

UNDERSTANDING AND NAVIGATING THE RESIDENTIAL TREATMENT PLACEMENT PROCESS

BRYAN MOELLER
PROGRAM MANAGER, FLUVANNA COUNTY CSA



HOWDY!

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What is a residential placement?

This is a form of mental/behavioral health treatment licensed by the Virginia Department of Behavioral Health and Developmental Services that requires the youth to reside outside of either their family home (for youth not in foster care) or a foster care home (for youth in foster care), as the treatment requires intense levels of supervision and restriction of geographical movement to ensure the safety of the youth.

Types of Residential Treatment Programs

Therapeutic Group Home (TGH)

- Less restrictive placement
- Many have a focus on Independent Living Skills

Psychiatric Residential Treatment Facility (PRTF)

- Most restrictive placement
- Movement between areas is heavily controlled
- Includes on-site education

Wilderness Program (Currently no active programs in Virginia)



Should Residential Be Pursued?

What Community-Based Services have been attempted/used?

- Mentoring
- Counseling (Outpatient, Intensive In-Home Services, etc)
- Evidence-Based Practices (Functional Family Therapy, Multi-Systemic Therapy)

Is this an In-Home/Family Support case being managed by DSS?

If the youth is currently hospitalized, what are the service recommendations being made by the youth's treatment team?

(Youth in Foster Care ONLY) Has a foster home been located and secured?



Eligibility for Residential Placement

CSA Parental Agreement

- ▶ Youth that are CHINS-eligible

Youth in Foster Care

- ▶ Depends on youth's level of safe behavior

Youth with an Individual Education Plan (IEP)

- ▶ Least Restrictive Environment **must** state “Residential Education / Residential School”

Youth with Parents that have a Non-Custodial Foster Care Agreement

- ▶ This is the only time that a LDSS' In-Home/Family Support team may manage a residential placement.

