



Children's Administration

Targeted Case Review

Outcome 4: Annual Screening for Mental Health and Substance Abuse

July 1, 2011 – June 30, 2012

This is a report of the results of a targeted case review of annual screenings for mental health and substance abuse. This case review is required by the Braam Revised Settlement and Exit Agreement related to the Braam lawsuit.

The Agreement states:

Outcome 4: *Children in out-of-home care will be screened for mental health and substance abuse needs every 12 months.*

I. Background and Purpose

This is the report of results of the second targeted case review concerning children in out-of-home care receiving an annual Early Periodic Screening, Diagnosis, and Treatment (EPSDT) exam or other valid mental health screen during the measurement year. Pursuant to the revised agreement, the case review process will be conducted every twelve months.

II. Measure Definition

DSHS Medicaid billing records, CA administrative data, and case review of a sample of 100 cases determined by administrative data to be non-compliant. Case review will determine whether an annual EPSDT exam or other valid mental health screening occurred during the reporting period.

Both administrative data and case review results will determine the Department's compliance with this outcome.

III. Sample Methodology

A. Size

The sample size will consist of 100 children who were in out-of-home care for 365 consecutive days or longer for whom billing and administrative data indicated that they did not have an EPSDT or other valid mental health and substance abuse screening during the reporting period.

B. Sample Definition

Cases reviewed were randomly selected from the administrative report based on FamLink and Medicaid billing data. The sample only included cases which met the following criteria:

Child Information: On date evaluated – all these were true:

1. Child was in out-of-home care for at least 365 consecutive days.
2. At least one of the 365 days occurred during the reporting period.
3. Children who left care (trial return home, adoption) but were in care for at least one day of the review period were excluded from the random sample.
4. Child's age on report date is less than 18.0 years

IV. Review Process

This targeted case review was conducted by the headquarters' Health Program Manager. The HQ Health Program Manager reviewed electronic records of Medicaid billing data in the PRISM and ProviderOne systems for all 100 non-compliant cases. These cases were randomly selected from the "master" list of non-compliant cases in the administrative data report.

Review for compliance:

These cases were originally identified as non-compliant because:

- The provider billed under a primary diagnosis/procedure code that was not picked up in the data; however, there were additional codes included in the billing that indicated the child received an EPSDT or other valid mental health or substance abuse screening or treatment.
- The data match between FamLink and ProviderOne only pulls in "paid" claims data. However, the HQ Health Program Manager consulted with ProviderOne staff to determine if these situations where an EPSDT or mental health billing was "denied" could be considered compliant. ProviderOne responded:

“Providers are instructed to bill the services that they perform. If the provider billed an EPSDT visit then the provider is indicating that they did an EPSDT visit. The claim may or may not pay but the provider still indicated that they did an EPSDT visit.”

Because compliance was achieved in the electronic case review by the HQ Health Program Manager, none of the cases in the sample were sent to the regions for further review of the child’s hard copy record.

The case review found that in 41 of the 100 cases reviewed there was an EPSDT or other valid mental health and substance abuse screen in the 12 months reviewed.

V. Results

Cases Reviewed by Region				
	State Total	Region 1	Region 2	Region 3
# of Cases Reviewed	100	27	27	46

Summary

- This case review is based 100 children from the list of cases that were considered non-compliant in the administrative data match between ProviderOne and FamLink.

A. Outcome Compliance by Region

Outcome 7	Annual Mental Health and Substance Abuse Screening			
	Statewide	Region 1	Region 2	Region 3
Total Applicable Cases	100	27	27	46
% Full Compliance	41% (41 out of 100)	52% (14 out of 27)	33% (9 out of 27)	39% (18 out of 46)
% Total Non-Compliant	59% (59 out of 100)	48% (13 out of 27)	67% (18 out of 27)	61% (28 out of 46)

Summary

- The review found 41% of the cases were compliant through additional research in FamLink and ProviderOne. Overall compliance by region is as follows:
 - Region 1 was the highest performer at 52%, with 14 out of 27 cases found compliant.
 - Region 3 was the second highest performer at 39%, with 18 out of 46 cases found compliant.
 - Region 2: was the lowest performing region at 33% with 9 out of 27 cases found compliant.

B. Case Review Question

Question 1: Did the child receive an annual EPSDT or other valid mental health or substance abuse screening during the measurement year, July 1, 2011 – June 30, 2012?

Question 1	Assessment Type			
	Statewide	Region 1	Region 2	Region 3
Total Compliant Cases by Evaluation Received	41	14	9	18
EPSDT	14	7	1	6
MH/SA Services	22	4	8	10
Other	5	3	0	2

Summary

- For the cases reviewed, 41 cases had some type of valid assessment that was determined compliant:
 - Fourteen cases showed that the child received an EPSDT.
 - Twenty-two cases indicated the child received mental health and/or substance abuse services or evaluations during the review period.
 - Five children received other kinds of developmental screening, therapy, or on-going treatment for a developmental concern during the review period.
- Compliance in **Region 1** determined that during the review period:
 - Seven out of fourteen children received an EPSDT.

- Four out of fourteen children received a mental health or substance abuse screening or ongoing treatment.
- Three out of fourteen children received a speech, language, and hearing evaluations or ongoing developmental treatment.
- Compliance in **Region 2** determined that during the review period:
 - One out of nine children received an EPSDT.
 - Eight out of nine children received a mental health or substance abuse screening or ongoing treatment.
- Compliance in **Region 3** determined that during the review period:
 - Six out of eighteen children received an EPSDT.
 - Ten out of eighteen children received a mental health or substance abuse screening or ongoing treatment.
 - Two out of eighteen children received a speech, language, and hearing evaluations or ongoing developmental treatment.

