



State of Louisiana
Department of Health and Hospitals
Office of the Secretary

April 30, 2013

The Honorable John A. Alario, Jr., President
Louisiana State Senate
P.O. Box 94183, Capitol Station
Baton Rouge, LA 70804-9183

The Honorable David Heitmeier, Chairman
Senate Health and Welfare Committee
P.O. Box 94183, Capitol Station
Baton Rouge, LA 70804-9183

The Honorable Jack Donahue, Chairman
Senate Finance Committee
Louisiana State Senate
P.O. Box 94183, Capitol Station
Baton Rouge, LA 70804-9183

RE: Senate Resolution 119 of the 2011 Regular Session

Dear President Alario, Senator Heitmeier, and Senator Donahue:

Senate Resolution 119 (SR 119) of the 2011 Regular Session urged and requested the Coordinated System of Care (CSoC) Governance Board and the Department of Health and Hospitals (DHH) to report to the Senate Committee on Health and Welfare and the Senate Committee on Finance the status of efforts to implement the CSoC in Louisiana. This correspondence serves as the CSoC Governance Board and DHH's response to SR 119.

As a component of the Louisiana Behavioral Health Partnership, when fully implemented the Coordinated System of Care (CSoC) will serve up to 2,400 young people with behavioral health challenges who are in or at-risk of out of home placement and their families. The CSoC is an initiative of Governor Bobby Jindal that brings together the Department of Children & Family Services, the Department of Education, the Department of Health & Hospitals, the Office of Juvenile Justice, the Governor's Office and family, youth and advocate representatives. There are three primary goals for the CSoC:

- (1) Reducing the number of youth in residential/detention settings;
- (2) Decreasing the state's cost of providing services by leveraging Medicaid and other funding sources; and
- (3) Improving the overall outcomes for these children and their caregivers.

The CSoC began enrollment in five Act 1225 regions of the state in March 2012. This included the Shreveport, Monroe, Alexandria, and Capital areas as well as Jefferson Parish. In October 2012, the Jefferson Parish area was expanded to include Orleans, Plaquemines and St. Bernard parishes. This required submission of an amendment to the Centers for Medicare and Medicaid Services (CMS). At this time, CMS has not yet approved the amendment and so data reported in this response does not include information about youth being served in those three parishes.

Youth enrolled in the CSoC receive individualized care planning using an innovative practice known as “wraparound” provided by newly formed regionally-based Wraparound Agencies. In addition to wraparound care planning, the 1915(c) and 1915(b)(3) waivers that support CSoC will allow this subset of the youth population who have intensive needs to receive additional services including parent support and training, youth support and training, crisis stabilization, respite and independent living/skill building.

There has long been a national movement to implement systems of care in an effort to improve outcomes for young people and their families. A recent publication based on evaluation data from the national system of care effort reports, “Systems of care decrease behavioral and emotional problems, suicide rates, substance use and juvenile justice involvement. They also increase strengths, school attendance and grades, and stability of living situations.”¹ Given the compelling need in Louisiana and the demonstrated outcomes of a system of care approach across the country, Louisiana continues efforts to implement the CSoC in earnest.

CSoC began enrollment on March 1, 2012. This report contains information pertaining to the initial thirteen months of operation (through March 31, 2013). It is anticipated that there will continue to be increased clarity and reporting ability going forward as operating protocols and processes between Magellan, the participating state agencies, the regionally based Wraparound Agencies and the Family Support Organization mature. In order to respond to SR 119, the following information is offered and reflects the Department of Health and Hospitals and CSoC Governance Board’s intent to openly share information with respect to CSoC performance as it develops.

Names of individuals serving on the CSoC Governance Board.

| Name | Role | Department /Organization (if applicable) |
|----------------------|-------------|--|
| Anne Cassidy | Member | Governor’s Office |
| Sherri Houin | Member | Family Representative |
| Kathy Kliebert | Member | Department of Health and Hospitals |
| Mary Livers | Chair | Office of Juvenile Justice |
| Stephen Osborn | Member | Department of Education |
| Shari Rich | Member | Family Representative |
| Suzy Sonnier | Member | Department of Children and Family Services |
| Mark Thomas | Vice Chair | Advocate Representative |
| Vacant | Member | Youth Representative |
| Jody Levison-Johnson | Staff | Department of Health and Hospitals/Office of Behavioral Health |

Name and business address of the Statewide Management Organization (SMO).

Magellan Health Services in Louisiana
10516 Perkins Rowe
5th Floor Suite 500
Baton Rouge, LA 70810

¹ Stroul, B., Goldman, S., Pires, S., & Manteuffel, B. (2012). *Expanding systems of care: Improving the lives of children, youth and families*. Washington, DC: Georgetown University Center for Child and Human Development, National Technical Assistance Center for Children’s Mental Health.

