

Promising Approaches

for Behavioral Health Services to Children and Adolescents
and Their Families in Managed Care Systems

6: Family Involvement in Managed Care Systems

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Introduction

Health Care Reform Tracking Project

Since 1995, the **Health Care Reform Tracking Project (HCRTTP)** has been tracking publicly financed managed care initiatives and their impact on children with mental health and substance abuse (collectively referred to as behavioral health) problems and their families. The HCRTTP is co-funded by the National Institute on Disability and Rehabilitation Research in the U.S. Department of Education and the Substance Abuse and Mental Health Services Administration in the U.S. Department of Health and Human Services. Supplemental funding has been provided by the Administration for Children and Families of the U.S. Department of Health and Human Services, the David and Lucile Packard Foundation, and the Center for Health Care Strategies, Inc. to incorporate special analyses related to children involved in the child welfare system. The HCRTTP is conducted jointly by the Research and Training Center for Children's Mental Health at the University of South Florida, the Human Service Collaborative of Washington, D.C., and the National Technical Assistance Center for Children's Mental Health at the Georgetown University Center for Child and Human Development. The mixed method design of the Tracking Project has involved periodic surveys of all states, in-depth impact analyses involving site visits to a selected sample of states, and the identification and dissemination of promising approaches and features of managed care systems.¹

Throughout these activities, the Tracking Project has explored and compared the differential effects of carve out designs, defined as arrangements in which behavioral health services are financed and administered separately from physical health services, and integrated designs, defined as arrangements in which the financing and administration of physical and behavioral health care are integrated (even if behavioral health services are subcontracted).

¹ All reports of the Healthcare Reform Tracking Project (HCRTTP) are available from the Research and Training Center for Children's Mental Health, Louis de la Parte Florida Mental Health Institute, University of South Florida, 13301 Bruce B. Downs Boulevard, Tampa, FL., (813) 974-6271. See page 33.

Methodology for Study of Promising Approaches

The strategies and approaches that are described in the **Promising Approaches Series** were identified by key state and local informants who responded to the HCRTTP's state surveys and who were interviewed during site visits to states for the HCRTTP's impact analyses. Once promising approaches and features of managed care systems were identified through these methods, members of the HCRTTP team, including researchers, family members, and practitioners, engaged in a number of additional methods to gather more detailed information about identified strategies within particular topical areas. Site visits were conducted in some cases, during which targeted interviews were held with key stakeholders, such as system purchasers and managers, managed care organization representatives, providers, family members, and representatives of other child-serving agencies. In other cases, telephone interviews were held with key state and local officials and family members to learn about promising strategies. Supporting documentation was gathered and reviewed to supplement the data gathered through the site visits and telephone interviews.

For each general topical area studied, a paper is prepared to explain the challenges and to describe promising approaches or features of managed care systems that are considered by key informants to improve service delivery for youth with behavioral health treatment needs and their families. These papers comprise the *Promising Approaches Series*.

The series intentionally avoids using the term, "model approaches." The strategies, approaches, and features of managed care systems described in the series are perceived by a diverse cross-section of key stakeholders to support effective service delivery for children with behavioral health disorders and their families; however, the HCRTTP has not formally evaluated these approaches. In addition, none of these approaches or strategies is without problems and challenges, and each requires adaptation in new settings to take into account individual state and local circumstances. Additionally, a given state or locality described in the series may be implementing an effective strategy or approach in one part of its managed care system and yet be struggling with other aspects of the system.

It is important to note that the series does not describe the universe of promising approaches that are underway in states and localities related to each of the aspects of managed care systems that was studied. Rather, it provides a snapshot of promising approaches that have been identified through the HCRTTP to date. New, innovative approaches are continually surfacing as the public sector continues to experiment with managed care.

Each approach or strategy that is described in the series is instructive in its own right. At the same time, there are commonalities across these strategies and approaches that can help to inform the organization of effective service delivery systems within a managed care environment for this population. An attempt is made in each paper to identify these commonalities, thus offering guidance to family run organizations, states and communities attempting to refine their managed care systems to better meet the needs of children and youth with serious behavioral health disorders and their families.

Overview

Promising Approaches 6: Family Involvement in Managed Care Systems

This paper focuses on promising approaches and strategies related to family involvement in managed care systems in three states. These promising approaches include both statewide approaches focused on a total population (New Jersey Partnership for Children), (Massachusetts Behavioral Health Partnership) and a local site (Delaware County, PA) focused on a specific geographic area (**Table 1**).

Table 1	
Promising Approaches to Family Involvement in Managed Care Systems	
Statewide Approaches	Local Approaches
New Jersey Partnership for Children	Delaware County, PA
Massachusetts Behavioral Health Partnership	

The paper addresses five areas of family involvement within managed care systems: (1) Requirements for Family Involvement; (2) Family Involvement at the System Management Level; (3) Family Involvement at the Service Delivery Level; (4) Practice of Relinquishing Custody to Obtain Services; and, (4) Program and Staff Roles for Families and Youth. The following section summarizes the issues and challenges on these five areas related to family involvement in public sector behavioral health managed care that have been identified through the Health Care Reform Tracking Project (HCRTP).

Following the review of the issues and challenges surrounding family involvement in managed care systems, this paper describes promising approaches and features in these five areas. The final section summarizes the commonalities across these promising approaches and strategies described by key stakeholders. The paper concludes with a list of resource contacts for the promising approaches and a list of national organizations addressing these issues.