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***Pre-planning and Applying for  
Medicaid and Magellan Financial  
Assistance***

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**Expectations for all Officers Working with Juvenile Justice-Involved Youth**

**Updated March 2016**

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## **Introduction and Expectations**

### **INTRODUCTION:**

An essential piece to the process of investigation and case management for youth under supervision of probation includes working with the youth and family to develop self-sufficiency in payment of medical care and behavioral health services. To assist with this the Office of Probation Administration has developed this resource which includes expectations that ALL officers investigating and supervising youth on probation must complete when a youth is in need of financial or medical assistance. This resource details steps necessary to help a youth and family be successful with this process, including application to Medicaid and Magellan. Finally, it is essential that officers who need additional support in this area immediately reach out to the Juvenile Justice Resource Supervisors (JJRS) and Treatment Officers within the probation system to assist with this process to ensure that youth are receiving the correct services to reduce risk and help them become successful adults.

### **EXPECTATIONS:**

#### ***Assistance and pre-planning for medical care:***

It is the expectation that every youth involved in the probation system and requesting financial assistance, either directly from the youth and family or as a condition of the court, receive an immediate screening by a probation officer or staff person to determine the ability to financially support themselves. A voucher shall not be issued for a youth until this process is complete. It is essential to understand when financial assistance is requested, the first step is to determine what the family can do to support themselves.

This process shall happen immediately and even BEFORE a youth is ordered by a court to a service. This is called "Pre-planning" and is essential to comprehensive case management. While a youth is involved in the investigation phase or evaluation stage, this financial assistance assessment shall be occurring. Additionally, working with the family and youth regarding the ability to support themselves in a self-sufficient manner is key to long-term family success. This is especially necessary if there is a plan for a youth to be placed out-of-home.

When a youth is involved in the investigation and evaluation stage, a step within this investigation process is to ensure the youth and family have all necessary medical care needs met. As clearly detailed in statute, this cost is not to be paid for with voucher service dollars and a probation officer does have a key role in this process. The probation officer shall assist the family in applying to Medicaid (steps detailed in this resource) or help them assess payment using other options such as private insurance. It is expected that the officer is initiating and ensuring completion with the youth and family immediately and PRIOR to any service beginning.

#### ***The out-of-home pre-planning process:***

Pre-planning is even more critical prior to deciding to place a youth in an out-of-home placement. If a youth is in detention or a detention alternative, the probation officer must ensure that medical care and

coverage for the placement is planned before placing the youth. If a youth is detained and doesn't have medical coverage, Medicaid can and shall be applied for, initiated by the probation officer, up to two weeks before any placement which will occur for 90 days or more. No youth shall enter a placement without the officer working with the youth and family to apply for Medicaid. This is the responsibility of the probation officer during the pre-planning process and not the facility after placement.

Additionally, it is the expectation that the probation officer has signed a release and is actively working with Magellan and the evaluation provider to ensure all appropriate placements are approved and application is made the day of admission, if approval is not received prior to admission. When Medicaid is in place, Magellan can back-date coverage of the cost of placement starting at admission, therefore it is essential a probation officer make daily calls when a placement is pending and coverage is being considered for approval.

At all times when a youth is pending out-of-home, the placement and referrals are being sent to providers. The provider, upon acceptance, shall give the probation officer a "Date of Admission." This is expected to be a true date, not a timeline. For example, the provider shall state admission is on June 1<sup>st</sup>, not in 14 to 45 days. The probation officer is expected to talk with the accepting facility and receive this date. If the date is over 15 days from admission, other placements shall continue to be assessed. At all times if a youth is in detention awaiting a placement, alternatives shall be assessed as research continues to show the negative effects of detention on youth. Only youth who are a danger to themselves/others or are a true flight risk should be detained.

Finally, immediate placement of youth upon acceptance is critical. All out-of-state placements must follow the Interstate Compact for the Placement of Children (ICPC) regulations as detailed in protocol. Officers shall pre-plan admission with a facility and prepare the judiciary for immediate placement. Youth who receive acceptance to a facility shall be immediately available for admission when pre-planning is comprehensive, reducing the number of youth who remain in detention awaiting a hearing before placement.

***Out-of-Home Cover Letter:***

All youth placed in an out-of-home placement shall have a cover letter included in their referral packet to all facilities detailing the medical support for the youth immediately upon placement. A detailed medical plan created between the Probation Officer and the parent/guardian shall include the following:

- Who is responsible for medical payment? Most of the time this would be the parent/guardian for probation youth, although if a state ward or other family member is responsible this shall be included.
- Nebraska Medicaid shall be previously applied for and acceptance information detailed.
- If the family has private insurance, this information shall be included.
- Additionally, if you have a youth who is also a state ward they may have the support of IV-E funding which could then be used as the medical plan.

***Example Letter:***

January 29, 2015

*Agency Name,*

This letter is a formal request for acceptance of *Youth Name* into *Agency Name* for the purpose of placement into a Group Home. This youth is under the court jurisdiction of \_\_\_\_ County, Nebraska for *Adjudicated Charges*.

As reflected in the attached referral packet, this youth is an appropriate candidate for placement at your facility. Please review the attached information and respond to this Probation Officer regarding approval or denial of this youth into your facility. Please include in all acceptance responses the exact admission date for this youth. If the date is more than 15 days from acceptance, it is important to note that continued efforts will be made by this Probation Officer to locate an alternative placement.

