For Your Information Special Medicaid Benefits for Children and Youth

Developmental Disability (DD) Medicaid Waiver Services

The following services are available to children and youth with developmental disabilities. To apply for services, contact your local governing entity or LGE. Phone numbers are listed on the attachment or on the Louisiana Department of Health website.

For those with developmental disabilities, who are able to live at home and not in an institution, waiver programs are available. To sign up for "waiver programs" that offer Medicaid and additional services to eligible persons, including individuals whose income may be too high for traditional Medicaid, you can request a screening to be added to the Developmental Disabilities Request for Services Registry (DD RFSR). The DD RFSR is arranged by urgency of need and date of application for developmentally disabled waiver services. The tool known as the Screening for Urgency of Need (SUN), was designed to identify any needs a person may have, review current supports a person has and uses now, and determine the urgency of any unmet needs that the person has. Having a current Statement of Approval is required to remain on the DD RFSR, receive a Waiver offer, or have a Screening for Urgency of Need (SUN) assessment.

The **Children's Choice Waiver (CC)** program provides services in the home and in the community to individuals 0 through 20 years of age, who currently live at home with their families or will leave an institution to return home. This waiver provides an individualized support package with a maximum capped cost, and is designed for maximum flexibility. This waiver includes support coordination, family support, crisis support, family training, center-based respite, environmental accessibility modifications, specialized medical equipment and supplies, permanent supportive housing stabilization, permanent supportive housing stabilization transition, some specialized therapies (aquatic, music, art, sensory integration, and hippotherapy). Children remain eligible for the Children's Choice Waiver until their twenty-first birthday, at which time they will transition to the most appropriate waiver that meets their needs as long as they remain eligible for waiver services.

The **Supports Waiver (SW)** program provides services in the home and in the community to individuals 18 years of age or older, who are eligible to receive OCDD waiver services. This waiver offers support coordination, supported employment (individual or group), day habilitation/community life engagement and transportation, prevocational services/community career planning and transportation, respite (centerbased or home), habilitation, permanent supportive housing stabilization and transition, personal emergency response systems, and expanded dental services for adult waiver beneficiaries.

The **Residential Options Waiver (ROW)** program provides services in the home and the community to individuals of all ages who are eligible to receive OCDD waiver services. It is a capped waiver where the person's individual annual budget is based upon the

person's assessed support needs. This waiver offers support coordination, community living supports, host home services, companion care services, shared living, adult day health care, respite care (out of home), personal emergency response system, one time transitional services, environmental accessibility adaptations, monitored in home caregiving, assistive technology/specialized medical equipment and supplies, community life engagement development, transportation-community access, professional services, nursing services, supported employment (individual or group)transportation, prevocational/community career planning and transportation, day habilitation/community life engagement and transportation, housing stabilization service, housing stabilization transition and expanded dental services for adult waiver beneficiaries.

The **New Opportunities Waiver (NOW)** program provides services in the home and in the community to individuals 3 years of age or older who are eligible for OCDD Waiver Services. This waiver offers individual and family supports, center-based respite, community life engagement development, environmental accessibility adaptions, specialized medical equipment, supportive independent living, substitute family care, day habilitation/community life engagement and transportation, supported employment (individual or group) transportation, prevocational/community career planning and transportation, personal emergency response system, skilled nursing, one time transitional services, housing stabilization transition, housing stabilization, monitored in home care giving, adult companion care, professional services, and expanded dental services for adult beneficiaries

Although not a waiver, services are also available for children ages birth through two years. EarlySteps contacts for each parish are listed on this web page: https://ldh.la.gov/index.cfm/directory/detail/609

Support Coordination

A support coordinator works with you to develop a full list of all the services you need and then helps you get them. This can include things like medical care, therapies, personal care services, equipment, social services and educational services. If you are a Medicaid recipient under the age of 21 and if support coordination is medically necessary, you may be eligible to receive support coordination services immediately. Contact Statistical Resources, Inc. (SRI) at 1-800-364-7828. Support coordination is also provided through EarlySteps for eligible children.

