



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

BACKGROUND: The PRTF Alternative/CHANCE Waiver provides specialized supports and services to youth ages 4 until their 19th birthday who have a primary diagnosis of a serious emotional disturbance. The waiver offers home and community based supports and services to help keep youth in their home or in the least restrictive environment. The South Carolina Department of Health and Human Services (SCDHHS) expanded services through this waiver statewide in June 2012 and is now offering supports and services to youth and their families across all 46 counties in South Carolina. SCDHHS plans to renew the PRTF Alternative/CHANCE Waiver for another five (5) years pending Centers for Medicare and Medicaid Services (CMS) approval. The waiver will expire at the end of 2012. In order to continue providing home and community based services to the youth and families, the renewal application must be submitted to CMS by September 30, 2012 for approval.

PROPOSED MAJOR CHANGES IN THE RENEWAL

- 1. Remove the Psychiatric Medical Assessment considering a similar and adequate service is offered through the state Medicaid plan:**
 - The service is not being actively utilized by waiver participants – only one unit of this service was billed in the past 2 years; and
 - A similar and service was added to the state plan since the original waiver application was completed allowing waiver participants have access to these services, as needed.

- 2. Restrict the assigned case manager from providing both case management and direct services:**
 - The proposed change if implemented would mean that a 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 services, thereby eliminating a potential conflict of interest and possibly not ensuring true freedom of choice; and,
 - This would ensure that the case manager is providing unbiased oversight for each waiver participant's menu of services.

- 3. 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:**
 - 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 facilitate transition and diversion additional youth from Psychiatric Residential Treatment Facility (PRTF) placement across the state.

4. Exclude the clinician who refers the youth to the waiver from performing the initial level of care assessment:

- Clinicians who refer children to the waiver could have a potential conflict of interest to also perform the level of care assessment. 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.

5. 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:

- 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 may be miscommunicated by the parent/guardian. This miscommunication makes it difficult to determine if there is a reasonable need for services.

PROPOSED TECHNICAL CHANGES IN THE RENEWAL

1. Clarify that waiver operations are now being conducted by SCDHHS instead of South Carolina Department of Mental Health;
2. Clarify the age limitations to indicate that youth age out on their 19th birthday;
3. Clarify billable case management activities;
4. Clarify case manager qualifications;
5. Clarify respite services;
6. Clarify respite staff training requirements and supervisory qualifications;
7. Convert diagnostic therapeutic services from a waiver service to extended an extended State Plan service;
8. Remove intensive family services from the diagnostic therapeutic services category to a stand-alone waiver service;
9. Clarify caregiver peer support and youth peer support supervisory requirements;
10. Adjust the cost neutrality threshold to account for the increase in waiver slots;

11. Clarify/correct service plan development scope, billing and qualifications;
12. Clarify wrap-around support services;
13. Identify allowance of other methods of communication to be utilized for those agencies/providers who are unable to attend the service plan development meeting;
14. Require the case manager to send a copy of the entire plan of care to the family and all the service providers once it is completed and approved by SCDHHS;
15. Clarify waiver service documentation requirements;
16. Update the laws referenced in regard to critical events and incidents;
17. Clarify medication administration during respite; and,
18. Update projections based on waiver data.

EFFECTIVE DATE: January 1, 2013 pending CMS approval