

Medicaid-funded Behavioral Health Services: Ages 0-6

MAP

GA Medicaid Children's Behavioral Health Coverage Mechanisms	EPSDT/ Health Check	Medicaid Rehabilitation Option (Behavioral Health)	Children's Intervention Services (CIS)	Children's Intervention School Services	Psychological and Therapy Services	Autism Spectrum Disorder Services	Physician's Services
Administering Department	DCH	DCH and DBHDD	DCH	DCH	DCH	DCH	DCH
Covered Benefits	 Based on the American Academy of Pediatrics Periodicity Schedule and Minimum Standards for Screening Components Below are examples of recommended screening, diagnostic screening tools, and treatment interventions recommended by the AAP Bright Futures Periodicity Schedule: Periodic, Catch-Up and Inter-periodic Screening Immunizations Diagnosis, Treatment, and Referral Lead Risk Assessment and Screening 	 BH Assessment Diagnostic Assessment Service Plan Development Individual Counseling Family Counseling Family Training Group Counseling Group Training Crisis Intervention Intensive Family Intervention Community Support, including: Case Management/ Coordination Skills-Building Psychological testing Psychiatric diagnostic interview examination Psychiatric diagnostic evaluation with medical services 	Counseling Services Assessment of the family resources, social/emotional impact of the child's physical disability or developmental delay on the child and family, effect on the child's response to treatment and adjustment to medical care. Provision of counseling services to resolve social/emotional barriers to effective treatment of the child's physical disability/developmental delay. Occupational Therapy Activities of daily living; 	Counseling Services Assisting children and/or their parents in understanding the nature of their illness or disability, special needs of the child, and the child's development. Assessment of the family resources, including the social/ emotional impact of the child's physical disability or developmental delay on the child/family, and its effect on the child's response to treatment and adjustment to medical care. Provision of counseling services to resolve social	 Psychological and Therapy Services to include: Diagnostic assessment Psychological testing Individual Psychotherapy Group Psychotherapy Group Psychotherapy Note Policy Change: As of 1/1/2022, Psychological Services was expanded to include those provided by licensed LPC, LCSW and LMFT providers in both Managed Care (CMO) and fee-for- service Medicaid. Exception procedure codes noted below. 	 Autism Services Behavior Identification Assessment Observational Behavioral Follow- up Assessment Adaptive Behavior Treatment Adaptive Behavior Treatment with Protocol Modification Adaptive Behavior Treatment Social Skills Group Exposure Adaptive Behavior Treatment with Protocol Modification 	 Psychological testing Psychiatric diagnostic interview examination Psychiatric diagnostic evaluation with medical services Electroconvulsive therapy Pharmacological Management Family Therapy Group Psychotherapy Psychotherapy Psychotherapy/ Psychotherapy/ Psychotherapy/ Sychotherapy/ Psychoanalysis Medication Administration



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 Oral Health and Dental Services Weight Assessment and Counseling for Nutrition and Physical Activity Tobacco, Alcohol, or Drug Use Assessment Depression Screening Maternal Depression Screening 	 Pharmacological Management Nursing Assessment and Care Medication Administration Adaptive behavia and play development 	nd treatment of the child's physical	
		 of function o Activities of daily 	



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				 Adaptive behavior and play development 			
Age Coverage	All children covered under EPSDT (to age 21)	A youth must be under the age of 18 years old. Youth aged 18-21 years (children still in high school or when it is otherwise developmentally/ clinically indicated) may be served to assist with transitioning to adult services. Ages 0 through 3 are not covered through fee for service Medicaid but are covered through Medicaid managed care	Youth birth to twenty- one (21) years of age	Youth ages three through twenty (20) years	Youth under the age of twenty-one.	Children and youth under age 21.	All ages
Target Population	All children covered under EPSDT (to age 21)	Youth with known or suspected mental health and/or substance use conditions	Youth with physical disabilities or a developmental delay, who have been prescribed rehabilitative or restorative intervention services by the child's primary care practitioner (PCP) or other prescribing practitioner at the request of the PCP	Youth with physical disabilities or a developmental delay who have been recommended for rehabilitative/ restorative intervention services by the child's primary care practitioner (PCP) or other prescribing practitioner at the request of the PCP, and with mental retardation, hearing	No admission/ eligibility requirements cited. Requires a PA from Alliant/GMCF after exhaustion of 24 units of service. Note: Psychological testing codes limited to licensed psychologists	 Children and youth with the following diagnoses: Autistic Disorder Rett's Syndrome Other childhood disintegrative disorders Asperger's Syndrome Other pervasive developmental disorders Pervasive developmental disorder, unspecified 	All populations





