

A photograph of a person holding a child's hand. The child is wearing a blue backpack. The background is blurred, suggesting an outdoor setting. The text is overlaid on the image.

Medicaid Resources to Support children and Families at Risk of Out-of- Home Placement

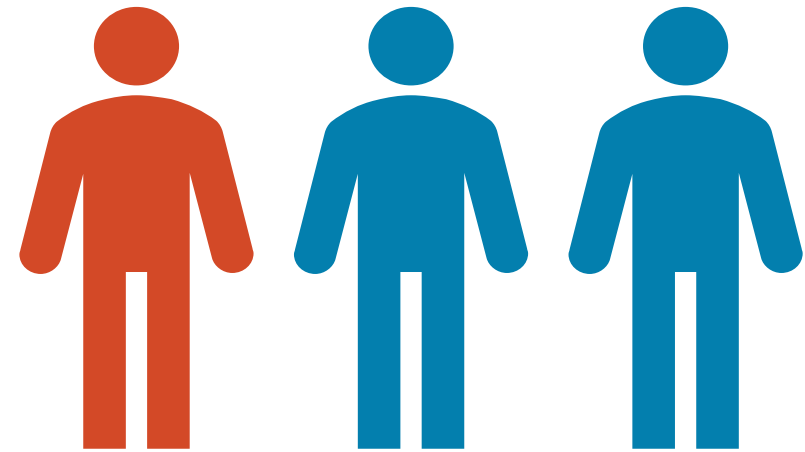
Juvenile Justice Committee

August 24, 2023

Mandy Dendy, Coverage Policy Director, ND Medical Services



About 1 in 3 North Dakota children are Medicaid-eligible



Out-of-home placement risks

Adverse Childhood Experiences (ACES)

Disability

Serious
Emotional
Disturbance
(SED)

