

Out of state placement for children in the custody of County Departments of Human Services

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 QRTP placements have been exhausted. This process should be followed after the FFPSA/QRTP process has been followed, the child was approved by the independent assessor yet all in state contracted options for QRTP placement have been exhausted.

Definitions

QRTP: A Qualified Residential Treatment Program (QRTP) is a residential level of care accessed for treatment purposes. Decisions about where to place a child in an approved QRTP are made by considering the child's strengths and needs, the skills of the available caretakers or facilities, and the child's prospects for permanency with family placements.

FFPSA: The Families First Prevention Services Act 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.

RAE: The Regional Accountability Entity's (RAE's) 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.

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

HCPF/EPSDT: The Early and Periodic Screening, Diagnostic and Treatment (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.

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

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

Checklist for counties

- County is responsible for requesting a Care Manager when they have a child/youth who needs services. This should be done as early as possible when a higher level of care is requested or when assistance is needed in coordinating care for a client with complex needs. When a referral is being made for an Independent Assessor to complete an assessment for possible QRTP placement/treatment, the County will request a Care Manager be assigned.
- 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 will have referred a child to an Independent Assessor for a QRTP placement/treatment at this point, the child was approved and all in state options have been exhausted.
- County is responsible to supply documents/referrals from providers for medically necessary treatment or documents from the Independent Assessor (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 IA 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 providing to the county a list of all in state contracted QRTP placements, contact information for parties involved in member's care, including a care manager, clinical contact and escalation contact for each RAE.
- 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 inter-disciplinary 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 OBH 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.

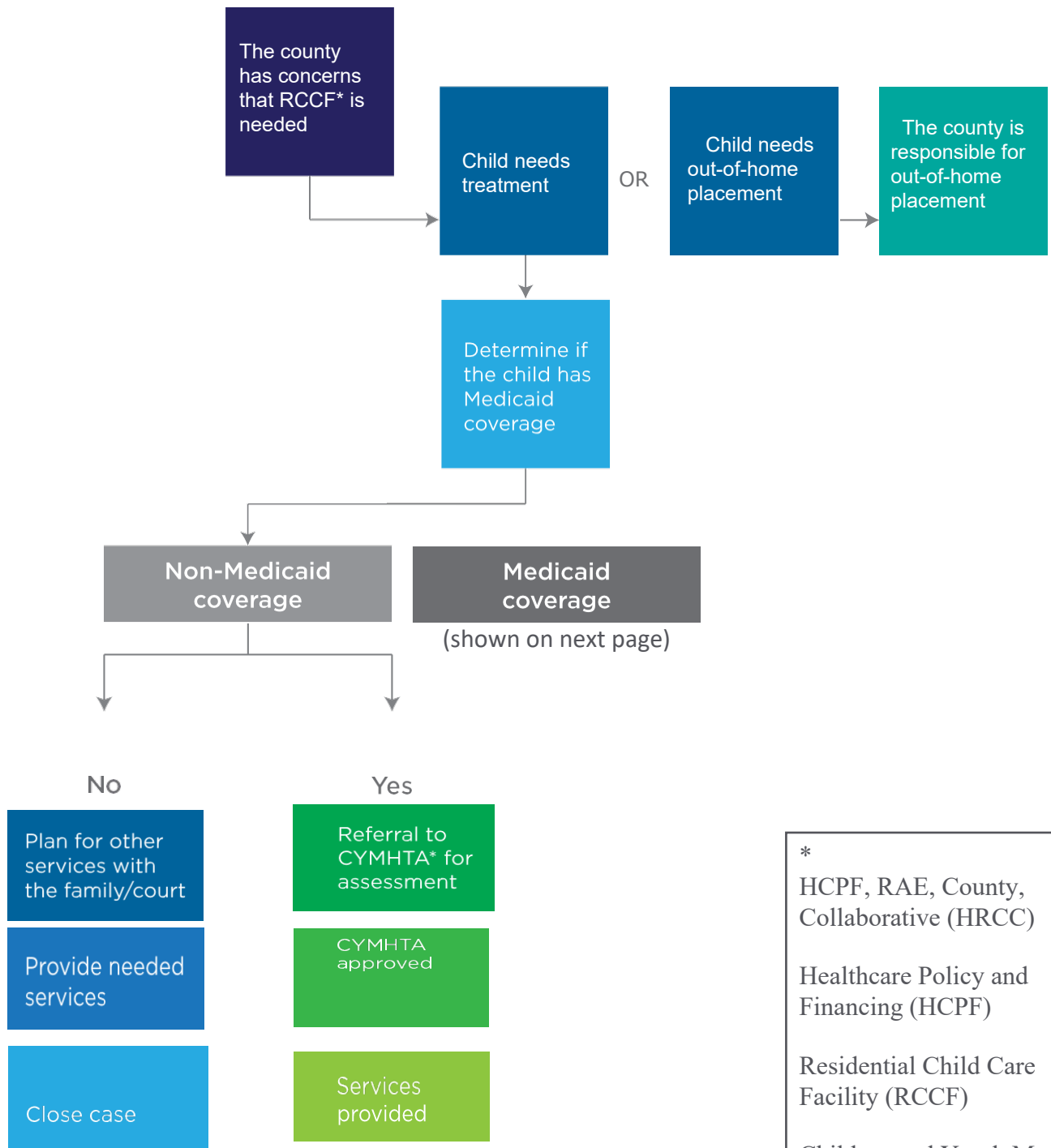
EPSDT staff will attend creative solutions/IDT calls as requested.