NOT ELIGIBLE FOR RESIDENTIAL PLACEMENT

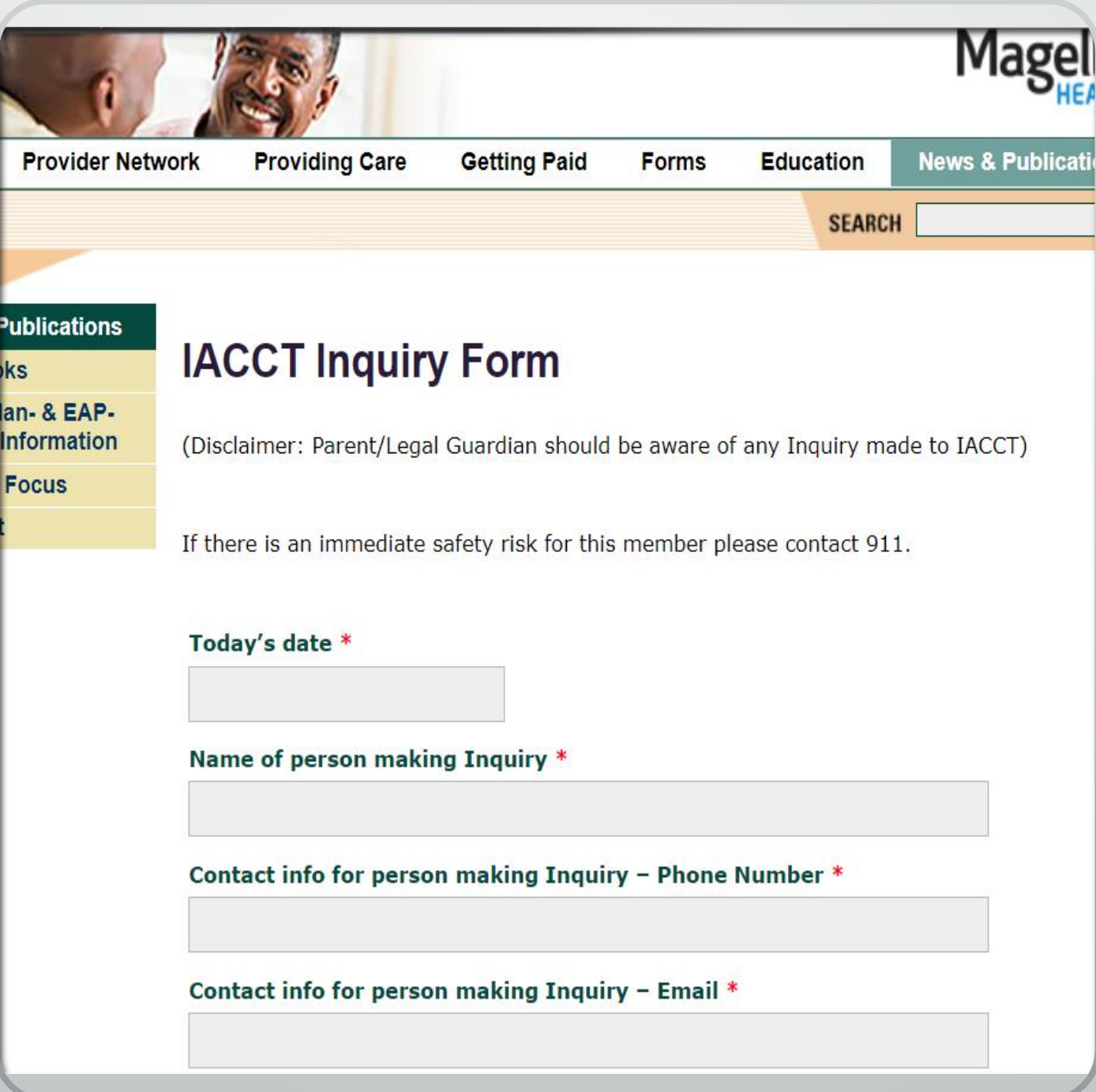
In-Home/Family Support Cases

Youth with IEPs whose Least Restrictive Environment **does not** state “Residential Education / Residential School”

IACCT Process

- Short for Independent Assessment, Certification and Coordination Team
- Required for all Medicaid-eligible youth
- Determines level of care (PRTF vs. TGH vs. Community-Based Services)
- MUST be completed prior to the start of a residential placement
- **BEST PRACTICE:** Initiate this before securing the residential placement
- It is encouraged to have a new CANS completed (Comprehensive Tool)
- Requires a Certificate of Need (CoN) from the IAACT assessor and the youth's physician.
 - This can **NOT** be completed by a Nurse Practitioner.
 - If the youth is in a acute treatment facility, the facility's physician may complete this.
 - Also provide a copy to the CSA Office

IACCT Inquiry Form



The screenshot shows the Magellan Health website interface. At the top right is the Magellan Health logo. A navigation bar contains links for Provider Network, Providing Care, Getting Paid, Forms, Education, and News & Publications. Below the navigation bar is a search bar with the word "SEARCH" and an input field. On the left side, there is a sidebar menu with categories: Publications, Books, Plan- & EAP-Information, and Focus. The main content area is titled "IACCT Inquiry Form" and includes a disclaimer: "(Disclaimer: Parent/Legal Guardian should be aware of any Inquiry made to IACCT)". Below the disclaimer is a warning: "If there is an immediate safety risk for this member please contact 911." The form contains four required fields, each with a red asterisk: "Today's date", "Name of person making Inquiry", "Contact info for person making Inquiry - Phone Number", and "Contact info for person making Inquiry - Email".

Magellan
HEALTH

Provider Network Providing Care Getting Paid Forms Education News & Publications

SEARCH

Publications
Books
Plan- & EAP-Information
Focus

IACCT Inquiry Form

(Disclaimer: Parent/Legal Guardian should be aware of any Inquiry made to IACCT)

If there is an immediate safety risk for this member please contact 911.

Today's date *

Name of person making Inquiry *

Contact info for person making Inquiry - Phone Number *

Contact info for person making Inquiry - Email *

IACCT Process (cont.)

- Recommendation meeting determines the *highest level of care* Medicaid will authorize.
- Results of recommendation remain active for the length of the Certificate of Need (typically 30 days)
- If a placement has not started during this period, a re-assessment will need to be performed.
 - Contact the IACCT RCM to coordinate the process.

