



Decoupling Focus Groups

Kentucky Department of Community Based Services

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PCCG **Human Services**
Public Focus. Proven Results.™

Agenda

- Introductions
- Survey Findings
- Discussion
- Questions



Welcome!

- Who is facilitating today's discussion?
 - Public Consulting Group (PCG)
 - PCG is supporting DCBS in planning for Decoupling
 - PCG works across the country supporting our state partners in the following ways:



- What providers are presented here today?
 - PCP and/or PCC
 - Service area

Decoupling Survey Findings

Domain E, Kentucky Provider Readiness Assessment Survey



Decoupling Survey Findings

- There are currently 48 providers with a current PCP and/or PCC DCBS agreement:
 - 35 provider completed the Decoupling Section (Domain E) of the Kentucky Provider Readiness Assessment Survey
 - 13 providers with a DCBS agreement did not respond

Reported Staffing Numbers			
	Maximum	Minimum	Average
Total Staff	614	8	133
Administrative Staff	151	2	29
Direct Staff	240	2	66

- Accreditations held by survey respondents:
 - Joint Commission on Accreditation of Healthcare Organizations (JCAHO): 3
 - Commission on Accreditation of Rehabilitation Facilities (CARF): 8
 - Counsel on Accreditation (COA): 20
 - Other: 3

Decoupling Survey Findings

- Special Populations served
 - Developmentally delayed
 - Intellectually disabled
 - Autism Spectrum Disorder (ASD)
 - Medically complex
 - Severe self-harm and severe aggression
 - Pregnant and parenting youth
 - 5S, SAO population
 - Trafficking victims
 - Sexually maladaptive youth
 - Youth with high criminogenic needs
- Utilization of Information Technology Systems
 - 30 providers indicated they have a current IT system
 - Centralized scheduling: 18
 - Clinical data with a Meaningful Use Certified Electronic Health Record: 22
 - Comprehensive Biopsychosocial Assessment: 27
 - Submission of claims electronically: 22
 - Financial accounting and revenue cycle management tools: 27
 - Reporting: 29
 - Quality assurance: 22

Decoupling Survey Findings

- Medicaid Providers:
 - 22 providers are enrolled Medicaid providers
 - 21 agencies are contracted with at least 1 MCO
 - 363 staff are currently active enrolled Medicaid providers

Amount of Medicaid Billing Organizations Processed Annually		
Maximum	Minimum	Average
\$27.7 million	\$20,000	\$2.8 Million

Maximum	Minimum	Average
\$27.7 million	\$20,000	\$2.8 Million

- Percentage of respondents annual revenue comprised of funds from DCBS:
 - 30 providers indicated that they secure funding from other sources

% DCBS Funded Annual Revenue		
Maximum	Minimum	Average
100%	.06%	66%

Maximum	Minimum	Average
100%	.06%	66%

Decoupling Survey Findings

- As a part of the survey, 19 Medicaid billable services were listed. Providers were asked to indicate whether their agency provided each of the listed services, and indicate the level of direct staff that provide the service.

Top 5 Services Provided		Top 5 Staff Levels Utilized	
Assessment		Licensed Professional Clinical Counselor (LPCC)	
Screening		Licensed Clinical Social Worker (LCSW)	
Service Planning for treatment of mental health		Clinical Social Worker, Masters Level (CSW)	
Crisis Intervention		Licensed Professional Clinical Counselor Associate (LPCA)	
Individual Outpatient Therapy		Certified Alcohol and Drug Counselor (CADC)	
<i>*Full service summary table on next slide</i>			

Kentucky Medicaid State Plan Qualification Requirements

	LP	LPA	LPP	LCSW	CSW	LPCC	LPCCA	LPAT	LPATA	LMT	MFTA	Peer Support Specialist	Physician	Psychiatrist	APRN	PA	CADC	LBA	LABA	Bachelors level	Other non-bachelors level	Community Support Specialist
Screening	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x			
Assessment	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x			
Psychological Testing	x	x	x																			
Crisis Intervention	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x			
Mobile Crisis	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x			
Residential Crisis Stabilization	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x			
Day Treatment				x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x			
Peer Support												x										
Parent/Family Peer Support												x										
Intensive Outpatient Program (IOP)	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x			
Individual Outpatient Therapy	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x			
Group Outpatient Therapy	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x			
Family Outpatient Therapy	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x			

Requirements Cont'd...

