

Guidance 5 Residential Mental Health Treatment for Children and Adolescents

Contract Reference: *Sections A-1.1 and C-1.2.3*

Authorities: *Chapter 394, F.S., Section 39.407, F.S.*
Fla. R. Juv. P. 8.350
Chapters 65E-9, F.A.C.

Frequency: Ongoing

Due Date: Not Applicable

Discussion:

Chapter 394, F.S., governs the provision of mental health services in Florida, including residential mental health treatment for children and adolescents.

- *Section 394.4781, F.S.* - Residential care for psychotic and emotionally disturbed children. This section outlines the Department's responsibility for administering residential mental health treatment services for children and adolescents in the following areas:
 - Eligible population;
 - Funding of the program;
 - Administration of the program; and
 - Rule adoption.
- *Section 394.491, F.S.* - Guiding principles for the child and adolescent mental health treatment and support system. This section outlines principles established by the Legislature to guide the development and implementation of the publicly funded child and adolescent mental health system of care. These guiding principles state that services and supports should be provided in the least restrictive environment that is clinically appropriate for the service needs of the child or adolescent.
- *Section 394.875(8), F.S.* – This section directs the Department, in consultation with the Agency for Health Care Administration (AHCA), to adopt rules governing a residential treatment center for children and adolescents which specify licensure standards for:
 - Admission;
 - Length of stay;
 - Program and staffing;
 - Discharge and discharge planning;
 - Treatment planning;
 - Seclusion, restraints, and time-out;
 - Rights of patients under s. 394.459 F.S.;
 - Use of psychotropic medications; and
 - Standards for the operation of such centers.

The following administrative rules relate to the purchasing of residential mental health treatment services and the licensing of residential mental health treatment centers, as defined in s. 394.67(22), F.S.

- *Chapter 65E-9, F.A.C. - Licensure of Residential Treatment Centers.* These rules set licensing standards for all residential treatment centers, including therapeutic group homes to provide treatment services to children with an emotional disturbance or serious emotional disturbance who are admitted to services pursuant to Chapter 39 or 394, F.S.

The Statewide Inpatient Psychiatric Program (SIPP) is administered by AHCA in partnership with the Department and authorized by *Title XIX of the Social Security Act; Title 42 of the Code of Federal Regulations; Chapter 409, F.S.; and Rule Division 59G, F.A.C.* SIPP serves Medicaid recipients up to 21 years of age who require placement in a psychiatric residential setting due to emotional disturbance or a serious emotional disturbance and meet the medical necessity criteria.

PROGRAM DESCRIPTION

Residential Mental Health Treatment Defined

The behavioral health system of care includes a continuum of services that vary in intensity from community-based services and supports provided in the home and community to residential mental health treatment provided in an out of home placement. Residential treatment programs provide 24 hour live-in support and include the following levels of care:

- Therapeutic foster home means a residential program in a community-based setting where one or two minors live in a licensed foster home with adults who receive specialized mental health training and support. Such support is also provided to natural parents, legal guardians, and others as determined in the treatment plan.
- Therapeutic group home means a 24 hour residential program providing community-based mental health services in a home-like setting for up to twelve children who may safely attend school and participate in activities in the community.
- Residential treatment center means a 24 hour residential program that provides 24 hour inpatient and highly structured level of care. These are not considered crisis placements.

In accordance with s. 394.875, F.S., the purpose of a residential treatment center is to provide mental health assessment and treatment services pursuant to ss. 394.491, 394.495, and 394.496, F.S. to children and adolescents who meet the target population criteria specified in s. 394.493(1)(a), (b), or (c), F.S.

Licensure

Both therapeutic group homes and residential treatment center levels of care are defined as "residential treatment centers" in s. 394.67(22), F.S. and licensed as such by AHCA under *Chapter 65E-9, F.A.C.* A residential mental health treatment provider may also be licensed as a hospital by AHCA, under the provisions of *Chapters 395, Part I, and 408, Part II, F.S.* SIPP providers must be licensed by AHCA as a hospital in accordance with *Chapter 395, F.S. and Chapter 59A-3, F.A.C.* or as a residential treatment center for children and adolescents in accordance with *Chapter 394, F.S. and Chapter 65E-9, F.A.C.*

Funding

Residential mental health treatment services are funded by a variety of sources that include but are not limited to private pay, private insurance, and public funds including Department general revenue and Medicaid. Placement of children and youth in therapeutic out of home settings with Department general

revenue funds is dependent on the availability of funds, per s. 394.493, F.S. Residential treatment services funded by private pay or private insurance may be accessed directly by the family.

Publicly funded residential mental health treatment has procedural guidelines regarding eligibility, the process for accessing services, and payment established in statute and administrative rule. Medicaid funded SIPP services include a utilization management component that requires prior-authorization and continued authorization for services regarding medical necessity and active treatment.

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 s. 394.4781, F.S., and who meet the following criteria, per *Chapters 65E-9, F.A.C.*:

- (a) Be under age 18 for services funded through the Managing Entity or under age 21 for SIPP services funded through Medicaid;
- (b) Be currently 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 s. 394.492(6), F.S.;
 - 2. The emotional disturbance or serious emotional disturbance 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 legal guardian.
- (c) Have been reviewed at a minimum by the child and family team and been presented with all available options for treatment.