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.

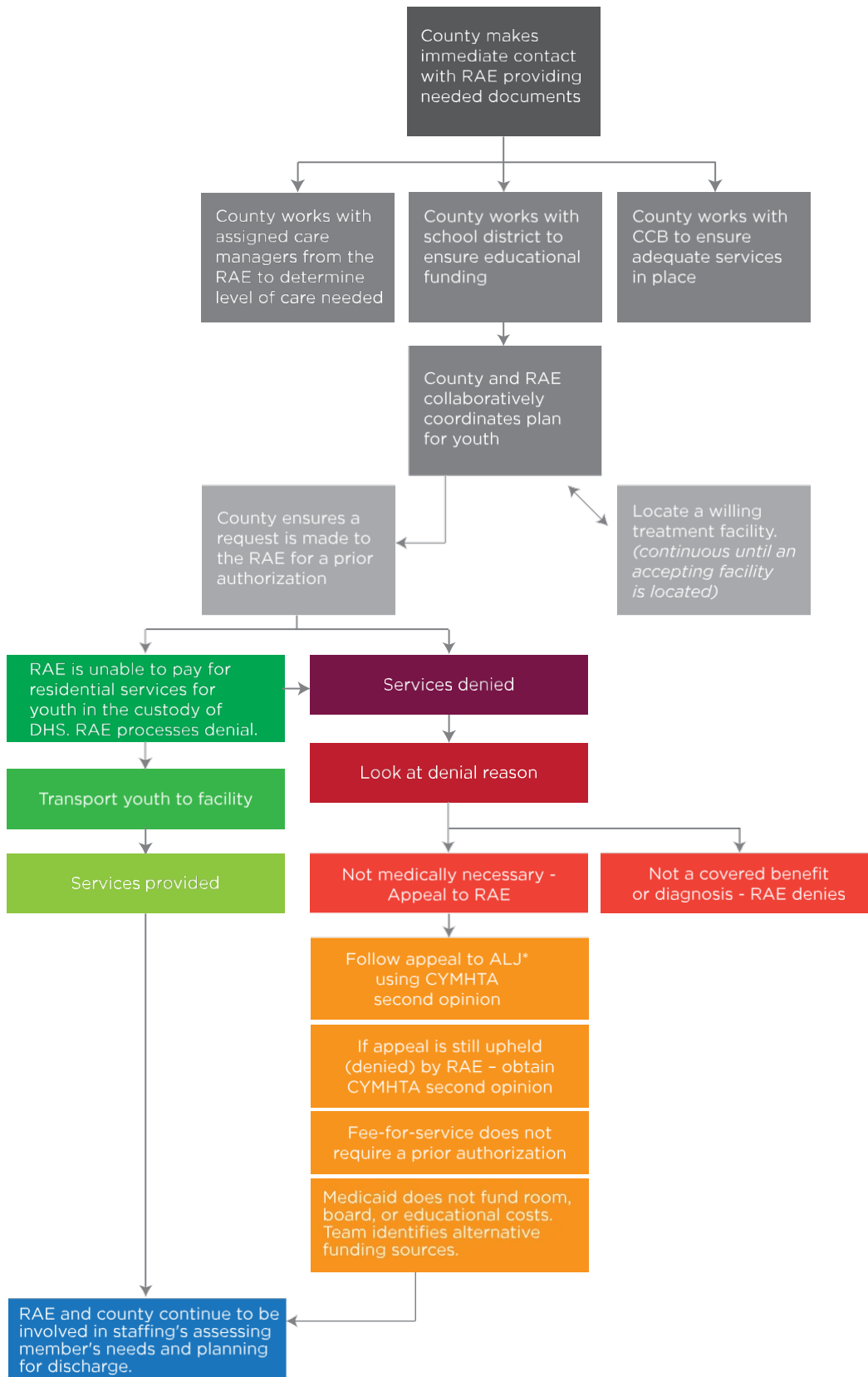
FLOW CHARTS:

Flow chart from HRCC*



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HCPF, RAE, County, Collaborative (HRCC)
Healthcare Policy and Financing (HCPF)
Residential Child Care Facility (RCCF)
Children and Youth Mental Health Treatment Act (CYMHTA)

Medicaid/treatment in-state coverage process



Medicaid out-of-state process