	LP	LPA	LPP	LCSW	CSW	LPCC	LPCA	LPAT	LPATT	LMFT	MFTA	Peer Support Specialist	Physician	Psychiatrist	APRN	PA	CADC	LBA	LABA	Bachelors level	Other non-bachelors level	Community Support Specialist
Collateral Outpatient Therapy	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x			
Partial Hospitalization	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x			
Service Planning (Treatment of Mental health only)	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x			
Residential Services for Substance Use Disorder (Substance Use only)	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x			
SBIRT-Screening, Brief Intervention and Referral to Treatment	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x			
Assertive Community Treatment (Mental health only)	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x			
Comprehensive Community Support Services (Mental health only)	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x			
Therapeutic Rehabilitation Program (TRP) (Mental health only)	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x			

Qualification Levels Reported in Decoupling Survey

	LP	LPA	LPP	LCSW	CSW	LPCC	LPCCA	LPAT	LPATA	LMT	MFTA	Psychiatrist	APRN	PA	CADC	LBA	LABA	Bachelors level	Other non-bachelors level
Screening	4	9	5	24	29	28	23	4	4	10	9	8	7	1	12	1	-	11	2
Assessment	7	10	6	29	27	28	21	4	4	9	10	10	9	1	12	1	-	9	1
Psychological Testing	6	7	4	1	-	1	-	-	-	-	-	-	-	-	-	-	-	-	1
Crisis Intervention	4	10	5	27	25	25	21	3	4	9	9	4	4	1	12	1	-	12	3
Mobile Crisis	1	3	3	9	9	9	7	-	-	3	3	-	-	-	5	1	-	3	-
Residential Crisis Stabilization	1	1	-	2	2	2	2	-	-	2	2	2	2	-	1	-	-	1	-
Day Treatment	-	-	-	-	1	-	1	-	-	-	-	-	-	-	-	-	-	-	-
Peer Support	-	2	-	1	1	-	-	-	-	-	-	-	-	-	1	-	-	4	3
Parent/Family Peer Support	-	1	1	2	2	2	2	-	-	1	-	-	-	-	1	1	-	5	3
Intensive Outpatient Program (IOP)	-	-	-	4	4	4	4	-	-	-	-	-	-	-	2	-	-	-	-
Individual Outpatient Therapy	3	7	3	23	19	22	19	3	3	8	9	3	2	-	9	1	1	1	-
Group Outpatient Therapy	2	6	3	18	17	18	16	2	2	8	8	1	1	-	9	-	-	3	-
Family Outpatient Therapy	3	7	3	23	19	22	19	3	3	8	9	1	1	-	10	-	-	1	-

Levels Reported Cont'd....

	LP	LP A	LPP	LCSW	CSW	LPCC	LPCA	LPAT	LPATA	LMFT	MFTA	Psychiatrist	APRN	PA	CADC	LBA	LABA	Bachelors level	Other non-bachelors level
Collateral Outpatient Therapy	3	7	3	20	19	21	18	3	2	8	9	1	1	-	9	-	-	2	-
Partial Hospitalization	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Service Planning (Treatment of Mental health only)	3	6	4	22	22	24	20	3	3	9	8	2	3	-	8	1	-	11	-
Residential Services for Substance Use Disorder (Substance Use Only)	-	2	1	4	3	5	3	-	-	1	1	1	1	-	2	-	-	1	-
SBIRT-Screening, Brief Intervention and Referral to Treatment-	-	-	1	8	7	8	7	1	1	2	2	1	1	-	4	1	-	2	-
Assertive Community Treatment (Mental health only)	-	1	-	1	2	2	1	-	-	1	1	1	2	-	1	-	-	1	1
Comprehensive Community Support Services (Mental health only)	1	2	1	5	6	4	5	1	-	3	2	-	-	-	1	-	-	10	5
Therapeutic Rehabilitation Program (TRP) (Mental health only)	1	2	1	4	4	4	3	-	1	3	2	1	1	-	1	-	-	3	-

What Medicaid Services are Included in the Current Bundled Rate?

- Individual Therapy
- Group Therapy
- Family Therapy
- Collateral Therapy
- All Screenings & Assessment
- Service / Treatment Planning
- Case Management

Medicaid Billing Codes		
90785	90846	99406
90832	90847	99407
90833	90849	99408
90834	90853	99409
90836	90887	H0001
90837	96110	H0002
99354	96127	H0031
99355	96150	H0032
90839	96151	H0049

Let's Discuss!

Now that you have seen the survey data, what are your initial thoughts?



Discussion Questions

1. For those who are currently contracted with an MCO, what portion of the contracting process was most difficult? What would have made the process go more smoothly?
2. What are your agency's lessons learned from initiating Medicaid billing?
3. Are there any additional services that your agency provides to youth and families through a DCBS PCP and/or PCC agreement, that were not captured in the survey?
4. How are direct staff documenting service units delivered as part of the program's milieu? For example, if a direct care worker provides behavior modification training as part of their day to day work, and they do this sporadically throughout the day, how is this documented for billing?
5. What support do you need from DCBS to ensure Decoupling is implemented successfully?
6. Are there any processes, resources, projects that we can capitalize on in moving forward with Decoupling?
7. What opportunities do you see in Decoupling that could really move the needle on child and family outcomes?
8. Some agencies have done a lot of foot work to prepare for Decoupling. What successes would you like to share? What has been challenging? What advice would you have for others as this moves forward?
9. What concerns do you have about Decoupling?

Questions?

Contact Us



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