

# **Building Blocks: Session 3**

Entry to the system



### What You Will Learn

- What is a Single Entry Point
- What is a Community Centered Board
- What does a Case Manager do
- Early and Periodic Screening, Diagnostic and Treatment
- Wait lists for IDD services
- Health Insurance Mandated Autism Treatment (HIMAT)
- Wright's Law overview



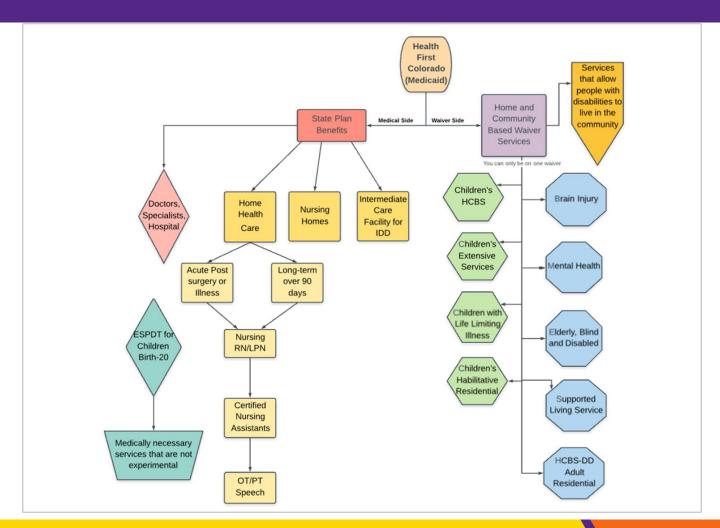
### **Crash Course in Medicaid**

- Think of Medicaid like a house.
  - There are many ways to get in and each point of entry entitles the individual to different services.
- Medicaid is NOT Medicare.
  - These are two distinct programs.
    This program will focus on Medicaid.
- Think of the HCBS Child/Adult
  Waivers as different rooms in the Medicaid house.





### **Crash Course in Medicaid**





### **Single Entry Point (SEPs)**

- Single Entry Point (SEP) Agencies operate the following waivers:
  - Children's HCBS Waiver (CHCBS) not really a waiver
  - The Children's Extensive Support Waiver (CES)\*
  - Children with Life Limiting Illness (CLLI)
  - Children's Habilitation Residential Program Waiver (CHRP) (Run by the county, with CCB support)
  - Brain injury (Adult)
  - Elderly, blind and disabled (EBD) (Adult)
  - Supported Living Services (SLS) (Adult)\*
  - Persons with Developmental Disabilities (DD/Comp) (Adult)\*
  - Mental health (MI) (Adult)



### **Single Entry Point (SEPs)**

- Single Entry Point (SEP) Agencies
  - Provide case management
  - Care planning
  - Make referrals to other resources for Health First Colorado (Colorado's Medicaid Program) members

 Support for IDD specific waivers are run by Community Centered Boards (CCB)\*



### **Community Centered Boards**

Provide case management services assist a person in accessing necessary services and supports to meet his or her needs.

#### Services include:

- Intake,
- Eligibility determination
- Service plan development
- Arrangement for services
- Delivery of services
- Service and support coordination
- Monitoring
- Any safeguards necessary to prevent conflict of interest between case management and direct service provision
- Termination and discharge from services.
- Case Management



### **Case Management**

<u>Case management</u> is assistance provided by a case management agency on behalf of an eligible member, which includes referral of needed Health First Colorado (Colorado's Medicaid Program) services and supports that enable the member to remain in his/her community-based setting.

