

Children and Youth with Special Health Care Needs and Medicaid



January 23, 2012

Children and Youth with Special Health Care Needs

- “Children and Youth who have or are at elevated risk for chronic health conditions which require specialized health and related services and supports of a type or amount beyond that required by children generally.”

Source: U.S. Maternal and Child Health Bureau

What are the “Five Doors” of RI Medicaid for Children?

- Rlte Care/Rlte Share - Children (up to age 19 years)
- Children in Substitute Care/Foster Care (up to age 21 years)
- Children with Special Health Care Needs (CSHCN) 9,742 enrolled as of 11/30/11 (6,902 in Managed Care and 2,840 in Fee for Service)
 - SSI
 - Katie Beckett (up to age 19)
 - Children in Subsidized Adoption (up to age 21)

CY 10' Expenses



- **Subsidized Adoption**
 - \$12.8 million
 - Average Eligibles 2,153
 - PMPM \$495.52
- **SSI**
 - \$93.3 million
 - Average Eligibles 5,890
 - PMPM \$1,325.87
- **Katie Beckett**
 - \$29.3 Million
 - Average Eligibles 1,227
 - PMPM \$1,994.39

Who/What is Katie Beckett?

- Medicaid coverage group named after a child named Katie Beckett who had been hospitalized for 3 years
- Congress approved this optional Medicaid coverage group for states in 1982
- RI one of only 20+ states with a Katie Beckett coverage group
- Katie Beckett = RI Medical Assistance/RI Medicaid

Criteria for Katie Beckett Coverage Group Eligibility

- Birth to age 19
 - Federal Disability Criteria (SSA) **required**
 - Institutional Level of Care **required**
 - Hospital (Medical or Psychiatric)
 - Nursing facility
 - ICF/MR (Group Home for the mentally retarded)
 - Child's income (3x SSI limit) and assets <\$4,000
 - Level of care provided at home is appropriate/safe and cost effective
 - Regardless of eligibility pathway, RI Medicaid provides the same covered benefits. **Katie Beckett does not provide "special services."** Katie Beckett is a CSHCN group.

Important Facts about these “Five Doors” to RI Medicaid for Children

- RI Medicaid benefits are the same for all children, regardless of the “door” of eligibility. The differences among the “doors” are in the eligibility criteria, not the benefits.
- Families may have several eligibility group choices or one choice. Some children with special health care needs may not meet any eligibility “door” to RI Medicaid
- All “doors” have an annual re-determination

What are the Delivery System Options for Children and Youth with Special Health Care Needs (CYSHCN)?

- **Managed Care or Medicaid Fee-for-Service Delivery System**
 - **Neighborhood Health Plan of Rhode Island**
 - **United Health Care**
 - Offers RItE Care Managed Care benefits *plus* Care Management to children with SSI, Katie Beckett and Adoption Subsidy who have no other health insurance

Medicaid Fee-for-Service

- SSI, Katie Beckett and Adoption Subsidy with other health insurance.

RI Medicaid Medical Necessity Definition

- “Medical, surgical or other services required for the prevention, diagnosis, cure or treatment of a health-related condition, including such services necessary to prevent a *decremental* change in either medical or mental health status”

Early and Periodic Screening, Diagnosis and Treatment (EPSDT)

- EPSDT provides for preventive and comprehensive health services up to the 21st birthday
- Growth and development are assessed through initial and periodic exams/evaluations according to the RI EPSDT Periodicity Schedule (recently updated)
- EPSDT covers referrals for diagnosis and treatment of all identified health concerns

RI Medicaid EPSDT Services for Children

- **Private Duty Nursing**
- **Certified Nursing Assistant**
- **CEDARR Family Centers**
 - CEDARR Direct Services
- **Other DME and home care medical supplies**
 - e.g. standers, wheelchairs, modular ramps, catheters, disposable gloves, (and diapers, liners and under pads for children over 3 years of age)

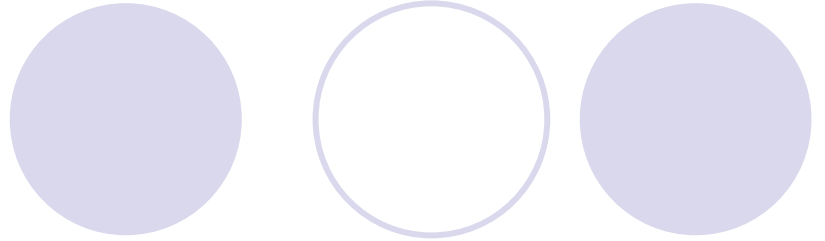
RI Medicaid Benefits: In - Plan [Rite Care Health Plan Card]

- **Physician**
- **Hospital Care**
- **Behavioral Health
(mental health and
substance abuse)**
- **X-ray/Diagnostic**
- **Laboratory testing**
- **Pharmacy**
- **Physical Therapy**
- **Occupational
Therapy**
- **Speech/Language
Therapy**
- **Durable Medical
Equipment (DME)**
- **Early Intervention
Services**

RI Medicaid Benefits: Out - of - Plan [MA Card - White card w/Blue Anchor]

