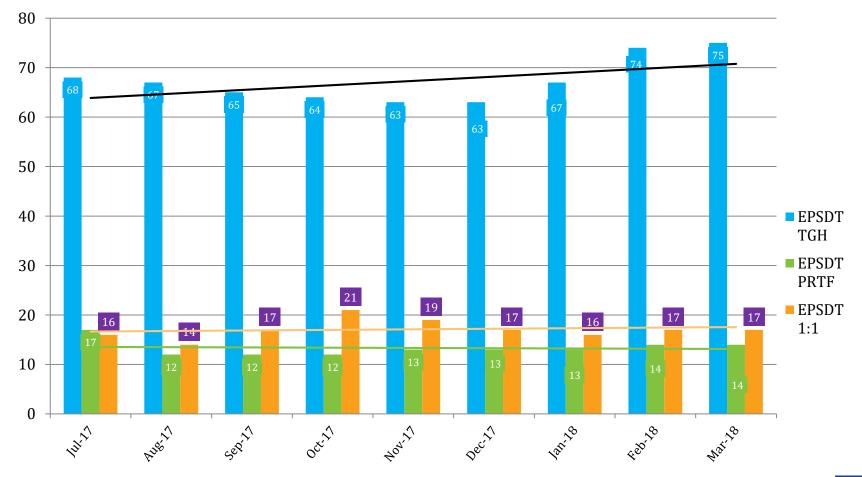
Current Medicaid Statistics for RTS





Unduplicated Members by Month by Service

Current Medicaid Statistics for EPSDT RTS

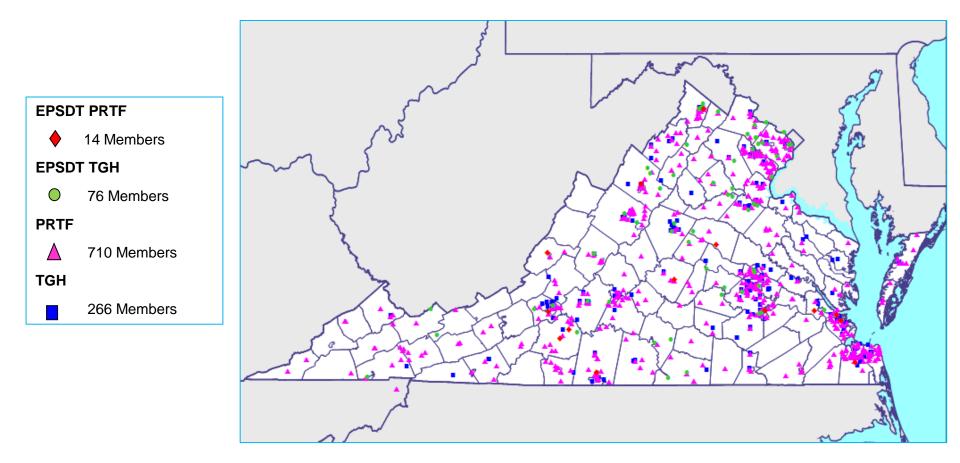




Data Source: VAD Auths Monthly

Children's Residential Treatment Services

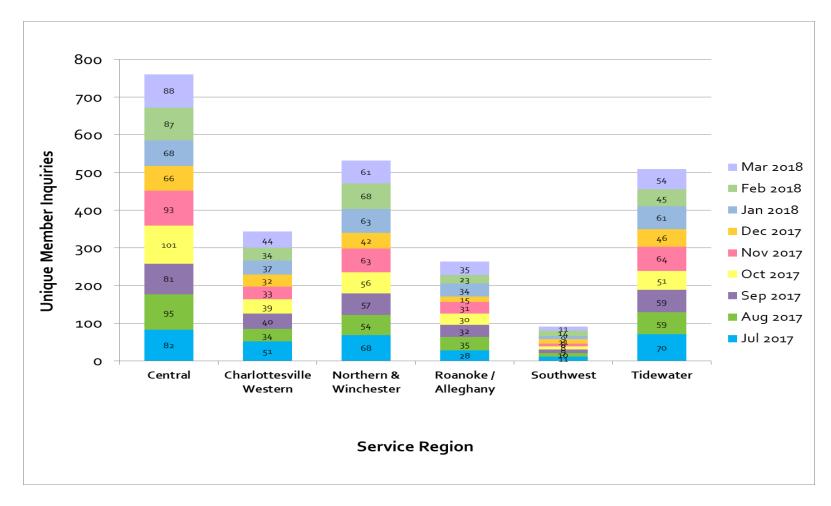
Where are Children Enrolled in Medicaid Placed in Virginia?



Data as of 4/2/2018: This map is updated by the 10th of each month.



