

**CHANCE**



 South Carolina Department of  
Health & Human Services



# Psychiatric Residential Treatment Facility (PRTF) Alternative Children's Health Access in Community Environments(CHANCE) Waiver

Proposed changes for the 1915c Waiver  
Renewal

# The PRTF Alternative CHANCE Waiver

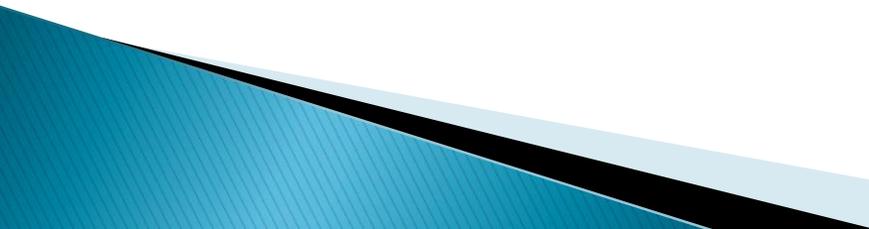
The purpose of this waiver is to provide home and community-based supports and services to children who have been diagnosed with SED and/or mental illness who would otherwise be served in Psychiatric Residential Treatment Facilities (PRTF)



# Why are we renewing the PRTF Alternative CHANCE Waiver?

- ▶ If we choose not to renew the waiver, services will stop for waiver participants as of 10/1/12
  - ▶ Waiver services have been beneficial to involved youth and families; South Carolina would like to continue offering these services with revisions to improve the program
  - ▶ Waiver services allow states to offer services that are different than services covered in the State Medicaid Plan such as respite
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# Brief history

- ▶ SC was one of ten states that received a grant award from CMS for a demonstration waiver in 2006
  - ▶ The demonstration waiver started serving youth in 2008 in three pilot counties
  - ▶ Start up operations originated at the Department of Mental Health
  - ▶ The Waiver expanded into three additional counties in the second year of the Waiver
  - ▶ Due to budgetary constraints, the Waiver was capped to 50 slots in 6 counties
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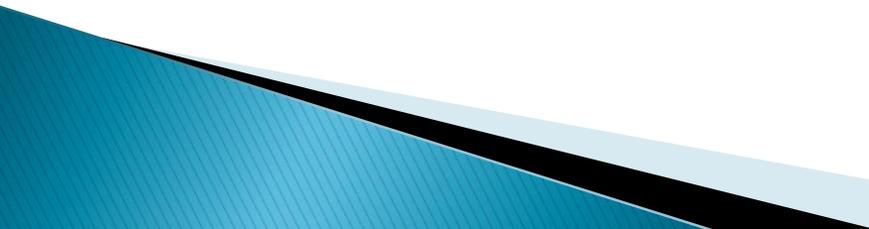
# Brief history

- ▶ October 2010, the Department of Health and Human Services took over operations of the Waiver in addition to the administrative responsibilities
  - ▶ June 2012, the PRTF Alternative CHANCE Waiver opened up enrollment for 150 slots in all 46 counties across SC
  - ▶ Over the course of the waiver 106 youth and families have chosen to receive home and community based services through the CHANCE waiver rather than PRTF placement
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# Brief history

- ▶ The demonstration has been a learning experience which has allowed DHHS, Federation of Families, providers and families to identify needed improvements going forward
  - ▶ We have seen more positive treatment outcomes for youth and their families in the home and community based setting as opposed to a child being in PRTF placement.
  - ▶ Home and community based services are a cost savings to South Carolina and the federal government
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# Brief history

- ▶ Children's Mental Health Accessibility Act (S.3289) was introduced to the US congress on June 13, 2012
  - ▶ The purpose of the legislation is to make the 1915c PRTF demonstration waiver a permanent waiver
  - ▶ The application for the Waiver renewal must be submitted by 9/30/12 in order for the Waiver to continue
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# Eligibility for Waiver Services

- ▶ Youth must meet Medicaid financial eligibility
  - ▶ Serves youth age 4 until their 19<sup>th</sup> birthday
  - ▶ Primary diagnosis of a serious emotional disturbance
  - ▶ Meet Level of Care Eligibility determination for a Psychiatric Residential Treatment Facility
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# Proposed Major changes

- ▶ Remove the Psychiatric Medical Assessment (PMA) considering a similar and adequate service is offered through the state Medicaid plan