Substance
use
disorders

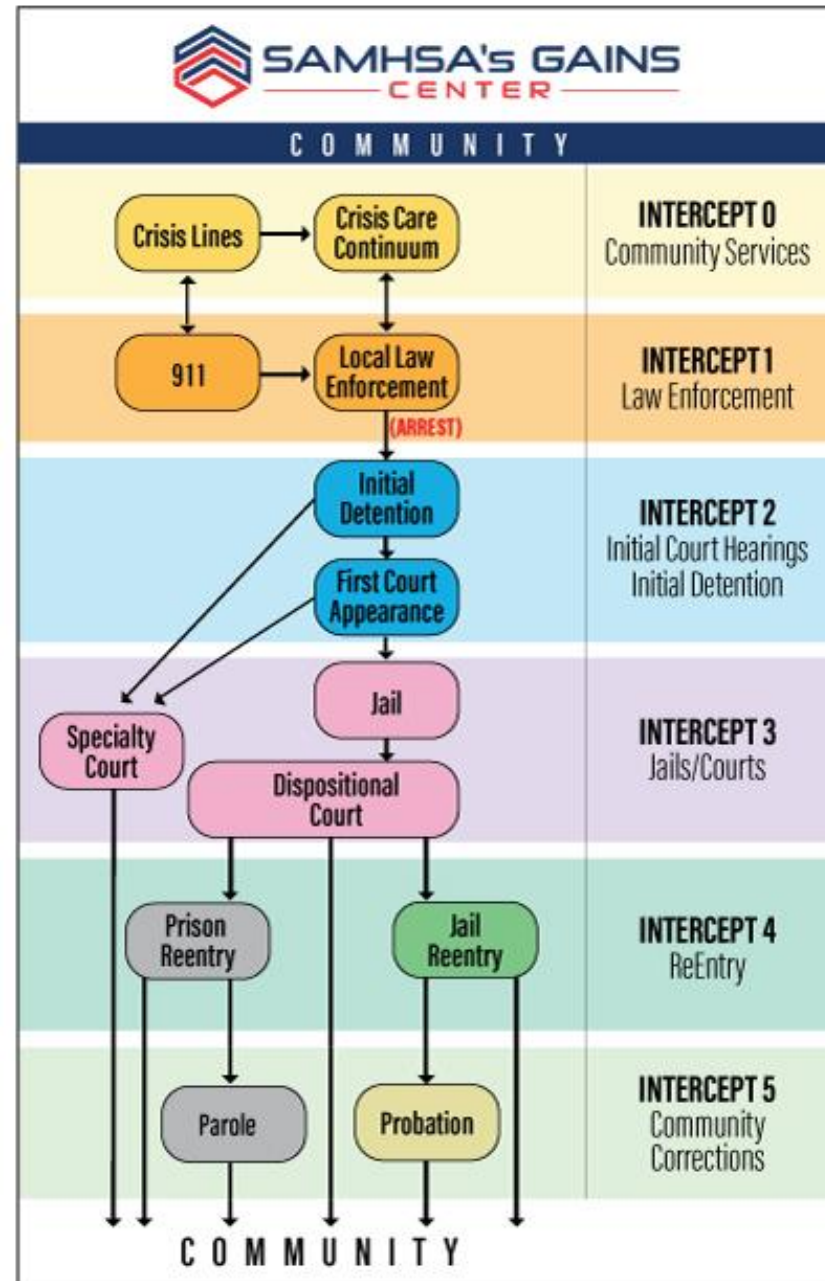
Mental
health
struggles

Trauma

Violence/
Conflict

Sequential Intercept Model (SIM)

- Substance Abuse and Mental Health Services Administration (SAMHSA) model for how individuals with mental health & substance use disorders come into contact with and move through the criminal justice system.



Risk identification, intercept, & mitigation points for youth and families



Schools



Homes



Providers,
Clinics,
Health
Centers



Communities



Justice
system

Services and Supports



Preventive
& Dyadic
Services



Community
Services



Crisis
Services



Residential
Services



Transitional
Services

North Dakota Medicaid covers a range of services and supports for youth who are at risk of out-of-home placement or who are placed out of home.

There is also support for families.

Preventive & Dyadic Services

+ and – a diagnosis
Youth & family



Schools



Homes



Providers,
Clinics, Health
Centers



Communities



Justice
system

EPSDT/Health Tracks Benefit for youth through age 20

EPSDT stands for Early and Periodic Screening, Diagnostic, and Treatment

Medicaid-eligible children 3+ are recommended to receive annual well child visits (under age 3 more frequently).

Recommended EPSDT Periodicity Schedule:

newborn	2 month	9 month	18 month
3-5 days	4 month	12 month	24 month
1 month	6 month	15 month	30 month
Or age 3 through age 20, annually			

[Health Tracks Information for Members or Families webpage](#)



EPSDT/Health Tracks Benefit

Comprehensive Health Tracks screenings can discover potential problems with a youth's

- physical, mental, and dental health; development, hearing, vision, and more.

Diagnostic tests can be performed when risks are identified through these screenings.

Then treatment can begin to control, correct, or reduce health problems discovered in the screenings.

This benefit is designed to ensure that eligible children and adolescents receive the right care at the right time in the right setting.



Did you know? – Health Tracks

ND Health Tracks Member Outreach will:

- Assist families in finding a provider
- Provide interpretation services so families can visit with a Health Tracks team member
 - Call (701) 328-2014 (then press 1) or email HTmemberoutreach@nd.gov

Families can contact the Customer Support Center for transportation assistance.

- Call (866) 614-6005 or email applyforhelp@nd.gov



Important piece of a bigger picture

North Dakota Medicaid will cover medically necessary treatment for youth with/without these screenings.

**Health Tracks/EPSDT Screenings =
Risk identification and mitigation**

Sick-child visits do not substitute for regular well-child checkups.



Youth Developmental Screenings & Brief Behavioral Assessments

Can be done at a:

- Well-child visit
- Problem-focused visit
- Other EPSDT visit

Resource:

<https://www.hhs.nd.gov/healthcare/medicaid/provider/manuals-and-guidelines#collapse-accordion-18910-2>

Developmental screen

- milestones,
- speech & language delay

Emotional/behavioral assessment

- depression,
- ADHD,
- suicidal risk,
- anxiety,
- substance use,
- eating disorders

Parents



Increased maternal Medicaid coverage

Mothers who enroll with ND Medicaid before giving birth are now eligible for twelve months of Medicaid coverage.

This means:

- Access to checkups after birth
- Behavioral health services
- Preventive care like mammograms and cervical screenings
- Dental care
- Vision and Hearing screenings
- Chiropractic care
- and more

DYADIC SERVICES (youth & family)

Source:

<https://www.hhs.nd.gov/health-care/medicaid/provider/manuals-and-guidelines#collapse-accordion-18910-2>

Maternal Depression screenings within a child's first year when performed in conjunction with a

- Health Tracks Screening (1, 2, 4, and 6 month visits on periodic schedule),
- well-child check, or
- any other pediatric visit.