Name, business address and geographic coverage area of each Wraparound Agency (WAA).

National Child & Family Services of Baton Rouge

10543 N. Glenstone Place, Baton Rouge, LA 70810

Geographic coverage area: Act 1225 Region 2 including: Ascension, East Baton Rouge (includes Zachary, City of Baker and Central Community school systems), West Baton Rouge, East Feliciana, West Feliciana, Iberville, and Pointe Coupee.

Eckerd CenLa Wraparound Agency

6501 Coliseum Blvd., Suite 700, Alexandria, LA 71303

Geographic coverage area: Act 1225 Region 7 including: Avoyelles, Grant, LaSalle, Vernon, Rapides, Catahoula, Concordia, and Winn parishes.

Choices, Inc.

124 Jefferson, Mansfield, LA 71052

Geographic coverage area: Act 1225 Region 8 including: Caddo, DeSoto, Natchitoches, Red River, Sabine, Bienville, Bossier, Claiborne, Jackson, and Webster parishes.

Wraparound Services of Northeast Louisiana

3001 Armand, Suite G, Monroe, LA 71201

Geographic coverage area: Act 1225 Region 9 including: Morehouse, Ouachita (includes the City of Monroe School System), East Carroll, Franklin, Jackson, Lincoln, Madison, Richland, Tensas, Union and West Carroll parishes.

National Child & Family Services

824 Elmwood Park Blvd., Suite 135, Harahan, LA 70123

Geographic coverage area: Jefferson

Name, business address and geographic coverage area of each Family Support Organization (FSO).

During this reporting period, the state moved to a single statewide Family Support Organization that was selected through a Request for Information process.

Ekhaya Youth Project

2601 Tulane Avenue, Suite 622, New Orleans, LA 70119 (Ekhaya has staff located in each region in in-kind or low-cost (shared) space.)

Geographic coverage areas: Jefferson Parish, Act 1225 Regions 2, 7, 8, 9

The total number of individuals receiving services in CSoC broken down by region.

The chart below indicates the number of children currently enrolled in the Coordinated System of Care by region as of March 31, 2013.

| Act 1225 Region | Area | Number of members receiving CSoC Services |
|------------------|------------------|---|
| 2 | Capital Area | 144 |
| 7 | Alexandria Area | 109 |
| 8 | Shreveport Area | 181 |
| 9 | Monroe Area | 189 |
| Jefferson Parish | Jefferson Parish | 102 |
| TOTAL | | 725 |

Both the State CSoC Team and Magellan have continued to work with each partnering state agency to identify priority populations for enrollment and to establish effective referral and enrollment processes. Magellan continues to screen all referrals on children and youth for clinical eligibility.

The total number of enrolled providers broken down by provider type and by region.

The five CSoC implementing regions each have a Wraparound Agency enrolled in the Magellan provider network. During the past reporting period, the state moved to a single statewide Family Support Organization who is responsible for offering Parent Support and Training and Youth Support in Training in each implementing region. Across the state, the total number of providers currently enrolled who may serve children in any capacity is outlined in the chart below. These data are tracked by OBH regions, rather than CSoC regions as they apply to the entire Louisiana Behavioral Health Partnership. The following represents a summary view of provider volume as of the end of March 2013.

| DHH Region/ Human Service District | Area | Number of providers as of March 31, 2013 |
|--|-----------------------|--|
| Metropolitan HSD | New Orleans Area | 358 |
| Capital Area HSD | Baton Rouge Area | 258 |
| South Central LA HSA | Houma/Thibodeaux Area | 68 |
| 4 | Acadiana Area | 127 |
| 5 | Lake Charles Area | 64 |
| 6 | Alexandria Area | 82 |
| 7 | Shreveport Area | 140 |
| 8 | Monroe Area | 124 |
| Florida Parishes HSA | Northshore Area | 152 |
| Jefferson Parish HSA | Jefferson Parish | 160 |

For detailed information about providers by provider type and region as of March 31, 2013, please see Attachment A to this report. It is important to note that Attachment A contains only private providers and not OBH/Local Governmental Entity providers.

The amount of state general funds and matching federal dollars expended each quarter by the CSoC.

For the 3rd quarter of FY13, \$2,121,963 was spent on the CSoC. This totaled \$1,056,913 in SGF and \$1,065,050 in matching federal dollars.

