

**Report to the Montana Legislature
Required Out-of-State Placement and Monitoring Report
January 1 2017 through June 30 2017**

Submitted September 28, 2017

The following statutorily required report is completed by the DPHHS, CMHB, in compliance with Child and Family Services Division (CFS) of the Department of Public Health and Human Services (DPHHS), Department of Corrections (DOC), and Juvenile Justice (JJ). The statute reads:

52-2-311. Out-of-state placement monitoring and reporting.

(1) The department shall collect the following information regarding high-risk children with multiagency service needs:

- (a) the number of children placed out of state;
- (b) the reasons each child was placed out of state;
- (c) the costs for each child placed out of state;
- (d) the process used to avoid out-of-state placements; and
- (e) the number of in-state providers participating in the pool.

(2) For children whose placement is funded in whole or in part by Medicaid, the report must include information indicating other department programs with which the child is involved.

(3) On an ongoing basis, the department shall attempt to reduce out-of-state placements.

(4) The department shall report biannually to the children, families, health, and human services interim committee concerning the information it has collected under this section and the results of the efforts it has made to reduce out-of-state placements.

Methodology

This report includes children whose treatment is paid by all State agencies and divisions, though the report is compiled by the Children's Mental Health Bureau (CMHB), which is a Medicaid bureau within DPHHS. The report distinguishes between youth whose treatment is funded solely by Medicaid, those whose treatment is funded by Medicaid, but Child and Family Services (CFS), Juvenile Justice (JJ), or Department of Corrections (DOC) is the placing agency, and those whose treatment is funded solely by CFS, JJ, or DOC.

This biannual report to the Legislature covers the second half of SFY17 (1/1/17 through 6/30/17) and includes only children who were in treatment out of state (OOS) on or after January 1 2017 and on or before June 30 2017. During this reporting period there were youth who received treatment in more than one out-of-state facility. These youth are only counted once regardless of the number of unique out of state facilities. In addition, some youth had both CFS and JJ or DOC involvement and those youth are only counted once as well.

Definitions

"Psychiatric Residential Treatment Facility" means a facility accredited by the Joint Commission on Accreditation of Health Care Organizations (JCAHO), Council on Accreditation (COA), or the Commission on Accreditation of Rehabilitation Facilities (CARF) or any other organizations designated by the Secretary of the United States Department of Health and Human Services as authorized to accredit psychiatric hospitals for Medicaid participation, and which operates for the primary purpose of providing residential psychiatric care to persons under 21 years of age. The youth must meet the Montana Medicaid SED criteria for PRTF services.

"Therapeutic group home (TGH)" means a treatment facility providing therapeutic services licensed and under contract with the department as a youth care facility with the supervision and intensity of treatment required to manage and treat up to eight youth who present severe emotional disturbance (SED) and/or behavioral disorders as determined by the department.

Organization

The organization of this report follows the list of required report variables prescribed in statute. The number of youth receiving treatment out of state by agency is discussed first, followed by the cost and reasons each youth was placed out of state. Care is given to describe the reasons for treatment in out of state (OOS) psychiatric residential treatment facilities (PRTF), rather than in state PRTF, for youth receiving Medicaid funds. Next, the report focuses on potential factors relating to treatment in an OOS PRTF. Finally, attention is given to how the CMHB is working to reduce the number of youth receiving treatment OOS.

Number of Youth receiving treatment in Out-of-State PRTF's

Table 1. Number of Youth receiving treatment in OOS Psychiatric Residential Treatment Facilities

	7/1/15- 12/31/15	1/1/16- 6/30/16	7/1/16- 12/31/16	1/1/17- 6/30/17
Placed by parent or guardian Medicaid Funding	72	51	46	45
Placed by CFS with Medicaid Funding	7	24	11	15
Placed by DOC with Medicaid Funding	0	0	1	1
Placed by JJ with Medicaid Funding	2	21	12	6
CFS Funding	1	8	7	16
DOC Funding	2	0	1	0
JJ Funding	0	1	9	6
Number of youth placed by and funded with both CFS and either DOC or JJ	0	1	0	3
Total youth placed during period with Medicaid funding	81	96	70	67
Total youth placed during period without Medicaid funding	3	10	17	25

Tables 2 and 3 demonstrate the number of youth in PRTF both at in and out of state facilities over time, as a point in time. As one can see from the table, the overall number of youth receiving treatment in a PRTF has decreased, as well as the number of youth receiving treatment in an out of state PRTF.