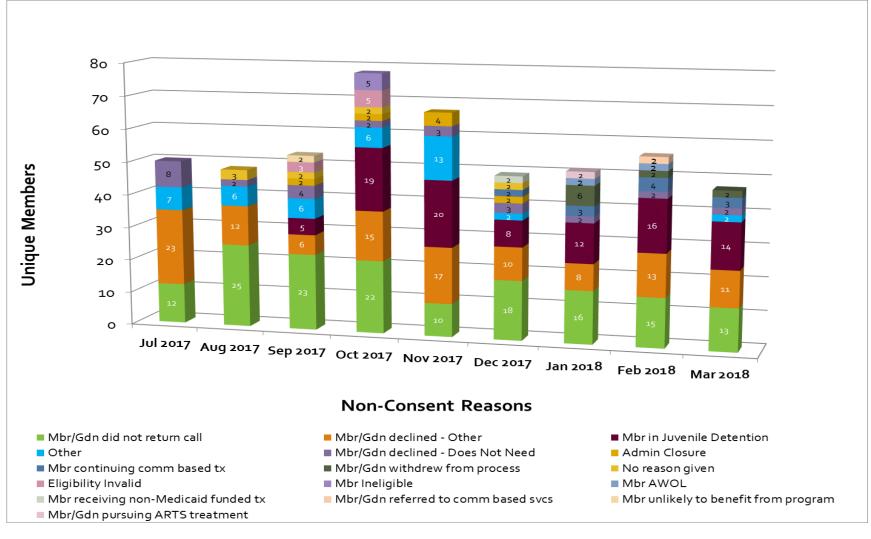
Number of RTS Inquiries Submitted to Magellan of Virginia by Locality



Data as of 04/09/2018. This report is updated by the 10th of each month.



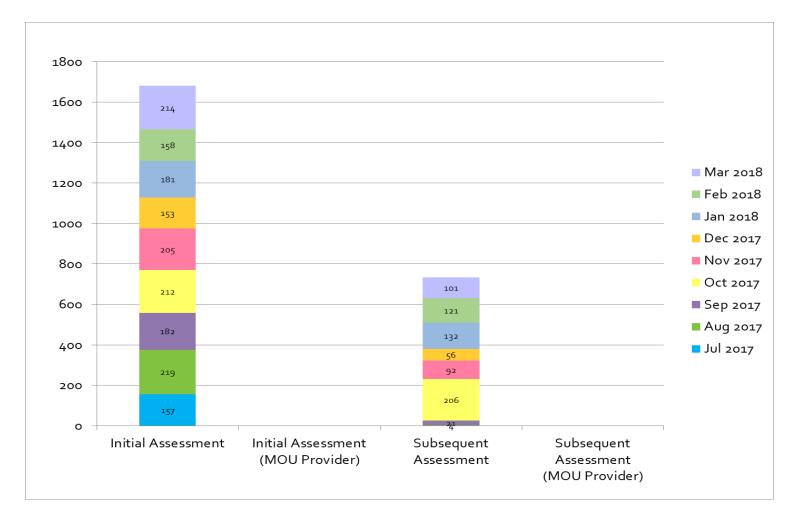
Number of RTS Inquiries Closed or Diverted



Data as of 04/09/2018. This report is updated by the 10th of each month.



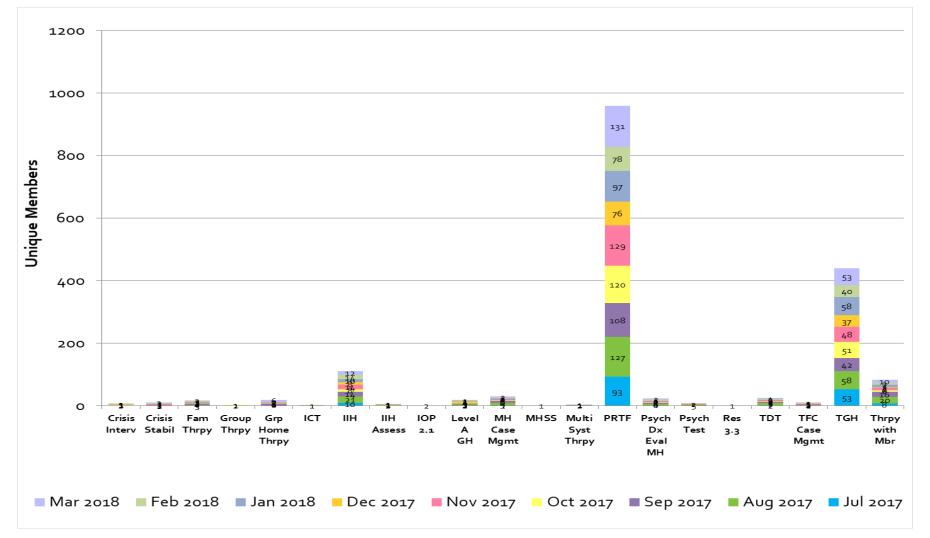
Number of Assessments by IACCT



Data as of 04/09/2018. This report is updated by the 10th of each month.



