

Iowa REACH Initiative

Responsive and Excellent Care for Healthy Youth
Initiative

Assessment Tool

Background

- ▶ As part of the REACH Initiative, Iowa HHS intends to develop a plan ensuring all assessments regarding eligibility for the Relevant Services, including those completed by Managed Care Organizations (MCOs), use the same criteria for services and the same screening and assessment tool.
- ▶ Mathematica performed an environmental scan of existing assessment tools for children and youth with serious emotional disturbance (SED) to support the state of Iowa and the REACH Initiative.

Objectives

- ▶ Determine assessment tools used by states for children and youth with SED.
- ▶ Understand the process of connecting children and youth with SED and their families to appropriate services post-assessment.

Key Assumptions

- ▶ The assessment tool that will be used as part of the REACH Initiative will be used to determine eligibility for REACH Initiative relevant services.
- ▶ The tool will be used in a clinical setting by a licensed practitioner.
- ▶ A separate assessment will be necessary to determine eligibility for a Medicaid home and community-based waiver.

Methods

► Initial Search:

- Conducted a literature search using various search terms across databases, journals, and webpages.
- Compiled a comparison matrix of eight assessment tools from sources like Health Affairs and Google.
- Identified "peer states" with comparable systems to Iowa, including Illinois, Michigan, Nebraska, Kansas, West Virginia, and Montana.

► Targeted Search:

- Conducted a focused search on peer states to gather detailed information on assessment tools, developers, priority populations, and intake processes.
- Utilized state Medicaid websites and snowball searches on relevant articles and publications for data collection.

Potential Assessment Tools

- Child and Adolescent Needs and Strengths (CANS)
- Child and Adolescent Functional Assessment Scale (CAFAS)
- Child and Adolescent Service Intensity Instrument (CASII)
- Youth Daily Living Activities – 20 (DLA – 20)

Key Considerations

- ▶ Mathematica recommends that the **CANS**, **CASII**, **CAFAS** and **DLA –20** assessments be considered as the child behavioral health assessment tool for children with SED.
- ▶ Mathematica also recommends three key areas to evaluate and make a final decision:
 - Ease of Implementation
 - Provider Uptake and Capacity
 - Cost and Fees

Ease of Implementation

Iowa should consider the steps required to adequately customize the screening tool to the state context

Tool	Considerations
CANS	<ul style="list-style-type: none">• Requires customization for state context• Would require development of a tool for children ages 0 – 5
CAFAS	<ul style="list-style-type: none">• Can be used with minimal customization• Would require development of a tool for children ages 0 – 2
CASII	<ul style="list-style-type: none">• Requires customization for state context
DLA – 20	<ul style="list-style-type: none">• Can be used without customization• Would require development of tool for children ages 0 – 5

Provider Uptake and Capacity

- ▶ For all screenings, Iowa should consider the current needs and capacity of the behavioral health workforce, as implementation will require training and ongoing education.
 - Iowa Total Care is trained to administer the DLA-20 and is qualified to train others
- ▶ The screenings also require care coordination efforts to be successful.

Cost and Fees

Iowa should consider the potential costs associated with the three assessment tools, including costs for training and software.

Tool	Costs
CANS	<ul style="list-style-type: none">• The assessment is free, but there are costs associated with training professionals to use it
CAFAS	<ul style="list-style-type: none">• Requires annual software fee and has cost per assessment
CASII	<ul style="list-style-type: none">• Cost associated with both training and printing materials for assessment
DLA – 20	<ul style="list-style-type: none">• Costs associated with assessment

Intensive In-Home and Community Support and Therapeutic Services

February 2025



Health and
Human Services

Relevant Services Definition

- ▶ Intensive In-Home and Community Therapeutic Services (IHCTS) are individualized, strength-based interventions to correct or ameliorate behavioral health conditions that interfere with a child's functioning.
- ▶ Interventions help the child to build skills necessary for successful functioning in the home and community and improve the family's or caregiver's ability to help the child successfully function in the home and community.
- ▶ IHCTS are delivered according to a care plan developed by the care planning team.
- ▶ The CPT develops goals and objectives for all life domains in which the child's behavioral health condition causes impaired functioning, including family life, community life, education, vocation, and independent living, and identifies the specific interventions that will be implemented to meet those goals and objectives.
- ▶ The goals and objectives seek to maximize the child's ability to live and participate in the community and to function independently, including through building social, communication, behavioral, and basic living skills.

Services

- ▶ Providers of IHCTS should engage the child and other family members or caregivers in home and community activities where the child has an opportunity to work towards identified goals and objectives in a natural setting.
- ▶ The provision of IHCTS does not include the prescription of medications, including psychotropic medications or hormone-based therapies.
- ▶ IHCTS include, but are not limited to:
 - Educating the child's family about, and training the family in managing, the child's needs;
 - In-home functional behavioral assessments, as needed;
 - Behavior management, including developing and implementing a behavioral plan with positive behavioral interventions and supports, modeling for the child's family and others how to implement behavioral strategies, and in-home behavioral aides who assist in implementing the behavior plan, monitoring its effectiveness, and reporting on the plan's effectiveness to clinical professionals; and
 - Therapeutic services delivered in the child's home and community, including but not limited to therapeutic interventions such as (a) individual and/or family therapy, and (b) evidence-based practices (e.g., Family Functional Therapy, Multisystemic Therapy, Trauma-Focused Cognitive Behavioral Therapy, etc.).

