

PROVIDER BULLETIN

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PSYCHIATRIC RESIDENTIAL TREATMENT FACILITIES: Requirements for Admission and Continued Stay

Applies to: Psychiatric Residential Treatment Facility (PRTF) Providers

Effective date: October 1, 2021

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PRECERTIFICATION REQUIREMENTS FOR PRIVATE PRTF

The Centers for Medicare & Medicaid Services (CMS) has approved the Medicaid state plan amendment (SPA) submitted by the MO HealthNet Division (MHD) for coverage of PRTF services delivered by private PRTFs. Conduent, as the medical review agent for MHD, will provide utilization review for private PRTFs for children and youth under the age of 21 with complex behavioral health conditions. The licensed mental health professional (LMHP) making the referral must submit complete documentation to Conduent via fax to (866) 629-0737 at least seven business days prior to the requested date of admission. All submissions must include a completed MHD [Inpatient UR Certification Request form](#) and the following documentation:

- Physician's or LMHP's referral for admission to PRTF
- Child/youth psychiatric/behavioral health diagnosis (ICD-10 code)
- Most recent psychiatric evaluation completed by psychiatrist, psychologist or advanced practice psychiatric nurse (completed within the last 30 days)
- Rationale for admission to PRTF level of care
- Documentation of failure of treatment at lower level of care

PRECERTIFICATION PROCESS FOR PRIVATE PRTF

Conduent will review submitted documentation to determine medical necessity and certificate of need pursuant to the requirements in 42 CFR 441 Subpart D and 13 CSR 70-15.070(3). Incomplete requests may delay the precertification process; however, Conduent will pend the review and reach out to the referring provider to obtain additional information if a clinical review cannot be completed. Conduent will notify the referring provider of the initial precertification review determination via phone.

If the participant does not meet medical necessity for the PRTF level of care, Conduent will inform the referring provider by phone, and mail a denial letter to the participant, referring provider, and facility. To obtain the status of precertification requests, providers may check online via CyberAccess or call the MHD Inpatient Certification Helpdesk at 1-800-766-0686, option 0.

CONTINUED STAY REQUIREMENTS FOR PRIVATE PRTF

Conduent will review the plan of care to determine continued medical necessity for treatment. The PRTF must submit continued stay requests with supporting documentation by fax using the MHD [Inpatient UR Certification Request form](#). Continued stay requests must be submitted seven business days prior to the last covered day. Continued stay requests must be submitted to Conduent via fax to (866) 629-0737. The first continued stay review must include the participant's plan of care and essential admission assessments developed within 14 days of admission. Additional documentation required for continued stay requests must include:

- Plan of care since last review
- Psychiatrist's progress notes
- Individual therapy progress notes since last review period
- Family therapy progress notes since last review period

TRANSITIONS FROM CHILDREN'S DIVISION LICENSED RESIDENTIAL TO PRTF

MHD recognizes that some facilities currently licensed by The Children's Division are transitioning to become PRTFs. MHD intends to ensure a smooth transition for children/youth who were admitted prior to a facility enrolling with MHD as a PRTF. Precertification requests must be submitted as outlined above, for children/youth who need PRTF level of care and who were admitted prior to a facility enrolling as a PRTF. Under these circumstances, MHD is waiving the requirement to submit the request seven days in advance. If submitted documentation supports the need for PRTF level of care, certification will be back-dated to the effective date of the PRTF's MHD enrollment. Facilities should not submit certification requests for children/youth who do not need the intensive level of services provided by a PRTF.

PRTF DESCRIPTION

- A PRTF provides comprehensive mental health treatment to children and adolescents (youth) who, due to mental illness, substance abuse, or severe emotional disturbance, need treatment that can most effectively be provided in a residential treatment facility.
- All other ambulatory care resources available in the community must have been identified, and if not accessed, determined not to meet the immediate treatment needs of the youth.
- PRTF programs are designed to offer a short term, intense, focused mental health treatment program to promote a successful return of the youth to the community.
- Specific outcomes of the mental health services include the youth returning to the family or to another less restrictive community living situation as soon as clinically possible and when treatment in a PRTF is no longer medically necessary.
- The residential treatment facility is expected to work actively with the family, other agencies, and the community to offer strengths-based, culturally competent, medically appropriate treatment designed to meet the individual needs of the youth including those identified with emotional and behavioral issues.

Reference: <https://www.medicaid.gov/medicaid/long-term-services-supports/institutional-long-term-care/inpatient-psychiatric-services-individuals-under-age-21/index.html>

APPLICABILITY:

At this time MO HealthNet managed care members will receive PRTF services through the fee-for-service delivery system. At a later date, PRTF services will be covered by the MHD managed care plans for their respective members.

Provider Bulletins are available on the MO HealthNet Division (MHD) website at <http://dss.mo.gov/mhd/providers/pages/bulletins.htm>. Bulletins will remain on the Provider Bulletins page only until incorporated into the [provider manuals](#) as appropriate, then moved to the Archived Bulletin page.

MO HealthNet News: Providers and other interested parties are urged to go to the MHD website at <http://dss.mo.gov/mhd/> to subscribe to the electronic mailing list to receive automatic notifications of provider bulletins, provider manual updates, and other official MO HealthNet communications via E-mail.

The information contained in this bulletin applies to coverage for:

- MO HealthNet Fee-for-Service
- MO HealthNet Managed Care

Questions regarding MO HealthNet Managed Care benefits should be directed to the patient's MO HealthNet Managed Care health plan. Before delivering a service, please check the patient's eligibility status by swiping the MO HealthNet card or by calling the Provider Communications Interactive Voice Response (IVR) System at 573-751-2896 and using Option One for the MO HealthNet ID card.

**Provider Communications Hotline
573-751-2896**