### A case manager is responsible for:

- Assessing a member's long-term care needs
- Developing and implementing a care plan for the member
- Coordinating and monitoring the delivery of long-term care services
- Evaluating the effectiveness of the services
- Periodically re-assessing the member's needs



### **Contact Info**

#### Single Entry Points:

- Rocky Mountain Human Services -Single Entry Point
- 9900 E. Iliff Avenue
- Denver, CO 80231
- Main Phone: 1-844-790-RMHS (7647)
- Website: www.rmhumanservices.org
- County Contact number:
  - Douglas Phone: (303) 688-4825
  - Arapahoe Phone: (303) 636-1130

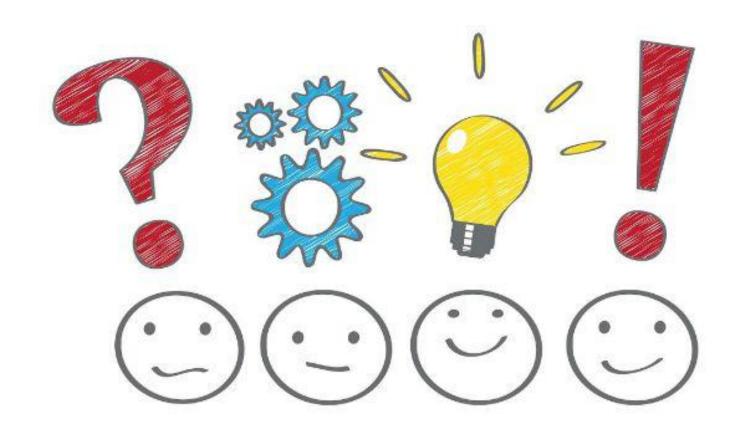
- Community Centered Boards Intake phone number:
  - Developmental Pathways: (303) 858-2260
    - Arapahoe and Douglas Counties (and the city of Aurora)
  - Rocky Mountain Human Services: (303) 636-5862
    - Denver County
  - Developmental Disabilities Resource Center

(303) 233-3363

- Jefferson, Summit, Gilpin and Clear Creek counties
- North Metro Community Center (303) 457-1001
  - Adams County (Excluding the City of Aurora)



### **Questions?**





- <u>Early</u>: Assessing and identifying problems early
- Periodic: Checking children's health at periodic, ageappropriate intervals
- Screening: Providing physical, mental, developmental, dental, hearing, vision, and other screening tests to detect potential problems
- <u>Diagnostic</u>: Performing diagnostic tests to follow up when a risk is identified, and
- <u>Treatment</u>: Control, correct or reduce health problems found.



- Who Qualifies?
- Children and Youth ages 20 and younger who are enrolled in Medicaid.
- EPSDT is made up of screening, diagnostic, and treatment services that are medically necessary in nature.
- Colorado provides through Healthy
  Communities and other programs:

- Information to all Medicaid-eligible individuals under age 20 and under
  - Including adults who are pregnant, that EPSDT services are available
  - Age appropriate screenings
  - Well child visits and immunizations
  - Provide or arrange for the provision of screening services for all children
  - Arrange (through referral) for corrective treatment as determined by child health screenings



#### **Medical Necessity**

All Medicaid coverable, medically necessary, services must be provided even if the service is not available under the State plan to other Medicaid eligibles. Medical necessity is determined on a case by case basis.

No arbitrary limitations on services are allowed, e.g., one pair of eyeglasses or 10 physical therapy visits per year.

#### **Benefits and Services**

**Screening Services** 

 Comprehensive health and developmental history; Comprehensive unclothed physical exam; Appropriate immunizations (according to the Advisory Committee on Immunization Practices); Laboratory tests (including lead toxicity testing)



#### **Benefits and Services (Cont)**

Health Education (anticipatory guidance including child development, healthy lifestyles, and accident and disease prevention).

Vision Services (At a minimum, diagnosis and treatment for defects in vision, including eyeglasses).

Dental Services (At a minimum, dental services include relief of pain and infections, restoration of teeth, and maintenance of dental health, including examinations, cleanings and fluoride treatments).

Hearing Services (At a minimum, diagnosis and treatment for defects in hearing, including hearing aids).

Other Necessary Health Care Services.



#### **Benefits and Services (Cont)**

Diagnostic Services (When a screening indicates the need for further evaluation, diagnostic services must be provided).

