





# Inpatient Psychiatric Services for Children Under 21

Updated Referral Process

Division of Behavioral Health

## DISCLAIMER

The materials presented in this workshop are not comprehensive. This training does not take the place of reading the provider policy and procedure manual(s) and terms and conditions of individual provider agreements/contracts.

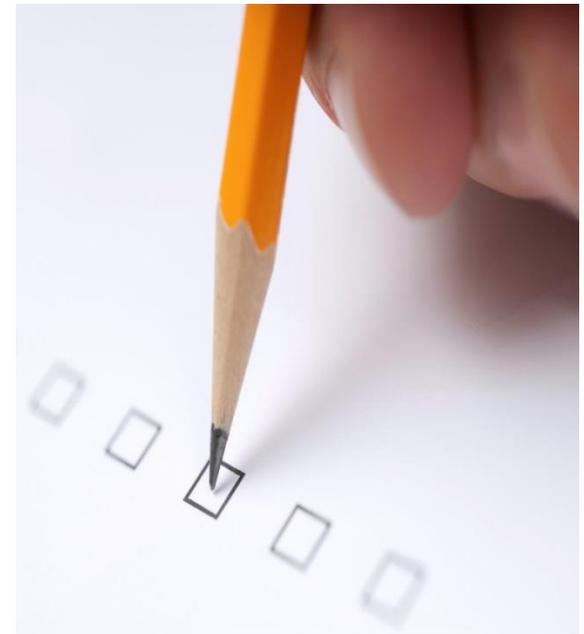


- **To educate the practitioner about SC Medicaid updated referral policy and procedures for Inpatient Psychiatric Hospital Services for Children under 21**
- **To avoid potential Medicaid recoupment after the practitioner delivers services**



**After completion of this training,  
you will:**

- **Receive highlights of Psychiatric Hospital Services Policy**
- **Understand changes in the referral process for Inpatient Psychiatric and PRTF Services**
- **Know the elements required for Inpatient Psychiatric and PRTF admissions**
- **Understand the role of Quality Assurance and Program Integrity regarding the changes in referral process**



# What is Medicaid?

- Medicaid is a publicly funded insurance program that pays for the health care needs of low-income individuals.
- Every state has its own Medicaid program.
- Every state has different rules and covers different services.

# How does Medicaid Work?

## Federal – Centers for Medicare and Medicaid Services (CMS)

- Defines the Medicaid program;
- Develops rules and regulations;
- Defines the required components for participation in the Medicaid program;

## State – South Carolina Department of Health and Human Services

- Establishes eligibility Standards;
- Determines the type, amount, duration and scope of services;
- Sets payment rates; and
- Administers their own program

# Who Administers Medicaid?

- The South Carolina Medicaid program has been re-branded as South Carolina Healthy Connections. The South Carolina Department of Health and Human Services (DHHS) is the single state agency designated to administer the state's Medicaid program.



# Who is Eligible to Receive Services?

- A beneficiary who has met the financial eligibility requirements for Medicaid
- A beneficiary's eligibility for Medicaid may be verified by using the SCDHHS web-based Claims Submission Tool, at no cost to the provider
- The provider must complete a Trading Partner Agreement (TPA) in order to conduct business using the web-based Claims Submission Tool

# Who is Eligible to Receive Services?

- If the beneficiary is covered by another insurance policy, this policy must be billed prior to billing Medicaid.
- Medicaid is **always** the payor of last resort.

# Who has the final authority?

The Centers for Medicare and Medicaid Services (CMS) has the final authority on the interpretation of Medicaid rules.



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# Policy and Procedures

## Inpatient Psychiatric Hospital Services for Children under 21

- Available to all Medicaid beneficiaries under age 21
- Required only if the beneficiary's medical condition, safety, or health would be significantly and directly threatened if care was provided in a less intensive setting

# Policy and Procedures

Eligible beneficiaries may receive inpatient psychiatric services from a privately owned facility or a facility operated by the SC Department of Mental Health.

# Policy and Procedures

Inpatient Psychiatric Services for Children Under Age 21 must be provided under the direction of a South Carolina licensed physician, by a psychiatric facility that is accredited by the Joint Commission (JCO), the Commission on Accreditation of Rehabilitation Facilities (CARF), or the Council on Accreditation of Services (COA) for Families and Children.

