

**SANTA CRUZ COUNTY
Behavioral Health Services**

POLICY AND PROCEDURE MANUAL

Subject: Katie A Services Pathways to Wellness

Policy Number: 2432

Date Effective: 12/14/2020

Pages: 4

Replaces: 2/13/2018

**Responsible for Updating
Director of Children's Services**

Approval: 
Behavioral Health Director

12-14-2020
Date

BACKGROUND:

Katie A. v. Bontá et al. refers to a class action lawsuit filed in federal district court, in 2003, concerning the availability of intensive mental health services to children in California who are either in foster care or at imminent risk of coming into care. As the result of a settlement agreement reached in December 2011 in this case, child welfare and mental health leaders from state and local levels worked together to establish a sustainable framework for the provision of an array of services that occur in community settings and in a coordinated manner.

SCOPE:

As part of the Katie A. agreement, the California Department of Social Services (CDSS) and the California Department of Health Care Services (DHCS) agreed to take specific actions that will strengthen California's child welfare and mental health systems with objectives that include:

- Facilitating the provision of an array of services delivered in a coordinated, comprehensive, community-based fashion that combines service access, planning, delivery, and transition into a coherent and all-inclusive approach, which is referred to as the Integrated Core Practice Model (ICPM).
- Addressing the need of some class members with more intensive needs (referred to as "subclass members") to receive medically necessary mental health services in their own home or family setting in order to facilitate reunification and meet their needs for safety, permanence, and well-being. These more intensive services are referred to as Intensive Care Coordination (ICC), Intensive Home Based Services (IHBS), and Therapeutic Foster Care (TFC).
 - DHCS has clarified that membership in the Katie A. subclass is not a requirement to receive ICC, IHBS, or TFC services. (See **MEDI-CAL MANUAL For Intensive Care Coordination [ICC], Intensive Home Based Services [IHBS], and Therapeutic Foster Care [TFC] Services for Medi-Cal Beneficiaries; Policy 2434 Intensive Care Coordination & Intensive Homed Based Services**)

PURPOSE:

To establish a procedure to ensure that children and youth under the age of 21, who are eligible for the full scope Medi-Cal, being served within the child welfare system and meeting Katie A. criteria, are identified and evaluated for intensive service needs.

POLICY:

The Department of Family and Children's Services (FCS), in collaboration with the County of Santa Cruz Children's Behavioral Health Services, regularly assesses all children in open child welfare cases, both voluntary and court-ordered services, to determine if they meet the criteria for consideration in the sub-class. If a child/youth is determined to meet the criteria and therefore a member of the sub-class, they will be referred to the County of Santa Cruz Children's Behavioral Health who will ensure the child/youth receives the appropriate mental health services. As part of routine assessment and collaboration, Children's Behavioral Health and Department of Family and Children's Services will regularly discuss subclass members to ensure coordinated care. If these subclass members eligibility change, they will no longer be considered subclass members.

DEFINITIONS:

1. **Child and Family Team (CFT)**- A group of individuals who are engaged in a variety of processes to identify the strengths and needs of the child/youth and the child/youth's family, to help achieve positive outcomes for safety, permanency, and well-being. In addition to the required participation of involved public agency representatives, the composition of the team is driven by family members' preferences.
2. **EPSDT**- The Early and Periodic Screening, Diagnostic and Treatment (EPSDT) benefit provides comprehensive and preventive health care services for children under age 21 who are enrolled in Medi-Cal.
3. **Mental Health Plan (MHP)**- Refers to Santa Cruz County Mental Health Services and its authorized representatives.

PROCEDURES:

- A. The Department of Family and Children's Services social worker is responsible for completing the Mental Health Screening Tool. Once completed, the forms are submitted to the designated Children's Behavioral Health Supervisor. Through the assessment process if determined that the child/youth meets medical necessity criteria then ongoing Specialty Mental Health Services and if eligible, Katie A. services will be provided.
- B. The Department of Family and Children's Services social worker or a Children's Behavioral Health clinician can request that a client be considered for Katie A. services. The **Katie A. Sub Class Eligibility Assessment Form** is jointly completed by the Department of Family and Children's Services social worker and by a Children's Behavioral Health clinician. Once completed, the forms are submitted to the designated Children's Behavioral Health Supervisor and to the Department of Family and Children's Services designated Program Manager.