The amount and percentage of the reduction of the cost to the state of providing services by leveraging state general fund through the Medicaid program as well as increasing service effectiveness and efficiency through the reduction of duplication across state agencies.

DHH Fiscal, in collaboration with OBH, Medicaid and Mercer, is currently working on the federal reporting requirements for the entire Louisiana Behavioral Health Partnership. This includes reporting on the cost effectiveness of the CSoC program. Submission to Centers for Medicare and Medicaid Services (CMS) is required upon completion of the first full year of the program's operation. February 28, 2013 marked the end of the first year of implementation. DHH is now in the posture of auditing the Statewide Management Organization. This audit is inclusive of validating encounter data, costs and savings associated with the Coordinated System of Care. Once this series

of audits has been completed, this data will be reportable to CMS. At that time, the data will also be incorporated into SR 119 responses.

The percentage of CSoC enrolled youth who have had to be placed in out-of-home treatment which includes but is not limited to detention, secure care facilities, psychiatric hospitals, residential treatment facilities, facilities serving the developmentally disabled, addiction facilities, alternative schools, or foster care.

Of the 725 children and youth currently enrolled across the five implementing regions, 13.8% (100) have experienced some period of time in out-of-home placement.

The number of licensed mental health professionals by type employed by the SMO to manage the toll free referral line.

Magellan in Louisiana's clinical team involved with call center and care management operations includes:

- 26 Licensed Professional Counselors (LPC)
- 17 Licensed Clinical Social Workers (LCSW)
- 2 Medical Doctors
- 11 Physician Advisors
- 3 Registered Nurses (RN)
- 5 Licensed Marriage & Family Therapists (LMFT)
- 1 Licensed Master Social Worker (LMSW)
- 1 Licensed Addiction Counselor (LAC)
- 1 Registered Social Worker (RSW)

Additionally, there are eleven people with multiple licenses:

- 1 is a Licensed Professional Counselor (LPC) and a Nationally Certified Counselor (NCC)
- 2 is a Licensed Addiction Counselor (LAC), LMFT and LPC
- 1 is a Certified Clinical Supervisor and LAC
- 3 are LMFTs and LPCs
- 1 is a LCSW and RN
- 2 is a Licensed Mental Health Counselor and LPC

The number of calls received by the SMO toll free referral line.

Between March 1, 2012, when the Magellan service line began and March 31, 2013, Magellan received a total of 127,298 calls with an abandonment rate of 1.36 percent, an average speed of answer of 7 seconds and an average handle time just over 6 minutes. Since previous S.R. 119 reporting, Magellan has reorganized its call center to improve customer service performance and ensure greater specialization among clinical care management staff. Because of this change, tracking calls related specifically to children's services is inconsistent with previous reports and numbers are most likely reflective of an under-reporting of actual experience.

Additionally, Magellan has discovered some systemic challenges that are causing an under-reporting in the number of CSoC screenings. Because Magellan routinely conducts at least an initial high-risk screening for almost all children entering the Louisiana Behavioral Health Partnership and about 49,000 children have been served in some fashion by Magellan since March 1, 2012, we know that the data tracking screenings within Magellan systems is under-reported. Magellan is working to rectify this situation.

Magellan has two types of screens to pre-identify children potentially eligible for CSoC. The first is

an abbreviated, three-question screen administered by a non-clinical person to identify high-risk individuals. It is called the high-risk screening. Children who flag positively on the high-risk screening are also screened by the SMO using the Child and Adolescent Needs and Strengths (CANS) Brief screen. This is administered by a clinician, encompasses additional questions and is known as the CANS Brief.

The data from Magellan shows 12,416 screenings (this number includes clients who called and were screened multiple times). As noted, we know this number is likely to be under-reported and is being further explored. Of those 12,416 screenings tracked, 5,828 did not qualify on either the high-risk or CANS Brief screen and were referred to other non-CSoC services. There were 6,588 high-risk screenings (representing 6,285 unduplicated members), where the member was found initially or potentially eligible. These members are transferred to a clinician for the CANS Brief. Some who are found initially ineligible on the high-risk screen may be sent to a clinician for the CANS Brief based on the caller's wishes. Of the 6,285 unduplicated members who received a CANS Brief, 2,810 unduplicated members were deemed initially eligible for CSoC. These members were either referred to CSoC services if they lived in an implementing region or to Magellan's Recovery/Resiliency Care Management program if they did not live in an implementing region. Those clients that did not screen eligible were referred to other non-CSoC services.

The number of calls referred to a WAA by region.

