



## Job Aid – Ohio Medicaid UM – IHBT Medical Necessity Criteria

**References:** [OAC 5122-29-28](#); OAC 5160-27-05 (draft); RFP#: ODMR-1617-1021 Section 4.3-Prior Authorization of Behavioral Health Redesign Services; Ohio Medicaid and MHAS IHBT Eligibility Criteria; Child and Adolescent Needs and Strengths (CANS)

**Purpose:** To delineate the medical necessity criteria to be used when reviewing requests for authorization of Intensive Home-based Treatment (IHBT) for Ohio Medicaid recipients who are children or adolescents with significant behavioral health challenges (SED) and related functional impairments. Services are delivered in the home, school, and community.

### Procedure :

1. The youth must have at least one family member or other individual who is a part of the youth's home who authorizes IHBT services to be provided, and actively participates in the provision of IHBT (ODM rule).
2. "Home" means any long-term family living arrangement including biological, kinship, adoptive, and non-custodial families who have made a long-term commitment to the child/adolescent (OMHAS rule).
3. **Eligibility:**
  - A. Under eighteen years of age; and:
    - a. IHBT may also be provided to transitional age youth between the ages of eighteen (18) and twenty-one (21) who have had an onset of serious emotional and mental disorders at an age younger than eighteen (18).
  - B. Completed an evaluation using the most recent *Diagnostic and Statistical Manual of Mental Disorders excluding the following diagnosis*: : Learning Disabilities (LD) in reading, mathematics, written expression, Motor Skills Disorder, and LD NOS (Learning Disabilities Not Otherwise Specified); Communication Disorders (Expressive Language Disorders, Mixed Receptive Expressive Language Disorder, Phonological Disorder, Stuttering, and Communication Disorder NOS), and:
    - a. Primary diagnosis: diagnostic assessment that substantiates symptomatology that supports mental health diagnosis
      1. Schizophrenia and associated disorders: rare in youth
      2. Bipolar and related disorders
      3. Major depressive disorders
      4. Disruptive mood dysregulation disorder
      5. Conduct and oppositional disorders
      6. Obsessive compulsive and related disorders
      7. Eating disorders (Anorexia, Bulimia)
      8. Post-traumatic stress and acute stress disorders

- 9. Anxiety disorders
- 10. Reactive attachment disorder
- C. Consumer is clinically determined to meet the "person with serious emotional disturbance" (SED) criteria in rule 5122-24-01 of the Administrative Code, and one of the following:
  - a. Is at risk for out-of-home placement due to his/her behavioral health/mental health condition; or
  - b. Has returned within the previous thirty days from an out-of-home placement or is transitioning back to their home within thirty (30) calendar days; or
  - c. Significant risk and/or safety issue related to youth's behavioral health
  - d. At risk of hospitalization due to self harm, other harm
  - e. At risk of re-traumatization due to impulsive risk-taking behaviors
- D. Impairment: Member must have two or more impairments:
  - a. Behavioral impairment is defined as impairment that is at or greater than the level implied by any of the following criteria in most social areas of functioning:
    - a. Inability or unwillingness to cooperate or participate in self-care activities
    - b. Suicidal preoccupation or rumination with or without lethal intent
    - c. School refusal and other anxieties or more severe withdrawal and isolation
    - d. Obsessive rituals, frequent anxiety attacks, or major conversion symptoms
    - e. Frequent episodes of aggressive or other antisocial behavior, either mild with some preservation in social relationships or more severe requiring considerable constant supervision, and
    - f. Impairment so severe as to preclude observation of social functioning or assessment of symptoms related to anxiety (e.g., severe depression or psychosis)
  - b. Relational Impairment: An impairment that seriously disrupts family or interpersonal relationships is defined as one:
    - i. Requiring assistance or intervention by police, courts, educational system, mental health system, social service, human services, and/or children's services
    - ii. Preventing participation in age-appropriate activities
    - iii. In which community (home, school, peers) is unable to tolerate behavior; or
    - iv. In which behavior is life-threatening (e.g., suicidal, homicidal, or otherwise potentially able to cause serious injury to self or others
    - v. Increased family conflicts and strained relationships
    - vi. Increased family stressors
    - vii. Association with negative peers
    - viii. Poor interpersonal skills resulting in increased conflicts, isolation
    - ix. Bullying and re-traumatization
    - x. BH stigma
    - xi. Lack of acceptance within typical youth activities and functions
    - xii. Increased chance of juvenile justice involvement
  - c. Functional impairment:
    - a. Functional impairment is the documentation that behavioral health significantly impacts functioning (family, school, peers, community, etc.)
      - a. At risk of removal from school due to behavioral symptomatology
        - Decreased achievement
        - Increased suspensions
        - Truancy

- Risk of expulsion
- Negative connection with school
- b. At risk of increased involvement in the juvenile justice system due to behavioral symptomatology
- c. Impairment that seriously disrupts family or interpersonal relationships, and
- d. May require the services of other youth-serving systems (e.g., education, human services, juvenile court, health, mental health/mental retardation, youth services, and others).

