



Community Based Services Team

This policy and related rate change are retroactive to date of service on and after October 12, 2015.

As noted in previous policy (E2015-075), the completion of a pre-admission screening tool and the convening of a community based services team (CBST) meeting is no longer a requirement for admission into a Psychiatric Residential Treatment Facility (PRTF) as of October 12, 2015.

Because PRTFs are designed to address chronicity and not acuity, admissions to a PRTF are planned events. The MCO shall facilitate discussion with representation from the responsible CMHC, the parents (as appropriate) or caregivers (including child welfare contractor or juvenile services case manager, if applicable), other persons knowledgeable about the child or adolescent, and the child or adolescent as appropriate. This group serves as a quasi-CBST and the forum may be telephone conferencing, tele-video conferencing, combination thereof, e.g., Go To Meeting or Adobe Connect, or any other means to more expediently involve all parties to discuss problems associated with the individual's treatment (if in treatment); criteria regarding diagnosis; chronic safety concerns; functional impairment; need for continued support; and, what available community supports and treatment there are in order to determine if the child or adolescent can be treated and supported safely in the community in lieu of PRTF treatment.

Though meetings are made with the CMHC, the MCO is responsible for authorizing an admission should it be determined the child or adolescent cannot be supported safely in the community. CMHC participation in the quasi-CBST consultation with the MCO prior to admission into a PRTF admission will be reimbursed using H0032-HA.

If the youth is on the SED Waiver, the CMHC may bill Wraparound (H2021) for participating in the quasi-CBST consultation facilitated by the MCO.

If the youth is enrolled and receiving services with the CMHC but not on the SED Waiver, the CMHC may bill H0032-HA for participation in the quasi-CBST consultation facilitated by the MCO.

If the youth is not enrolled and receiving services with the CMHC, the CMHC may bill H0032-HA for participation in the quasi-CBST consultation facilitated by the MCO. Because there are occasions when the child or adolescent is not known to the CMHC and not enrolled in services, an open treatment record is not a requirement for reimbursement.

If the discharge plan is from a hospital setting to a PRTF, the MCO shall facilitate a quasi-CBST consultation as described above. The CMHC may bill H0032-HA for participating in a quasi-CBST consultation facilitated by the MCO.

The reimbursement rate for H0032-HA is \$80 per event, per member, per day. CMHC participation in a quasi-CBST consultation shall be a minimum of one individual and can be the child/adolescent's case manager, a Qualified Mental Health Professional, or person designated as the PRTF Liaison. If the youth/adolescent is unknown to the CMHC, a clinician shall participate in the case consultation. The CMHC may not bill if the youth is residing in an institution.