

Louisiana Department of Health Health Plan Advisory 16-23 September 6, 2016

Crisis Stabilization-New State Plan Service

The state received approval from the Centers for Medicare and Medicaid Services (CMS) to add crisis stabilization (CS) to the Children's Behavioral Health Services' State Plan Amendment (SPA). This service is no longer limited to youth enrolled in the Coordinated System of Care (CSoC).

Effective immediately, Healthy Louisiana Managed Care Organizations (MCOs) are responsible for developing an adequate provider network to ensure members in their plan have access to this service statewide.

MCOs should begin to assess the need for this service and create and implement a network development plan. If necessary, single case agreements shall be developed to ensure services are available.

MCOs are required to submit their network plan to Darrell Montgomery at Darrell.Montgomery@la.gov no later than Oct. 3, 2016. MCOs shall be ready to process claims no later than Sept. 1, 2016.

Service Definition

Crisis stabilization provides short-term and intensive supportive resources for the youth 0-20 years old and his/her family. The intent of this service is to provide an out-of-home crisis stabilization option for the family in order to avoid psychiatric inpatient and institutional treatment of the youth by responding to potential crisis situations. The goal will be to support the youth and family in ways that will address current acute and/or chronic mental health needs and coordinate a successful return to the family setting at the earliest possible time. During the time the crisis stabilization is supporting the youth, there is regular contact with the family to prepare for the youth's return and his/her ongoing needs as part of the family. It is expected that the youth, family and crisis stabilization provider are integral members of the youth's individual treatment team.

This service is provided as part of a comprehensive specialized psychiatric program available to all Medicaid eligible children with significant functional impairments resulting from an identified mental health or substance use disorder diagnosis. The medical necessity for this service must be determined, and service recommended, by a licensed mental health professional (LMHP) or physician, or under the direction of a licensed practitioner, to promote the maximum reduction of symptoms and/or restoration of an individual to his/her best age-appropriate functional level.

Service Components

- Prior to being referred to CS a preliminary assessment of risk, including crisis resolution and debriefing, mental status and medical stability and the need for further evaluation or other mental health services must be conducted.
- Consultation with a physician or with other qualified providers to assist with the individuals' specific crisis is included.
- Services provided to children and youth must include communication and coordination with the family and/or legal guardian, including any agency legally responsible for the care or custody of the child. Coordination with other childserving systems should occur, as needed, to achieve the treatment goals. All coordination must be documented in the youth's medical record.
- The assessment includes contact with the client, family members or other collateral sources (e.g., caregiver, school personnel) with pertinent information for the purpose of a preliminary assessment and/or referral to other alternative mental health services at an appropriate level.
- The child or adolescent must require a service that includes direct monitoring by professional behavioral health staff that would not be able to be provided by a less restrictive service.
- Follow up with the individual and, as necessary, with the individuals' caretaker and/or family members.
- Transportation is provided between the child's/youth's place of residence and other services sites and places in the community, and the cost of transportation is included in the rate paid to providers of these services

Code	Description	Modifier	Unit	Medicaid Rate
H0045	CRISIS STABILIZATION – INDIVIDUAL	НА	Day	\$180

Service Exclusions

The following services shall be excluded from Medicaid coverage and reimbursement:

- Components that are not provided to or directed exclusively toward the treatment of the Medicaid eligible individual.
- Services provided at a work site which are job tasks oriented and not directly related to the treatment of the recipient's needs.
- Any services or components in which the basic nature of which are to supplant housekeeping, homemaking or basic services for the convenience of an individual receiving services.
- Services rendered in an institute for mental disease.
- Crisis stabilization shall not be provided simultaneously with short-term respite care and shall not duplicate any other Medicaid State Plan service or service otherwise available to the recipient at no cost.
- Medicaid is not claimed for the cost of room and board. The minimum daily rate on file is an all-inclusive rate.

Provider Types

Crisis Receiving Center

Licensed per Revised Statute 40:2180.12 et seq. and Louisiana Administrative Code (LAC) 48:I Chapters 53 and 54 found at the following website: http://www.doa.la.gov/Pages/osr/lac/Code.aspx

• Respite Care Services Agency

Licensed as a Home and Community Based Services (HCBS) provider/In-Home Respite Agency per Revised Statute 40:2120.1 et seq. and Louisiana Administrative Code (LAC) 48:I Chapter 50 found at the following website: http://www.doa.la.gov/Pages/osr/lac/Code.aspx.

• Center-Based Respite

Licensed as an HCBS provider/Center-Based Respite per Revised Statute 40:2120.1 et seq. and Louisiana Administrative Code (LAC) 48:I Chapter 50 found at the following website: http://www.doa.la.gov/Pages/osr/lac/Code.aspx.

• Child Placing Agency (Therapeutic Foster Care)

Licensed as a Child Placing Agency by the Department of Child and Family Services (DCFS) (R.S. 46:1401-142).

http://www.dcfs.louisiana.gov/assets/docs/searchable/Licensing/Residential/20160 3 ChildPlacing.pdf

Provider Qualifications

- Providers of this service must operate within their scope of practice license required for the facility or agency to practice in the state of Louisiana.
- Services must be provided by an agency licensed by the Louisiana Department of Health (LDH) or DCFS.
- Providers must maintain medical records that include a copy of the plan of care or treatment plan, the name of the individual, dates of services provided, nature,

- content and units of rehabilitation services provided, and progress made toward functional improvement and goals in the treatment plan.
- Staff providing CS services must use clinical programming and a training curriculum approved by LDH prior to delivering services.