
Appendix A

2003 Survey of State Managed Care Initiatives Affecting Behavioral Health Services for Children and Adolescents and Their Families

Respondent Name:

State:

Title/Agency:

Date:

Phone:

Fax:

E-Mail:

If you are planning to describe more than one managed care initiative affecting behavioral health services (i.e., mental health and/or substance abuse services) for children and adolescents, please duplicate this form and complete a separate survey for each initiative.

Return completed survey to:

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I. General Information about Managed Care System

-
1. Indicate the activity in your state since 2000 with respect to managed care initiatives affecting behavioral health services for children and adolescents.

(Check all that apply.)

- Started a managed care system
- Terminated a managed care system
- Continued to operate a managed care system

If a managed care initiative was terminated, explain why.

-
2. Specify the currently operating managed care system that you are reporting on in this form:

Name: _____

Implementation Date: _____

Briefly describe this managed care system: _____

3. Which of the following best characterizes the primary focus of the system?
(Check only one.)

- Medicaid reform
- Public sector behavioral health system reform
- Medicaid and public behavioral health system reform
- Children's interagency reform
- Other, Specify _____

4. What are the current goals of the managed care system? (Check all that apply.)

- Contain costs
- Increase access
- Expand service array
- Improve quality
- Improve accountability
- Other, Specify _____

5. Does this system involve the use of a Medicaid waiver?

- Yes No

If yes, specify type of waiver _____

6. Which of the following best characterizes the design of this system?
(Check only one.)

- Integrated design (i.e., administration and financing of physical health and behavioral health are integrated, including instances where physical health plans subcontract with behavioral health plans)
- Behavioral health carve out (i.e., behavioral health financing and administration are separate from physical health financing and administration)
- Integrated with partial carve out (i.e., some behavioral health services are integrated with the physical health system while splitting out others for separate management and financing)

7. Are substance abuse services included in this system?

- Yes No

If no, how are the administration and financing of substance abuse services handled? (Check only one.)

- There is a separate substance abuse managed care carve out
- Substance abuse is integrated with physical health
- Substance abuse remains fee for service

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8. If this system includes both physical health and behavioral health services, is there parity between physical and behavioral health services?
- Yes No If no, check all of the following choices that apply.
- Behavioral health services are subject to higher co-payments and deductibles
 - There are lifetime limits on behavioral health services
 - There are day and/or visit limits on behavioral health services
 - Other, specify _____

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9. Who at the state level has the lead responsibility for planning and overseeing the operation of behavioral health services for this managed care system?
(Check only one.)
- Governor's office
 - State health agency
 - State Medicaid agency
 - State mental health agency
 - State substance abuse agency
 - Other, Specify _____

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10. For which of the following populations does the managed care system include a discrete planning process? (Check all that apply.)
- Adolescents with substance abuse disorders
 - Children and adolescents with serious emotional disorders
 - Children and adolescents involved with the child welfare system
 - Children and adolescents involved with the juvenile justice system
 - Culturally diverse children and adolescents
 - No discrete planning for special populations

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11. In conjunction with the managed care system, is education and training about the goals and operation of the managed care system provided to any of the following groups? (Check all that apply.)
- Families
 - Providers
 - Child welfare system
 - Juvenile justice system
 - Other child-serving system
 - No training
 - Other, Specify _____

12. In your judgment, to what extent are each of the following currently involved in planning, refining, and implementing this system?

	Not Involved	Some Involvement	Significant Involvement
Families	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
State child mental health staff	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
State substance abuse staff	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
State child welfare staff	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
State juvenile justice staff	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
State education staff	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Providers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

II. Populations Included

1. What is the population covered by this system? (Check all that apply.)

- Total Medicaid population
- Portion of Medicaid population
- SCHIP population
- Non-Medicaid, non-SCHIP population
- Other, Specify _____

2. If the total Medicaid population is **NOT** covered, which of the following subgroups are covered? (Check all that apply.)

