

Children's Mental Health Bureau
Utilization Review and
reimbursement

Presented by Tracey Riley

Children's Mental Health Bureau Utilization Review and reimbursement

In November of 2017, the governor called a special session to address the variances in revenue and high fire season expenditures. The governor and the legislature worked together to reach a compromise to bring the budget into balance. That compromise included a number of proposed spending reductions and a reduction to the Department of Public Health and Human Services (DPHHS) budget of \$49 million general fund dollars.

Medicaid rates and services are stated in administrative rule. The rule amendments in MAR Notice No. 37-828 were to implement the necessary spending reductions resulting from the November 2017 Legislative Special Session.

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Out Of State Psychiatric Residential Facilities (PRTF): The department imposed a cap on the daily rate for out-of-state PRTFs at 133% of the in-state PRTF rate. This limit is necessary because some out-of-state providers have a usual and customary charge that is considerably higher than other out-of-state providers and higher than the daily rate paid to in-state PRTF facilities. The department can better manage costs by imposing a cap on the out-of-state PRTF rate.

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Outpatient Psychotherapy Sessions: Previous rule allowed for 24 outpatient psychotherapy sessions per state fiscal year without requiring a Serious Emotional Disturbance diagnosis. The department has limited this number of outpatient psychotherapy sessions to 10 to ensure that youth who need 11 or more sessions in a fiscal year have their treatment guided by the same criteria that is currently required beyond 24 sessions.

Children's Mental Health Bureau Utilization Review and reimbursement cont.

Utilization Review: Initial stays for Therapeutic Group Home (TGH) were previously authorized for up to 180 days. The department now authorizes up to 120 days for initial TGH stays. In addition the department has added prior authorization for genetic testing to determine if a youth is at risk for a mental health condition or to inform a prescriber of a youth's response to a certain drug.

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Home Support Services: Previously Home Support Service (HSS) providers could bill a daily rate every day of a 28 day period as long as they conducted a minimum of four contacts with the caregiver, two of which must be face to face. In addition, the provider was also required to conduct a minimum of two face to face contacts with the youth during the 28-day period. CMHB has restructured HSS to only allow reimbursement on days a contact was made and limiting the number of phone contacts that can be reimbursed to a number equal to the face-to-face contacts.

Additional Reductions from the November 2017 Legislative Special Session:

Reduce Services - Medicaid Targeted Case Management (TCM): The Special Session required additional reductions to Children's Mental Health TCM beyond those implemented on January 1, 2018. This reduction will require that the rate for TCM remain at the \$8.19 per unit through June 30, 2019.

Add Prior Authorization - Medicaid Partial Hospital Program: The Department will propose to add prior authorization to the Partial Hospital Program starting on July 1, 2018.

Additional Reductions from the November 2017 Legislative Special Session:

Reduce Grants - Youth Crisis Diversion Grants: General fund only grants for Youth Mental Health Crisis Diversion were reduced from 24 months to 12 months

Please contact Kandis Franklin for more information:
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Non-Medicaid Services Room and Board Account: Non-Medicaid Services Room and Board Account funding for the remainder of FY2018 and all of FY2019 was eliminated. The Supplemental Services Program (SSP) and System of Care Account (SOCA) will still have limited funds.

Contact Information for Children's Mental Health Bureau

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