This service is billed to the child's Medicaid number.

North Dakota Medicaid Expansion covers more North Dakotans

Ages 19 to 64 Years Old

Household size & Modified
Adjusted Gross Income (MAGI) at
or below 138% FPL

North Dakota Resident & U.S.
Citizen or “Qualified” Alien

Do not have Medicare or
Supplemental Security Income
(SSI)



Adult wellness checks

Wellness checks for members are covered annually. These are comprehensive screenings appropriate to the member's age and circumstances.

Screenings

- chronic disease/conditions,
- reproductive health,
- depression,
- suicidal risk,
- anxiety,
- substance use

Community Services & Supports

+ diagnosis
Youth & Family



Schools



Homes



Providers,
Clinics, Health
Centers



Communities



Justice
system



Youth and Adults

Targeted Case Management (TCM)

Services to assist eligible youth and adults in gaining access to needed:

- Medical
- Social
- Educational and
- Other services necessary for appropriate care and treatment.

Policies:

[Serious Emotional Disturbance/Serious Mental Illness](#)

[Child Welfare](#)

Targeted Case Management (TCM) populations

Serious Emotional Disturbance (SED) (youth)

- Be under age 21 and Medicaid eligible with a mental health disorder diagnosis* expected to last 1 year+; and
- Score of 25+ on WHODAS 2.0; and
 - Be having a psychiatric crisis or emergency which requires emergency intervention to prevent institutional placement; or
 - In need of long-term mental health services.

Serious Mental Illness (SMI) (adults)

Be 18+ years old, Medicaid eligible and chronically mentally ill with the condition expected to last 1 year+; and

Score of 25+ on WHODAS 2.0; and at least one of the following:

- undergone psychiatric treatment more intensive than outpatient services 1+ times; or
- a history of documented problems resulting from mental illness for 1+ year(s) verified by family or local provider; or
- experienced a single episode of continuous structured supportive residential care other than hospitalization for at least two months.

Child Welfare

Medicaid eligible; and a victim in an abuse or neglect report with a finding of 'Services Required' or 'No Services Required'

OR

Receiving services dictated by a court order or voluntarily; and

Served by HHS, County Social Service Board, Division of Juvenile Services, or a ND federally recognized Indian tribe/Indian Tribal Organization

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1915i: Home and Community-Based Behavioral Health Support

hhs.nd.gov/1915i



Services

- **Care Coordination- 0+**
- **Training & Support for Unpaid Caregivers- 0+**
- **Community Transition Services- 0+**
- **Benefits Planning- 0+**
- **Non-Medical Transportation- 0+**
- **Respite- 0-21**
- **Pre-Vocational Training- 16+**
- **Supported Education- 5+**
- **Supported Employment- 14+**
- **Housing Support- 17.5+**
- **Family Peer Support- 0-18**
- **Peer Support- 18+**