- N/A (Total Medicaid population is covered)
- TANF population
- Poverty related population
- Aged, blind, and disabled population (SSI)
- Pregnant women and children
- Children and adolescents in the child welfare system
(Indicate child welfare subpopulations below)
 - Children in child welfare who are in state custody
 - Children in child welfare who are not in state custody
- Children and adolescents in the juvenile justice system
- Other, Specify _____

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3. If children in the child welfare system who are in state custody are covered, is their enrollment voluntary or mandatory?

- Enrollment is voluntary
 Enrollment is mandatory
 N/A (Children in state custody are not covered)

If enrollment is voluntary, to what extent are children in state custody enrolled in the managed care system?

- Most are enrolled
 About half are enrolled
 Less than half are enrolled
 Few are enrolled
 None are enrolled

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4. Are there any types of placements in which children in the child welfare or juvenile justice systems would lose eligibility for services from the managed care system?

- Yes No

Specify placements _____

III. Managed Care Organizations

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1. What types of entities are used as managed care organizations (MCOs) for behavioral health services within the managed care system, including administrative services organizations (ASOs)? (Check all that apply.)

- For-profit managed health care organizations
 Nonprofit managed health care organizations
 For-profit behavioral health managed care organizations
 Nonprofit behavioral health managed care organizations
 Private, nonprofit agencies
 Government entities
 Other, Specify _____

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2. Has there been a change since 2000 in the type of entity used to manage behavioral health services in the managed care system?

- Yes No

If yes, explain.

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3. How many MCOs are used in the managed care system to manage behavioral health services? (Check only one.)

- One MCO statewide
 One MCO per region
 Multiple MCOs statewide or within regions

4. In conjunction with the system, is training or education being provided to increase the knowledge base of MCOs related to serving the following populations? (Check all that apply.)

- Children and adolescents with serious emotional disorders
- Adolescents with substance abuse disorders
- Children and adolescents with co-occurring mental health and substance abuse disorders
- Children and adolescents involved with the child welfare system
- Children and adolescents involved with the juvenile justice system
- The Medicaid population in general
- Home and community-based service approaches
- System of care values and principles
- Coordination between physical health and behavioral health services
- No training
- Other, Specify _____

IV. Service Coverage and Capacity

1. For each type of mental health service, indicate how the service is covered.
(Check all that apply.)

Service	Covered Under Managed Care System	Covered Outside Managed Care System by Another Funding Source	Not Covered by the State through any Source
Mental Health Services			
Assessment and diagnostic evaluation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Outpatient psychotherapy (individual, family, and group)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Medical management	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Home-based services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Day treatment/partial hospitalization	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Crisis services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Behavioral aide services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Therapeutic foster care	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Therapeutic group homes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Residential treatment centers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Crisis residential services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Inpatient hospital services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Case management services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
School-based services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Respite services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Wraparound services/process	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Family support/education	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Transportation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mental health consultation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Therapeutic nursery/preschool	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other, Specify _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

2. For each type of substance abuse service, indicate how the service is covered. (Check all that apply.)

Service	Covered Under Managed Care System	Covered Outside Managed Care System by Another Funding Source	Not Covered by the State through any Source
Substance Abuse Services			
Assessment and diagnostic evaluation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Outpatient psychotherapy (individual, family, and group)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Assessment and diagnostic evaluation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Intensive outpatient services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Outpatient individual counseling	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Outpatient group counseling	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Outpatient family counseling	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
School-based services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Day treatment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ambulatory detoxification	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Residential detoxification	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Inpatient detoxification	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Residential treatment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Inpatient hospital services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Partial hospitalization	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Methadone maintenance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Relapse prevention	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Case management	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other, Specify _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

3. Does the managed care system include coverage for both acute (i.e., episodic, short-term) and extended (longer-term) behavioral health care services? (Check only one.)
- Acute care only
 - Acute and extended care
 - Extended care only

4. What other systems also are responsible, and have behavioral health service dollars, for extended behavioral health service provision? (Check all that apply.)

- Child mental health system
- Child welfare system
- Juvenile justice system
- Education system
- Substance abuse system
- No other systems have extended care behavioral health dollars
- Other, Specify _____

5. Based on current coverage, does the managed care system expand coverage of home and community-based services for children and adolescents in comparison with the pre-managed care system?

