


	MEDICAL ASSISTANCE BULLETIN COMMONWEALTH OF PENNSYLVANIA * DEPARTMENT OF PUBLIC WELFARE		
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SUBJECT: Residential Treatment Facility Services Provided in a Secure Setting			
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PURPOSE:

The purposes of this bulletin are to:

1. announce that the Medical Assistance (MA) Program will pay for medically necessary services provided in a Secure Care Residential Treatment Facility (RTF) for adjudicated delinquent MA recipients under 21 years of age who have been court ordered into a secure residential placement and who have a diagnosed mental illness or severe emotional disorder, regardless of any additional diagnosis including substance abuse or mental retardation; and
2. inform providers of the procedures for enrolling as a Secure Care RTF and for receiving MA payment for medically necessary services provided in a Secure Care RTF setting.

SCOPE:

HealthChoices Behavioral Health Managed Care Organizations (BH-MCOs)

HealthChoices Physical Health Managed Care Organizations (PH-MCO)

General Hospitals

MA Voluntary MCOs

Physicians

Residential Treatment Facilities

Private Children and Youth Agency Directors

Psychiatric Hospitals and Psychiatric Units

Psychologists

Rehabilitation Hospitals and Rehabilitation Units

BACKGROUND:

MA Bulletins 01-93-04 et al, "Payment for Mental Health Services Provided In a Residential Treatment Facility for Eligible Individuals Under 21 Years of Age", 1165-95-01 "Update JCAHO Accredited RTF Services" and 1157-95-01, "Mental Health Services Provided in a Non-JCAHO Residential Treatment Facility for Children Under 21 Years of Age" set forth MA Program

participation and payment requirements for RTFs that are accredited by the Joint Commission on Accreditation of Healthcare Organizations (JCAHO) and for those that are not JCAHO accredited, respectively. One of the requirements set forth in these bulletins is that the program be licensed by the Department of Public Welfare (the Department) as a residential child care facility under 55 Pa. Code Chapters 3680 and 3810. Chapter 3810 regulations did not apply to secure care facilities.

In October 1999, the regulations at Chapters 3680 and 3810 were rescinded in whole or in part and replaced by Chapter 3800, "Child Residential and Day Treatment Facilities", which also governs secure care facilities. In-state JCAHO accredited and non-JCAHO accredited RTFs are now required to be licensed under the Chapter 3800 regulations.

The Department has permitted out-of-state providers to enroll in the MA Program and receive MA payment for medically necessary RTF care provided to eligible Pennsylvania MA recipients. Out-of-state providers are required to have the appropriate residential license of their state and/or be JCAHO-accredited; to have a service description approved by the Office of Mental Health and Substance Abuse Services (OMHSAS); and to be enrolled in PA's MA Program. The Department learned through reviewing the service descriptions for these facilities and the prescriptions for RTF care that some of these out-of-state facilities that serve Pennsylvania MA recipients that have been adjudicated delinquent are secure facilities.

So that Pennsylvania MA recipients who require secure residential settings may receive medically necessary care in the most appropriate environment and as close to their family and community as their needs permit, the Department's Offices of Medical Assistance Programs (OMAP), Mental Health and Substance Abuse Services, and Children, Youth and Families (OCYF) have collaborated to develop the following procedures for enrolling and making payment to in-state providers for medically necessary secure RTF care.

DISCUSSION:

Chapter 3800 regulations, at 55 Pa. Code § 3800.5, define secure care as follows:

"Care provided in a 24-hour living setting to one or more children who are delinquent, from which voluntary egress is prohibited through one of the following mechanisms:

- i. Egress from the building, or a portion of the building, is prohibited through internal locks within the building or exterior locks.
- ii. Egress from the premises is prohibited through secure fencing around the perimeter of the building."

Provider Qualifications

In order to participate in and receive payment from the MA Program for RTF services in a secure setting, the facility must be enrolled with OMAP as a MA provider; be licensed under Chapter 3800 as a secure care residential child care facility; and be accredited by JCAHO and be certified by OMHSAS as meeting the Department's Interim Guidelines (Attachment 4), set forth in MA Bulletin 01-93-04 and 1165-95-01, or meet the requirements set forth in MA Bulletin 1157-95-01 related to non-JCAHO RTFs and be certified by OMHSAS.

To be enrolled as an MA provider of RTF services in a secure setting, the provider must submit a service description for approval to the OMHSAS Regional Field Office, which describes the mental health treatment services(s) to be rendered that will address the diagnosed mental health condition and/or addictive disorder of the population served at the facility. The description of services must demonstrate a level of clinical treatment that is beyond the standard level of treatment expected within a secure residential facility serving adjudicated delinquent youth. Approval of the service description will also include an on-site review by Department staff. Both review of the service description and subsequent on-site review will be based on compliance with MA Bulletin 01-93-04 et al and MA Bulletin 1157-95-01, in particular Attachment 4 "Interim Guidelines for Residential Treatment Facilities" (see attached), and adherence to the Pennsylvania Child and Adolescent Service System Program's (CASSP) principles for children's treatment and services.