C. Calculation of Compliance

For this review period, the FY2012 Medicaid billing records and CA administrative data showed Children’s Administrations performance for this outcome at 84%. As a result of the targeted electronic case review from the 16% of “non-compliant” cases, Children’s Administrations performance is now at 90%.

Compliance for this outcome was calculated as follows:

a. Total number of children in the case count	=	5651
b. Total COMPLIANT cases in case count	=	4727
c. Total NON-COMPLIANT cases in case count	=	924
d. Number of NON-COMPLIANT cases randomly selected for case review	=	100
e. Number of cases found COMPLIANT via case review process	=	41
f. NON-COMPLIANT cases (924) X percent COMPLIANT (0.41) via case review	=	378
g. Total COMPLIANT cases after case review: 4727 + 378 (b + f)	=	5105

$$\frac{5,105}{\div 5,651} = 0.90 \quad \begin{array}{l} \text{(Total COMPLIANT cases after case review) (g)} \\ \text{(Total number of children in the case count) (a)} \\ \text{(PERCENT OF OVERALL COMPLIANCE)} \end{array}$$

VI. APPENDIX

CASE REVIEW QUESTIONS AND DECISION RULES

Goal

Children in the custody of the Department shall receive timely, accessible, individualized and appropriate mental health assessments and treatment by qualified mental health professionals consistent with the child's best interest.

Outcome Being Reviewed

Outcome 4: *Children in out-of-home care will be screened for mental health and substance abuse needs every 12 months.*

How often and when will the Case Review Occur?

The first target date for this case review is January 2012 and every 12 months thereafter until determined otherwise.

Population from Which the Sample Will Be Selected

DSHS Medicaid billing records, CA administrative data, and case review of a sample of 100 cases determined by administrative data to be non-compliant. Case review will determine whether an annual EPSDT exam or other valid mental health screening occurred during the reporting period. Both administrative data and case review results will determine the Department's compliance with this outcome.

This targeted case review will be a random sample consisting of 100 cases determined as "non-compliant" for having a completed Annual Mental Health or Substance Abuse Screen. The data pull should consist of:

One hundred children using the population in the Annual Mental Health Report identified as "non-compliant." All of the data elements will be the same as that in the Annual Mental Health Report.

Sample Size

The sample size will consist of 100 children who were in out-of-home care for 365 consecutive days or longer for whom billing and administrative data indicated that they did not have an EPSDT or other valid mental health and substance abuse screening during the reporting period.

Specific Questions and Criteria

Did the child who remained in out-of-home care for 365 consecutive days or longer have an annual Early Periodic Screening, Diagnosis, and Treatment (EPSDT) exam or other valid mental health/substance abuse screen completed **during the review period**?

Full Compliance:

There is documentation that the child had one or more of the following **during the review period**:

- An annual Early Periodic Screening, Diagnosis, and Treatment (EPSDT) exam, *or*
- Other valid mental health/substance abuse screen during the measurement year as evidenced by other billing information, including FamLink payment data, or evidence that a valid screen occurred may include one or more of the following uploaded in FamLink:

- CHET report contains EPSDT or a completed emotional/behavioral screening
- Mental Health/Substance Abuse screening, diagnosis or treatment
- Psychiatric/Psychological evaluations
- In-patient hospitalization for mental health or behavioral health
- The Global Appraisal of Individual Needs – Short Screener (GAIN-SS)

RCW 71.05.027 requires all DSHS Administrations to use the same screening tool for substance abuse, mental health and co-occurring disorders. The Global Appraisal of Individual Needs – Short Screener (GAIN-SS) version 2.0.1 is the identified tool.

- Other types of mental health/psychological/substance abuse evaluations (i.e., psycho sexual)

Reviewer Guidance: Reviewers will identify and set aside any screenings or assessments that fall into this category for review by HQ PM before determining compliance

- Juvenile Rehabilitation intake screening
- Sexually Aggressive Youth evaluation
- Birth to three evaluations (e.g., Early Support for Infants and Toddler evaluation)
- Other developmental assessments on young children, birth to age five

Reviewer Guidance: Reviewers will identify and set aside any screenings or assessments that fall into this category for review by HQ PM before determining compliance

- Other:

Reviewer Guidance: Reviewers will identify and set aside any screenings or assessments that fall into this category for review by HQ PM before determining compliance

- Child received mental health, substance abuse, or BRS services during the review period.

Reviewer Guidance: Documentation may include: Billing/payment information, reports by a provider, GAL/CASA report, ISSP supported by screening or evaluation attachments. Review may find indication that a mental health or substance abuse screening or evaluation was completed; Reviews should follow-up with social worker for the results of the completed screening or assessment which must then be documented in FamLink before counting as compliant.

Reviewer Guidance: Information located through the sources listed above will be documented in FamLink.

Other Indicators of Progress:

There is indication the child received an exam, screen, assessment, or treatment in a case note, but the case note information cannot be corroborated by one of the resource documents above.

Reviewer Guidance: These cases are considered non-compliant with the full compliance measure.

Non-Compliance:

No documentation can be located to indicate the child had an annual Early Periodic Screening, Diagnosis, and Treatment (EPSDT) exam or other valid mental health or substance abuse screen during the reporting period (screens meets the criteria as described above).

Not Applicable:

There are documented efforts that the social worker made to schedule and have the youth screened for the required mental health and substance abuse during the reporting period, however the youth refused to have the screening completed.

Reviewer Guidance: Reviewers will describe efforts to complete the screening.

The youth was on the run at time of scheduled exam or during the time period when the screening would have been required.

Reviewer Guidance: Reviewers need to specifically identify these cases during the case review. HQ program manager will review these cases to determine their overall impact on this Outcome.