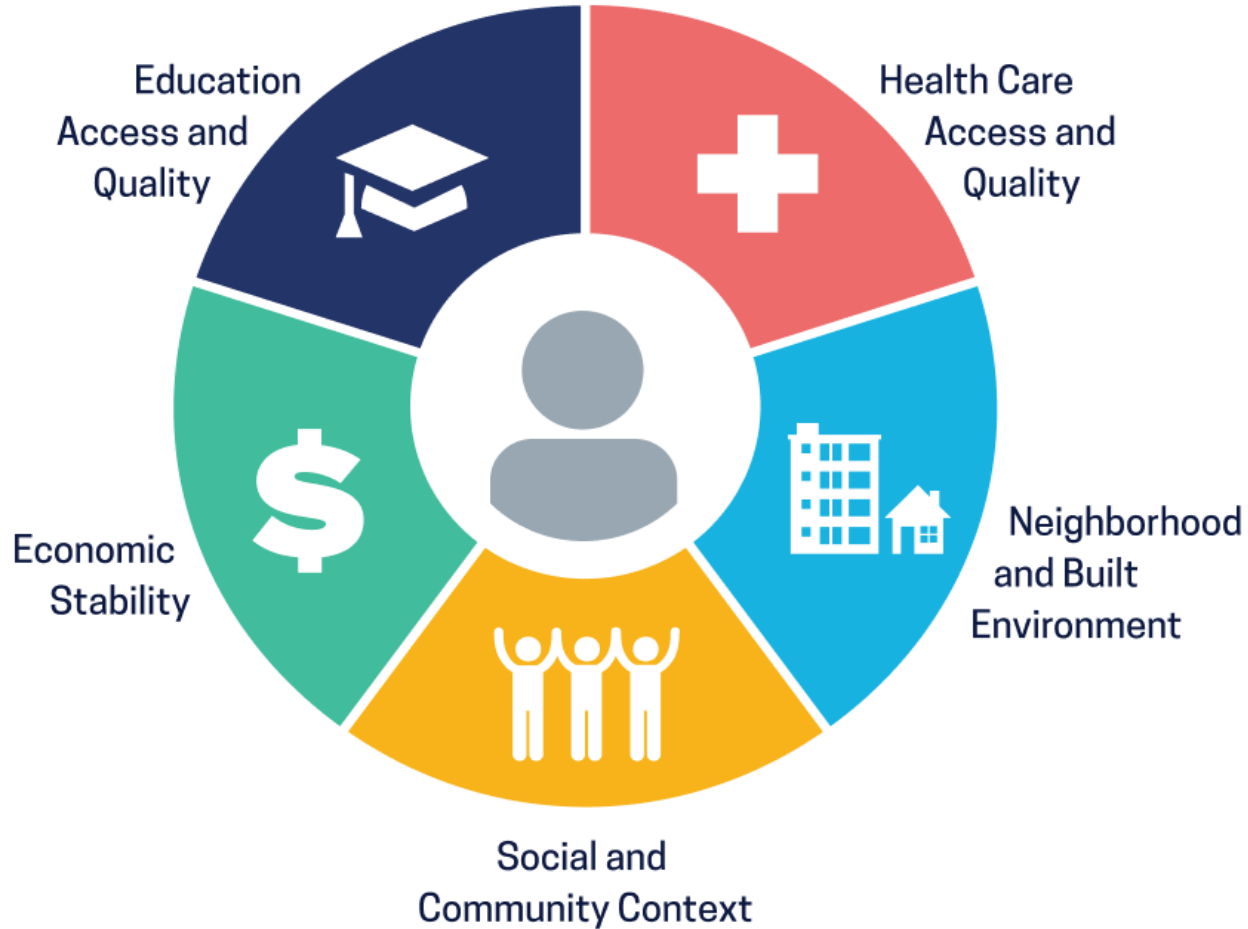


Eligibility Requirements:

- **Age: 0+**
- **Qualifying Behavioral Health Diagnosis**
- **WHODAS Score 25+**
- **Household Income at or below 150% FPL**
- **Residence Meets Home and Community Based Settings Rule**



Social Determinants of Health



1915(i) includes services which relate to the social determinants of health, such as Benefits Planning, Housing Support, Supported Education, Supported Employment, and Peer Support.

Behavioral Health Rehabilitative Services

Provider Manual



Services

Assessments

- Screening, Triage, and Referral Leading to Assessment
- Behavioral Assessment
- Nursing Assessment and Evaluation
- Assessment for Alleged Abuse and/or Neglect & Recommended Plan of Care (formerly Forensic Interview)

Counseling & Therapy

- Behavioral Health Counseling and Therapy
- Individual or Group Counseling

Skills Teaching & Practice

- Skills Restoration
- Skills Integration

Interventions

- Behavioral Intervention
- Crisis Intervention
- Intensive In-Home for Children



Eligibility Requirements:

- Age: youth and adults
- At risk of entering or reentering a mental health facility or hospital & WHODAS 2.0 score of 25+; and/or
- Need substance use disorder (SUD) treatment services; and/or
- Have a mental health disorder and be
 - from a household that is in crisis and at risk of major dysfunction that could lead to disruption of the current family makeup; and/or
 - in a family that has experienced dysfunction resulting in disruption of the family.



Provider qualifications

Service must be recommended by a practitioner of the healing arts

This requirement is unique in that it allows for the leverage of a broader workforce to deliver the services.

Behavioral health rehabilitative services can be delivered by unlicensed practitioners so long as they are qualified to furnish services and their qualifications include a brief summary of

- Certification,
- Registration,
- Education,
- Training, or
- Experience; and
- Applicable supervisory requirements for unlicensed practitioners.