Table 2. Youth receiving treatment In State and Out of State as of December 2016

Month:	In-State PRTF	Out-of-State PRTF	Total	Percent Out-of-State (%)
December 2011	83	22	105	21%
December 2012	104	30	134	22%
December 2013	118	45	163	28%
December 2014	113	46	159	29%
December 2015	121	52	173	31%
December 2016	98	28	126	22%

Table 3. Youth receiving treatment In State and Out of State as of June 2017

Month:	In-State PRTF	Out-of-State PRTF	Total	Percent Out-of-State (%)
June 2012	104	32	136	24%
June 2013	97	39	136	29%
June 2014	125	53	178	30%
June 2015	133	48	181	27%
June 2016	103	47	150	31%
June 2017	107	41	148	28%

Number of youth receiving treatment in OOS Therapeutic Group Home**Table 4. Number of Youth receiving treatment in OOS Therapeutic Group Home 1/1/17-6/30/17**

Placed by Parent or Guardian with Medicaid Funding	29
Placed by Child and Family Services (CFS) Division with Medicaid Funding	26
Placed by Department of Corrections (juvenile parole) with Medicaid Funding	0
Placed by Juvenile Justice (juvenile probation) with Medicaid Funding	30
Number of youth with both CFS and either Juvenile Justice or Department of Corrections involvement, funded by Medicaid	5
Placed by Child and Family Services ineligible for Medicaid Funding	10
Placed by Department of Corrections ineligible for Medicaid Funding	1
Placed by Juvenile Justice ineligible for Medicaid Funding	5
Number of youth with both CFS and either Department of Corrections or Juvenile Justice involvement placed ineligible for Medicaid Funding	1
Total youth placed during period with Medicaid funding	90
Total youth placed during period without Medicaid funding	17

Costs for Each Youth

The following tables list the treatment cost for the period of January 1 2017 through June 30 2017 for each youth that was receiving treatment out of state during that timeframe. Youth are included in the tables below regardless of length of stay and it should be noted that since providers have 365 days to bill Medicaid, some costs were not reported during this period. The costs below list the total of all treatment received out of state by each youth in both therapeutic group home and PRTF for which Medicaid has been billed through August 15 2017.

Table 5. List of Total Costs of Stay per Youth in TGH 1/1/17 through 6/30/17

\$3,930.00	\$17,684.00	\$17,028.00
\$5,156.00	\$1,294.00	\$5,433.00
\$1,646.00	\$4,772.00	\$24,226.50
\$35,197.26	\$24,113.04	\$14,973.42
\$583.38	\$15,556.80	\$22,557.36
\$22,946.28	\$13,806.66	\$30,530.22
\$27,418.86	\$7,000.56	\$22,168.44
\$28,391.16	\$23,140.74	\$35,197.26
\$5,250.42	\$11,473.14	\$27,807.78
\$2,527.98	\$12,250.98	\$23,335.20
\$6,806.10	\$5,639.34	\$3,111.36
\$22,946.28	\$8,750.70	\$2,527.98
\$28,196.70	\$22,362.90	\$1,620.51
\$6,311.46	\$10,385.90	\$2,670.25
\$24,747.50	\$24,610.90	\$50,634.75
\$25,952.88	\$22,884.12	\$24,182.64
\$34,245.40	\$16,225.50	\$24,696.42
\$50,634.75	\$23,467.68	\$50,612.24
\$38,175.20	\$50,634.75	\$28,631.40
\$24,441.20	\$21,779.52	\$5,315.25
\$50,515.30	\$18,245.50	\$21,553.00
\$50,806.70	\$3,889.20	\$30,772.50
\$43,508.50	\$42,666.40	\$43,765.54
\$9,824.50	\$50,806.70	\$50,806.70
\$15,999.90	\$3,551.46	\$31,611.75
\$50,806.70	\$41,871.62	\$50,634.75
\$51,120.26	\$50,525.80	\$50,720.26
\$16,147.08	\$14,790.38	\$50,914.72
\$3,500.28	\$29,751.02	\$49,611.26
\$35,197.26	\$41,653.64	\$3,111.36
\$11,084.22	\$44,106.26	\$23,164.58
\$32,311.08	\$43,044.26	\$50,893.26
\$33,358.34	\$16,437.78	\$13,189.48
\$50,720.25	\$2,333.52	\$23,653.44
\$18,673.22	\$34,392.98	No Cost Reported
No Cost Reported	No Cost Reported	