# Policy and Procedures

- A clinical team must always complete the CON form for Inpatient Psychiatric Services for Children under 21.
- The type of admission status dictates whether an independent team or facility-based interdisciplinary team is responsible for certifying the need for Inpatient Psychiatric Hospital Services.

# Policy and Procedures

Inpatient Psychiatric services are expected to aggressively treat the beneficiary with a full range of therapies and education and rehabilitative activities in the least restrictive environment required. All of the services must be provided at the facility as part of the therapeutic milieu. This includes medication management, psychotherapy, and an age-appropriate school program approved by the South Carolina Department of Education.

# Policy and Procedures

Programs of services provided to each beneficiary must include, but are not limited to the following:

- Psychiatric Evaluations
- Psychological Evaluations
- Psychotherapy Services
- Medical Services
- Crisis Management

# Policy and Procedures

## Reporting Changes:

- Changes affecting business operation must be reported to the SCDHHS Provider Service Center
- Providers must obtain approval to expand scope of services prior to expansion

# Policy and Procedures

## The following changes must be reported:

- Email addresses or telephone numbers of the primary business location or mailing address
- CEO or Clinical Director
- Licensure
- Accreditation status
- Other changes which affect compliance with Medicaid requirements

# Policy and Procedures

- Any services that are provided by staff who do not meet SCDHHS staff qualification requirements are subject to recoupment.
- If SCDHHS or its designee determines that a Inpatient Psychiatric Services provider failed to comply with staff qualification requirements and services are rendered, termination of the provider from the Medicaid program and possible recoupment of payments may result

# Changes to the Referral Process

Effective July 1, 2014, Inpatient Psychiatric Service providers will no longer need a 257 Form from State Agencies in order to provide services to Medicaid Beneficiaries.

# Changes to the Referral Process

- Beneficiaries will have expanded choices in treatment providers.
- Inpatient Psychiatric Service providers will not be dependent on State Agencies for referrals.
- Service-providing State Agencies will no longer be responsible for the state match when they refer to private providers. SCDHHS will cover the match.

# Changes to the Referral Process

- Referrals may be made among and between state agencies and private providers enrolled in the SC Medicaid Program.
- Referrals must include a Certification of Need (CON) Form, CALOCUS, and QIO Prior Authorization.

# Changes to the Referral Process

- Referrals (provider to provider or self-referred) can be done via phone, email, fax, and hard copy mail.  
**Note:** All information must be HIPAA compliant.
- When referrals are made between providers, the referring provider **may** furnish the receiving provider the assessment, IPOC, list of services to render, and any other clinical documentation.
- Regardless of clinical information sent, the receiving facility **must** develop their own individualized plan of care.

# Beneficiary Certificate of Need (CON) PRTFs

There are two types of Medicaid admissions to PRTFs:

1. An urgent admission
2. An admission for beneficiaries who become Medicaid eligible after admittance

# Beneficiary CON PRTFs

An urgent admission is one in which the client meets the CON or CALOCUS criteria but is **not** presenting immediate danger that would cause death, serious impairment to the health of the client, or bodily harm to another person.

# Beneficiary CON

## PRTFs

- The CON form has been revised; please reference the manual for the current form.
- An independent team consisting of a psychiatrist or other physician and at least one other LPHA will complete the CON form for urgent admissions to PRTFs.
- The facility's interdisciplinary team will complete the CON form for clients who become Medicaid eligible after their admission to a PRTF.

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# Beneficiary CON PRTFs

- The form must be signed and dated by the physician/psychiatrist and one other team member.
- Refer to the Inpatient Psychiatric Hospital Manual for the SCDHHS Certification of Need Form that must be completed by the team.

# CALOCUS

## PRTF Admissions

- The Child and Adolescent Level of Care Utilization System (CALOCUS) is required to be administered and scored as a pre-admission requirement to placement in a PRTF.
- The pre-admission CALOCUS must be administered face to face by a qualified clinical professional who is certified to administer the CALOCUS.

# CALOCUS

## Admissions to the public PRTF

- A qualified clinical professional must administer the CALOCUS and complete the CALOCUS Score Sheet.
- Referring State Agencies may administer the CALOCUS.
- Community mental health staff may administer the CALOCUS for admissions to the public PRTF which is operated by the Department of Mental Health.

# CALOCUS

## Admissions to Private PRTFs

- A qualified clinical professional must administer the CALOCUS and complete the CALOCUS Score Sheet.
- Referring State Agencies may administer CALOCUS.