Qualified Providers

Other Licensed Providers (OLPs)	Non-OLP Providers
Licensed Clinical Social Workers (LCSWs)	Licensed Baccalaureate Social Workers (LBSWs)
Licensed Professional Clinical Counselors (LPCCs)	Licensed Master Social Workers (LMSWs)
Licensed Professional Counselors (LPCs)	Licensed Exempt Psychologist
Licensed Marriage and Family Therapists (LMFTs)	Licensed Associate Professional Counselor (LAPC)
Licensed Addiction Counselors (LACs)	Registered Nurses (RN)
Psychologists (excluding school psychologists)	Behavioral Modification Specialists
	Mental Health Technicians

Service Name	Definition of Services	Billing Code
Intensive in-home for Children	<p>This service provides the Medicaid-eligible child(ren) and their family with intensive in-home crisis intervention and family education, to prevent one or more children from being placed in out-of-home care. The service must be for the direct benefit of the Medicaid-eligible child. Services are furnished in the child's home. Providers are on call 24 hours a day, seven days a week. Services are time-limited and providers carry a limited caseload.</p> <p>Family education is the practice of equipping family members to develop knowledge and skills that will enhance their ability to help restore the Medicaid- eligible child to the best possible functional level.</p> <p>A child is at risk if the referring agency documents the child is at risk of out-of-home placement and one or more of the following criteria is present:</p> <ul style="list-style-type: none"> • Court determination for need of placement; • Temporary custody transferred from parents with reunification as the plan; • History of significant law violation, physical or sexual abuse and/or neglect, incorrigibility, delinquency, substance abuse, severe mental health issues, etc.; • A referral from the child and family team process; • Prior placement of any child from within the family unit; • Prior placement history of child identified in the referral; • Prevent adoption disruption; • Child protection assessment resulting in a "Services Required"; and/or • Earlier intervention before court order involvement to prevent placement outside the home. <p>Situations not covered above will be reviewed by ND Medicaid per a recommendation and proposed care plan from Intensive In-Home Service provider and the referring agency.</p> <p>This service must take place in the home where the child resides. Parents/guardians must be physically present while the service is being delivered.</p> <p>The length of service is brief, solution-focused and outcome-based. The average length of service is usually two to six months. Services provided beyond six months will require thorough documentation in the child's plan of care and are subject to audit.</p>	S9482

Intensive In-home treatment for children

- Child and family service for benefit of the child(ren) to prevent out-of-home care
- Available 24/7
- At-risk
- In-home service

Crisis Intervention

Crisis Intervention	Emergency behavioral health therapeutic intervention intended to assist in a crisis situation. Crisis situations may be defined as an individual's perception or experience of an event or situation that exceeds the individual's current resources or coping mechanisms. Crisis intervention seeks to stabilize the individual's mental state and prevent immediate harm to the individual or others in contact with that individual. Crisis intervention includes facilitating emotion regulation, safety planning, providing support, providing guidance for preventing future crisis, promoting mobilization of emotion regulation skills, implementing order, and providing protection. Providers rendering crisis intervention services must be available 24 hours per day, 7 days per week, if the individual needs further follow up services.	H2011^
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Emergency 24/7 Service

- Stabilize & prevent harm
 - facilitating emotion regulation,
 - safety planning,
 - providing support,
 - providing guidance for preventing future crisis,
 - promoting mobilization of emotion regulation skills, implementing order, and
 - providing protection.

DYADIC SERVICES (youth & family)

Skills Restoration

Skills Integration

Therapy and/or treatment that involves the participation of a family member/collateral and/or other non-Medicaid eligible individual(s) is for the direct benefit of the member, in accordance with the member's needs and treatment goals identified in the member's treatment plan and for assisting the member's recovery. The general expectation is that the member would be present for the service with the non-member; however, there may be some treatment session(s) where the practitioner's judgment is not to include the member.

Services provided to the client or on behalf of the client to someone other than the client.

DYADIC SERVICES (youth & family)

Psychotherapy*

Individual

Family psychotherapy

- with and
- without the patient present

*Not a state plan Behavioral Health Rehabilitative Service. Can be provided by qualified providers within their scope of practice.

School-based Medicaid Services

Medicaid services can be delivered to eligible students by

- school-employed practitioners OR
- contracted non-school practitioners



Telehealth

1915(i)

Behavioral Health
& more

Home and Community Based Waivers

- **Traditional Intellectual Disabilities & Developmental Disabilities**
- **Autism**

Waiver recipients are eligible for Medicaid state plan services too



Traditional Intellectual Disabilities and Developmental Disabilities HCBS Waiver



Eligibility Requirements:

- Age: 0+
- Diagnosis: Intellectual Disability or Developmental Disability
- Level of Care: Intermediate Care Facility for Individuals with Intellectual Disabilities (ICF/IID)



Services:

- Day Habilitation
- Homemaker
- Independent Habilitation
- Individual Employment Support
- Prevocational Services
- Residential Habilitation
- Extended Home Health Care
- Adult Foster Care
- Behavioral Consultation
- Community Transition Services
- Environmental Modifications
- Equipment And Supplies
- Family Care Option
- In-home Supports
- Infant Development
- Parenting Support
- Small Group Employment Support Services

Family Care Option

The natural family retains all decision-making authority and all legal, education, medical, and financial responsibility.