A child and family team staffing is optional for children referred for SIPP services and may be "waived" by the family. The purpose of a child and family team staffing for these children is to discuss appropriate alternatives to residential treatment and not to determine eligibility for the service. Completed SIPP referral packets must be forwarded by the Managing Entity, or designee, and Community Based Care providers to the SIPP provider for all children being considered for SIPP services to allow the prior authorization process established by Medicaid to occur. Recipients who are enrolled in a Managed Medical Assistance (MMA) plan will receive authorization through the MMA plan.

Refer to the *Statewide Inpatient Psychiatric Program Coverage Policy*, the *Therapeutic Group Care Services*, and the *Specialized Therapeutic Services Coverage and Limitations Handbook* at the link internet address below for specific eligibility requirements for SIPP, and Therapeutic Group Care services.

http://ahca.myflorida.com/medicaid/review/specific_policy.shtml

Referral Process for Publicly Funded Residential Mental Health Treatment

Dependent children must be assessed for suitability for residential treatment through the suitability assessment process described in s. 39.407, F.S. All other children or adolescents being considered for mental health residential treatment (hospital, residential treatment center, or therapeutic group home) funded by Medicaid or General Revenue

funds must be assessed by and have a written recommendation from a psychologist or psychiatrist stating they meet the eligibility criteria outlined in the Eligibility section, regardless of the funding source.

The following process applies for a **non-dependent** child or adolescent whose family is seeking Medicaid funded SIPP and Therapeutic Group Care services or general revenue funds from the Department to purchase residential treatment services.

- The referral process for SIPP is as follows:
 - A child and family staffing is scheduled with the family to discuss all treatment options, unless the family waives/declines the staffing, which is not required for the SIPP packet to be sent forward to the SIPP provider.
 - The SIPP packet is reviewed for completeness and submitted by the Community Based Care or Managing Entity, or designee to the SIPP provider to seek prior authorization through the utilization management process.
 - For recipients enrolled in a Managed Medical Assistance (MMA) plan, prior authorization and utilization management is completed by the MMA plan.
- The referral process for families requesting Department general revenue funds to purchase other types of residential treatment center services such as therapeutic group homes is as follows:
 - A child and family staffing is scheduled with the family to determine the most appropriate and least restrictive treatment options available to meet the child's needs.
 - If residential treatment is determined to be necessary as the least restrictive treatment option and funds are available, the Department may assist the family to purchase services.
 - The appropriate documentation for admission is reviewed for completeness and submitted by the Community Based Care or Managing Entity, or designee to the residential treatment center provider to seek prior authorization through the utilization management process.

Eligibility, referral, and approval guidelines for Medicaid funded Specialized Therapeutic Group Care and Specialized Therapeutic Foster Care services can be referenced in the Medicaid *Specialized Therapeutic Services Coverage and Limitations Handbook* at the link below:

http://ahca.myflorida.com/medicaid/review/specific_policy.shtml

Prior to placing **dependent** children/adolescents in a residential mental health treatment center, Community Based Care agencies must follow *CFOP 170-11, Chapter 39.407, F.S.* and *Florida Rule of Juvenile Procedure 8.350*, as applicable.

LOCATION OF SERVICES

Hospitals and residential treatment centers, including therapeutic group homes that provide mental health treatment services are located in every region in the state. AHCA's website provides the following link to locate and obtain information about the facilities they license.

- Facility/provider locator and information search: <http://www.floridahealthfinder.gov/facilitylocator/facloc.aspx>.

PROGRAM GOALS AND OBJECTIVES

Residential mental health treatment is provided to children/adolescents for the specific purpose of addressing their mental health needs through observation, diagnosis, and treatment in a therapeutic

setting. Residential mental health treatment services are not intended to be used for emergency placements or to provide secure shelter for a child/adolescent. Children/adolescents in acute psychiatric crisis should be referred to a crisis stabilization unit for emergency screening and stabilization.

MONITORING

Residential treatment centers are licensed and monitored by AHCA. Facilities may choose to be accredited and may ask AHCA to accept their accreditation, in lieu of receiving routine on-site licensure surveys, by submitting the required documentation from a recognized or approved accreditation organization. Additional information regarding the licensing and accreditation requirements can be referenced on the AHCA website at the following link:

http://ahca.myflorida.com/MCHO/Health_Facility_Regulation/Hospital_Outpatient/rtc.shtml

RESIDENTIAL TREATMENT PROVIDER RESPONSIBILITIES AND EXPECTATIONS

Residential treatment providers are required to comply with relevant federal and state statutes, accreditation requirements, and licensure and contract requirements.

MANAGING ENTITY RESPONSIBILITIES

The Managing Entity is expected to manage the residential system of care, either directly or by designation. Tasks include:

- Coordination of residential and community-based treatment resources within their local system of care with their local Community Based Care (CBC) provider(s) and other key stakeholders;
- Management of the child and family staffing process for non-dependent children, which includes the placement and discharge processes; and
- Review and submission of SIPP referral packets to SIPP providers for non-dependent Medicaid eligible children.
- SIPP packets that are submitted to the SIPP providers by the Managing Entity are for individuals that will be utilizing Department general funding due to being uninsured or underinsured. If an underinsured or uninsured child or youth, the SIPP packet is sent to the Managing Entity and if medical necessity is met, and funding is available, PRTS (Purchase of Residential treatment services) funding will be utilized. All Medicaid SIPP packets are submitted directly to the SIPP providers by those who complete the packet with assistance, if needed, from the Managing Entity.