Children under age 21 are entitled to receive all medically necessary health care, diagnostic services, treatment, and other measures that Medicaid can cover.

This includes many services that are not covered for adults.

The following benefits are available to all Medicaid eligible children and youth under the age of 21 who have a medical need:

Transportation

Non-Emergency Medical Transportation (NEMT) is transportation provided to Medicaid eligible children and youth to and/or from a Medicaid covered service, including carved-out services, or value-added benefits when no other means of transportation is available. Medicaid covered transportation is available to Medicaid beneficiaries when the beneficiary is enrolled in a Medicaid benefit program that explicitly includes transportation services. Healthy Louisiana managed care plan recipients should contact the following numbers to schedule NEMT services. NEMT services may be scheduled Monday through Friday from 7am to 7pm. NEMT services should be scheduled at least 48 hours in advance of the requested date of transport, not including Saturday and Sunday.

| Aetna Better Health of Louisiana | 1-877-917-4150 |
|----------------------------------|----------------|
| AmeriHealth Caritas Louisiana | 1-888-913-0364 |
| Healthy Blue | 1-866-430-1101 |
| Humana Healthy Horizons | 1-844-613-1638 |
| Louisiana Healthcare Connections | 1-855-369-3723 |
| United Healthcare Community Plan | 1-866-726-1472 |

Medicaid beneficiaries, who are eligible for transportation services and are unsure which managed care plan provides those services, should contact Healthy Louisiana at 1-855-229-6848 for assistance.

Medicaid beneficiaries who are eligible for transportation services but do not receive transportation services through a managed care plan, should contact Verida to schedule a ride at 1-855-325-7626.

An attendant shall be required when the beneficiary is under the age of 17.

The attendant must:

- Be a parent, legal guardian, or responsible person designated by the parent/legal guardian; and
- Be able to authorize medical treatment and care for the beneficiary.

Attendants may not:

- Be under the age of 17; or
- Be a Medicaid provider or employee of a Medicaid provider that is providing services to the beneficiary being transported, except for employees of a mental health facility in the event a beneficiary has been identified as being a danger to themselves or others or at risk for elopement.
- Be a transportation provider or an employee of a transportation provider

The only exception to the attendant requirements are for all females, regardless of their age, seeking prenatal and/or postnatal care. These females shall not be required to have an attendant.

If a child is to be transported, either as a beneficiary or an additional passenger, the parent or guardian of the child is responsible for providing an appropriate child passenger restraint system. The transportation providers will not transport any child without the appropriate child passenger restraint system.

Applied Behavioral Analysis- Based Therapy Services (ABA)

ABA therapy is the design, implementation and evaluation of environmental modification using behavioral stimuli and consequences to produce socially significant improvement in human behavior, including the direct observation, measurement and functional analysis of the relations between environment and behavior. ABA-based therapies teach skills through the use of behavioral observation and reinforcement or prompting to teach each step of targeted behavior. ABA-based therapies are based on reliable evidence of their success in alleviating autism and are not experimental. This service is available through Medicaid for persons 0 to 21 years of age. For Medicaid to cover ABA services through a licensed provider they must be ordered by a physician and be prior authorized by Medicaid.

ABA is accessed through your Managed Care Organization. All Medicaid eligible children are enrolled in the Medicaid Managed Care Program for their Specialized Behavioral Health Services even if they may have Fee-for-Service Medicaid for their Physical Health Services.

Aetna Better Health of Louisiana1-855-242-0802

AmeriHealth Caritas Louisiana 1-888-756-0004

Healthy Blue 1-844-406-2389

Humana Healthy Horizons 1-800-448-3810

Louisiana Healthcare Connections 1-866-595-8133

UnitedHealthcare Community Plan 1-866-658-5499

If you are not sure who your Managed Care Organization is you can contact the Medicaid Managed Care Program Line at 1-855-229-6848 to find out which Managed Care Organization you are covered under.