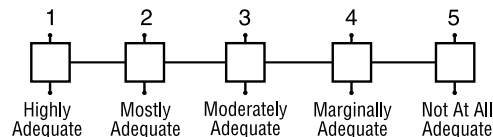
- Yes No

Specify services that have been added. _____

6. To what extent has the managed care system expanded the current availability of home and community-based services by bringing about the development of new service capacity?

- Not at all
- Very little
- Somewhat
- Significantly

7. On a scale of 1 to 5, characterize the current adequacy of home and community-based service capacity for behavioral health services for children and adolescents in general in your state.



8. Is the managed care system incorporating or providing incentives for providers to use evidence-based practices?

- Yes No

If yes, in what ways is the managed care system encouraging or providing incentives for providers to utilize evidence-based practices? (Check all that apply.)

- Incorporating contract requirements
- Developing practice guidelines
- Developing special rates
- Providing training and/or consultation
- Monitoring through quality improvement protocols
- Other, Specify _____

Specify which evidence-based practices the managed care system is encouraging providers to incorporate: _____

9. Does the state require reinvestment of savings from the managed care system back into behavioral health services for children and adolescents?

Yes No

10. Have there been savings from the managed care system to reinvest?

Yes No

If yes, how are they being reinvested?

11. Besides reinvestment of savings from the managed care system, is the state investing in increasing service capacity for behavioral health services for children and adolescents and their families?

Yes No

12. Has the managed care system made it easier to provide more flexible/individualized services?

Yes No

13. To what extent are behavioral health services to infants, toddlers, and preschoolers provided through the managed care system? (Check only one.)

None are provided

Few are provided

Many are provided

If services are provided to infants and toddlers, list the services provided most frequently.

V. Special Provisions for Children and Adolescents with Serious and Complex Behavioral Health Needs

1. Which of the following special provisions, if any, does the managed care system include for each of the following populations of children with serious and complex behavioral health needs. (Check all that apply.)

Special Provisions	For children with serious behavioral health disorders	For children involved in the child welfare system	For children involved in the juvenile justice system
Expanded service array	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Intensive case management	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Interagency treatment and service planning	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Wraparound services/process	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Family support services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Higher capitation or case rates	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Flexible service dollars	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other, specify	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

2. What effect has the managed care system had on the provision of case management/care coordination services for children with serious and complex behavioral health needs? (Check only one.)

- Increased case management/care coordination services
 Decreased case management/care coordination services
 No effect

3. From the following list, check the system of care values and principles that are incorporated into the system's RFPs and contracts. (Check all that apply.)

- Broad array of community-based services
 Family involvement
 Individualized, flexible care
 Interagency treatment and service planning
 Case management
 Cultural competence
 None of the above values and principles

4. Does the managed care system facilitate and support the development and operation of local systems of care (defined as organized delivery systems for children with serious and complex behavioral health disorders that incorporate the above values and principles)?

Yes No

VI. Financing and Risk

1. What dollars contribute to financing the managed care system? (Check all that apply)

Agency Source	Type of Revenue						
	Medicaid	General Revenue	Block Grant	Child Welfare (e.g. Title IV-E, IV-B)	TANF	SCHIP	Other, Specify
Medicaid Agency	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mental Health Agency	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Child Welfare Agency	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Juvenile Justice Agency	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Education Agency	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Substance Abuse Agency	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Health Agency	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
MR/DD Agency	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

2. Which systems are using Medicaid dollars for behavioral health services outside of the managed care system? (Check all that apply.)

