



Policy Title: Children's Mental Health Residential Treatment		
Department: System of Care		
Date Issued: 2/7/2012	Revised Date: 5/5/2020 Review Date: 3/6/2024	
CEO Approval: 	Effective Date: _____9/22/2024_____	

POLICY:

It is the policy of Central Florida Cares Health System, Inc. (CFCHS) to coordinate the placement and discharges of the Residential Treatment Services for children as defined in the master contract and requirements pursuant to Chapter 394, Florida Statutes (F.S.)

RELATED POLICIES: None

REFERENCE:

The Florida Department of Children and Families (Department) Guidance Document 5 - Residential Mental Health Treatment for Children and Adolescents

PURPOSE:

This policy describes the procedure for CFCHS' role in the referral process, coordination of care, and discharges for mental health residential services for children.

DEFINITION:

Per 65E-10, F.A.C., residential treatment programs include the following levels of care:

- Specialized Therapeutic Group Home (STGH) means a 24-hour residential program providing community-based mental health services in a home-like setting for up to twelve (12) children who may safely attend school and participate in activities in the community.
- Residential Treatment Center (RTC) means a 24-hour residential program that provides 24-hour inpatient and highly structured level of care. These are not considered crisis placements. Residential mental health services are funded by the following sources:
 - The Statewide Inpatient Psychiatric Program (SIPP) applies to the placement of children in residential treatment programs funded by Medicaid.
 - Purchase of Residential Treatment Services (PRTS) applies to the placement of children in residential treatment programs funded by CFCHS.

PROCEDURE:

Persons Served Eligibility:

Publicly funded residential mental health treatment is intended to serve children and adolescents who have been assessed and diagnosed as being emotionally disturbed by a psychiatrist or clinical psychologist who has specialty training and experience with children, per section 394.4781, F.S., and who meet the following criteria, per Chapters 65E-9 and 65E-10, F.A.C.:

- a. Be under the age of 18 and under age 21 for SIPP services;
- b. Be assessed (within 90 days prior to placement) by a psychologist or a psychiatrist licensed to practice in the state of Florida, with experience or training in children's disorders; who attests, in writing, that:
 1. The child has an emotional disturbance as defined in s. 394.492(5), F.S., or a serious emotional disturbance as defined in section 394.492(6), F.S.
 2. The emotional disturbance or serious emotional disturbance that requires treatment in a residential treatment setting.
 3. A less restrictive setting than residential treatment is not available or clinically recommended.
 4. The treatment provided in the residential treatment setting is reasonably likely to resolve the child's presenting problems as identified by the psychiatrist or psychologist; and
 5. The nature, purpose, and expected length of treatment have been explained to the child and the child's parent or guardian.
- c. Have been reviewed at a minimum by the child and family team and been presented with all available options for treatment.

Referral Process:

1. The Case Manager initiates a referral for residential placement by submitting a completed application via CFCHS' Portal System. If the case management agency does not have access to the portal, then an application will be submitted through other means. Case management supervisors are responsible for ensuring an application is complete before submitting to CFCHS' Children's Care Coordination Specialist. CFCHS ensures each applicant is referred to Targeted Case Management prior to beginning the application process, if the applicant is not already receiving case management services.
2. CFCHS' Children's Care Coordination Specialist reviews the applications to ensure they are complete and meet eligibility criteria per 65E-10.018, F.A.C. The packet must include a letter of recommendation from a psychiatrist or clinical psychologist that is dated within the last 90 days, current clinical records of services received in the community within the last year, and a physical completed within the last 90 days. A "Sliding Fee Scale Assessment" must be completed for persons served with PRTS.
3. Upon receipt of a completed residential treatment application, CFCHS' Care Coordination Specialist schedules a Child Specific Staffing Team (CSST). The staffing team may be comprised of the following: Florida Medicaid Managed Medical Assistance Program (MMA) Representative, parent/guardian, child, the treating provider, and other agencies involved such as the Department of Juvenile Justice (DJJ), Community Based Care Lead Agency, or other persons invited by the family. Staffing is optional for children referred for SIPP services and may be "waived" by the family.
4. The CCST is facilitated by CFCHS' Children's Care Coordination Specialist. During the staffing, the team reviews information and discusses the child and family's wishes and needs. The staffing team also identifies less restrictive levels of care that are available in the community which might reasonably prevent the need for residential care. If the team determines that residential is necessary, the CFCHS facilitator moves forward with placement and authorization process, as outlined below.
5. Upon completion of the staffing, CFCHS' facilitator completes the "Child and Family Staffing Summary,." which includes the purpose, outcome, and identifies the individuals who attended the staffing.