The following table reflects the number of referrals made to a WAA by region as of March 31, 2013.

| Act 1225 Region | Area | Number referred to a WAA as of 3/31/2013 |
|------------------|------------------|--|
| 2 | Capital Area | 519 |
| 7 | Alexandria Area | 314 |
| 8 | Shreveport Area | 539 |
| 9 | Monroe Area | 437 |
| Jefferson Parish | Jefferson Parish | 313 |
| TOTAL | | 2122 |

The number of calls referred to non-WAA services by region and by provider type.

Of the 2,810 members who screened initially eligible for CSoC, 769 members were in non-implementing regions. Thirty five (35) members who screened eligible for CSoC chose or were already participating in Multi-Systemic Therapy and therefore could not be concurrently enrolled in CSoC.

Other referrals in non-implementing regions, specifically for this small group of potentially CSoC-eligible children, are summarized below:

| Service Type | # of referrals in non-implementing regions | | | |
|--|--|----------|----------|----------|
| | Region 3 | Region 4 | Region 5 | Region 6 |
| Psychosocial Rehabilitation (PSR) | 30 | 61 | 28 | 19 |
| Other community-based services (including Homebuilders, Community Psychiatric Support and Treatment and Family Functional Therapy) | 34 | 68 | 26 | 19 |

In addition, many children were referred to a psychiatrist or routine outpatient services which are not reported in the table above.

The number of referrals denied for CSoC services.

All children/youth that are brought to the attention of Magellan undergo an initial abbreviated screening questionnaire to determine if they may qualify for CSoC. A more comprehensive screening is conducted for those who flag positively on this questionnaire. At this point, 5,828 did not flag positively on the abbreviated questionnaire or the CANS Brief. Any child can be reassessed at a later time and many will be automatically reassessed as part of the transition out of a specific set of services.

Average length of services for WAA services statewide and by region.

Average length of services for member's currently enrolled in a WAA is 162 days. Average length of services for members' enrolled, and including those discharged, from WAA census since March 1, 2012 is 134 days. Broken down by region is: Jefferson Parish 102 days; Region 2 (Capitol Area) 114 days; Region 7 (Alexandria Area) 139 days; Region 8 (Shreveport Area) 168 days; Region 9 (Monroe Area) 171 days.

The length of stay averages reported do not yet reflect an accurate picture of what will be a typical length of stay in CSoC. As processes mature, we anticipate the lengths of stay will stabilize and be more aligned with national averages which generally range from 12-18 months.

Average length of services for CSoC clients in non-WAA services statewide and by region.

The average length of services for CSoC eligible members in non-WAA services statewide is 129 days and by region is: Region 3= 67 days; Region 4= 91; Region 5=101 days; Region 6= 109 days.

Total number of Medicaid consumers approved for CSoC services by the SMO.

Of the 725 members currently enrolled in CSoC, there are 679 who are Medicaid consumers.

Total number of other insured consumers approved for CSoC services by the SMO.

Of the 725 members currently enrolled in CSoC, there were 8 other insured consumers approved for CSoC services.

Total number of non-insured consumers approved for CSoC services by the SMO.

Of the 725 members enrolled in CSoC, there are 38 who are considered non-insured.

Total number of prospective reviews conducted for CSoC clients by the SMO.

Magellan has conducted 12,416 screenings for CSoC services since March 1, 2012. Of those, there were 10,413 unique children screened.

Total number of grievances and appeals categorized by type by consumers and advocates, and percentage that were resolved.

Since March 2012, Magellan received three (3) grievances from members' legal guardians or a provider regarding CSoC and/or WAA services. To date, all grievances have been resolved.

Thank you for the opportunity to report on our efforts to improve the system of care for children and youth with significant behavioral health challenges and their families in Louisiana. The CSoc Governance Board and DHH are dedicated to working with the legislature and public and private stakeholders to continue to improve our service delivery system and address the behavioral health needs of children and youth within our state. Should you have any questions regarding the information contained in this correspondence, please feel free to contact Ms. Jody Levison-Johnson, the Deputy Assistant Secretary at the Office of Behavioral Health, at (225) 342-5921.

Sincerely,



Courtney Phillips, MPA
Interim Deputy Secretary
Department of Health & Hospitals



Mary L. Livers, PhD, MSW
Chair
Coordinated System of Care Governance Board

Cc: The Honorable Members of the Senate Health and Welfare Committee
The Honorable Members of the Senate Finance Committee
David R. Poynter Legislative Research Library
Ms. Jody Levison-Johnson, Deputy Assistant Secretary, Office of Behavioral Health
Ms. Connie Goodson, Director, Coordinated System of Care, Office of Behavioral Health
Dr. Anthony Speier, Assistant Secretary, Office of Behavioral Health
Members of the CSoc Governance Board