

Medicaid Eligibility and Services for Children

Sarah Somers Managing Attorney National Health Law Program Advanced Juvenile Law: The Courts' Response to Children with Mental Health Needs May 12, 2016

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- Non-profit law firm working to improve health access and quality for low-income individuals and individuals with disabilities
 - <u>Activities</u>: Administrative advocacy, litigation, education, research, training
 - Offices: Washington D.C., Los Angeles, CA, Carrboro, NC
 - Website: www.healthlaw.org



Medicaid Eligibility and Services for Children

Overview of Session

- · Medicaid eligibility
- Medicaid services
- Questions



Youth in the juvenile justice system	
Majority are low-income and qualify for Medicaid Estimates: up to 75%	
Limitales. up to 73%	
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Health Needs	
Studies confirm importance of	
community-based services best practices and ADA early treatment and prevention	
avoidance of use of emergency departments	
HELP Medicaid Eighlity and Services for Children	
Medicaid	
Cooperative federal-state program U.S. Dep't Health & Human Servs., Centers for Medicare &	
N.C. Dep't Health & Human Servs., Delivers for wedicare & Medicard Servs. (CMS) N.C. Dep't Health & Human Servs., Division of Med. Assistance	
(DMA), Division of MH/DD/SAS Federal match of state funds (65%)	
NHELP Medicaid Eligibility and Services for Children	

Medicaid

- Covers certain children, elderly, people with disabilities, caretaker relatives
 - At state option, covers single, childless adults under 138 % of federal poverty level (FPL)
 - Option not taken in NC so far!
- Must have very low income and resources
- Generally, must be a citizen
 - Very few immigrants eligible (e.g. certain refugees) and are subject to limitations
 - Undocumented immigrants eligible only for coverage of emergency services



Medicaid Eligibility and Services for Children

Medicaid eligibility

- Children with low family incomes
 - Birth through 5 210% of FPL (about \$50,000 for family of four)
 - 6-19 133% of FPL (about \$31,000 for family of four)
- Foster and many adopted children
- Special needs and Title IV-E adoption
- · Children with disabilities
 - Children qualifying for SSI
 - Children on the CAP waiver programs
- Children in long-term care (out of home more than 12 months)



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Medicaid eligibility

- - Medicaid applications can be accepted
 - Majority of youth adjudicated delinquent serve probation
 - Many others not adjudicated delinquent NC Family and Children's Medicaid Manual 3360, http://info.dhhs.state.nc.us/olm/manuals/dma/fcm/man/



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Medicaid	
 Early and Periodic Screening, Diagnosis and Treatment Comprehensive program of screening and treatment 	
Must be covered for Medicaid-eligible children and youth	
up to age 21	
Reasons for EPSDT Children are not little adults	
 Adolescents are not big children 	
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Medicaid	
EPSDT is called "Health Check" in North Carolina	
"Health Choice" is a different program, NC CHIP	
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Wedicaid Eligibility and Services for Children	
Brook action the records	
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Health Check	
"Periodic" and "interperiodic" screenings	
 Set according to age, professional guidelines Medical, including psychological 	
Dental	
Lab tests, including lead blood levels	

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All treatment that fits in the categories described in the federal Medicaid Act

(42 U.S.C. § 1396d(a))

Necessary to "correct or ameliorate physical and mental illnesses and conditions," even if the service is not covered under the state plan.



Medicaid Eligibility and Services for Children

Covered Services, e.g.