Authorization and Placement Process:

The Statewide Inpatient Psychiatric Program (SIPP)

1. CFCHS submits the complete application packet to a SIPP designated facility based on family/consumer choice, clinical appropriateness, availability of open beds, and any other factors that have an impact on the case being referred.
2. Once the SIPP-designated facility determines the child is clinically appropriate for admission to their program, the facility schedules an admission date and seeks prior authorization through the utilization management process as established by Medicaid Managed Medical Assistance Plan.

Specialized Therapeutic Group Home (STGH)

1. CFCHS submits the complete application packet based on family/consumer choice, clinical appropriateness, availability of open beds, and any other factors that have an impact on the case being referred.
2. Once the designated facility determines the child is clinically appropriate for admission to their program, the facility schedules an admission date and seeks prior authorization for the therapeutic portion through the utilization management process as established by Medicaid Managed Medical Assistance Plan.

Purchase of Residential Treatment Services (PRTS)

1. Completed packets are reviewed by CFCHS' System of Care (SOC) Department for clinical appropriateness and by the Contract Manager for availability of funds.
2. If residential treatment is determined to be appropriate, CFCHS' Children's Care Coordination Specialist will submit the application to PRTS Subcontractor based on family/consumer choice, clinical appropriateness, availability of open beds, and any other factors that have an impact on the case being referred.
3. Upon acceptance by the program, the Subcontractor submits an authorization request through Cognito Forms, an electronic system.
4. The form is reviewed and electronically signed by CFCHS SOC Department. A copy of the form is emailed to the Subcontractor.
5. Initial authorization length of stay for PRTS is 90 days. CFCHS may provide authorization for an alternative length of stay as necessary on an individual basis.
6. For accepted referrals, CFCHS' Children's Care Coordination Specialist assists with coordination of admission and ensures compliance with sliding fee scale per 65E-14.018, F.A.C.

The procedures for continued stay requests is as follows:

1. The Subcontractor must submit a continued stay request through Cognito Forms and most recent treatment plan review to the CFCHS Children's Care Coordination Specialist three (3) business days prior to expiration of previous authorization.
2. Upon receiving the request for continued stay, CFCHS' Children's Care Coordination Specialist reviews the request for authorization. The request is processed within three (3) business days to authorize or deny payment for continued stay at the residential treatment center.
3. Continued Stay authorizations are provided in 30-day intervals. Alternative authorization time intervals may be considered on an individual basis.

Coordination of Care:

1. Maintain census and waitlist for SIPP, STGH, and PRTS placements.
2. Cooperate with the AHCA office, Medicaid Managed Medical Assistance Plans, and residential treatment providers to ensure appropriate discharge planning and transition of children returning to the community. This may include participation in level of care staffing, treatment planning, or treatment plan reviews. For PRTS, CFCHS' Children's Care Coordination Specialist must attend monthly treatment team meeting to ensure clinical appropriateness.
3. SIPP Subcontractor must submit monthly treatment plan reviews to CFCHS' Children's Care Coordination Specialist within seven (7) days of held treatment team.
4. PRTS Subcontractor must notify CFCHS' Children's Care Coordination Specialist of all treatment team meetings at minimum seven (7) days prior to meeting.
5. Coordinate with state agencies if programs are placed on holds or moratoriums.
6. Provide technical assistance and coordination with residential treatment providers and families.
7. Ensure training is made available to referral sources and Targeted Case Management agencies on admission/discharge procedures and CFCHS' Portal System.