Mental Health and Substance Use Services

Children and youth may receive mental health and substance use services if it is medically necessary. These services include necessary assessments and evaluations; individual, group and/or family therapy; medication management; crisis services; community psychiatric support and treatment; psychosocial rehabilitation; multi-systemic therapy; functional family therapy; homebuilders; assertive community treatment for youth ages 18-20; therapeutic group home; psychiatric residential treatment facility; inpatient psychiatric treatment; and substance use disorder treatment services. In addition, eligible at-risk children and youth may access specialized services, including peer support, short-term respite, and independent living skills building, through the Coordinated System of Care program.

How to Access Mental Health and Substance Use Care

How a person gets these services depends on the type of coverage they have.

If the member is **enrolled in a Medicaid Managed Care Plan,** they can access services toll free by calling their plan using the numbers listed below. All Medicaid eligible children are enrolled in Medicaid Managed Care Program for their Specialized Behavioral Health Services even if they may have Fee-for-Service Medicaid for their Physical Health Services.

| Aetna Better Health of Louisiana | 1-855-242-0802 |
|----------------------------------|----------------|
| AmeriHealth Caritas Louisiana | 1-888-756-0004 |
| Healthy Blue | 1-844-521-6941 |
| Humana Healthy Horizons | 1-800-448-3810 |
| Louisiana Healthcare Connections | 1-866-595-8133 |
| UnitedHealthcare Community Plan | 1-866-658-5499 |

If you are not sure who your Managed Care Organization is you can contact the Medicaid Managed Care Program Line at 1-855-229-6848 to find out which Managed Care Organization you are covered under.

If a member is part of the Coordinated System of Care (CSoC) that helps at-risk children and youth who have serious behavioral health challenges, they can access services by contacting Magellan at 1-800-424-4489/TTY 1-800-424-4416. CSoC offers services and supports that help children and youth return remain at home. Services include youth support and training; parent support and training; independent living skill building services; and short-term respite, as well as all other Medicaid State Plan behavioral health services. Parents and guardians will be assisted in selecting a provider in their area to best meet the needs of the child or youth and the family. Members may apply for CSoC by contacting their Managed Care Organization and requesting referral to CSoC. The Managed Care Organization will transfer the caller to Magellan for a brief Child and Adolescent Needs Assessment (CANS) screening. If the youth screens positive on the brief CANS assessment Magellan will connect you to the regional Wraparound Agency for further assessment.

EPSDT (Early and Periodic Screening, Diagnostic, and Treatment) Dental Services

The EPSDT Dental Program provides coverage of certain diagnostic; preventive; restorative; endodontic; periodontic; removable prosthodontic; maxillofacial prosthetic; oral and maxillofacial surgery; orthodontic; and adjunctive general services. Specific policy guidelines apply.

Comprehensive Orthodontic Treatment (braces) are paid only when there is a cranio-facial deformity, such as cleft palate, cleft lip, or other medical conditions which possibly results in a handicapping malocclusion. If such a condition exists, the recipient should see a Medicaid-enrolled orthodontist. Patients having only crowded or crooked teeth, spacing problems or under/overbite are not covered for braces, unless identified as medically necessary.

DentaQuest and MCNA Dental administer the dental benefits for eligible Medicaid recipients. Contact your plan toll free by calling the numbers listed below to locate a network provider for questions about covered dental services.

DentaQuest 1-800-685-0143 MCNA Dental 1-855-702-6262

The rest of your medical services will either be accessed through Fee-for-Service Medicaid if you have Fee-for-Service Medicaid for your physical health services or through your Managed Care Organization if you chose to "opt in" to the Medicaid Managed Care Program for your physical health services.

Chisholm Class Members (Medicaid eligible children who are on the DD Request for Services Registry) are allowed to participate in the Medicaid Managed Care Program if they "opt in." For more information about these options, contact the Medicaid Managed Care Program hotline toll free at 1-855-229-6848.

EPSDT (Early and Periodic Screening, Diagnostic, and Treatment) Exams and Checkups

Medicaid beneficiaries under the age of 21 are eligible for checkups ("EPSDT preventive screening"). These screenings include a health history; physical exam; immunizations; laboratory tests, including lead blood level assessment; vision and hearing checks; developmental screening; autism screenings; perinatal depression screening; and dental screenings. They are available both on a regular basis and whenever additional health treatment or services are needed.