- **CEDARR Family Center Services**
- **CEDARR Direct Services**
- **Fee-for-Service Dental Services**
- **Certified Lead Center Services**
- **Child and Adolescent Intensive Treatment Services (CAITS)**
- **Medicaid-covered Services identified through an Individualized Education Program (IEP)**

C E D A R R



- C Comprehensive
- E Evaluation
- D Diagnosis
- A Assessment
- R Referral
- R Re-evaluation

CEDARR Core Principles

- Family centered
- Evidence based practice
- Family supports
- Community supports
- Clinical expertise for all disabilities
- Data driven

Capacities of CEDARR Family Centers

- Basic Services and Supports
 - Provision of Special Needs Resource Information, System Mapping and Navigation, Resource Identification, Eligibility Assessment and Application Assistance, Peer Family Support and Guidance
 - Enhanced Services (Health Needs Coordination, Therapeutic Counseling and Groups)
- Initial Family Intake and Needs Determination (IFIND)
- Family Care Plan Development
- Family Care Plan Review and Revision

CEDARR Enrollment (as of 1/1/2012)

- 2591 Enrolled Children
 - About Families CEDARR- 1053 members
 - Solutions CEDARR- 897 members
 - Empowered Families CEDARR- 281 members
 - Families First CEDARR- 360 members
- 1581 Children Receiving one or more Direct Service (61% of Caseload)
- SFY 2011 Costs \$5.8 million

CEDARR Health Homes



- State Plan Amendment approved by CMS in November 2011
- Provides enhanced Federal match for CEDARR Services
- Enhanced Services to Children and Families
 - Screening for secondary conditions (yearly BMI and Depression screening)
 - Additional re-imburement to PCP's to engage in Care Planning and dashboard report developed to share CEDARR information with PCPs
 - Enhanced Information sharing between CEDARR and Medicaid Managed Care Plans

Satisfaction with CEDARR Services

Domain	% Strongly Agree or Agree
Family Centeredness – This measures the families’ satisfaction with their ability to participate in setting goals, developing treatment plans and the responsiveness of the CEDARR.	93.33%
Quality of IFIND and Family Care Plan process – This measures the families’ satisfaction with the IFIND and Family Care Plan process and end product	96.67%
Satisfaction with the CEDARR Services – This measures the families’ overall satisfaction with the CEDARR.	90.99%

Direct Services & CEDARR

- CEDARR assesses needs with family and child
- Possible range of service options are identified including CEDARR Enhanced Services and/or CEDARR Direct Services
- Family is given provider options
- Referral sent to provider with recommended number of treatment hours
- When services are to begin the CEDARR shares the assessment and care plan with the family's chosen provider

CEDARR Direct Service Implementation



- Direct Service Provider conducts focused assessment with child and family
- Provider develops Treatment Plan with the family
- Proposed plan is reviewed/approved by CFC
- CFC is responsible to communicate with providers frequently
- Provider staff are invited to family meetings



CEDARR Direct Services

- Home Based Therapeutic Services (HBTS)
- Personal Assistance Services and Supports (PASS)
- Kids Connect
- Respite for Children

Home Based Therapeutic Services (HBTS)



- Provides home and community services to children up to age 21 with significant behavioral health, developmental and physical disabilities
- 1:1 therapeutic services given to a child in a home or community setting by paraprofessionals
- HBTS may not exceed 40 hours per week
- 6 different HBTS services: Intensive, Treatment Support, ABA, pre, post and group

HBTS Today



- 13 Certified HBTS Provider-Agencies
(7 ABA providers)
- 511 Children Currently Receiving
HBTS
- SFY 2011 Costs - \$14 million

KIDS CONNECT Program

- Goal is to allow children and youth with special health care needs to participate in child and youth care (Medicaid-eligible)
- Focus is on inclusion with peers who are typically developing
- Not intended to replace other services such as Early Intervention, Special Education or Head Start
- 142 children receiving KIDS CONNECT
- 10 KIDS CONNECT Providers
- SFY 11 Costs \$1.8 million

KIDS CONNECT – Direct Services



- Provides interventions in the child or youth care setting
- Work under supervision of licensed health care professional
- Goals can include:
 - Increase communication with and understanding others
 - Involvement in activities with typically developing peers
 - Opportunities for social interactions
 - Develop independent skills
 - Decrease aggression or other maladaptive behaviors
 - Learn program-solving skills

Personal Assistance Services and Supports (PASS)

- Strength based *and* consumer directed approach
- Families play central role
 - Family selects, trains and supervises worker
 - Employer of record is PASS Agency
 - Reduces dependency on outside agencies
- Great number of support workers are family, friends and neighbors (tap into an underutilized workforce)

Goals of PASS



- Foster and enhance a child's independence, social integration skills, and his/her community involvement and participation
- Facilitate the transition of Children with Special Health Care Needs from the child's system of care to the adult system of care

PASS Services



- Assessment and Service Plan Development
- Direct Services
- Service Plan Implementation
- Clinical Consultation
- More than 1022 children receiving services
- 11 PASS Providers
- SFY 11' Costs \$ 17.6 million

Respite for Children

- Allows caregivers of Children with Special Health Care Needs to have a break from care giving responsibilities
- 100 hours of Respite per year
- Workers located, trained and supervised by families (similar to PASS)
- 5 Providers
- 579 children receiving services
- SFY 11' Costs \$ 662,000

Thank You