Voluntary placement by the natural family

- Care for a child in a family home setting that meets the minimum licensing requirements for foster home.
- May be provided part-time/full-time basis for an eligible child under the age of 21, who cannot remain in their natural family home on a full-time basis.

In-home supports

Support to meet the excess care needs related to the participant's disability.

Benefits the primary caregiver by providing relief care (respite) when the primary caregiver

- is not present or
- when they are present and need a second pair of hands to help with the participant's activities of daily living and maintaining health and safety.

Autism Spectrum Disorder Waiver



Eligibility Requirements:

- Age: 0 – 15*
- Diagnosis: Individuals with Autism Spectrum Disorder
- Level of Care: Intermediate Care Facility for Individuals with Intellectual Disabilities (ICF/IID)

*will now cover ages 0-17



Services:

- Respite
- Service Management
- Assistive Technology

Goal:

To help families care for a child diagnosed with autism spectrum disorder at home instead of having to place the child in a facility to receive needed care.

Respite

Provides parents with temporary relief from the stress of caring for a child with special needs.

An extra set of hands to help caregiving while the parent caregiver

- rests,
- cleans,
- leaves the home to run errands,
- goes to another child's activities,
- socializes or
- takes a short break.



Families

Family Support Program Eligibility

Medicaid-eligible youth must have a current EPSDT screening

Expenses exceeding \$15,000 over 12 months

- Includes Medicaid, insurance, and Voluntary Treatment Program expenses. Can include expenses at a psychiatric treatment residential facility (PRTF) or therapeutic foster care.

Resource:

<https://www.hhs.nd.gov/sites/www/files/documents/DHS%20Legacy/family-support-services.pdf>

Family Support Program

Community-based services lasting up to a year to prevent out-of-home placement. (can only happen once).

Support families trained to provide:

mentoring services to
the household and

relief care to the
Medicaid-eligible child.

American Society of Addiction Medicine (ASAM) Levels 1-3.7



Outpatient Services

- Initial level of care / diagnostic interview
- Individual and group counseling and psychotherapy
- Medication Assisted Therapy (MAT) including buprenorphine and methadone treatment.



Intensive Outpatient Services or Partial Hospitalization

- Typically delivered by SUD/MH specialty providers
- Support system including availability of emergency services around the clock



Residential or Inpatient Services

- Different levels of care ranging from low to high-intensity clinically managed residential care to medically monitored high-intensity inpatient services
- Goal is to prepare individual for outpatient treatment
- Provided in structured residential setting staffed 24 hrs per day and are clinically managed



Medically Managed Intensive Inpatient Services

- Primary medical and nursing care.
- Patients receive daily direct care from licensed physician in a hospital-based setting.
- Biomedical, emotional, behavioral, and/or cognitive conditions present

← Least restrictive

Continuum

Most restrictive →

Residential Services

+ Diagnosis
Youth only



Schools



Homes



Providers,
Clinics, Health
Centers



Communities



Justice
system

Psychiatric Residential Treatment Facilities (PRTFs)

Provides to children and adolescents

- a 24 hour therapeutic environment integrating
 - group living,
 - educational services, and
 - a clinical program that meets the needs of the child and family.

Services are available to children who are in need of and able to respond to active psychotherapeutic intervention

and who cannot be effectively treated in their own family, in another home, or in a less restrictive setting.

Qualified Residential Treatment Programs (QRTPs)

ND Medicaid covers the following services provided by licensed QRTPs to Medicaid-enrolled youth

- Individual, group, and family counseling
- Targeted case management services

Placement is available to youth:

- Under the public custody of a Human Service Zone, Division of Juvenile Services or North Dakota Tribal Nation
- Not in the public custody, who have been pre-approved for placement and reimbursement by the HHS Voluntary Treatment Program.



Contact

Mandy Dendy mrdendy@nd.gov

Coverage Policy Director – Medical Services