Outcomes

► These services:

- Improve self-care, including addressing behaviors and social skills deficits that interfere with daily living tasks and avoiding exploitation by others;
- Improve self-management of symptoms, including assisting with self administration of medications;
- Improve social functioning, including addressing social skills deficits and anger management;
- Support the development and maintenance of social support networks and the use of community resources;
- Support employment objectives by identifying and addressing behaviors that interfere with seeking and maintaining a job;
- Support educational objectives, including identifying and addressing behaviors that interfere with succeeding in an academic program in the community; and
- Support independent living objectives by identifying and addressing behaviors that interfere with seeking and maintaining housing and living independently.

Settings

- ▶ IHCTS may be provided to children living and receiving services at home and in the community, including foster care placements, as well as to children who are currently in a hospital, group home, or other congregate or institutional placement as part of discharge or transition planning.
- ▶ Notwithstanding the foregoing, IHCTS will not be provided to children in juvenile detention centers.

Services and Providers Subcommittee

Key Implementation Plan Strategy:

Develop and strengthen the HCBS service array that is individualized and strengths-based aimed to correct or ameliorate behavioral health conditions that interfere with a child's functioning.

Responsibilities:

- **Define and design an intensive in-home and community-based service delivery system** composed of In-Home and Community-based Supportive and Therapeutic Services (IHCSTS)
- Develop proposed care pathways for youth to access IHCSTS based on results from the chosen assessment tool.
- Propose requirements to support furthering the principal of unconditional care.
- Propose the ideal business processes and technology systems for the state to implement these IHCSTS for youth for whom they are determined to be medically necessary.
- Provide recommendations on trainings and support for providers.

Behavioral Health Intervention Services (BHIS)

- ▶ BHIS are available to Medicaid members who have been diagnosed with a psychological disorder and who have a need for behavioral health intervention services related to the member's psychological disorder.
- ▶ BHIS are supportive, directive, and teach interventions provided in a community-based or residential group care environment designed to improve the individual's level of functioning (child and adult) as it relates to a mental health diagnosis, with a primary goal of assisting the individual and his or her family to learn age-appropriate skills to manage their behavior, and regain, or retain self-control.

▶ Source: [BHIS Provider Manual](#)

IHCSTS and BHIS – Eligible Youth

IHCSTS

- ▶ Members of the defined class - children and young adults in Iowa who:
- ▶ (a) Are under the age of twenty-one, and Medicaid-eligible;
- ▶ (b) Have been determined by a licensed practitioner of the healing arts to have a serious emotional disturbance not attributable to an intellectual or developmental disability;
- ▶ (c) Have had an assessment that intensive home and community-based services are needed to correct or ameliorate their condition.
- ▶ Additional eligibility criteria TBD based on Assessment Tool and Care Pathways

BHIS

- ▶ Medicaid members may receive behavioral health intervention services when they meet the following requirements, as determined by a licensed practitioner of the healing arts acting within the practitioner's scope of practice as allowed under state law:
- ▶ The member has been diagnosed with a psychological disorder.
- ▶ The member has a need for behavioral health intervention services related to the member's psychological disorder.

IHCSTS and BHIS - Services

IHCSTS

- Educating the child's family about, and training the family in managing, the child's needs;
- In-home functional behavioral assessments, as needed;
- Behavior management, including developing and implementing a behavioral plan with positive behavioral interventions and supports, modeling for the child's family and others how to implement behavioral strategies, and in-home behavioral aides who assist in implementing the behavior plan, monitoring its effectiveness, and reporting on the plan's effectiveness to clinical professionals; and
- Therapeutic services delivered in the child's home and community, including but not limited to **therapeutic** interventions

BHIS

- ▶ Medically Necessary
- ▶ Behavior Intervention
- ▶ Crisis Intervention
- ▶ Family Training
- ▶ Skills Training and Development

IHCSTS and BHIS - Settings

IHCSTS

- ▶ IHCTS may be provided to children living and receiving services at home and in the community, including foster care placements, as well as to children who are currently in a hospital, group home, or other congregate or institutional placement as part of discharge or transition planning.
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BHIS

- ▶ Community-Based
- ▶ Schools
- ▶ Residential
- ▶ Group Care

IHCSTS and BHIS - Providers

IHCSTS

- ▶ To be determined

BHIS – Community Staff

- ▶ Bachelor's degree in social sciences field plus: 1 year experience or 20 hours training in child mental health
- ▶ Bachelor's degree in non-social sciences field plus: 2 years experience or 30 hours training in child mental health

Discussion

- ▶ What is important to consider as Iowa works to build In-Home and Community-Based Supportive and Therapeutic Services?
- ▶ What additional information would this group need to help keep the conversation going about developing these services?

Public Comment