				impairments (including deafness), speech or language impairments, visual impairments (including blindness), serious emotional disturbance, orthopedic impairments, autism, traumatic brain injury, other health impairments, or specific learning disabilities; and who, by reason thereof, needs special education and related services.			
All Medicaid policy found at: <u>www.mmis.geo</u> <u>rgia.gov</u> Select "provider" and "manuals"	Procedures and codes are found in the policy for <i>EPSDT/ Health</i> <i>Check</i> Manual	POLICIES AND PROCEDURES For Community Behavioral Health Rehabilitation Services	POLICIES AND PROCEDURES For Children's Intervention Services	POLICIES AND PROCEDURES for Children's Intervention School Services (CISS)	POLICIES AND PROCEDURES For Psychological and Therapy Services	POLICIES AND PROCEDURES for Autism Spectrum Disorder (ASD) Services	POLICIES AND PROCEDURES For Physician Services On the MMIS website select "Provider" and "Fee Schedules"

Early and Periodic Screening, Diagnostic and Treatment Benefit [Section 1902(a)(43)(D) of the Social Security Act]

Early and periodic screening, diagnostic and treatment services (EPSDT) includes a range of services under the Medicaid program for categorically needy individuals under age 21. States must:

• Provide for medically necessary screening, vision, hearing and dental services.





- Provide any service which states are permitted to cover under Medicaid that is necessary to treat or ameliorate a defect, physical and mental illness, or a condition identified by a screen.
- Services under EPSDT must be sufficient in amount, duration, or scope to reasonably achieve their purpose.
- The amount, duration, or scope of EPSDT services to recipients may not be denied arbitrarily or reduced solely because of the diagnosis, type of illness, or condition.
- States may apply medical necessity criteria when determining the amount, scope, or duration of EPSDT services.

Babies Can't Wait Program: Administered by the Georgia Department of Public Health, Medicaid funds the following services for Medicaid-enrolled children.

- Population: Infants and children up to age three with significant delay in one or more of the following five areas:
 - cognitive development; physical development, including vision and hearing; communication development; social or emotional development; or adaptive development; or have an established risk of developmental delay due to a diagnosed physical or mental condition of known etiology and significant developmental consequences
- Case Management Services to assist with access to needed medical, social, educational and other services including:
 - Assessment of to determine service needs, including any medical, educational, social or other services.
 - Development of a specific care plan
 - Referral and related activities
 - $\circ \quad \text{Service coordination} \quad$
 - o Monitoring and follow-up delivery and to resolve gaps in services
 - Evaluation/ Review
 - \circ $\;$ Advocacy on behalf of the member for appropriate community resources
 - \circ $\;$ Coordinate with the multiple providers of services.
- Special Instruction Services to design learning environments and activities that promote the acquisition of skills that lead to achieving the outcomes on the IFSP; providing families with information, skills, and support related to enhancing the skill development of the child; and working to enhance the child's development. Other services include:
 - Systematic planning and coordination of people, materials, and places.
 - o Collaboration with the family to identify locations, activity settings, and learning opportunities built upon the unique strengths and priorities of the child and family.
 - Activities with the family in order to strengthen and reinforce the family's knowledge and ability to enhance their child's skill development within home and community.

Services and the Medicaid policy manual citation descriptions include:

Assistive technology devices and services (DME), audiology services (CIS), family training, counseling (CIS), and home visits, health services (physician, etc.), medical diagnostic services (Health Check/EPSDT), certain nursing services (GA Pediatric Program, CIS), nutrition services (CIS), occupational therapy, physical therapy, speech therapy (CIS) psychological services, social work services (CIS), special instruction, vision services (vision services), and transportation (non-emergency medical transportation)