- Mental Health
 Child Welfare
 Juvenile Justice
 Education
 Substance Abuse
 Health
 MR/DD
 No systems are using Medicaid dollars outside the managed care system.
 Other, Specify _____

-
3. Is cost shifting occurring between the managed care system and other children's systems? (Check all that apply.)
- Cost shifting is not occurring
 - Cost shifting is occurring from the managed care system to other child-serving systems
 - Cost shifting is occurring from other child-serving systems into the managed care system

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4. Does the managed care system incorporate strategies to clarify responsibility for providing and paying for services across child-serving systems?
- Yes No

-
5. Does the managed care system involve use of capitation or case rate financing? (Check all that apply.)
- Capitation
 - Case rates
 - Neither capitation nor case rate financing

-
6. Have the capitation or case rates increased or decreased since 2000?
- Rates have increased
 - Rates have decreased
 - Rates have stayed the same
 - N/A (Neither capitation nor case rates are used)

-
7. Does the managed care system assess the sufficiency of capitation or case rates for behavioral health services to children and adolescents, including high-need populations?
- Yes No N/A (Neither capitation nor case rates are used)
- If yes, have rate adjustments been made based on these assessments?
- Yes No

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8. If capitation or case rates include both physical and behavioral health, does the state require that a specified percentage of the rate be allocated to behavioral health care?
- Yes N/A (Neither capitation nor case rates are used)
- No There are separate rates for behavioral health
- If yes, specify percentage _____

-
9. Does the managed care system incorporate risk adjusted rates for any of the following populations? (Check all that apply.)
- Children involved in the child welfare system
 - Children involved in the juvenile justice system
 - Children with serious behavioral health disorders
 - No risk adjusted rates are incorporated
 - Other, Specify _____

10. Does the managed care system incorporate other types of risk adjustment mechanisms? (Check all that apply.)

- Stop loss
- Risk corridors
- Reinsurance
- Risk pools
- No risk adjustment mechanisms are incorporated
- Other, Specify _____

11. In what way do the state and MCOs share the financial risks and benefits? (Check only one.)

- MCOs have all the benefit and all the risk
- State has all the benefit and all the risk
- MCOs and state share risk and share benefit
- MCO and state share risk only
- MCO and state share benefit only

12. In what ways is risk shared with providers? (Check all that apply.)

- Providers have no risk
- Subcapitation
- Case rates
- Bonuses/penalties tied to performance

13. Does the state put a limit on MCO profits?

- Yes
- No

14. Does the state put a limit on MCO administrative costs?

- Yes
- No

15. Does the system incorporate bonuses or penalties for MCOs based on performance related to behavioral health service delivery to children and adolescents?

- Yes
- No

16. If capitation or case rates are used, please complete the following matrix as applicable.

Population	Amount of Capitation Rate (Specify if annual or monthly)	Amount of Case Rate (Specify if annual or monthly)
Adults and children and adolescents-physical and behavioral health		
Children and adolescents — physical and behavioral health		
Adults and children and adolescents — behavioral health only		
Children and adolescents — behavioral health only		
Adults — behavioral health only		
Children and adolescents with serious emotional disorders		
Adults with serious and persistent mental illnesses		
Adolescents with substance abuse disorders		
Children and adolescents in the child welfare system		
Children and adolescent in the juvenile justice system		
Other, Specify _____		

VII. Clinical Decision Making and Mangement Mechanisms

1. Do medical necessity criteria allow for consideration of psychosocial and environmental considerations in clinical decision making?

Yes No

If yes, characterize the interpretation and application of medical necessity criteria by MCOs. (Check only one.)

Medical necessity criteria are interpreted narrowly by MCOs

Medical necessity criteria are interpreted broadly to include psychosocial and environmental considerations

2. Does the managed care system incorporate the following clinical decision making criteria? (Check all that apply.)

- Level of care criteria specific to children's mental health services
- Patient placement criteria specific to adolescent substance abuse treatment
- No child-specific clinical decision making criteria

3. Overall, has the use of clinical decision making criteria improved consistency in clinical decision making?

- Yes No

If no, explain.

4. Are clinical decision making criteria standardized across the state? (Check only one.)

- Criteria are standardized across the state
- Criteria differ with each MCO

5. Which management mechanisms, if any, are utilized in the delivery of behavioral health services under this system? (Check all that apply.)

- Prior authorization
- Concurrent review
- Retrospective review
- Case management
- No management mechanisms are used
- Other, Specify

6. Does the managed care system allow for the provision of certain services up to a specified amount without prior authorization?