In addition, in order to enroll in the MA Program, providers of RTF services in a secure setting must notify the Department that the RTF's policies and procedures are consistent with the policy, procedures, and employee training requirements set forth in federal regulations at 42 CFR, Part 483, Subpart G, as set forth in MA Bulletin 53-01-01, "The Use of Restraint and Seclusion in Psychiatric Residential Treatment Facilities" (see attached). The Secure Care RTF director must complete an "Attestation of Compliance with State and Federal Restraint and Seclusion Requirements" or submit the facility's own letter of compliance and attach a copy of the material distributed to the residents/family/guardian/custodian regarding the facility's use of restrictive procedures.

Payment for Services

In order for a MA-enrolled Secure Care RTF provider to receive payment for services rendered, the provider must also comply with all other requirements set forth in MA Bulletins 01-93-04 et al, 1165-95-01 and 1157-95-01, which include that the services must be prior approved by OMAP. For MA recipients enrolled in the Department's HealthChoices Program, Secure RTF services must be prior authorized by the BH-MCO.

The Department will establish a negotiated per diem rate for each provider to pay for prescribed therapeutic or rehabilitative services. The negotiated per diem rate will be based upon each facility's costs reflected in the facility's cost report and applying Medicare cost reimbursement principles and other reasonableness tests. Costs related to room and board for non-JCAHO accredited Secure Care RTFs are not compensable under the MA Program. The BH-MCO will establish the payment rate for JCAHO and non-JCAHO accredited Secure Care RTFs who are enrolled within their network.

A facility over which a government unit exercises administrative control, even if through contract with a private entity (e.g., privatized prison), is not eligible to enroll as a Secure RTF.

PROCEDURE:

The following steps must be completed in order to enroll in the MA Program and receive MA payment for providing RTF services in a secure setting:

1. Submit an enrollment application to OMAP which includes the following information, in addition to other detailed information identified in the MA Provider Enrollment Package:
 - A copy of the facility's Chapter 3800 Secure Care Child Residential Facility license issued by the Department's Office of Children, Youth and Families;
 - A copy of the facility's certificate of accreditation from JCAHO as a child/adolescent mental health facility, for a residential setting, if applicable;
 - A copy of the facility's service description describing the admission criteria, evaluation, and treatment plans, and the responsibilities and qualifications of staff, along with staffing requirements needed to carry out the program objectives as well as discharge planning.
 - The "Attestation of Compliance with State and Federal Restraint and Seclusion Requirements" form or a letter from the facility stating their compliance with State and Federal Restraint and Seclusion Requirements and a copy of the material distributed to the residents/family/guardian/custodian regarding the facility's use of restrictive procedures.

Providers may request an enrollment package via the OMAP website at www.dpw.state.pa.us/omap, click on the link to OMAP Site Map. At OMAP Site Map, scroll to Provider Enrollment Information and click on the RTF link within the Provider Type table. Enrollment information may also be obtained by calling (717) 772-6456. For HealthChoices, the RTF provider must be enrolled with the BH-MCO, as well as OMAP. The provider must contact the specific BH-MCO to determine their enrollment process.

2. Submit a service description to the OMHSAS Regional Field Office describing the level of clinical treatment that will be provided to meet the individual mental health needs of the population served at the Secure Care RTF, including a detailed explanation of how the treatment provided is beyond the standard level of treatment expected within a secure residential facility serving adjudicated delinquent youth and the additional elements set forth in Attachment 4.

As part of the service description approval, OMHSAS Regional Field Office staff will conduct an on-site inspection and certify the facility's compliance with program eligibility requirements set forth in MABs 01-93-04 (JCAHO) or 1157-95-01 (non-JCAHO). OMHSAS Regional Field Office Staff will provide a copy of the certification letter confirming approval of the facility's service description and compliance with program eligibility requirements to OMAP Enrollment and Rate Setting Unit within 45 days but no later than 90 days after the Department receives the MA RTF Provider Enrollment Package.

All documents required for enrollment must be sent to the following address:

**Office of Medical Assistance Programs
Bureau of Fee for Service Programs
Provider Enrollment
P.O. Box 8045
Harrisburg, Pennsylvania 17105**

IMPORTANT REMINDER: OMAP, through the Fee-for-Service Program or HealthChoices, will not pay for admissions to a secure or non-secure RTF or continuation of treatment in a secure or non-secure RTF, whether court-ordered or otherwise, unless OMAP or the BH-MCO determines that the level of care and the particular program are medically necessary.

ATTACHMENTS:

- MA Bulletin # 53-01-01 - The Use of Restraint and Seclusion in Psychiatric Residential Treatment Facilities (RTF)

- Interim Guidelines for Residential Treatment Facilities

COMMENTS AND QUESTIONS REGARDING THIS BULLETIN SHOULD BE DIRECTED TO:

The appropriate toll-free number for your provider type or the appropriate HealthChoices or Voluntary Managed Care Organization.

Visit the Office of Medical Assistance Programs website at www.dpw.state.pa.us/omap.