

MEDICAID SERVICES FOR
CHILDREN WITH DISABILITIES:
WHO DOES WHAT?

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GUARDIAN AD LITEM CONFERENCE 2015

The Plan

- Medicaid Types
 - ▣ By Service
 - ▣ By Provider Access
 - ▣ By Eligibility
- Challenging Denials
- Case Studies

MEDICAID SERVICE TYPES



Medicaid

Service Types

State Plan Medicaid

- Statewide
- No cap on enrollees
- Comparable services for anyone eligible
- Children get full range of services, including some HCBS

Home and Community-Based Service Waiver

- Limited to defined population
- Cap on enrollees
- HCBS to prevent/delay institutionalization
- Enrollees also get SP Medicaid

State Plan Medicaid Services (Not Exhaustive)

Mandatory

- Inpatient & outpatient hospital
- Physician & nurse practitioner
- Labs & x-rays
- Prenatal care, nurse midwife & family planning
- ***EPSDT for under 21***
- Rural health clinic
- Fed Qualified Health Ctr

Optional

- HCBS (disabilities or chronic medical conditions)
- Pediatric nursing facilities
- Inpt psychiatric for under 21
- Nursing Home or ICF/DD
- Prescription medication
- Personal care services
- Private duty nursing
- PT, OT, S/LT, RT
- Vision & dental services
- Durable medical equipment

EPSDT: SP Medicaid for Children

- Diagnosis & treatment necessary to “**correct or ameliorate** defects and physical and mental illnesses and conditions discovered by the screening services, whether or not such services are covered under the State plan.” 42 USC §1396d(r)(5) (1989 amendment)
- Broader definition of medical necessity than adults
- Wider selection of services than adults: includes all Mandatory & Optional Medicaid Services

SP Medicaid Services for Children: A Sampler

- Applied Behavior Analysis for kids w/ASD: *Garrido v. Dudek*, 731 F. 3d 1152 (11th Cir. 2013)
- Incontinent supplies: *Smith v. Benson*, 703 F. Supp. 2d 1262 (S.D. Fla. 2009)
- Personal cares assistance
- Private duty nursing
- Therapy services

SP Medicaid Services: Child Welfare-Related

- Medicaid Foster Care (MFC)
- Specialized Therapeutic Foster Care (STFC)
- Children's Medical Assessment Team (CMAT): required for NH, MFC, Model Waiver
- Comprehensive Behavioral Health Assessment (CBHA)
- Child Welfare Behavioral Health Overlay: GH setting
- Targeted Group Care Services
- Community Substance Abuse Services
- State In-Patient Psychiatric (SIPP)

SP Medicaid Services:

Community Behavioral Health Services

- Assessment Services: psychiatric, record review, bio-psychosocial, brief behavioral health, psychological testing, limited functional assessment
- Treatment Plan Development & Modification
- Medical & Psychiatric Therapies: medication management and treatment, brief individual & group therapies
- Behavioral Health Therapies: Individual and family, group, day services for 2-5 y.o.
- Community Support & Rehab Services: psychosocial rehab, clubhouse for 16 and up
- Therapeutic Behavioral On-site Services: wraparound in permanent home or foster care

HCBS WAIVERS

- **Florida Waivers for Children:**
- Developmental Disabilities “iBudget” Waiver, administered by Agency for Persons with Disabilities (APD)
- Model Waiver: degenerative spinocerebellar disease, assessed through CMAT
- Familial Dysautonomia (Riley-Day syndrome)
- Project AIDS Care
- **Florida Waivers 18 and up:**
- Traumatic Brain & Spinal Cord Injury
- Adult Cystic Fibrosis
- Long Term Care Waiver (managed care)

DD “iBudget” Waiver: Eligibility

- Level of care of ICF/DD
- Age 3 and up, diagnosed with:
 - ▣ Down syndrome
 - ▣ Intellectual disability (Generally, IQ under 70)
 - ▣ Autism (NOT ASD, Asperger’s or PDD-NOS)
 - ▣ Spina bifida
 - ▣ Prader-Willi syndrome
 - ▣ Cerebral palsy

DD iBudget Waiver Enrollment: What about the wait list?

