

CABINET FOR HEALTH AND FAMILY SERVICES DEPARTMENT FOR COMMUNITY BASED SERVICES

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Contract Correspondence Transmittal (CCT)

CCT Number: 09-08

Division/Branch: Protection and Permanency/OOHC

Key Words/Phrases: Outsourced Therapeutic Services Questions and Answers

Attachments/Forms:

Dear PCC/PCP Provider,

There have been numerous questions regarding CCT 09-05 Outsourced Therapeutic Services. The following is a compilation of questions and answers. For the purpose of this memo, these terms are defined as such:

Agency = PCC/PCP

Provider = A person not directly employed by the PCC/PCP who is

delivering a therapeutic service.

- Q. For children who have previously been given an exception to receive therapeutic services from an outside source like CMHC, are we now responsible for contracting for those services in order to continue, or will there be an exemption of any type, given their pre-established arrangement?
 - A. Documentation to support a previous exception needs to be sent to DCBS central office (<u>Julie.Cubert@ky.gov</u>) for any child in a PCC/PCP that is receiving services that are being billed to Medicaid. PCC/PCPs will be notified if an exception is approved. If the exception is not approved, the agency needs to contract with the provider for the service.



- Q. If we (PCC/PCP) choose to contract for therapeutic services for children who are already receiving these services from CMHC, do we need to follow the new exception process, or will a previous approval from a Cabinet worker suffice?
 - A. If a PCC/PCP chooses to contract with a CMHC or any outside provider, then the PCC/PCP is responsible for paying the provider. Medicaid should not be billed. Per the PCC Agreement a copy of any contract must be submitted to CHFS central office for review.
- Q. Will a previous approval from a Cabinet worker suffice?
 - A. Exception approvals will be granted by DCBS central office
- Q. If the agency providing additional counseling does not bill Medicaid, do we need to submit a request for an exception?
 - A. If the provider does not bill Medicaid, please submit to DCBS central office, a copy of the agreement or contract that the provider operates under.
- Q. How will this affect foster children that need a psych eval. and possibly psychiatry meds?
 - A. Per the PCC Agreement: Prior approval must be obtained from the SRA for a psychological evaluation. A psychological evaluation will only be covered in 12 month intervals. Court ordered psychological evaluations, when deemed medically necessary, will be billed to Medicaid. If the psychological evaluation is not covered by Medicaid and has prior approval of the SRA, CHFS will pay the provider upon receipt of an itemized invoice from the provider of the service.
- Q. Will a PCC also have to contract with a psychiatrist?
 - A. If Medicaid will be billed for the service, a request for an exception needs to be submitted to DBCS central office. If Medicaid will not be billed, a copy of the agreement or contract made with the psychiatrist shall be submitted to DCBS central office. Agreements should be specific that the service will not be billed to Medicaid by anyone.
- Q. Our foster care and adoption program currently has contracts with community mental health providers to provide therapeutic services for our clients. These are not Impact Plus clients. Are we to submit copies of our contracts to DCBS or is this only for clients receiving therapeutic services through Impact Plus?
 - A. Please submit any existing contracts to DCBS central office to provide verification that Medicaid is not being billed.
- Q. What about kids that have been in outsourced therapy for a long period of time?
 - A. In agencies where several youth are receiving services from an outsourced provider, the PCC/PCP will need to contract to continue those services. In unique cases where the situation meets one of the exception criteria, a request should be submitted to DCBS central office.

- Q. Are we (DCBS) able to force the PCC to continue (outsourced therapy)?
 - A. DCBS will not force a PCC/PCP to outsource therapy, as they are permitted to provide services in house as per the agreement. DCBS will address issues if a youth is not receiving services relevant to their specific treatment goals.
- Q. What about Impact?
 - A. Impact services should be handled just as any other outsourced therapy. A contract or an exception needs to be completed.
- Q. For the kids that are going to be outsourced, are we limited to the CMHC in all instances?
 - A. DCBS will not mandate which providers that PCC/PCPs can **contract** with, however contracts shall be submitted to DCBS central office for review. Per the PCC agreement, **exceptions** will only be approved in special circumstances for CMHC providers.
- Q. How can a PCC contract with Impact Plus for outsourcing?
 - A. Per a memo from Department of Medicaid Services, <u>a PCP must establish a written contract with the Impact Plus provider in which there are clearly defined expectations and a well established plan for communication between the PCP and the therapist exists. Because clinical services are built into the level of care rate, the PCP shall be completely responsible for payment of those services to the outside provider. The PCC/PCP should contact the Department for Behavioral Health Developmental and Intellectual Disabilities (DBHDID) to establish a contract.</u>
- Q. As we work to transition some of our children from their outside therapy, is there a timeline under which we need to complete this transition?
 - A. The transition needs to occur as soon as possible. Contracts with providers need to be completed immediately. In extreme cases in which an exception may be warranted, the request needs to be sent to DCBS (Julie.Cubert@ky.gov) as soon as possible.

If you have questions concerning this process, please contact Julie.Cubert@ky.gov

Thank you for your support and partnership in this endeavor.

Sincerely,

Michael Cheek

Michael Cheel.

Director