Which Placement type is best for the youth?

Therapeutic Group Home

- Less restrictive
- Average length of stay: 6-18 months
- More educational options
- Develops Independent Living skills
- High risk of criminal activity, substance use, or elopement.

PRTF

- Most restrictive environment
- Average length of stay: 3-12 months
- Very intensive levels of therapeutic services
- Education occurs onsite
- Greater risk of traumatic event

FAPT/CPMT Approval Process

Step 1: Locate/ Secure Placement

1. Contact all placements on the list of Medicaid-eligible providers
 - Be sure to document any facility reason for declining the youth
2. (Residential Placement via IEP) Make sure that the placement is as geographically close as possible to Fluvanna County.¹
3. Confirm both the earliest and latest dates of admission.
4. Request the youth be placed on the next scheduled FAPT meeting agenda.

Step 2: FAPT/CPMT

1. Schedule case for the next available FAPT meeting.
2. During the FAPT meeting, complete any additional processes needed for the youth to have the placement eligible for CSA funding (CHINS determination for CSA Parental Agreement, etc).
3. Case goes to CPMT for approval of funding for placement.

Step 3: Admission Preparation

1. If the youth has an IEP, contact the youth's IEP case manager immediately, to change the Least Restrictive Environment to "Residential Education", to start on the day of admission.
2. If placement is occurring as a result of a CSA Parental Agreement, parents will need to sign the CSA Parental Agreement (to be provided by the CSA Office to the youth's CSA Case Manager before the date of admission).

- No safe alternative
 - ❖ Entering Foster Care via Emergency Custody, no foster homes available.
 - ❖ Youth determined by acute care facility's treatment to be too unsafe to return to the community or family home.
- Youth will lose placement if not placed by a certain date (aka “drop dead” date).

Otherwise, the standard FAPT/CPMT approval process needs to be followed.

REASONS FOR PURSUING EMERGENCY APPROVAL:

(Note: Youth must already have their eligibility determined **prior** to the request being made)



YOUTH WITHOUT MEDICAID POLICIES

After the youth is at their residential placement for 30 days, the youth's parents/custodians must apply for Medicaid on the youth's behalf.

- Many residential programs can assist the families with this application.**
- This also applies to youth in out-of-state placements.**



OUT-OF-STATE PLACEMENTS

- Should be pursued after all in-state options have denied the youth admission.
- Medicaid-eligible programs must still be pursued first.
- Partner with the CSA Coordinator on identifying out-of-state facilities.

INTERSTATE COMPACT FOR THE PLACEMENT OF CHILDREN (ICPC)

Applies to five situations:

1. Placements preliminary to an adoption
2. Placements into foster care, including foster homes, group homes, residential treatment facilities, and institutions.
3. Placements with parents and relatives when a parent or relative is not making the placement.
4. Placements of adjudicated delinquents in institutions in other states.
5. Placements through parents. (Regulation 4 placement)



1-4: Source: "Virginia's Guide to the Interstate Compact on the Placement of Children", Virginia Department of Social Services

5: Source: "ICPC Regulation 4 Checklist Residential Placements", ICPC Unit, Virginia Department of Social Services

HOW TO INITIATE AN ICPC REFERRAL

Email to vaicpcoffice@dss.virginia.gov:

