

Children's System of Care

Comprehensive Waiver Renewal *Listening Session*

by
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New Jersey Department of Children and Families

Commissioner

Children's
System of Care
(CSOC)
(formerly DCBHS)

Division of
Child Protection &
Permanency
(CP&P)
(formerly DYFS)

Division of Family & Community Partnerships (formerly DPCP)

Division on Women

Office of Adolescent Services



Children's System of Care Objectives

To help youth succeed...



At Home

Successfully living with their families and reducing the need for out-of-home treatment settings.



In School

Successfully attending the least restrictive and most appropriate school setting close to home.



In the Community

Successfully participating In the community and becoming independent, productive and law-abiding citizens.

LANGUAGE IS IMPORTANT



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Language of CSOC

- Children, youth, young adult
- Parents, caregivers
- Treatment/Care
- Engagement
- Transition
- Missing
- Therapeutic leave

Not the Language of CSOC

- Clients, Case,
 Consumer
- Mom and Dad
- Placement
- Not Motivated
- Close, Terminate
- Runaway
- Home visits

VISION

Waiver Renewal

A fully integrated continuum of care that seamlessly addresses individuals' physical, behavioral health and longterm care needs

CSOC

Seamless System of Care for all youth who may need treatment, support and services

CURRENT CSOC WAIVER COMPONENTS

The <u>Children's Home and Community-Based programs</u> under the Comprehensive Waiver are administered by the Department of Children and Families (DCF), Division of Children's System of Care (CSOC)

- 1. Intellectual Disability/Developmental Disability Mental Illness (ID/DD-MI)
- 1. Autism Spectrum Disorder (ASD)

EACH PILOT EXPECTED TO SERVE ABOUT 200 YOUTH

3. Serious Emotional Disturbance (SED)

CHILDREN WITH SED WHO MEET CLINICAL CRITERIA FOR HOSPITAL LEVEL OF CARE, WILL BE PROVIDED WITH PLAN A, MEDICAL BENEFIT PACKAGE

SERVICES TO BE PRIOR AUTHORIZED THROUGH CSOC'S CONTRACTED SYSTEM ADMINISTRATOR (CSA), PERFORMCARE

SED

ADDITIONAL THREE NEW SERVICES TO ELIGIBLE YOUTH* INVOLVED WITH THE CHILDREN'S SYSTEM OF CARE (CSOC):

- Transitioning Youth Life Skill Building (16 and over)
- Youth Support and Training (5 -16 yr old)
- Non Medical Transportation

*Youth must be involved with Care Management Organization (CMO) and services must be included in plan of care

ID/DD-MI

GOALS

- Serve and stabilize child in the least restrictive setting
- Return the family unit to a place that will require minimal outside intervention

INCLUSIONARY CRITERIA

- NJ FamilyCare Eligible youth
- CMO involved youth (to coordinate care)
- 5 to 21 yr old
- Co-occurring MH/DD diagnosis
- Meets State MH LEVEL OF CARE (LOC)

ID/DD-MI SERVICE COMPONENTS

- Case/Care Management
- Individual Supports
- Natural Supports Training
- Intensive In Community —Habilitation (IIH)
- Respite
- Non Medical Transportation
- Interpreter Services

- Services are habilitative
- Must be evidence based
- Enhance inclusion in community
 - Improved adaptive behavior, language, and cognitive outcomes

INCLUSIONARY CRITERIA:

- Must be determined DD eligible through CSOC
- NJ FamilyCare Eligible Youth
- Under 13 yr. old
- Meets Level of Care Criteria
- Diagnosis of ASD

EXCLUSIONARY CRITERIA:

Children with other insurance

- Three levels of acuity with associated cost limits for habilitation services
 - Low-\$9,000/yr
 - Moderate-\$18,000/yr
 - High-\$27,000/yr
- Eligibility and tier assessment by CSOC's Contracted System Administrator (CSA)
 - Maximum up to three years

CSOC authorizes through its own provider network the following services in the form of ABA:

- Behavior Consultative Supports
- Individual Behavior Supports

MCO's authorize and manage the below through their provider network:

- Occupational Therapy
- Physical Therapy
- Speech and Language Therapy

SERVING CHILDREN AND FAMILIES WITH COMPREHENSIVE SUPPORTS

- Under the renewal, a new Children's Support Services program will be initiated to:
 - Expand access to services currently under the ID/DD-MI and ASD pilots
 - Include additional services such as Supported Employment and Assistive Technology

Treating Children with Autism Spectrum Disorder

- In New Jersey, 1 out of every 41 children are diagnosed with Autism Spectrum Disorder
- With the success of the pilot, staff from DMAHS, CSOC, and the Department of Banking and Insurance (DOBI) are meeting regularly to build a comprehensive package of services to provide to NJ FamilyCare eligible youth with Autism

BEHAVIORAL HEALTH INTEGRATION

Adults with SMI die on average 25 years earlier than other Americans, largely due to treatable medical conditions

81% of NJ Medicaid high inpatient users have a BH diagnosis, including 44% with SMI

Sources: Journal of Psychopharmacology. 2010 Nov; 24(4_supplement): 61-68; Rutgers Center for State Health Policy.

Co-Morbidity in Children and Adults

| Cost Driver | Children | Adults |
|-------------------|----------|----------|
| Behavioral Health | ^ | |
| Physical Health | | ^ |

Co-Morbidity is not as high in Children as in Adults
1/3 of Children with Behavioral Health have chronic conditions
2/3 of Adults with Mental Illness have chronic conditions



BEHAVIORAL HEALTH INTEGRATION

Through health homes, 5 counties now offering integrated care management

Children's Behavioral Health Home (BHH)



What it is:

➤ CMO's are the designated BHH for Children in NJ
➤ Enhancement to the Child Family Team to bring medical expertise to the table

What it is not:

Not a physical site



QUESTIONS/COMMENTS

The Renewal application can be accessed through the Division's website at: http://www.state.nj.us/dcf/about/divisions/dcsc/

or directly at:

http://www.state.nj.us/humanservices/dmahs/home/waiver.html

The comment period ends August 12, 2016

Comments can be sent via email to dmahs.cmwcomments@dhs.state.nj.us (preferred method)

Or by mail or fax to:

Margaret Rose Division of Medical Assistance and Health Services Office of Legal and Regulatory Affairs P.O. Box 712 Trenton, NJ 08625-0712

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