E. Service Exclusions and Limitations

- a. CPST
- b. Therapeutic Behavioral Service
- c. Psychosocial rehabilitation
- d. Psychotherapy; Group; Family therapy
- e. Day treatment
- f. Other IHBT programs
- g. ACT
- h. Residential
- i. Intensive Outpatient

**4. Child and Adolescent Needs and Strengths (CANS)**

- a. In addition to the IHBT eligibility criteria listed in OhioMHAS and Medicaid rules, the child/adolescent must also meet certain scores on the following CANS Domains:
  1. Child Emotional/Behavioral Needs Domain
  2. Child Risk Behaviors Domain
  3. Life Functioning Domain
  4. 25 items total
- b. Scoring:
  1. **0 – No Evidence of Need** – This rating indicates that there is no reason to believe that a particular need exists. Based on current assessment information there is no reason to assume this is a need.
  2. **1 - Watchful Waiting/Prevention** – This level of rating indicates that you need to keep an eye on this area or think about putting in place some preventive actions to make sure things do not get worse (e.g. a child/youth who has been suicidal in the past).
  3. **2 - Action Needed** – This level of rating implies that something must be done to address the identified need. The need is sufficiently problematic, that it is interfering in the child/youth's or family's life in a notable way.
  4. **3 - Immediate/Intensive Action Needed** – This level rating indicates a need that requires immediate or intensive effort to address. Dangerous or disabling levels of needs are rated with this level.

CANS Scoring Eligibility for IHBT						
Behavioral & Emotional Needs	AND	Life Functioning	OR	Risk Behaviors		
Rating of "2" or higher on any one of the following				Rating of "3" on <b>one</b> of the following; <b>or</b> rating of "2" on <b>two</b> of the following		Rating of "2" or higher on <b>one</b> or more of the following
Psychosis				Family		Suicide Risk
Impulsive/ Hyperactivity				Social		Self-Mutilation
Depression				Legal		Other Self Harm
Substance Abuse				Living Situation		Danger to others
Anger Control				School Behavior		Sexual Aggression
Eating Disturbance				School Attendance		Fire Setting
Adjustment to Trauma						Runaway
Anxiety						Delinquency
Oppositional						Judgement
Conduct				Social Behavior		

### 5. Length of Stay

- a. Length of stay averages 4.5 months typically
- b. Fidelity range is between 3 and 6 months
- c. Depends on breadth and depth of individual presenting concerns
- d. Can expect longer LOS for youth with:
  1. Co-occurring disorders;
  2. More complicated presentations;
  3. Complex contextual and systemic issues; and
  4. Higher number and severity of risk and safety issues (including trauma)
- e. The maximum amount of IHBT service which may be authorized is 72 hours within a 3 month authorization period.
- f. The provider agency may request additional IHBT service to be authorized by Kepro up to an additional 72 hours of service per 3 month authorization.

### 6. Continued Stay Criteria

- a. Youth continues to meet the eligibility criteria for IHBT; and
- b. Youth and/or family has insufficient or severely limited resources or skills necessary to cope with an immediate behavioral health crisis; or
- c. The desired outcome or level of functioning has not been restored, improved, or sustained; or
- d. The youth continues to be at risk for out-of-home placement; or

- e. Less intensive services would not be effective in managing the level of behavioral health symptoms.

#### **7. Discharge**

- a. Recipient or their guardian may request to end receipt of IHBT services at their discretion
- b. Upon disenrollment of an IHBT recipient, the IHBT team shall document the circumstances regarding disenrollment in the recipient's treatment plan.
- c. The provider must inform Kepro of disenrollment within three business days of the discharge date.
- d. Either the provider or Kepro shall deactivate the authorization for the IHBT service.
- e. Disenrollment of a recipient from IHBT is necessary to assure that the recipient may obtain Medicaid reimbursed behavioral health services from a provider other than the IHBT team.