CHILDREN AND FAMILY SERVICES

ADMINISTRATIVE MEMO #10-2008

TO:	Service Area Administrators Protection and Safety Administrators, Supervisors, and Staff
FROM:	Todd L. Reckling, Policy Section Administrator Division of Children & Family Services
Approved by:	Todd A. Landry, Director Division of Children & Family Services
Date:	June 30, 2008
Contact Person:	Lori Harder, CAAN Administrator (402) 471-9733 or lori.harder@dhhs.ne.gov
REGARDING:	**Administrative Services Organization (ASO) for CFS**
Effective Date:	**July 1, 2008**
Duration:	Until modified
Purpose:	**Implementation of ASO services**

Action Required: Effective July 1, 2008, the Nebraska Department of Health and Human Services entered into a contract with Magellan Behavioral Health of Nebraska, for the provision of a comprehensive Administrative Services Organization that will automate, manage, maintain, and coordinate the mental health and substance abuse treatment, gambling addictions, child welfare and juvenile services for the identified populations of Behavioral Health, Children and Family Services, and Medicaid and Long-Term Care.

Magellan will be responsible to ensure the registration of the following services: In Home Safety Services, Home Supported Safety Services, Residential Safety Services, Family Engagement, Intensive Family Preservation, Family Support, Visitation, Electronic Monitoring/Global Positioning (EM/GPS), Tracker, Drug Screening and Testing (DST), Respite, Agency Supported Foster Care, And Group Home Care. Providers of these services are required as outlined in their contracts for the registration of services with the ASO.

A. The following is an outline of the registration process. This is **not** a worker responsibility.

Registration of CFS Services

1. CFS worker completes and sends a service authorization to the provider. (No Change)

2. Registration of services will occur once the provider receives the written service authorization from the CFS worker.
3. The provider will enter the required information at the Magellan web based site in the required format.
4. Magellan will verify the registration and authorizations and provide a listing of approved claims for payment to CFS. Effective January 1, 2009, provider claims that do not have the required registration and/or service or clinical authorization will be returned to the Service Areas for resolution.

   In addition, Magellan will review all Letters of Agreements (LOA's) based upon a court ordered service or based on a worker authorization due to special circumstances following a case consultation. **Magellan does not approve or deny non–Medicaid services nor do they process payments for our provider network.**

B. The following is the process for clinical authorization for mental health and substance abuse services:

Authorization of Court Ordered Services via Letters of Agreement

1. The worker will fax a copy of the court order to Magellan at 402-437-4266.
2. Magellan will clinically authorize the service
3. Magellan will locate the provider.
4. Magellan will develop a letter of agreement for signature of the CFS Policy Section Administrator.
5. The provider must make application to Magellan for appropriate level of care within seven (7) calendar days.
6. If application is denied, CFS staff will request a court hearing immediately.
7. Magellan and the provider will provide testimony upon request.
8. Magellan will continue to issue letters of agreement while the court order is in effect.

C. The following is what a CFS worker can authorize related to mental health and substance abuse.

Authorization for mental health/substance abuse services for non-Medicaid eligible persons:

A CFS worker can request the following assessments:

1. Pre-Treatment Assessment (PTA) OR
2. Comprehensive Family Assessment (CFA)

A CFS worker cannot document/narrate any other type of assessment request in a case plan or in a court report. Pretreatment Assessments and Comprehensive Family Assessments are holistic bio/psycho/social assessments of individuals that encompass every mental health/substance abuse area for assessment and determines whether further testing is necessary. Each of these assessments would be the basis for further service provision of mental health/substance abuse services.

If further service provision is warranted, then service authorizations for those services will be generated from Central Office State Ward Medical based on the clinical approval of Magellan and the billing document from the provider. These documents will be submitted by the provider.

When authorization for mental health and substance abuse services are approved to be paid using CFS funds, Magellan will ensure that the provider participates and follows all the Medicaid/Medicaid Managed Care rules, regulations, policies and reimbursement rates for those services.

Intensive Care Management/Case Consultation

Effective July 1, 2008, two separate services will be available from the ASO to CFS staff to support their work with children and families. These two services are: Intensive Care Management (ICM) and case conferences.

A. Intensive care management provides clinical care management services to identify when youth are treatment ready and/or identify a treatment provider is willing to serve them or they will develop an alternative creative treatment plan with the case manger and family. The service provision of Intensive Care Management is mandatory for CFS families who meet the following criteria:

   1. All children placed in treatment services via court order using a letter of agreement.
   2. Children that had a treatment failure and are in detention more than 30 days.

B. Case conferences are available upon request to case managers who may need additional support with a specific issue related to mental health and/or substance abuse and identifying the appropriate intervention necessary to remediate the concern. Magellan will have specific case managers identified by Service Area available to perform these functions and that listing is available on the CFS website.

Reporting Requirements

The ASO is also responsible to collect and analyze data related to provider performance based on the performance outcomes identified for each contracted service. Magellan will receive, track, monitor and report to DHHS provider compliance for all contract performance standards. Magellan will provide the reports in the required format and ensure that provider performance measures are tracked by service type, service area, and provider organization. All reports will be ready for publication on the DHHS website. Performance measures relating to response times of In-Home Safety Services and Intensive Family Preservation will be posted monthly. All other performance measures will be posted quarterly.

In addition, we are in the process of developing an electronic health record for each child/family that will be available on a website. DHHS/CFS staff will be able to access this information for the children and families on their caseload. This electronic health record will provide information regarding the individual's

demographic information, diagnosis, medications, placements, services provided by Medicaid, Behavioral Health and CFS. The report will include the names of providers serving the individual/family as well as the associated cost for each service. The plan is to have the electronic health records available by the end of this year.