- **2014 Gen'l Appropriations Act HB 5003, §9(1)(b)**
 - Priority enrollment in the Waiver at time of:
 - Adoption with placement in a family home
 - Reunification with family members in family home
 - Permanent placement with a relative in family home
- **Crisis Enrollment**
 - 1st Priority: Homeless
 - 2nd Priority: Serious danger to self or others
 - 3rd Priority: Caregiver under duress/unable to care

When are DD Waiver services needed?

- For services not offered through SP Medicaid/ EPSDT: E.g., Respite, APD residential group homes, environmental modifications
- If you can't find providers through SP Medicaid who are qualified to work with DD
- To ensure continued Medicaid for reunification

MEDICAID PROVIDER ACCESS TYPE



Medicaid

Provider Access Type

□ **Fee-for-service:**

- Provider selected by enrollee from any Medicaid provider
- Provider is paid a set fee for each service
- AHCA administers

□ **Managed care:**

- Enrollee selects a “managed care organization” (MCO) that acts as gatekeeper for services and provides its own provider network
- Each enrollee has a case manager
- Paid a capitated rate for each enrollee
- Required to provide medically necessary service even if no available provider in network

SP Medicaid Managed Care

- Called “Managed Medical Assistance” or MMA
- Mandatory for most Medicaid participants
 - ▣ One exception: anyone **enrolled in or on the waiting list** for the Developmental Disabilities Waiver
- State divided into 11 Regions
- 14 MCOs across the state, but not in all Regions

MMA Specialty Plans

- **Child Welfare Plan:** Sunshine Health
- **Children's Medical Services Network:** a revamp of CMS into a provider network. Still pays fee-for-service and only uses Medicaid providers. Available for children with special health care needs or chronic conditions
- **Magellan Complete Care for Serious Mental Illness:** For serious mental illness, with access through DCF. Not in Regions 1,3 or 8
- Two plans for HIV/AIDS

MEDICAID ELIGIBILITY TYPES



Eligibility Categories

- SSI-Based: Anyone getting SSI gets SP Medicaid
- Family-Based: Children qualify if household income is low enough
- ICP/HCBS: Anyone eligible of this level of care qualifies if income is under 3XSSI amount, assets under \$2000. Child is “household of one.”
- Medically Needy or “Share of Cost”
- Child Welfare: Through both Title IV-E and State criteria (Non-IV-E)

Child Welfare Medicaid: Permanency & Beyond

- Adoption: Medicaid until age 18. Over 18 if SSI-recipient or eligible based on income of child
- Reunification: Only as long as DCF case is open.
- Relative or non-relative placement, or permanent guardianship: Child financial information determines eligibility as long as parents aren't living in the same household.

WHO TO ASK?

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SP Medicaid or MMA

- Fee-for-Service
 - AHCA or contracted peer review (eQHealth for home care, Magellan for behavioral)
 - Work through case manager, but may need to go through provider network administrator
- MMA

HOW TO COMPLAIN OR CONTEST



MEDICAL NECESSITY

- Applies to all services – State Plan, MMA, HCBS
- Defined by AHCA rule 59G-1.010
- Five parts or “prongs”
- May need testimony of health care provider to support medical necessity

AHCA COMPLAINT

- Go to AHCA Website (ahca.myflorida.com)
- Click on Medicaid
- Click on REPORT A COMPLAINT

- Keep a record of your complaint, with date of filing, notes of names of anyone who contacts you

Administrative Challenges

- **SP Medicaid and DD Waiver:** Request a fair hearing (DCF Office of Appeal Hearings)
- **Managed Care** has two options:
 - ▣ Internal appeal through MCO and/or
 - ▣ Fair Hearing through DCF Office of Appeal Hearings

Resources

- Advocacy 101 Webinar: Challenge an Agency's Denial or Reduction of Services
 - ▣ Disability Rights Florida at:
 - ▣ http://www.disabilityrightsflorida.org/resources/webinars_and_trainings
- DCF Office of Appeal Hearings:
 - ▣ <http://www.myflfamilies.com/about-us/office-inspector-general/investigation-reports/appeal-hearings>

DISCUSSION

Case Studies

Examples

- A. 5 y.o. girl with cerebral palsy, relative placement
- B. 10 y.o. girl with intellectual disability (IQ 56), acting out due to abuse, foster care placement wearing out
- C. 8 y.o. boy with severe autism, SLB, aggression, non-verbal, 10th foster care placement
- D. 18 y.o. boy with Down Syndrome and schizophrenia in STFC, but not doing well.