

Shawn Sullivan, Secretary

Susan Fout, Acting Commissioner

Sam Brownback, Governor

To: PRTF Administrators and Stakeholders
CMHC Executive Directors

From: Ted Jester, Facilities Quality Improvement Manager

Date: December 19, 2012

Re: Policy Changes and Transition Planning

The purpose of this letter is to communicate some policy changes that will take effect January 1, 2013, to answer some scenarios presented, and address expectations during this transition. These changes were all presented to CMHC, MCO and PRTF representatives on or before December 14, 2012.

1. Initial Certification of Need (CON) remains the same and will consist of a CBST recommendation and a PRTF Screen completed by a CMHC. Recertification (continued stay screen/extension screen) will be determined by the MCOs conducting utilization reviews and making a determination for continued stay based on medical necessity. CMHCs will no longer conduct continued stay/extension screens after January 1, 2013. Emergency exception screens for PRTFs will no longer exist post January 1, 2013. If a psychiatric emergency exists, then the youth should meet inpatient criteria and may receive treatment in an acute setting.
2. Once initial authorization is completed the admission should occur within fifteen (15) days (previously 30 days). If needs really cannot be met in the community then placement should occur sooner rather than later.
3. Initial authorization period will be up to 60 days (previously 90 days). This initial authorization period begins on the date the screen authorizes admissions rather than when the youth is admitted.
4. MCO Care Coordinator will participate as a member of the CBST, therefore is part of the decision process for PRTF screening, placement and discharge planning.
5. CMHC PRTF Liaisons will support members and their MCO Care Coordinator in the transition from KHS to MCO through March 31, 2013. This will include notifying and educating Care Coordinators on youth cases and working with the Care Coordinators of youth who are to be admitted and or discharged from a PRTF.
6. PRTF Liaisons or other identified CMHC staff will serve as the point of contact for the MCOs. There is an expectation that the CMHC continue to be part of discharge planning just as they should be doing now. This may be through a liaison or a member of youth's treatment team. CMHCs will maintain full responsibility for discharge planning for any youth who is non-Medicaid.

As part of the transition planning, KDADS collected youth Medicaid member information that included their authorization period ending date and forwarded that information to the appropriate MCO so they can plan accordingly and begin care coordination immediately following January 1. KHS will continue to do initial 90 day authorization screens for admissions and 60 day extension screens through December 31, 2012.

Common Scenarios Presented

For **PRTF Initial screens** in which the initial authorization for 90 days would extend past 12/31/12 should we end the authorization as of 12/31/12 or continue to authorize the full 90 days? If we do the latter, days past 12/31/12 would be covered under KanCare and the new MCOs.

EXAMPLE: An approved PRTF Initial screen with an admission date of 12/4/12 would have an authorization of 12/4/12-3/3/13 if the full 90 day initial authorization is provided.

Answer: Admissions authorization should be for a period authorized **up to 90 days** as it is now even if that extends the authorization period past 12/31/12. New policy does not go into effect until January 1, 2013.

For **PRTF Extension screens**, which are often done two weeks prior to the end of an authorization prior, should we discontinue authorizing PRTF Extension screens that would cover a new authorization period that would start 1/1/13 or later?

EXAMPLE: A Member's current authorization period for PRTF treatment ends on 1/3/13. On 12/14/12 a PRTF Extension screen is requested, with the results for such screen applying toward continued stay in the PRTF following the end of the current authorization period (i.e., 1/3/13).

Answer: Until January 1, 2013, Extension screens should still be completed by the CMHCs. The extension screen is good for **up to 60 days** as is current policy (42 CFR 441.153(a)(1)). After January 1, MCOs will use their utilization management process to determine medical necessity and whether or not services in the community can meet the youth's needs.

For **PRTF Extension screen appeals** that would be for authorizations that begin 1/1/13 or later should the MCOs do these appeals since the timeframe that would be covered would be under their contract?

EXAMPLE: A Member's current authorization period for PRTF treatment ends on 1/3/13. On 12/14/12 a PRTF Extension screen is requested and the screener determines the Member no longer meets criteria for continued PRTF treatment which would result in the Member being discharged from the PRTF on or before 1/3/13. The Member's parents file an appeal of the screen decision hoping for continued stay in the PRTF following the end of the current authorization period (i.e., 1/3/13).

Answer: The appeal would follow the same process as it does now **IF the appeal is filed prior to January 1. If the appeal is filed after January 1 then it would be handled through the appropriate MCO.**

Another question arose regarding the State Plan and if there are any conflicts with that document and these changes. As part of this process the State Plan and CMS requirements were thoroughly reviewed and we continue to conform and none of the policy changes are contrary to them.

The thing to stress here is that our current policies and processes stay intact until January 1, 2013. There will be some transition pains and we need to all work together to resolve and overcome them when they arise. It is after all about meeting our youth's needs and ensuring they are receiving all the necessary care and services.

We are in the process of re-editing the Mental Health Screening and Discharge Planning Handbook that was primarily written as a guide for CMHC Screeners. Attached is draft of Section III: Psychiatric Residential Treatment Facility Screen and Discharge Requirements. It further outlines the changes mentioned in this letter regarding screens, admissions, and discharges.

As always, I would like to thank you and your staff for the work you do for Kansans in need of mental health services. I will make myself available for any questions that you might have.

Sincerely,

A handwritten signature in black ink, appearing to read 'J Ted Jester', with a long horizontal flourish extending to the right.

J Ted Jester

CC: Angela Hagen, Director Behavioral Health Services
Carla Drescher, Assistant Director
QI Field Staff and Consultants
File

Attachment: PRTF Screen and Discharge Requirements (draft)

JTJ:jtj