Children's Service Center Administrative Management Luzerne/Wyoming Counties

Introduction:

In FY 2015-2016, the **Administrative Management Service** at Children's Service Center provided services to 5668 unduplicated clients and families. We project that CSC will provide Administrative Management Services to 5700 unduplicated clients and families in calendar year January 1, 2017 to June 30, 2017 and July 1, 2017 to June 30, 2018.

CSC's Plan for development of a resiliency oriented system:

System Indictors:

- 1. Affirmative Action hiring policy that supports accommodations: Children's Service Center's hiring policy is one of affirmative action; in addition, our HR department has an established track record of providing accommodations for staff that request them, both for physical as well as mental health needs.
- 2. Resiliency oriented mission statement: Children's Service Center continues to review our mission statement to ensure a resiliency oriented mission statement drives our services.
- 3. Board Representation:
 Children's Service Center is proud that consumers have representation on our Board. A significant officer on our Board of Directors is a consumer of services here at CSC. We are planning to increase consumer participation on

1. Soundness of Approach:

A. Project Description:

our Board.

The Base Service Unit is the functional unit responsible for assessing and evaluating client needs, planning comprehensive treatment programs and making available the necessary services on a continuing basis. Children's Service Center operates in both Luzerne and Wyoming Counties. As of July 1, 2006, the Health Choices initiative started with Community Care being the managed care company for many counties in Pennsylvania including Luzerne and Wyoming Counties. The Base Service Unit at Children's Service Center has changed and evolved into a Service Management Unit (SMU) with enhanced responsibilities including but not limited to Base Service Unit responsibilities. The Service Management Unit is the

central location for interfacing for authorization requests for services, utilization management oversight, and quality assurance to ensure good quality of care takes place for all clients in a managed care environment. From the clients perspective there is no change. The processes are seamless. However from the perspective of the SMU, staff has had to make adjustments. Clients who have any public insurance, other than Community Care Medical Assistance or HMO's, the Service Management Unit will interface with clients as they have always done in the past as a Base Service Unit. For Clients that have Community Care Medical Assistance, the responsibilities have changed. The following report will discuss these responsibilities.

The *primary operational functions* of the Service Management Unit at Children's Service Center in Luzerne County are as follows:

- Registration: Any child, adolescent and family who want to come through the public mental health system would enter through the Service Management Unit. By meeting with a Registration Specialist, the family would be able to register in the public system, have the opportunity to present any applicable insurance and informed of any liability or financial responsibilities for services, before the family sees a clinician for an assessment. Children's Service Center is also a Community Partner with the Department of Public Welfare (DPW) with their COMPASS Program, which allows the staff at Children's Service Center and DPW to work together to help families obtain Medical Assistance coverage. For clients that have Community Care Medical Assistance, the Registration Specialist will go onto Community Care's secured website and electronically register the client in order to get approval for outpatient and medication services. Other services that require a paper authorization form to be completed are also done by the Registration Specialist. In addition, the registration staff also interfaces with the County Mental Health office's new computer system called EZ-CAP. After a family leaves the registration office, the staff begins entering client information into the HCSIS system. This system will generate a unique identifying number called the MHX number. It is this MHX number that is used to uniquely identify a client in the county's EZ-CAP system. After HCSIS registration is completed, the registration staff takes the MHX number and begins registering the family in the county's EZ-CAP system. It is this system where all county funded cases are registered, authorized, and payment claims are processed.
- Assessment: Determining the needs of a client and family are another key aspect of the Service Management Unit function. Children's Service Center uses psychiatrists and psychologists, who are assigned a percentage of time to the Service Management Unit, for further evaluation to determine the scope of service needed. Children's Service Center also uses outpatient clinicians to assess and determine service needs.

- Linkage and Referral: After an assessment is completed, the Service Management Unit will ensure that the client and family are connected with the service that the evaluator recommended. The referral can be made to Children's Service Center or to another service provider if the family chooses. For clients who have Community Care Medical Assistance, the Service Management Unit will secure the necessary authorization from Community Care as well as secure a referral to the provider of choice by either the client or Community Care.
- Authorize Services: All public mental health services will be authorized by the Service Management Unit with the exception of Community Care Medical Assistance and HMO's. This authorization for county funded cases is obtained through the EZ-CAP system. This allows the provider of service, the family and the Luzerne/Wyoming Counties MH Program Office to know what services have been approved for payment. Inherent in this Service Management Unit process is a utilization management function. This means that admission, continued stay, and discharge criteria for all requested services looking for SMU authorization as well as Community Care authorization is met.
- Monitor the Service Delivery: The Service Management Unit monitors the service delivery to ensure that the needs of the client and family are being met. At Children's Service Center, an electronic report or spread sheet is generated that conveys the necessary information to the Service Management Unit in order to justify generating a new or updated authorization for service. The Quality Assurance department conducts periodic random chart reviews to insure there was a seamless transfer from one service to another and to maintain continuity of care.
 - -Quality Assurance: The Service Management Unit has hired a Quality Assurance Coordinator who is in charge of Performance Improvement, and Quality Assurance. Spearheading initiatives that require data collection, monitoring and assessing the data, and implementing strategies for improvement are key responsibilities in addition to clinical record reviews. The Quality Department also has developed clinical program outcomes with each service at Children's Service Center in order to empirically show the effectiveness of each service.
 - -Utilization Management: The Service Management Unit has the responsibility to utilize Appendix T criteria from the Health Choices Bulletin, which outlines admission, continued stay, and discharge criteria for all mental health services. The role of the Service Management Unit is to review all public clients, including Community Care Medical Assistance clients, to ensure that the admission, continued stay, and discharge criteria is being met at Children's Service Center.