EPSDT preventive screening may help to find problems, which need other health treatment or additional services. Beneficiaries under 21 years of age are entitled to receive all medically necessary health care, screening, diagnostic services, treatment, and other measures covered under federal Medicaid statutes and regulations to correct or improve physical or mental conditions. Services may include those not otherwise covered by Louisiana Medicaid for beneficiaries age 21 and older, unless prohibited or excluded.

EPSDT (Early and Periodic Screening, Diagnostic, and Treatment) Personal Care Services (PCS)

EPSDT Personal Care Services (PCS) are provided by direct service workers (DSWs) and defined as tasks that are medically necessary when physical or cognitive limitations due to illness or injury necessitate assistance with eating, toileting, bathing, bed mobility, transferring, dressing, locomotion, personal hygiene, and bladder or bowel requirements. PCS does not include medical tasks such as medication administration, tracheostomy care, feeding tube or catheter management. The Medicaid Home Health program or Extended Home Health program provides those medical services. PCS must be ordered by a practitioner (physician, advance practice nurse, or physician assistant). The PCS provider must request approval for the service from Medicaid or the Managed Care Organization.

Extended Skilled Nursing Services

Children and youth may be eligible to receive skilled nursing (over 3 hours per day) in the home. These services are provided by a home health agency. An authorizing healthcare provider, which includes a physician, nurse practitioner, clinical nurse specialist, or physician assistant licensed, certified, registered or otherwise authorized to order home healthcare services consistent with state law must order this service. Once ordered by a authorizing healthcare provider, the home health agency must request approval for the service from Medicaid or the Managed Care Organization.

Intermittent Nursing Services

Nursing visits to EPSDT individuals that do not exceed three hours per day may be provided without a prior authorization request unless more than one nursing visit a day is needed. These services must still be ordered by a physician and provided by a home health agency.

<u>Pediatric Day Health Center</u> These centers serve medically fragile individuals under the age of 21, including technology dependent children, who require nursing supervision and possibly therapeutic interventions all or part of the day due to a medically complex condition. These facilities offer an alternative or supplement to receiving in-home nursing care. PDHC may be provided up to seven days per week and up to 12 hours per day as documented by the beneficiary's Plan of Care.

Physical Therapy, Occupational Therapy, Speech Therapy, and Audiology Services

If a child or youth requires rehabilitation services such as physical, occupational or speech therapy, psychology, or audiology services, these services can be provided at school, through the EarlySteps early intervention program, in an outpatient facility, in a rehabilitation center, at home, or in a combination of settings, depending on the child's needs.

For Medicaid to cover these services at school (ages 3 to 21), or through the early intervention program with EarlySteps (ages birth through two years old), the services must be part of the Individualized Education Program (IEP) or Individualized Family Service Plan (IFSP). For Medicaid to cover the services through an outpatient facility, rehabilitation center, or home health, they must be ordered by an authorized healthcare provider. Once ordered by an authorized healthcare provider, the service provider must determine if prior authorization is required by Fee-for-Service Medicaid or the Managed Care Organization.

For information on receiving these therapies contact your school or early intervention center or other providers. EarlySteps contacts for each parish are listed on this web page: https://ldh.la.gov/index.cfm/directory/detail/609. Call the Specialty Care Resource Line for referral assistance at 1-877-455-9955 for Fee-for-Service Medicaid or call your Managed Care Organization using the contacts listed above under Mental Health to locate other therapy providers.

Medical Equipment and Supplies

Children and youth can obtain any medically necessary medical supplies, equipment and appliances needed to correct, or improve physical or mental conditions. Medical equipment

and supplies must be ordered by a physician. Once ordered by a physician, the supplier of the equipment or supplies must determine if prior authorization is required by Fee-for-Service Medicaid or the Managed Care Organization.

If you need a service that is not listed above contact the Specialty Care Resource Line toll-free at 1-877-455- 9955 or TTY 1-877-544-9544 or the participant's Managed Care Organization Member Services or Medicaid Managed Care Case Manager.