

IX. REPORT OF THE PSYCHIATRIC MEDICAL INSTITUTIONS FOR CHILDREN (PMIC) WORKGROUP (DHS)

Introduction

The Iowa General Assembly directed the Department of Human Services (DHS), through SF 525 to establish a Psychiatric Medical Institutions for Children (PMIC) transition committee ("Transition Committee). Section 525 directs the Transition Committee to develop a plan for the transitioning of the administration of PMIC services from a fee for service program administered by the Iowa Medicaid Enterprise (IME) to the Iowa Plan, through which the IME provides managed behavioral health care to its Medicaid enrollees. The work of this Transition Committee is happening at the same time that DHS has convened a two-year effort to overhaul its mental health system for children. Section 525 required specific representation on the Transition Committee. The Administration developed this preliminary report to detail the planned work of the Transition Committee to review the current PMIC program and propose how the program should be modified as it moves to the Iowa Plan.

Interaction with the Children's Mental Health Initiative

DHS is engaged in a statewide stakeholder effort to improve the children's/youth's mental health system in Iowa. The PMICs play an important role in the system today, and will continue to do so in the future. Because the improvements to the children's/youths' mental health system will occur in phases and will not be completed by the planned transition of PMIC services to the Iowa Plan in July 2012, there are a number of issues identified in SF 525 that will be addressed instead through the larger effort. The following issues will be considered mainly in the larger effort, but will also be vetted with the PMIC Transition Committee, where appropriate:

- Development of specialized programs to address the needs of children in need of more intensive treatment that are underserved (4a);
- Navigation, access and care coordination for children in need of services from the children's/youth's mental health system (4b1);
- Integrating children's/youth's mental health waiver services to ensure availability of choices for community placement (4b2);
- Evaluating alternative reimbursement and service models that are innovative and could support overall system goals (4b5);
- Evaluating the adequacy of reimbursement at all levels of the children's/youth's mental health system. (4b6) (Note: the PMIC Transition Committee will be specifically discussing PMIC reimbursement rates and inclusion of ancillary services within those rates.);
- Developing profiles of the conditions and behaviors that result in a child's/youth's involuntary discharge or out of state placement (4b7); and,
- Evaluating and defining the appropriate array of less intensive services for a child/youth leaving a hospital or PMIC placement (4b8).

As Jennifer Vermeer, the Director of the Medicaid enterprise of the DHS chairs both groups, she will ensure that the groups appropriately collaborate.

Process for Developing a Transition Plan and Issues for Discussion

The Transition Committee held its first meeting on October 4, 2011. At this meeting, the Transition Committee discussed the process for developing the transition plan for moving coverage of PMICs from fee-for-service into the Iowa Plan. Many Transition Committee members participated in the Remedial Services Transition Committee effort last fall and agreed to follow a similar process for this effort.

The Transition Committee agreed to hold two working committee meetings.¹ At those meetings, the Transition Committee will discuss overall goals for the transition of PMICs to the Iowa Plan and discuss specific issues raised in the SF 525 including:

- Identifying admission and continued stay criteria for PMIC providers (4b3);
- Evaluating changes in licensing standards for PMICs, as necessary (4b4); and,
- Evaluating and defining the standards for existing and new PMIC and other treatment levels (4b9).

In addition, the Transition Committee will discuss reimbursement rates for current PMIC services, and will utilize a sub-committee to discuss payment for ancillary services by PMICs beginning July 2012, as required by the Centers for Medicare and Medicaid Services.

Next Steps

The Transition Committee will work diligently over the next six weeks to develop a draft final transition plan to be submitted to the legislative interim committee by December 9, 2011 as required by SF 525 and will address any concerns made by the legislative interim committee into a final plan to be developed by December 31, 2011. This final plan will be submitted to the general assembly by January 16, 2012.

¹ The meetings are scheduled for November 4, 2011 and December 7, 2011.