Table 6. List of Total Costs of Stay per Youth in PRTF 7/1/16 through 12/31/16

\$34,686.00	\$24,180.00	\$31,620.00
\$30,195.00	\$61,750.00	\$105,300.00
\$8,400.00	\$20,808.00	\$16,728.00
\$11,532.00	\$19,434.00	\$15,000.00
\$38,350.00	\$12,000.00	\$4,464.00
\$48,000.00	\$17,550.00	\$51,350.00
\$21,267.00	\$3,000.00	\$37,128.00
\$31,710.00	\$69,500.00	\$66,950.00
\$57,528.00	\$4,464.00	\$67,600.00
\$3,375.00	\$26,500.00	\$28,968.00
\$61,100.00	\$43,152.00	\$58,797.00
\$33,456.00	\$36,828.00	\$10,400.00
\$33,480.00	\$11,424.00	\$18,600.00
\$49,400.00	\$62,400.00	\$3,375.00
\$47,706.00	\$1,500.00	\$52,632.00
\$99,120.00	\$20,088.00	\$4,455.00
\$100,300.00	\$50,316.00	\$35,248.00
\$53,597.00	\$42,126.00	\$22,044.00
\$37,025.00	\$36,720.00	\$35,088.00
\$67,482.00	\$31,248.00	\$59,976.00
\$102,321.00	\$15,714.00	\$63,050.00
\$37,200.00	\$31,850.00	\$42,780.00
\$19,500.00	\$650.00	\$5,625.00
\$6,300.00	\$28,260.00	\$65,250.50
\$50,850.00	\$190,755.00	\$84,300.00
\$44,000.00	\$197,235.00	\$38,814.00
\$50,285.00	\$80,892.00	\$94,500.00
\$44,590.00	\$33,335.00	No Cost Reported
No Cost Reported	No Cost Reported	No Cost Reported
No Cost Reported	No Cost Reported	No Cost Reported
No Cost Reported	No Cost Reported	

Reasons Youth are treated in OOS facilities

There are no additional requirements for a youth to receive treatment in an OOS TGH, the authorization process and medical necessity requirements are the same as in state TGH.

Treatment in an OOS PRTF funded through Medicaid can only occur after a youth has been determined to meet medical necessity criteria for PRTF level of care and has been denied admission by all three in-state PRTF's. In order to meet medical necessity criteria for PRTF, a youth must exhibit behaviors or symptoms of serious emotional disturbance of a severe and persistent nature requiring 24-hour treatment under the direction of a physician. In addition, the prognosis for treatment at the PRTF level of care must reasonably be expected to improve the clinical condition/serious emotional disturbance of the youth or prevent further regression based upon a physician's evaluation.

Table 7 shows the percentage of all denials which can be attributed to each denial reason as reported on initial stay requests received January 1 2017 through June 30 2017. The most common reason youth are denied in state is due to aggression and behavior which cannot be managed in the current milieu. In many cases, multiple reasons for denial were noted.

Table 7. In-state denial reasons January 1 2017 through June 30 2017

Denial Reason	Percentage of all denials
Aggression/Violence, Behavior cannot be managed on current milieu, Too Acute	44%
Unlikely to benefit from treatment	10%
Elopement Risk	2%
Sexualized behavior or main problem is chemical dependency	8%
No Beds	31%
Other (special needs that cannot be addressed by facility)	4%

Table 8 shows the instances of Serious Emotional Disturbance (SED) diagnosis for youth being treated in OOS PRTF. The Magellan database was reviewed to determine which SED diagnosis was present upon initial approval. It should be noted that the primary diagnosis is not identified in the Magellan system and some youth had more than one diagnosis and/or had more than one initial authorization so the primary diagnosis was not always clearly identified and is not reflected in this data.

Table 8. Instances of SED Diagnosis

SED Diagnosis	Percentage of youth with Diagnosis
Depressive Disorder	29%
Trauma and Stressor Related Disorders	28%
Disruptive and Impulse Control Disorders	16%
Neurodevelopmental Disorder	14%
Anxiety Disorder	6%
Bipolar and Related Disorders	5%
Obsessive Compulsive and Related Disorders	1%
Gender Dysphoria	1%
Schizophrenia spectrum	1%

Reducing Number of Youth that are receiving treatment in OOS facilities

The Children’s Mental Health Bureau has implemented policy changes in recent years to reduce the number of youth that are going out of state for treatment. These include the implementation of updated, more specific, medical necessity criteria for both Therapeutic Group Home and Psychiatric Residential Treatment Facility and reviewing medical necessity every 30 days for Psychiatric Residential Treatment Facilities. Additionally, Regional Care Coordinators and Regional Resource Specialists have taken on a more collaborative role with out of state Psychiatric Residential Treatment Facilities, Therapeutic Group Home providers, and community mental health providers to ensure that youth are being treated in the least restrictive level of care at the earliest possible time in their home communities.