Category: Utilization Management

Code: UM 2.0 Attach O CTSS

Subject: Children's Therapeutic Services and Supports (CTSS) Level of Care Guidelines

Purpose: The purpose of this policy is to describe the criteria used by BHP in medical necessity determinations for CTSS.

Policy: BHP Care Management (CM) staff use the following level of care guidelines for CTSS when completing medical necessity determinations.

Please refer to the enrollee's benefit document for specific information. To the extent there is any inconsistency between this policy and the terms of the enrollee's benefit plan or certificate of coverage, the terms of the enrollee's benefit plan document will govern.

Benefits must be available for healthcare services. Healthcare services must be ordered by a physician, physician assistant, nurse practitioner, or behavioral health practitioner. Healthcare services must be medically necessary, applicable conservative treatments must have been tried, and the most cost-effective alternative must be requested for coverage consideration.

CTSS services are categorized as "rehabilitative" services. For children with emotional disturbances, rehabilitation means that services are provided to restore the child to a level of functioning that they had either achieved before or would have achieved if normal development had not been impaired because of a mental health disorder. CTSS are designed to be a flexible package of mental health services for children who require varying therapeutic and rehabilitative levels of intervention to address the conditions of emotional disturbance that impair and interfere with individuals' abilities to function independently.

CTSS are also "time-limited" interventions that are provided using the various treatment interventions covered under the CTSS benefits list: individual, group and family psychotherapy; individual, group and family skills training; crisis assistance; mental health behavioral aide (MHBA) services; child/adolescent day treatment; and therapeutic preschool programs. BHP has specific level of care guidelines for the psychotherapy and day treatment components of CTSS services, and the current guidelines address the overall policies of CTSS services, in regard to integrating various CTSS treatment modalities for an individual child and family, and specific policies for skills training, crisis assistance, MHBA services and therapeutic preschool programs

BHP views the involvement of the child's parents, or any other primary caretakers, as an essential component of CTSS services. BHP also views coordination of care among the health care providers involved in the child's care as essential.

If the child's insurance coverage is a P-MAP program, BHP will review the treatment using the current DHS guidelines for CTSS services.

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ADMISSION GUIDELINES:

The provided treatment documentation must satisfy the following:

1. The child has a current Diagnostic Assessment (D.A.) completed by a licensed mental health professional which includes diagnosis based on the current DSM or ICD system, and which documents that the that the child has serious symptoms and impairments requiring CTSS services.

2. Other health care providers currently involved in the child's care are identified, and there is documentation of a plan for coordination of care.

3. If the D.A. documents the child as having a diagnosis or symptoms that are likely to benefit from medication, and medication is not currently part of the child's treatment, there is documentation of a plan to refer the child for a medication evaluation. BHP Intake staff can assist with referral to a BHP child/adolescent psychiatrist, or, if appropriate, the assessment may be completed by the child's pediatrician or other primary medical provider.

CONTINUED CARE GUIDELINES:

The treatment documentation provided must include the following:

1. A new D.A. must be completed annually, unless the child has an Autism Spectrum or Pervasive Developmental Disorder diagnosis, in which case the D.A. may be completed every three years if the parent or guardian requests a reduced frequency of assessment and the assessing mental health practitioner agrees that there has been little change in the child's condition and therefore an annual assessment is not necessary. An updated individualized treatment plan (ITP) is provided which includes current information about symptoms and diagnosis. The ITP must be reviewed and updated every 90 days.

2. Documentation of at least annual exchange of information directly between the CTSS practitioner, or practitioners, and the child's other current health care providers. BHP understands that practitioners are not able to control whether other providers respond to an authorized request for treatment information. BHP does require, however, that the CTSS practitioner requests authorization to at least provide information about the CTSS treatment to other providers.

3. The ITP must include documentation of specific family skills treatment interventions and related measurable treatment goals, unless there are clear indications that involvement of family members would be clinically counterproductive or legally prohibited.

4. The ITP documents progress as evidenced by measurable reduction of symptoms and/or behaviors to the degree which indicates adequate response to treatment or the CTSS recipient has not shown such progress but is potentially responsive to the treatment modality and the treatment plan has been modified to specifically address the lack of expected treatment progress.

5. The ITP documents specific discharge criteria.

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DISCHARGE CRITERIA:

1. The child's condition has worsened so that a higher level of care is required.
2. The child has achieved the ITP discharge goals and is ready for transition to either a less intensive level of treatment or community resources for extended support and work on his/her problems.

Regulatory / External References: NCQA 2.0, Chapter 62M:

1. American Psychiatric Association. (2013). Diagnostic and Statistical Manual of mental disorders (5th ed.). Washington, D.C.
2. Minnesota Statuate 256B.0943, Children's Therapeutic Services and Supports (accessed online on 2-10-14): https://www.revisor.mn.gov/statutes/?id=256B.0943
3. Level of Care Placement Criteria for Psychiatric Illness, American Academy of Child and Adolescent Psychiatry, Washington, D.C., 1996.
4. Minnesota Health Care Programs (MHCP) Provider Manual, , Children's Therapeutic and Suports (CTSS) (accessed online on 2-10-14) http://www.dhs.state.mn.us/main/idcplg?IdcService=GET_DYNAMIC_CONVERSION&RevisionSelectionMethod=LatestReleased&dDocName=id_058361#
5. Minnesota StatutesMinnesota Statues, Table of contents. [On-line], Available: http://www.revisor.leg.state.mn.us/stats/245/4871.html.

Internal References: Richard Sethre PhD LP

Source: BHP

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