Treatment (Necessary health care services must be made available for treatment of all physical and mental illnesses or conditions discovered by any screening and diagnostic procedures).

Pediatric Behavioral Therapies (All behavioral therapies will need to be authorized prior to the start of treatment. The contracted Medicaid provider will assess your child, put together a treatment plan, and submit a Prior Authorization Request (PAR) to the Department's Utilization Management (UM) vendor to review for medical necessity).



#### **EPSDT Medical Necessity Does NOT include:**

Experimental or investigational treatments

Services or items not generally accepted as effective; and/or not within the normal course and duration of treatment;

Services for caregiver or providers convenience Services for which Colorado has a waiver are also not considered to be state plan benefits, and therefore are not a benefit under EPSDT.

(Items such as respite, in-home support services, and home modifications are examples of waiver services).



- Wait lists for IDD services are managed by Colorado Department of Health Care Policy and Financing
- While the wait list for adults (Persons with Developmental disabilities Waiver; HCSB-DD/Comp)
- No Wait lists for:
  - Children's HCBS Waiver (CHCBS)
  - The Children's Extensive Support Waiver (CES)\*
  - Children with Life Limiting Illness (CLLI)
  - Children's Habilitation Residential Program Waiver (CHRP) (Run by the county, with CCB support)\*
  - Brain injury (Adult)
  - Elderly, blind and disabled (EBD) (Adult)
  - Supported Living Services (SLS) (Adult)\*
  - Mental health (MI) (Adult)
  - Spinal Injury Waiver (SI) (Adult)



- If your son or daughter qualify for one of the waiver programs we discussed tonight, you will want to contact your CCB and get them on the adult waitlists.
- All children with an IDD diagnosis can be placed on the Wait lists at the <u>age of</u> <u>14</u> for Adult (Supported Living Services Waiver; HCBS-SLS, or Persons with Developmental disabilities Waiver; HCSB-DD/Comp) IDD service.
  - Wait lists for Adult IDD service options: (All kids are automatically placed on the "Date Specific" list, which is their 18th birthday)
  - As Soon as Available The individual has requested enrollment as soon as available.
  - Date Specific The individual does not need services at this time but has requested to be add to the "As Soon as Available" list at a specific future date.
  - Safety Net The individual does not need or want services at this time, but requests to be on the waiting list in case a need arises at a later time.



#### Number of Persons on Medicaid 1915(c) HCBS Waiver Wait Lists by region

Region	Persons on Medicaid 1915(c) HCBS Waiver Wait Lists
US	656,195
Alabama	5,284
Alaska	535
Arizona	0
Arkansas	3,278
California	4,088
Colorado	3,194
Connecticut	2,903
Delaware	0
District of Columbia	0
Florida	67,479
Georgia	10,270
Hawaii	0
Idaho	0
Illinois	19,163
Indiana	1,627
lowa	8,928

Region	Persons on Medicaid 1915(c) HCBS Waiver Wait Lists
Kansas	3,890
Kentucky	8,190
Louisiana	73,929
Maine	1,000
Maryland	36,156
Massachusetts	0
Michigan	3,311
Minnesota	128
Mississippi	9,481
Missouri	0
Montana	1,309
Nebraska	2,062
Nevada	1,372
New Hampshire	260
New Jersey	0
New Mexico	20,070
New York	0

Region	Persons on Medicaid 1915(c) HCBS Waiver Wait Lists
North Carolina	12,068
North Dakota	3
Ohio	64,546
Oklahoma	7,569
Oregon	134
Pennsylvania	9,728
Rhode Island	0
South Carolina	11,275
South Dakota	0
Tennessee	5,813
Texas	232,068
Utah	2,543
Vermont	0
Virginia	16,583
Washington	0
West Virginia	1,540
Wisconsin	4,216
Wyoming	202



- Intake phone numbers:
- Developmental Pathways:

(303) 858-2260

- Arapahoe and Douglas Counties (and the city of Aurora)
- Rocky Mountain Human Services:

(303) 636-5862

- Denver County
- Developmental Disabilities Resource Center

(303) 233-3363

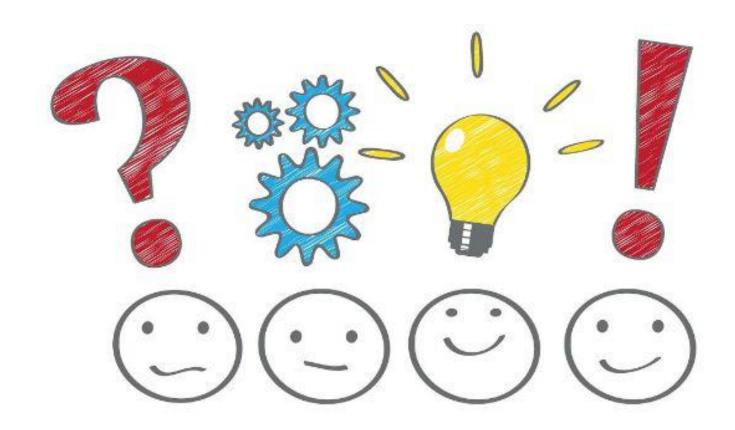
- Jefferson, Summit, Gilpin and Clear Creek counties
- North Metro Community Center

(303) 457-1001

Adams County (Excluding the City of Aurora)



### **Questions?**





## Health Insurance Mandated Autism Treatment (HIMAT)

- Mandates coverage of certain Autism treatments by certain private health insurance plans.
- State law (CRS 10-16-104 (1.4)) requires certain types of private group health insurance policies to cover treatment for Autism Spectrum Disorder (ASD).
- Treatment Limits
- Benefits are subject to the general terms of the policy (co-pays, deductibles, ca ps, etc.), but are otherwise unlimited, except:
- Applied Behavior Analysis (ABA) only the plan may limit benefits as follows:
  - 0 through 8 -- \$34k per year
  - 9 through 18 -- \$12k per year



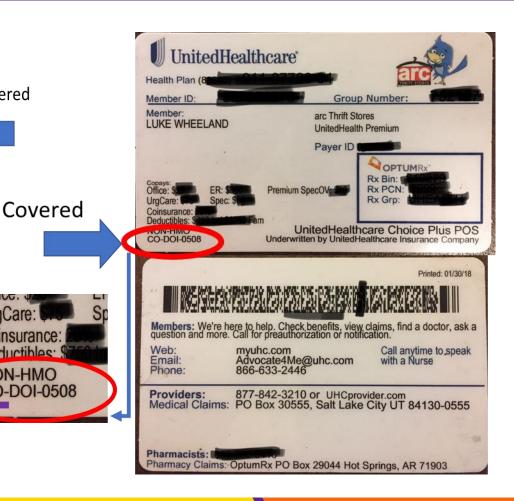
## Health Insurance Mandated Autism Treatment (HIMAT)

- Who is covered:
  - Children from birth through 18 years of age with certain private group health insurance
  - The child is covered by a Colorado Based insurance plan.
- If a private health insurance card is marked with "CO-DOI", most circumstances, the group health benefit plan is required to comply with HIMAT
- ASD defined as Autistic Disorder, Asperger's Disorder and Atypical Autism as PDD-NOS (as defined at time of diagnosis, DSM currently being revised)
- You do not need to have Medicaid to use HIMAT



### **Health Insurance Mandated Autism Treatment (HIMAT)**





UrgCare:

Coinsurance:

Deductibles 9

**NON-HMO** 

CO-DOI-0508



### Wrightslaw



Parents, educators, advocates, and attorneys come to Wrightslaw for accurate, reliable information about special education law, education law, and advocacy for children with disabilities.

http://www.wrightslaw.com/



6538 South Racine Circle Centennial, CO 80111

**T:** 303.220.9228

**F:** 303.220.0994

E: Luke@arc-ad.org



www.arc-ad.org



TheArcArapahoeDouglas



ArcArapDoug



thearcarapdoug