- Yes No

If yes, describe services allowable without prior authorization.

7. Does the managed care system utilize specific strategies for managing the use of more intensive services, such as residential treatment services?

- Yes No

If yes, describe strategies.

VIII. Access

1. **Currently**, how is initial access to a basic level of behavioral health services for children and adolescents affected by the managed care system in comparison to pre-managed care? (Check only one.)

- Initial access to behavioral health services is better
- Initial access to behavioral health services is worse
- No change

2. **Currently**, how is access to extended care services for children and adolescents (i.e., care extending beyond short-term stabilization) affected by the managed care system in comparison to pre-managed care? (Check only one.)

- Access to extended care behavioral health services is better
- Access to extended care behavioral health services is worse
- No change

3. **Currently**, what effect is the managed care system having on waiting lists for children's behavioral health services in comparison to pre-managed care? (Check only one.)

- Waiting lists are shorter
- Waiting lists are longer
- No change

4. **Currently**, is the managed care system having any of the following effects on access to behavioral health inpatient services for children and adolescents in comparison to pre-managed care? (Check all that apply)

- Initial access is easier
- Initial access is more difficult
- Average lengths of stay are shorter
- Average lengths of stay are longer
- No change

5. If access is more difficult or lengths of stay are shorter, indicate which, if any, of the following have resulted. (Check all that apply.)

- N/A (Access is not more difficult and lengths of stay are not shorter)
- Premature discharge before stabilization from inpatient settings
- Children discharged without needed services
- Placement in community-based services lacking appropriate clinical capacity
- Increased use of residential treatment services as a substitute for inpatient
- Inappropriate use of child welfare emergency shelters
- Inappropriate use of juvenile justice facilities
- Discharge without a safe placement for children in child welfare
- No negative effects have occurred.
- Other, Specify

6. Has the managed care system led to the development of treatment alternatives to hospitalization?

- Yes
- No

Specify the types of alternatives that have developed.

IX. Service Coordination

1. **Currently**, what effect is the managed care system having on coordination between physical health and behavioral health services in comparison to pre-managed care? (Check only one.)
 - Coordination between physical health and behavioral health services is better
 - Coordination between physical health and behavioral health services is worse
 - No effect

 2. **Currently**, what effect is the managed care system having on coordination between mental health and substance abuse services in comparison to pre-managed care? (Check only one.)
 - Coordination between mental health and substance abuse services is better
 - Coordination between mental health and substance abuse services is worse
 - No effect

 3. **Currently**, what effect is the managed care system having on interagency coordination in general? (Check only one.)
 - Interagency coordination is better
 - Interagency coordination is worse
 - No effect

 4. **Currently**, what effect is the managed care system having on coordination between mental health and child welfare services in comparison to pre-managed care? (Check only one.)
 - Coordination between mental health and child welfare services is better
 - Coordination between mental health and child welfare services is worse
 - No effect
-

X. Early Identification and Intervention

1. Are EPSDT screens conducted within the managed care system?
 - Yes
 - No

2. Is there a behavioral health component to the EPSDT screening process within the managed care system?
 - Yes
 - No

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3. Are there incentives or strategies to encourage primary care practitioners to conduct EPSDT screens and to make appropriate referrals for behavioral health care?

Yes No

If yes, specify which types of strategies or incentives are used. (Check all that apply.)

- Contract requirement
- Performance incentives
- Training
- Monitoring for compliance
- Monitoring behavioral health referrals
- Development and inclusion of a behavioral health component for EPSDT screens
- Enhanced rates for conducting screens
- Providing information to primary care practitioners on referral options for behavioral health care
- Other, Specify _____

-
4. Is the managed care system responsible for screening children in the child welfare system who enter state custody to identify mental health problems and treatment need?

Yes No N/A (Children in state custody are not covered)

If yes, to what extent is screening actually conducted?

- Most children are screened
- Some children are screened
- Few children are screened
- No children are screened

XI. Cultural Competence

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1. Which of the following strategies related to cultural competence are incorporated in the managed care system? (Check all that apply.)