- Physician services
- In- and outpatient hospital
- Services provided by licensed professionals (e.g.,
- Psychiatric residential treatment facilities (PRTF)
- "Rehabilitation" services



Medicaid Eligibility and Services for Children

List of covered services from statute

EPSDT Policy la 07:31:07 REV. 03:23:09 REV. 01:11:10

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Mental	health	services	covered	in
NC				

- Multi-systemic therapy
- Intensive in-home supports
- Assertive community treatment team
- In- and outpatient substance abuse treatment
- Case management
- Community support team



Medicaid Eligibility and Services for Children

Multi-systemic therapy

- Intensive, in-home treatment
- Designed for youth 7 to 17
- · With antisocial/aggressive behavior
- At risk of out-of-home placement due to delinquency OR
- Returning from out-of-home placement
- Can be used to address substance abuse, sexual abuse, sex offending
- · Involves families and other systems
 - School, probation officers, extended families, and community connections



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Intensive in-home supports

- Family preservation
- Team-based, in-home therapeutic resources
 - Medical and non-medical on CFT
- Monitor/manage psychiatric or addiction symptoms
- Prevention of out of home placement
 - Time limited
 - · Crisis response



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- A model for the U.S.
- Restates and explains EPSDT federal requirements
 - No waiting list for services
 - No monetary cap on total costs (except CAP)
 - No upper limit on hours or units
 - · No limit on number of visits to provider
 - No set list specifying when EPSDT services or equipment may be covered
 - No co-payment or other costs

NC Div. of Med. Assistance, EPSDT Policy Instructions Update, https://www2.ncdhhs.gov/dma/epsdt/epsdtpolicyinstructions.pdf



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EPSDT – Service Limitations

- Equally effective, less costly alternative
- Must be service listed in 1396d(a)
- Not "experimental"

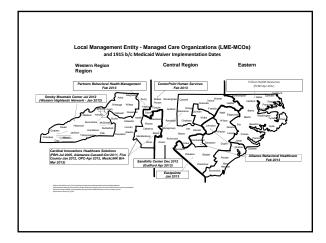


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Medicaid

- 1915(c) waiver
 - Innovations waiver for ID/DD
 - · Limited number, long waiting list
 - CAP-C (Community Alternatives Program for Children)
- For children who need institutional level of care
- Services not otherwise covered by Medicaid
 - e.g. respite, home modifications





The "Medical Home"

- Community Care of North Carolina
 - Very successful
 - Being phased out



Medicaid Eligibility and Services for Children

Medicaid Reform – Coming Soon

- Transforming system to capitated managed care
 - Prepaid Health Plans
 - Provider-led Entities
- Eligibility categories and services to remain the same
- Application to U.S. D.H.H.S. for 1115 Demonstration Waiver
 - Draft is public, final to be filed with HHS by June 1, 2016
 - Estimated completion July 1, 2019 at the earliest



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Prior authorization	
To control costs, prevent fraud	
Authorized by federal and state law and regulationsPer caselaw, should not excessively delay delivery of	
services	
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Prior Authorization	
NC Tracks, Provider Claims and Billing Assistance Guide EPSDT Policy Instructions	
"covered" v. "non-covered"	
Use of contractors	
Requests should be acted on with "reasonable promotocos" usually w/in 15 business days.	
promptness" usually w/in 15 business days • A loose requirement	

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Provider availability

Issues with incomplete information

- Federal Medicaid law requires
 - Rates sufficient to ensure provider supply comparable to private market (42 U.S.C. § 1396a(a)(30)(A))
 - Providing or arranging for corrective treatment (42 U.S.C. § 1396a(a)(43))



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- Notice and opportunity for hearing must be provided when:
 - Medicaid eligibility denied or terminated
 - Medicaid services denied, terminated, suspended or reduced
 - · Prior authorization denied



Medicaid Eligibility and Services for Children

Issues for discussion

- Variation between counties
 - LMEs/DSS offices
 - Juvenile court counselors
- Self-Incrimination
 - No statement made to a juvenile court counselor are admissible prior to the dispositional hearing. N.C. Stat. § 7B-2408.



Medicaid Eligibility and Services for Children

Litigation

- D.T.M. v. Cansler, No. 7:08-CV-57-H (E.D. N.C.) (settlement agreement)
- K.C. v. Cansler and Piedmont Behavioral Health, No. 5:11-cv-354-FL (settlement agreement)

Questions?

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