B. Description of Target Population:

The Service Management Unit will see any child, adolescent, and their family from age's birth through 18 years of age, with the exception of Behavioral Health Rehabilitation Services (BHRS) which has an age limit of up to the twenty first (21) birthdays.

C. Statement of Need:

The Service Management Unit will interface with any child, adolescent, and family who are experiencing psychiatric, social or emotional difficulties, at any severity, in order to develop a service plan.

D. Project Outcomes:

The Service Management Unit at Children's Service Center has interfaced with 5668 unduplicated consumers for services in fiscal year 2015-2016. The Service Management Unit is cognizant of the length of time it takes a client to go from the initial registration to meeting with an assessment clinician to getting a treatment appointment at Children's Service Center. At Children's Service Center, there are three levels of triage in order to access services. These levels comprise of crisis, urgent, and routine. By definition, crisis access means that a family will have immediate contact and availability of a crisis clinician. Urgent access means that a family will have a 24-48 hour availability to wait in order to see a crisis clinician. Routine access means that a family will have contact and availability to see an assessment clinician within 7 days. These are Community Care's access standards.

Children's Service Center offers Open Access to begin services. With this approach, families are told that they can arrive anytime during the week between 9:00am thru 1:00pm for a registration appointment that is immediately followed by an assessment appointment. Therefore after the Registration Specialist meets with a family, there is no longer a wait or delay for the family to see an assessment clinician. Although, we have 7 days according to Community Care to schedule a family for an assessment after the registration appointment, Children's Service Center does it all on the same day.

On a more global scale, the Service Management Unit is actively working to submit encounter data through the new CCRS-POMS Enterprise system. This outcome data is important and is tied to funding revenue for the County.

The Service Management Unit will see any family that presents for services at Children's Service Center. The Service Management Unit has not rejected or ejected any client from accessing behavioral health services.

E. Potential for Success:

Children's Service Center has full accreditation status by the Joint Commission on Accreditation of Healthcare Organizations (JCAHO). As part of our Joint Commission process, we continually look at how we can improve our processes and therefore our outcomes. We have looked at our intake system processes, and realized that change was needed to get families seen and assessed quicker. We have delineated duties for a unique registration staff, and duties for our assessment clinicians. The end result of this process enhancement is that our assessment clinicians now spend quality time with our families performing therapeutic assessments and referrals to needed services whereas the registration staff handle all of the data entry, insurance verification, liability determination, EZ-CAP and HCSIS registration. And best of all, the family is seen all on the same day for both registration and assessment.

With the start of the Service Management Unit at Children's Service Center, we have continued the tradition of operating as a Base Service Unit while at the same time enhanced our function to centralize the interfacing with Community Care. This allows the SMU the opportunity to provide quality reviews of material before it is submitted to Community Care for authorization. This also allows the SMU to find any errors in the work, to monitor internally the clinical processes at Children's Service Center and interface with clinical staff to offer the client the best possible service. Requests by clinical staff that appear problematic are returned for correction prior to the Service Management Unit interfacing with Community Care. Essentially with time, the Service Management Unit will begin to apply the same Utilization Management standards, the same Quality Assurance Reviews and the same Clinical Oversight as the Managed Care Company, Community Care, does for us. The Service Management Unit has therefore evolved into a Total Quality Management operation in a managed care environment.

2. Overall Qualifications of the Agency:

Children's Service Center is accredited by the Joint Commission on Accreditation of Healthcare Organizations (JCAHO) and is Sanctuary Certified. Children's Service Center has an extensive history of providing quality behavioral health care to the youth in our community and is committed to the highest standard of availability and continuity of care. We have been committed to the needs of children, adolescents and families for 154 years and currently serve well over 5,000 individuals.