- Specific planning for culturally diverse populations
- Requirements in RFPs and contracts related to cultural competence
- Training of MCOs and/or providers on cultural competence
- Outreach to culturally diverse populations
- Inclusion of specialized services needed by culturally diverse populations
- Inclusion of culturally diverse providers in provider networks
- Translation/interpreter services
- Tracking utilization and/or outcomes by culturally diverse groups
- None
- Other, Specify _____

-
2. Characterize the current cultural competence requirements in the managed care system as compared with the previous system. (Check only one.)
- Cultural competence requirements are stronger in the managed care system
 - Cultural competence requirements are weaker in the managed care system
 - No change

XII. Family Involvement

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1. Which of the following strategies related to family involvement are incorporated in the managed care system? (Check all that apply.)
- Requirements in RFPs and contracts for family involvement at the system level
 - Requirements in RFPs, contracts, and service delivery protocols for family involvement in planning and delivering services for their own children
 - Focus in service delivery on families in addition to the identified child
 - Coverage for and provision of family supports
 - Use of family advocates
 - Hiring family and/or youth in paid staff roles
 - None
 - Other, Specify _____
-
2. Characterize the current family involvement requirements in the managed care system as compared with the previous system. (Check only one.)
- Family involvement requirements are stronger in the managed care system
 - Family involvement requirements are weaker in the managed care system
 - No change
-
3. Does the managed care system pay for services to family members if only the child is covered?
- Yes No
-
4. What effect has the managed care system had on the pre-existing issue of families having to relinquish custody to access behavioral health services? (Check only one.)
- Practice of relinquishing custody has worsened under managed care
 - Practice of relinquishing custody has improved under managed care
 - No effect
 - N/A (Families do not relinquish custody to child welfare to access behavioral health services)
-
5. Does the managed care system incorporate strategies to help families navigate the grievance and appeals process and how to use it?
- Yes No

6. Is the state funding a family organization to play some role in the managed care system?

Yes No

If yes, describe role.

XIII. Providers

1. Are the following types of providers included in provider networks in the managed care system? (Check all that apply.)

- Child welfare providers
 - School-based behavioral health providers
 - Certified addictions counselors
 - Culturally diverse and indigenous providers
 - Family members as providers
 - Paraprofessionals and student interns
 - None of the above are included providers
-

2. Are certification or credentialing requirements in the managed care system impeding the inclusion of particular types of behavioral health service providers?

Yes No

If yes, explain.

3. Since 2000, have provider reimbursement rates in the managed care system increased or decreased? (Check only one.)

- Provider reimbursement rates are higher
 - Provider reimbursement rates are lower
 - No change
-

4. Since 2000, has administrative burden for providers in the managed care increased or decreased? (Check only one.)

- Administrative burden is higher
 - Administrative burden is lower
 - No change
-

5. **Currently**, is the managed care system resulting in closure or severe financial hardship for particular types of children's behavioral health agencies?

Yes No

If yes, explain.

6. Do front-line practitioners have the skills, knowledge, and attitudes to function effectively to meet the goals of the managed care system?

Yes No

XIV. Accountability

1. Does the managed care system have adequate data to inform decision making with respect to behavioral health services for children and adolescents and their families?

Yes No

If adequate data are not available, indicate the reasons why.
(Check all that apply.)

- Lack of encounter data
 Lack of staff capacity to analyze data
 Inadequate MIS system
 Not tracking children's behavioral health services
 Other, Specify _____
-

2. Does the managed care system incorporate quality measures specific to behavioral health services for children and adolescents and their families?

Yes No

3. How are families involved in the quality measurement process? (Check all that apply.)

- Not involved
 Focus groups
 Surveys
 Involved in the design of the quality measures and/or process
 Involved in monitoring the quality measurement process
 Other, Specify _____
-

4. Characterize the stage of development of the measurement of clinical and functional outcomes specific to behavioral health services for children and adolescents. (Check only one.)

