

**June 2006**

**Provider Bulletin Number 641b**

## **Behavior Management Providers**

### **Continued Stay Screens and Absenteeism Day Coverage**

Effective with dates of service on and after July 1, 2006, only the behavior management preadmission screening to a Level VI facility (using either H0002 or H0032 HA) will be reimbursed. A screening for the purpose of a continued stay will be noncovered by the Kansas Medical Assistance Program (KMAP).

Effective with dates of service on and after July 1, 2006, Level V and Level VI Foster Care services do not include any Medicaid payment for absent days. If the youth is present in the Level V or Level VI facility for any meal served during normal dining time, the facility can bill KMAP for the service that day.

See the *Behavior Management Provider Manual, Section 8400* for more information.

Information about the Kansas Medical Assistance Program as well as provider manuals and other publications are on the KMAP Web site at <https://www.kmap-state-ks.us>. For the changes resulting from this provider bulletin, select the *Behavior Management Provider Manual* pages 8-5 and 8-10.

If you have any questions, please contact the KMAP Customer Service Center at 1-800-933-6593 (in-state providers) or (785) 274-5990 between 7:30 a.m. and 5:30 p.m., Monday through Friday.

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EDS is the fiscal agent and administrator of the Kansas Medical Assistance Program for the Division of Health Policy and Finance.

**8400. Updated 6/06**

The Adult and Medical Services does not specify the actual treatment requirements for a child but strongly suggests a cooperative program between the providers of behavior management services and the local community mental health center to provide a comprehensive array of services to the child and family.

To verify services provided in the course of a postpayment review, documentation in the beneficiary's medical record must support the service(s) billed.

**Preadmission Assessments:**

Level VI residential and crisis observation/stabilization placement require a preadmission assessment be completed and a determination made through the Mental Health Consortium (MHC) that other community based resources will not meet the child's needs.

The SRS social worker will contact the MHC and arrange the assessment. Preadmission assessments must be completed face-to-face with the Medicaid consumer by the community mental health center and must be completed within two (2) working days. Following completion of the assessment, the facility will be notified of the results via a letter from the MHC. If the admission is approved, a prior authorization (PA) number will be included in the letter for the facility to utilize when billing for the service. These services require a Client Service Agreement or Placement Agreement.

**Level VI Initial:** Non-crisis in nature, the screening must be completed within two (2) working days of the Consortium's receipt of the request. The admission must occur within thirty (30) days of the completion of the screening.

~~**Level VI Extension:** Request for an additional 90 day stay in Level VI care. The screening must be completed within two (2) working days of the Consortium's receipt of the request.~~

**Observation Stabilization within a Level VI facility:** Screening for observation stabilization for days three (3) through five (5) must be completed within two (2) days of the Consortium's receipt of the request.

#### 8400. Updated 6/06

- The placement of no more than one special needs foster child in each special foster home where behavior management Therapeutic Foster Care is provided with exceptions granted in writing by the licensing authority.
- A low staff-to-client ratio in each program administered by a behavior management provider to allow sufficient time to work with each child, with the foster parents, and with biological parents if they are available.
- Creation of a support system among foster parents.
- The availability of respite care for the foster parents.

#### Payment of Absent Days:

Level V and Level VI Foster Care services do not include any Medicaid payment for absent days. If the youth is present in the Level V or Level VI facility for any meal served during normal dining times, the facility can bill KMAP for the service that day.

Providers must document whether or not the youth is present in the facility for a meal served during normal dining times on the day any Level V or Level VI service is billed to KMAP.

~~Level V and Level VI Foster Care are reimbursed for absent days as follows:~~

- ~~• **Visitation**—Unlimited visitation days (within the total number of days approved for the child's stay) with a maximum of 14 days per visit are paid at the contracted per diem rate. The frequency, duration, and location of the visits must be a part of the child's individual case plan developed by the facility prior to the visitation. An approved visitation plan must be documented on an SRS form YA 3904 on file at the facility.~~

~~The day the child leaves the facility for the visit, he/she is counted as present in the facility. The day the child returns to the facility and all intervening days are counted as visit days.~~

- ~~• **Runaway**—Payment will be made for up to five (5) days at the contracted per diem rate unless both placement and payment are terminated sooner by the SRS Social Service supervisor.~~

~~The day the child runs away from the facility is considered the first day. Medicaid will not make payment for more than five days per episode.~~

- ~~• **Detention**—Payment will be made at the contracted per diem rate up to the day before departure to the detention center. The departure day is not eligible for reimbursement.~~