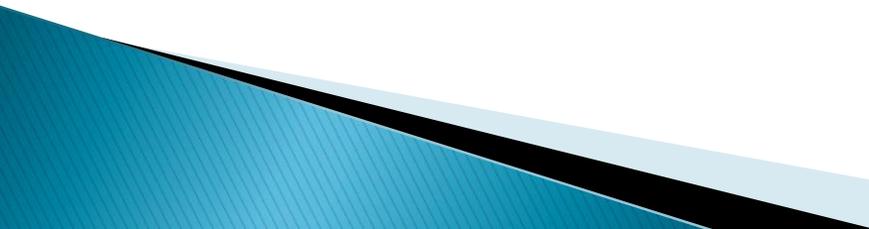
# Reason for the Proposed Major change

- Only one unit of the PMA service was billed as a waiver service in the past 2 years
  - A similar service is available under the State Medicaid Plan allowing waiver participants to have access to this service as needed
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# Proposed Major changes

- ▶ Restrict the assigned case manager from providing both case management and direct services

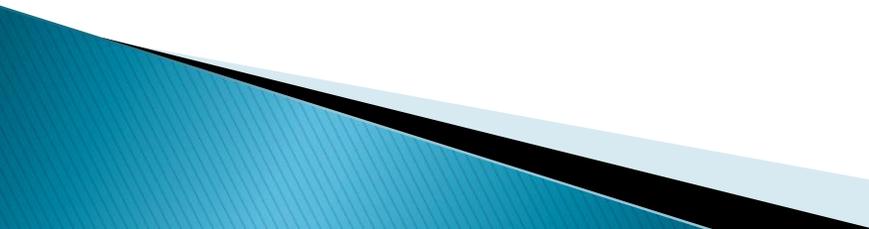
# Reason for the Proposed Major change

- ▶ The assigned case manager would not be allowed to provide direct services to youth who are on their current Case Management caseload
  - ▶ This change would preclude the case manager from providing other direct services, thereby eliminating a potential conflict of interest
  - ▶ This will ensure true freedom of choice
  - ▶ This would ensure that the case manager is providing unbiased oversight for each waiver participant's menu of services
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# Proposed Major changes

- ▶ Expand the number of persons served statewide under the waiver to 150 and the unduplicated number of children served in the waiver adjusted to 200

# Reason for the Proposed Major change

- ▶ Statewide expansion to 150 slots required the calculation of unduplicated slots based on historical data which amounted to 200 unduplicated slots per waiver year.
  - ▶ This increase facilitates transition and diversion of additional youth from Psychiatric Residential Treatment Facility (PRTF) placements across the state.
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# Proposed Major changes

- ▶ Exclude the clinician who refers the youth to the waiver from performing the initial Level of Care assessment

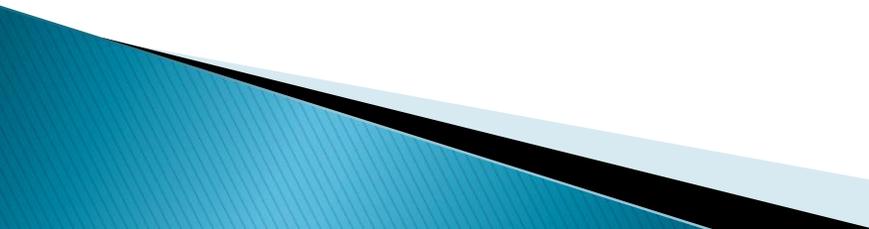
# Reason for the Proposed Major change

- ▶ Potential conflict of interest if the referring Clinician also performs the initial level of care assessment for admission to waiver. These clinicians may often provide waiver services to the child once enrolled in the waiver and could financially benefit from assessing the child to meet level of care requirements.
  - ▶ Families will have the opportunity to choose a clinician to complete the level of care from a list of independent providers.
  - ▶ Annual redetermination of the level of care can be performed by any certified clinician of the family's choice, including the referring clinician.
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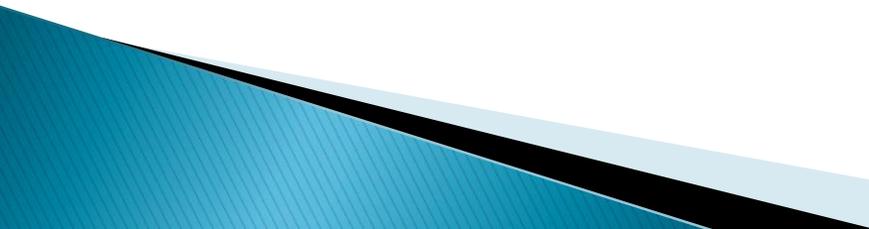
# Proposed Major changes

- ▶ Require applicants to provide the Federation of Families, the family advocacy organization who performs outreach and intake functions, with documentation to substantiate the need for waiver services prior to proceeding with the eligibility process