COVER LETTER INCLUDES THE FOLLOWING: PARENTAL AND LDSS PLACEMENTS

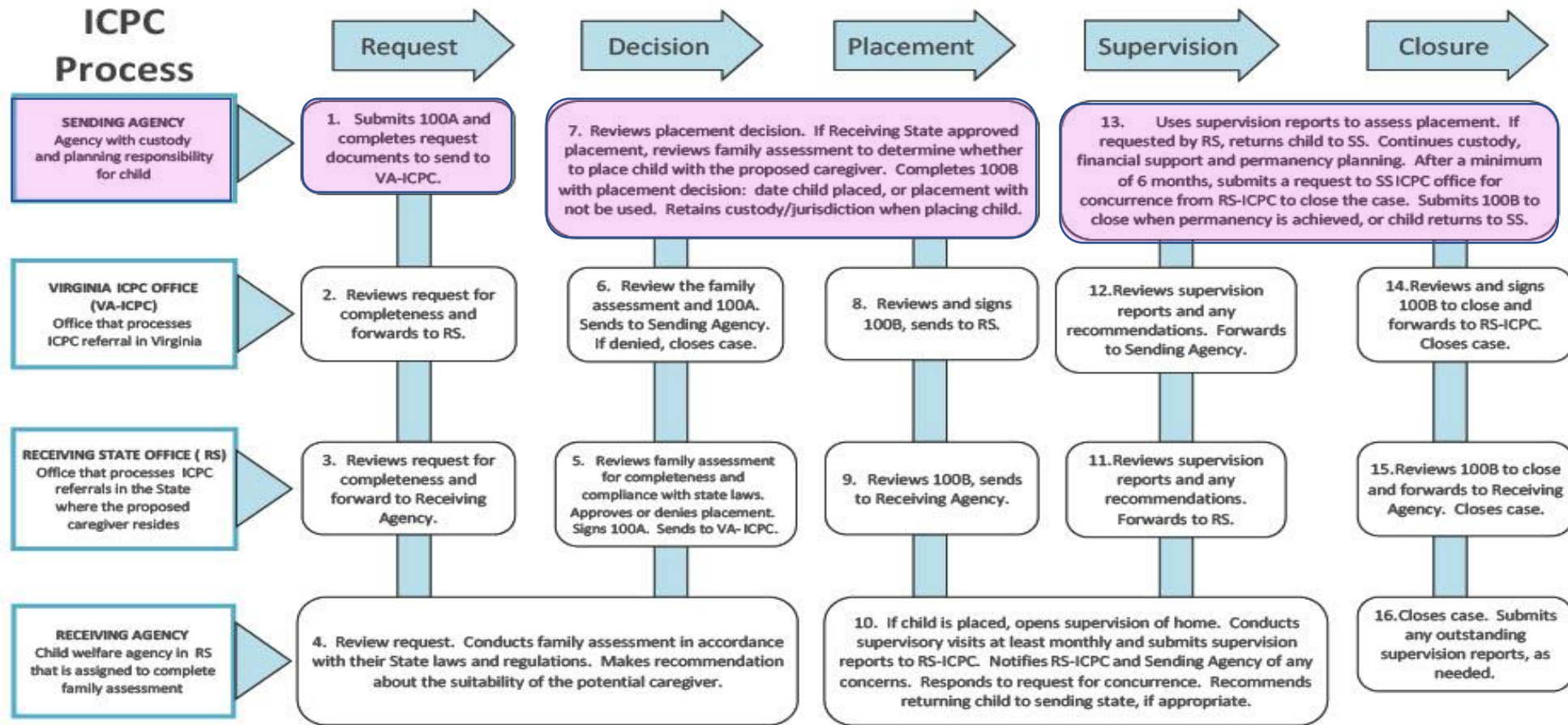
- Contact information of worker completing the form.
- Parental Information
- Reason out of state placement is being pursued
- Statement indicating who currently has legal custody
- Plans for meeting the costs of care for child in other state

ADDITIONAL REQUIRED DOCUMENTS TO BE INCLUDED IN REFERRAL PACKET IF IN LDSS CUSTODY:

- 100 A (uploaded as a separate document WITHOUT the instructions)- See Example
- Financial/Medical Plan
- Most Recent Physical Exam
- Custody Order
- Acceptance Letter -Dated within 30 days of the referral
- Disruption Statement



VIRGINIA DEPARTMENT OF SOCIAL SERVICES



*All documents are sent through the NEICE system.

WAIT!!!

What about Medicaid reimbursement for these
out-of-state placements?

SETTING UP A BEHAVIORAL HEALTH SERVICES ADMINISTRATOR (BHSA) SINGLE CARE AGREEMENT

Email enhancedbh@dmas.virginia.gov to start the process.

As of this writing, Virginia Department of Medical Assistance Services is in the process of developing the process for establishing these Agreements.



QUESTIONS?

THANK YOU FOR ATTENDING!