- Not measuring clinical and functional outcomes
 In early stage of developing measurement system
 Developed but not yet implemented measurement system
 Implementing measurement system but do not yet have results
 Implementing measurement system and have results
-

5. Does the managed care system measure parent and youth satisfaction with behavioral health services? (Check all that apply.)

- Not measuring parent or youth satisfaction
 Measuring parent satisfaction
 Measuring youth satisfaction
-

6. If there is a formal evaluation of the system, does it include a focus on children and adolescents with behavioral health disorders and their families?

Yes No N/A (No formal evaluation)

7. Indicate by checking which, if any, of the following system performance information is tracked by the managed care system and whether data are being used to inform decision making. (Check all that apply.)

System Information	Not Tracked	Tracked	Information is Used for System Planning
Child behavioral health penetration rates	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Child behavioral health service utilization	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Child behavioral health service utilization by culturally diverse groups	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Behavioral health service utilization by children in child welfare	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Behavioral health service utilization by children in juvenile justice	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Total cost of child behavioral health services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cost per child served with behavioral health services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cost shifting among child-serving systems	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

8. What has been the impact of the managed care system on the following system performance indicators?

System Information	Increased	Decreased	No Effect	Don't Know
Child behavioral health penetration rates	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Child behavioral health service utilization	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Total cost of child behavioral health services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Overall quality of child behavioral health services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Overall clinical and functional outcomes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Overall family satisfaction with services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Incorporation of evidence-based interventions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

XV. General Update

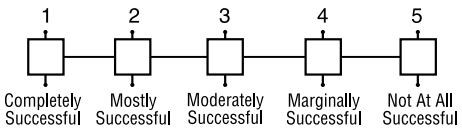
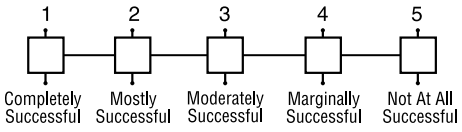
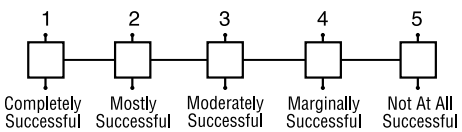
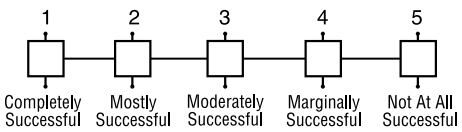
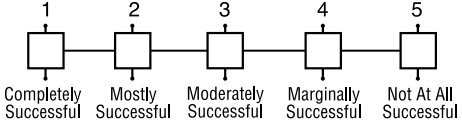
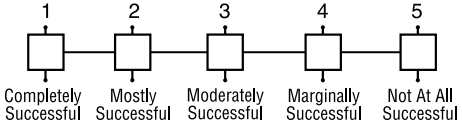
1. Is the current fiscal climate (e.g., state budget deficit) having any detrimental effect on your managed care system?

Yes No

If yes, indicate what detrimental effects the current economic climate is having on the behavioral health managed care system in your state. (Check all that apply.)

- Lowered the federal poverty level eligibility cut-off
- Eliminated specific populations from eligibility for the managed care system
- Reduced coverage of services (e.g., eliminated coverage for certain services)
- Reduced levels of service (i.e., number of visits, length of stay, duration of services)
- Incorporated or raised co-pays
- Decreased provider reimbursement rates
- Decreased capitation or case rates to MCOs
- Implemented more stringent authorization procedures, guidelines, or policies
- Changed drug formulary
- Reduced services to non-Medicaid, uninsured children and adolescents
- Reduced interagency coordination
- Other, Specify _____

2. In your opinion, how successful has the managed care system in your state been at achieving the following goals of managed care?

Containing costs	
Increasing access	
Expanding service array	
Improving quality	
Improving accountability	
Other, Specify	

3. Indicate the future plans of your state with respect to managed behavioral health care. (Check all that apply.)

- Plan to continue to use managed care technologies to manage behavioral health service delivery
- Plan to phase out managed care
- Plan to move to a non-risk-based system
- Plan to increase use of administrative services organizations (ASOs)
- Other, Specify