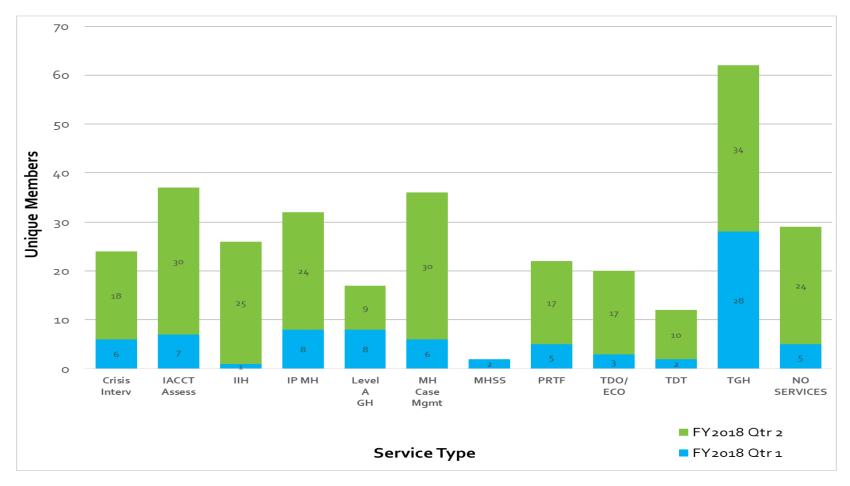
Recommended Medicaid Covered Services



Data as of 04/09/2018. This report is updated by the 10th of each month.



Medicaid Covered Services Received within 30 Days After PRTF Discharge



Data as of o2/10/2018. This report is updated by the 10th of the month following end of quarter. "NO SERVICES" could indicate a member who is receiving services not requiring an authorization or being funded by another source (ex: MCO, CCC plus, or CSA).



Children's Residential Treatment Services

As of May 1, 2018, Two Levels of Care

- Children's Residential Treatment Services as defined by this program manual consist of two levels of care: Psychiatric Residential Treatment Facility (PRTF) services and Therapeutic Group Home (TGH) services.
- As of May 1, 2018, DMAS and Magellan of Virginia no longer reimburse for Community-Based Residential Services for Children and Adolescents under 21 (Level A) group home services provided by a DSS licensed facility.



Transforming the Delivery System of Medicaid Behavioral Health Services for Children Under 21

Effective 1/1/18 for CCC Plus and Beginning 8/1/18 for Medallion 4.0

- Intensive In Home (IIH)
- Therapeutic Day Treatment (TDT)
- MH Case Management
- Family Support Partners
- EPSDT Behavioral Therapy
- Crisis Intervention
- Crisis Stabilization

Effective April 1, 2019 for both CCC Plus and Medallion 4.0

- Therapeutic Group Home
- Psychiatric Residential Treatment Services
- Treatment Foster Care Case Management

Magellan/DMAS Contractor will continue to cover behavioral health treatment services for feefor-service members

> All Behavioral Health Services are Covered by Managed Care Plans

> A fully integrated Physical and Behavioral Health Continuum of Care



Transitioning to Managed Care

Enhancing IACCT Process for the Transition

- 90 day Reassessment Requirement for Children placed prior to 7/1/17 eliminated (went in effect December 2017)
- FAPT is automatically notified of a child going through the IACCT Process (January 2018).
- Eliminate the IACCT Family Engagement Notification Form to Magellan (March 1, 2018).
- Recommendation Meeting eliminated if all interested parties are in agreement with the treatment decision (March 26, 2018).



Transitioning to Managed Care

Enhancing IACCT Process for the Transition

 Adverse Childhood Experiences Screening (ACES) will be removed from IACCT process effective June 1, 2018. Residential Treatment Providers will be responsible for screening for trauma as part of treatment planning using the ACES or another trauma screening tool.



Transitioning to Managed Care

- Continued promotion of community engagement and tenure, residential treatment needs to be individualized, short term, and focused on comprehensive discharge planning.
- Reduce duplicative processes for children and families
- Independent Certification Team to include licensed providers involved with child in the community
- Streamline processes for psychosocial assessment, medical assessment
- High touch care coordination by the managed care health plan to coordinate the member's behavioral health and medical needs – full continuum of care.