# CALOCUS

## Admissions to Private PRTFs

The pre-admission CALOCUS **must** be administered by a qualified clinical professional who is **not** associated with the receiving facility.

# CALOCUS

## Admissions to private PRTFs

Includes but is not limited to:

- no organizational affiliations (e.g. sharing a parent company)
- No personal affiliations (e.g. relatives or familial relationships)
- No financial affiliations (e.g. the receiving facility makes referrals to the clinician's business or practice)

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# CALOCUS

## PRTF Admissions

- Clinicians become certified by SCDHHS to administer the CALOCUS by passing a competency test.
- CALOCUS training and certification is offered by the SCDHHS/Division of Behavioral Health.
- To register for the CALOCUS training, refer to <https://training.scdhhs.gov/academy>

# QIO Prior Authorization

- All admissions to Inpatient Psychiatric Services require Prior Authorization through the SCDHHS designated Quality Improvement Organization (QIO), KEPRO.
- The provider must submit the KEPRO Fax Form and supporting clinical documentation for approval.

# QIO Prior Authorization

- Initial Prior Authorizations (PA) will be for a duration of 21 calendar days.
- If necessary, the first continued stay request must be submitted to KEPRO by the 14<sup>th</sup> day of admission.
- Continued Stay PA requires a treatment plan and progress summary from an interdisciplinary team of facility clinical staff. This team should include outpatient clinical service providers.
- SCDHHS Behavioral Health staff may also attend the treatment team meetings.

# QIO Prior Authorization

- KeyPro will utilize Interqual (initial stay criteria) for the initial 21 day stay request.
- For all continued stay requests, KeyPro will utilize the facility's treatment plan, progress summary and adherence to manual service requirements.

# QIO/Continued Stay

Continued stays will be limited to 30 days per continued stay; teams should request the least amount of time within that 30 day period as is clinically appropriate.

# QIO Oversight

- KeyPro will conduct regular and as needed on site reviews of Psychiatric Residential Treatment Facilities.
- Providers are encouraged to visit the KEPRO Web site at <http://scdhhs.KEPRO.gov>

# SCDHHS Quality Assurance

- Will provide education, training and consultation to providers to ensure that appropriate treatment by qualified staff is being provided and documented
- Will perform quality assurance reviews of provider records
- Will refer questions of misuse and overuse of services to SCDHHS Division of Program Integrity

# SCDHHS Program Integrity

- Seeks to reduce waste, fraud and abuse in the use of Medicaid funds
- Performs surveillance and utilization review of provider records
- Investigates misuse and overuse by beneficiaries
- Refers fraud cases to the state attorney general's office

# Monthly Review of Analytics

- **SCDHHS will be using very complex and in-depth analytics to monitor monthly service utilization.**
- **Unusual or unexpected patterns in service utilization will be subject to further inquiry.**
- **QA and/or PI may become involved.**

# Resources

[www.scdhhs.gov](http://www.scdhhs.gov)

- Medicaid information
- Provider manuals
- Fee schedules and crosswalks
- Edit codes and carrier codes
- Electronic filing resources
  - Trading Partner Agreements
  - Companion Guides

# Resources

## Provider Service Center

- 1-888-289-0709
  - Option 1 – Electronic Data Interchange (EDI) Support Center
  - Option 2 – Eligibility/Claim Information/Prior Authorization
  - Option 3 – Nursing Home/OSS/Hospice
  - Option 4 – Provider Enrollment & Education
  - Option 5 – Third Party Liability Services

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# Resources

## Online Training Sessions [MedicaideLearning.com](http://MedicaideLearning.com)

### Medicaid Basics

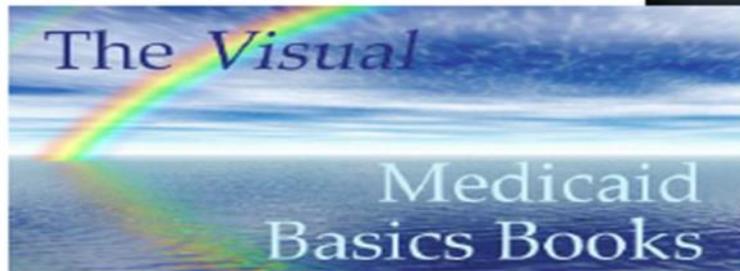


### The Web Tool



*interactive*

### Podcasts



### Rollover Forms



Questions?

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Thank  
You!