A. Experience with this service:

The Children's Service Center has had experience operating a Base Service Unit since Luzerne/Wyoming Counties Mental Health and Developmental Services office has contracted the Base Service Unit function to the Agency back in 1966. The Children's Service Center has maintained the integrity of the mission of a Base Service Unit, as mentioned earlier under the heading of primary operational functions, since that time. Over the years, the Children's Service Center has met the challenges of expanding the continuum of services for children, and has planned these expansions with the County Office and the Base Service Unit. The Base Service Unit is, often times, the starting point for discussing a new program by conducting a needs assessment. This report is then used by the agency's clinical teams to see if there is support and need for such a service request. A core qualification under regulations for operating a Base Service Unit is to maintain a record for all patients. Back in the early 1990's, the Children's Service Center had upgraded its computer hardware and software in order to continue to maintain computerized records of all of its clients. The financial commitment was made to purchase an AS400 computer system and to purchase the software package from Presently, with the advancements in technology, Lavendar and Wyatt. Children's Service Center has transitioned to an Electronic Medical Record (EMR), called Askesis. Children's Service Center and its Service Management Unit are on the cutting edge of technology in order to serve our children, adolescent and families with the best EMR product available to date.

B. Experience working with the proposed population:

Children's Service Center's Base Service Unit has worked directly with children, adolescents and their families since its 1966 inception. The Base Service Unit has strived to meet the needs of any family by interfacing with them to provide registration, assessment, referral, and case management services in a caring and professional manner. The Base Service Unit staff has interfaced with families not only at Children's Service Center but also at family homes, schools, hospitals, residential care settings, and other in-vivo

locations in the community. The Base Service Unit staff has operated utilizing CASSP principals of providing services in the most cost effective, least restrictive, family focused and child-centered manner tailored for each family. The end result is that the Base Service Unit has helped families get the best possible services available to meet their specific needs.

C. Experience coordinating community resources:

Children's Service Center's Service Management Unit has great experience coordinating community resources. Besides helping families get the behavioral health care they need, the Service Management Unit staff has helped many families overcome obstacles, such as accessing transportation needs, sorting out their financial and insurance needs, helping them with food/clothing/shelter needs, and helping them get medication. We have referred families to many other helping organizations, depending on the family need. We have a directory of community resources at hand to quickly help families with a referral.

D. Current, valid license or certifications:

While the Service Management Unit/Base Service Unit does not require a license or certification, it does operate in close communication with the County MH/ID/EI Administrator's Office. The Service Management Directors meet at the Administrator's Office so that programmatic, operational, and financial issues can be reviewed and discussed.

3. Qualifications of Individuals Performing the Service:

The Service Management Unit at Children's Service Center has a Director, two part-time assessment clinicians, two full-time registration specialists, one full-time Case Manager, and one full-time Liability and Authorization Specialists.

The Director has been with Children's Service Center for 20 years and with the Base Service Unit since July 2013. The Director has a Master's of Science Degree and a Bachelors Degree in Social Work with earlier work done as a treatment clinician at the Children's Service Center.

The assessment clinicians have combined 3 years' experience work experience in the field. One has a Masters in Social Work Degree and the other a Bachelors in Psychology. The case manager is obtaining a bachelor degree in Social Work with only 12 credits until completion. The case manager has 6 years' experience working within the organization. The liability and authorization specialist is a high school graduate and has been with Children's Service Center for the past 12 years and with this position for eight and a half years. The Lead Registration worker has an Associate's Degree and employed with Children's

Service Center for one year. The second registration specialist has a high school diploma been at Children's Service Center for three months. The Wyoming County office employ's one part time registration staff that has an Associate's Degree and has been with the organization for 4 years.

All of the Service Management Unit staff has expertise in working with our clients and their families. The Service Management Unit, by its mission, is to maintain a relationship with the client from initial entry into the system until closing from the system. The Service Management Unit remains ready to assist families with resource referrals, liability determinations and abatement procedures if having financial difficulties. The Service Management Unit also interfaces with families who have lost insurance coverage and need help applying for Medical Assistance. The Service Management Unit also stands ready to help families connect with Medical Assistance in order to access the Medical Assistance Loophole, if warranted. All Service Management Unit staff have developed relationships not only with the provider staff at Children's Service Center, but also with a network of other service providers, including the County MH Office, Community Care Behavioral Health, psychiatric hospitals, BHRS providers, Department of Public Welfare, Residential Treatment Facilities, YMCA, and Helpline to name a few. In addition, the SMU case manager oversees clients who are psychiatrically hospitalized, placed out of county according to Michael H rules, registered clients receiving services at other providers than Children's Service Center, and MA-50 initial Residential Treatment Facility (RTF) referrals. Therefore, the Service Management Unit at Children's Service Center has ensured that over the years families have had the opportunity to work with knowledgeable staff that has helped them access appropriate community resources.

4. Budget:

A. Overall analysis of budget:

Please see attached