- C. The designated Children's Behavioral Health Supervisor will assign the referral to the appropriate Children's Behavioral Health clinician and instruct the clinician to begin using Katie A. billing codes. The use of Katie A. billing codes tags in Avatar the child/youth determined to meet the Katie A. Sub-Class criteria as a "Special Population" client.
- D. Following receipt of the Katie A. eligibility notification, the designated Department of Family and Children's Services Program Manager will log the referral into the master Katie A. database. The Katie A. database is shared with the designated Children's Behavioral Health Supervisor. The designated Department of Family and Children's Services Program Manager and the designated Children's Behavioral Health Supervisor meet monthly to review the Katie A. database, discuss progress and continued eligibility criteria for the Katie A. Sub-Class. In addition, referrals for Katie A. services can be initiated at this meeting.
- E. Children and youth who meet the criteria for Katie A. Sub-Class designation are those who have more intensive needs and require medically necessary mental health services in the child/youth's own home, a family setting or the most home-like setting appropriate in order to facilitate reunification and to meet the child/youth's needs for safety, permanence and well-being. Children/youth (up to age 21) are considered to be members of the Katie A. Subclass if they meet the following criteria:
- a) Eligible for full-scope Medi-Cal;
 - b) Have an open child welfare services case (see Katie A. Medi-Cal Manual, Appendix A, Glossary); and
 - c) Meet the medical necessity criteria for Specialty Mental Health Services as set forth in the California Code of Regulations (CCR), Title 9, Section 1830.205 or Section 1830.210.
 - d) Are receiving, or being considered for, Wraparound.
 - e) Are receiving, or being considered for, specialized care rate due to behavioral health needs.
 - f) Are receiving, or being considered for other intensive SMHS, including but not limited to Therapeutic Behavioral Services (TBS) or crisis stabilization.
 - g) Are currently in or being considered for group homes (RCL 10 or above) or Short Term Residential Therapeutic Programs (STRTP).
 - h) Have been discharged within 90 days from, or are currently in or being considered for, a psychiatric hospital or 24-hour mental health treatment facility (e.g., psychiatric inpatient hospital, psychiatric health facility [PHF], community treatment facility, etc.).
 - i) Have experienced two or more mental health hospitalizations in the last 12 months.
 - j) Have experienced two or more placement changes within 24 months due to behavioral health needs.
 - k) Have been treated with two or more antipsychotic medications at the same time over a three-month period.
 - l) If the child is zero through five years old and has more than one psychotropic medication, the child is six through 11 years old and has more than two psychotropic medications, or the child is 12 through 17 years old and has more than three psychotropic medications.

- m) If the child is zero through five years old and has more than one mental health diagnosis, the child is six through 11 years old and has more than two mental health diagnoses, or the child is 12 through 17 years old and has more than three mental health diagnoses.
- n) Have two or more emergency room visits in the last 6 months due to primary mental health condition or need, including but not limited to involuntary psychiatric treatment under California Welfare and Institutions Code (WIC) section 5585.50.
- o) Have been detained pursuant to WIC sections 601 and 602 primarily due to mental health needs.
- p) Have received SMHS within the last year and have been reported homeless within the prior six months.

F. These services will be provided by Children's Behavioral Health staff and/or county contractors who are EPSDT providers.

PRIOR VERSIONS: 1/16/2018; 2/13/2018

REFERENCES: MHSUDS Information Notice Number 13-19; MHSUDS Information Notice Number 16-004; Medi-Cal Manual for Intensive Care Coordination (ICC), Intensive Home Based Services (IHBS), and Therapeutic Foster Care (TFC) Services for Medi-Cal Beneficiaries, Third Edition, January 2018; The California Integrated Core Practice Model for Children, Youth, and Families 2018

FORMS/ATTACHMENTS: Katie A. Sub-Class Eligibility Assessment