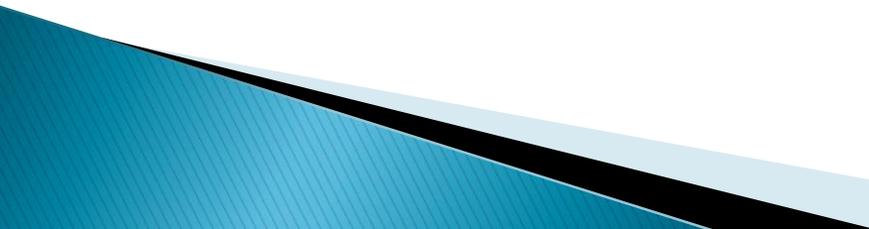
# Reason for the Proposed Major change

- ▶ Strengthen the intake process. Many inappropriate referrals have been made for youth who do not have a reasonable need for services through the PRFT Alternative CHANCE Waiver.
  - ▶ During intake, information concerning diagnosis and medical history has been miscommunicated. This miscommunication makes it difficult to determine if there is justification for waiver services.
  - ▶ Documentation from a doctor/clinician to show a need for this level of support would take the burden off the family and speed up the eligibility process
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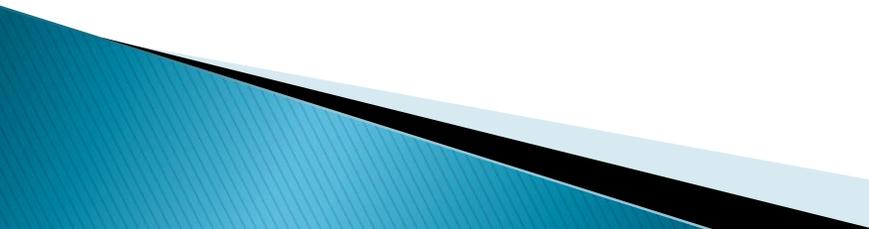
# Waiver Renewal Process

- ▶ Public notice of proposed changes and meeting notice 7/23/12
  - ▶ Public notice summary of proposed changes 7/27/12
  - ▶ Presentation of proposed changes to Medical Care Advisory Committee 8/14/12
  - ▶ Public meeting 8/23/12
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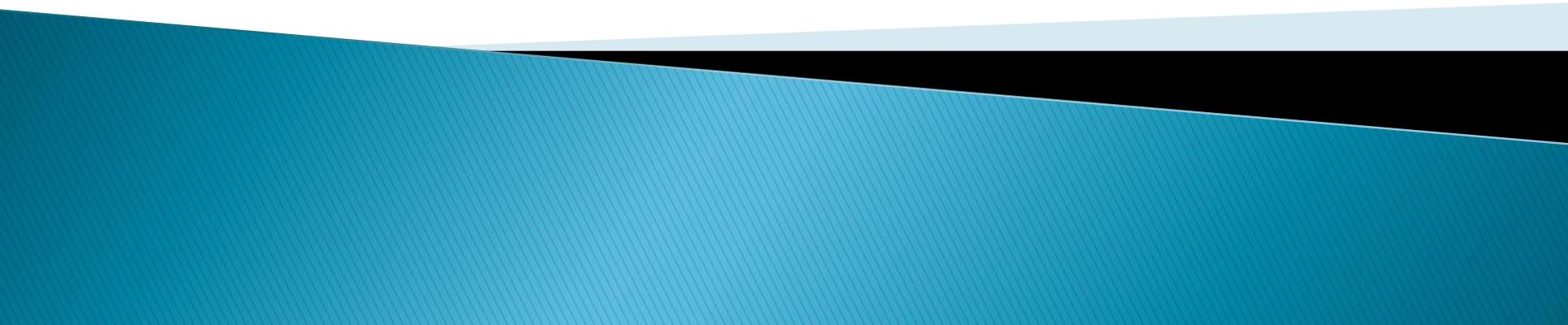
# Waiver Renewal Process

- ▶ Deadline for public comments  
8/24/12
  - ▶ Review of public comments 8/27/12 –  
9/3/12
  - ▶ Complete revisions of PRTF Alternative  
CHANCE Waiver renewal application as  
needed
  - ▶ Internal approval of final changes by  
9/14/12
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# Waiver Renewal Process

- ▶ Submit Waiver renewal application by 9/28/12
  - ▶ Revise PRTF Alternative CHANCE Waiver Policy Manual 10/1/12 – 12/1/12
  - ▶ New Waiver manual published 1/1/13
  - ▶ Implement changes to Waiver 1/1/13
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**Proposed changes, if  
approved by CMS, would be  
implemented on 1/1/13**



# Questions and Comments

Comments may be submitted in writing by Friday 8/24/12 to:  
SCDHHS, Division of Family Services, 1801 Main Street, Columbia,  
SC 29201

or to

[comments@scdhhs.gov](mailto:comments@scdhhs.gov)