

Department of Human Services Tip Sheet: Out-of-State (OOS) Treatment for Children in the Custody of County DHS

This document outlines the process, roles, and responsibilities for Counties, RAE's and EPSDT Medicaid to work together to access residential treatment for children when in-state treatment options have been exhausted. This process should be followed after the FFPSA process has been followed, the child was approved by the Independent Assessment yet all in state contracted options for treatment have been exhausted.

Definitions

Administrative Service Organization (ASO): Organizations that were created by and contracted with the BHA to administer Colorado Crisis Services, the Child and Youth Mental Health Treatment Act (CYMHTA), as well as conduct Independent Assessments (IAs).

Behavioral Health Administration (BHA): A cabinet member-led agency, housed within the Department of Human Services, designed to be the single entity responsible for driving coordination and collaboration across state agencies to address behavioral health needs.

County: The County Department of Human Services which has custody of the child.

Early and Periodic Screening, Diagnostic and Treatment (EPSDT): The EPSDT program entitles children to any treatment or procedure that fits within one of the categories of Medicaid-covered services listed in Section 1905(a) of the Social Security Act if that treatment or service is necessary to "correct or ameliorate" defects and physical and mental illnesses or conditions identified by screenings¹. This EPDST definition does NOT include housing and focuses primarily on treatment.

Family First Prevention Services Act (FFPSA): FFPSA was signed into law in 2018. Beginning on October 1st, 2021, all Colorado children in the custody of County Departments of Human Services will be required to be referred for an Independent Assessment to determine the necessity for placement in a QRTP for treatment purposes.

Health Care Policy and Financing (HCPF): The state agency responsible for the administration of Health First Colorado (Colorado's Medicaid program), Child Health Plan Plus, and other health care programs

Independent Assessment (IA): A full psychosocial assessment on children/youth and their families to determine if the behavioral health needs of the youth can be met with Community-based supports/services or meets criteria for treatment in a QRTP.

Psychiatric Residential Treatment Facility (PRTF): A facility that provides comprehensive mental health treatment to children and adolescents (youth) who, due to mental illness, substance abuse, or severe emotional disturbance, need treatment that can most effectively be provided in a residential treatment facility. PRTF services are provided under the direction of a physician.

Qualified Individual (QI): A behavioral health clinician who is certified in completing the Child and Adolescent Needs and Strengths (CANS) tool as a part of the Independent Assessment, and who is not affiliated with any residential placement setting or funding source.

Qualified Residential Treatment Program (QRTP): A facility that provides residential trauma-informed treatment that is designed to address the needs, including clinical needs, of children with serious emotional or behavioral

disorders or disturbances. As appropriate, QRTP treatment facilitates the participation of family members in the child's treatment program, including siblings, and documents outreach to family members, including siblings.

Regional Accountable Entity (RAE): RAEs are contracted with HCPF as the organization responsible for coordinating members' care, ensuring they are connecting with primary and behavioral health care, and developing regional strategies to serve Health First Colorado members. There are 7 RAE regions across Colorado. Children in the custody of the County should be assigned to that County's RAE and this should not change while in that County's custody.

The following checklist should be used for Counties/RAE's and EPSDT when a child is recommended for QRTP/PRTF level of care and all in-state options have been exhausted.

Checklist for Counties

- County is responsible for requesting a RAE Care Manager when a referral is being made for a QRTP/PRTF level of care.
- County will reach out to the local Community Center Board (CCB)/Case Management Agency (CMA) for assistance with applying for waivers the child may be eligible to receive – work with the CCB/CMA in your area on available options for the child.
- County is responsible to supply documents/referrals from providers for medically necessary treatment or documents from the Independent Assessment (IA). These documents will be available through the ASO for the RAE and EPSDT as needed and requested by those organizations.
- County is responsible to ensure involvement of: Parents (or guardians), RAE, HCPF, the school district, the CCB (if applicable), clinical team, and any legal, guardian ad litem (GAL), or judicial contacts needed for the QI to be able to interview if needed depending on the case.
- County is responsible for the arrangement, coordination and cost if needed of transportation for youth in their custody.
- County is responsible for all costs not covered by Health First Colorado (out-of-state oral health, out-of-state immunizations, educational costs not covered by the school district).
- County will work with the RAE to explore all Medicaid contracted out -of-state providers as provided by HCPF staff. Should all contracted providers be exhausted, the County will refer any non-contracted residential placements that are willing to accept or have accepted a child to HCPF to explore contracting with Colorado Medicaid through EPSDT.

Checklist for RAEs

- The RAE is responsible for requesting needed documentation for HIPAA. i.e. custody paperwork, release of information (ROI) etc.
- The RAE is responsible for scheduling and facilitating all interdisciplinary team (IDT) calls needed to facilitate the timely placement of a child in this level of care. The RAE will keep formal meeting notes and disseminate to the team to keep track of all discussion and next steps identified. In some cases, the RAE may join an existing standing meeting.
- The RAE is responsible for ensuring that all appropriate staff receive invitations to IDT calls, per county recommendations.
- The RAE will work with the County to determine best fit and coordinate on making referrals to Colorado Medicaid options. If an entity reaches out to facility X, that entity should remain the contact point for

facility X. It is the responsibility of the RAE to ensure this process remains consistent.

- RAE is responsible for referring any interested, non-Medicaid facilities to HCPF staff to contract with Medicaid should they wish to do so.
- If in-state residential options are exhausted, the RAE is responsible to submit the request for EPSDT to cover out-of-state facilities should the request be denied for non-contracted services or the child being in the custody of the county.

Checklist for EPSDT

- EPSDT staff will share a list of all contracted out-of-state placement options with the RAE and County.
- EPSDT will reach out to the ASO and/or BHA for any needed documentation of approval of QRTP.
- EPSDT staff will assist with enrollments for non-contracted providers willing to join Health First Colorado and will work with the County/RAE team on this if existing out-of-state contracted providers are exhausted. EPSDT staff will work directly with the identified facility to explore contracting/enrollment.
- EPSDT staff will approve or deny services requested under the EPSDT program. If this is denied, then EPSDT will provide the county with the appeals process.
- EPSDT staff will attend creative solutions/IDT calls as requested.
- EPSDT staff will attend monthly care meetings with out-of-state facilities when paying for the care.
- Health First Colorado will pay for approved treatment when billed appropriately.