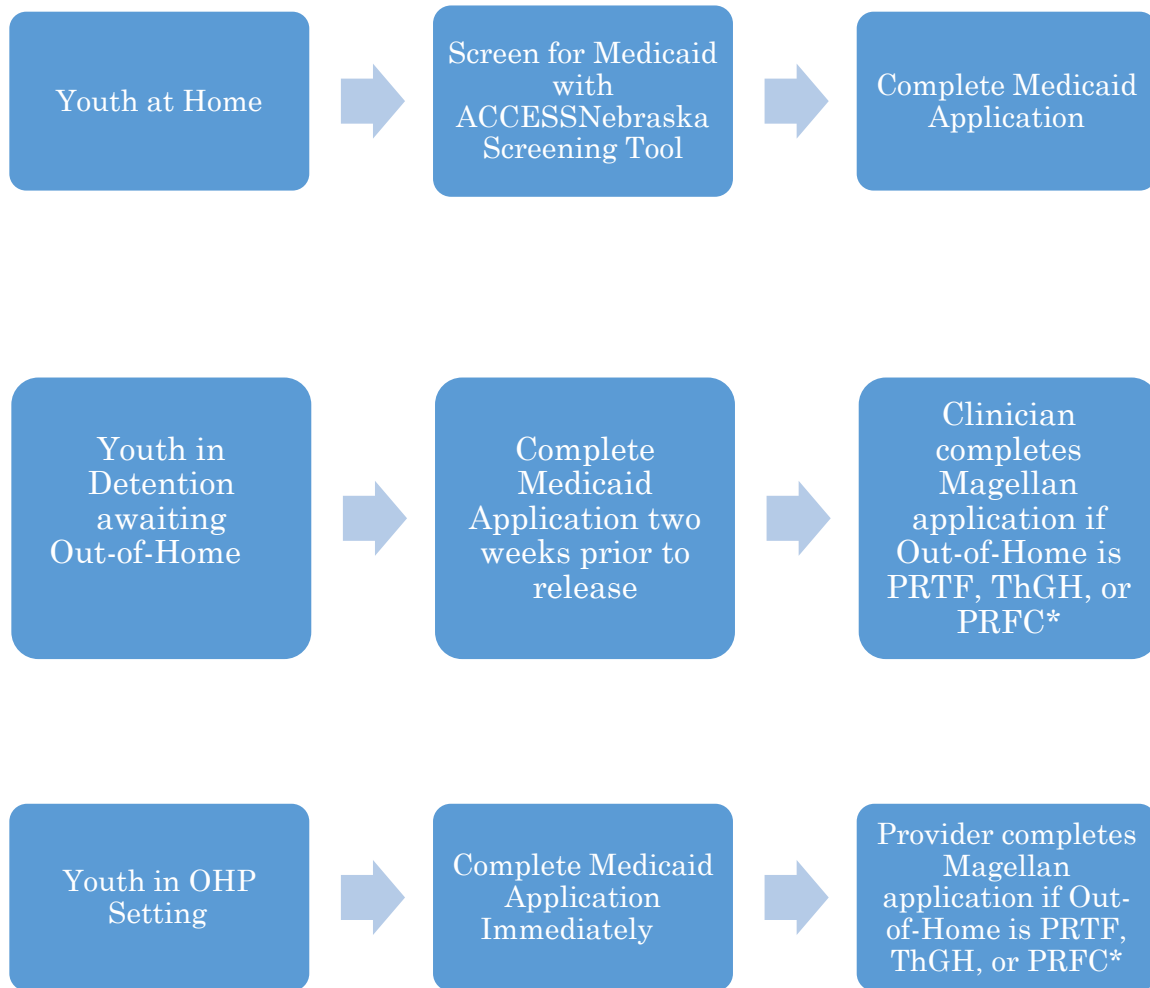
This youth is currently enrolled in Medicaid coverage for all covered medical services while in your facility. If you have questions regarding medical care or medication please contact this youth's parent/legal guardian (*contact information can be included*) who is responsible for the care.

Please accept this letter and referral packet as a request for placement at your facility.

Sincerely,

*Probation Officer Name*

## Flow chart for Medicaid and Magellan Applications



***\* Psychiatric Residential Treatment Facility (PRTF),  
Therapeutic Group Home (ThGH), and  
Professional Resource Family Care (PRFC)***

## **Medicaid**

### **INTRO TO MEDICAID:**

Many youth on probation in Nebraska have behavioral health and physical health issues that could benefit from treatment. As we know, Probation funds can be used to pay for some behavioral health and similar services. However, Probation funds cannot be used to pay for physical health services or for medications.

The failure to link youth to funding for health care funding is extremely costly to state and local governments. In addition, the lack of access to health care services can increase recidivism, which can contribute to increased costs to Probation.

One way to link youth with health care services (and thus decrease recidivism) is by enrolling eligible youth in Nebraska Medicaid. Medicaid is a cost sharing program between the federal government and the state government. In Nebraska, the federal government provides about 51% of the funding and the State of Nebraska provides the remaining 49%. In comparison, the funds that Probation receives to pay for services is 100% state funded.

As you can see, by enrolling eligible youth into Medicaid, the state funding provided to Probation can be utilized to pay for services provided to youth who do not qualify for Medicaid and can also be used to pay for non-health care related services that might benefit youth (such as tutoring or foster care services).

Attached is information that will assist you in screening youth for Medicaid and for enrolling youth in Nebraska Medicaid.

### ***Expectations of Probation Officers:***

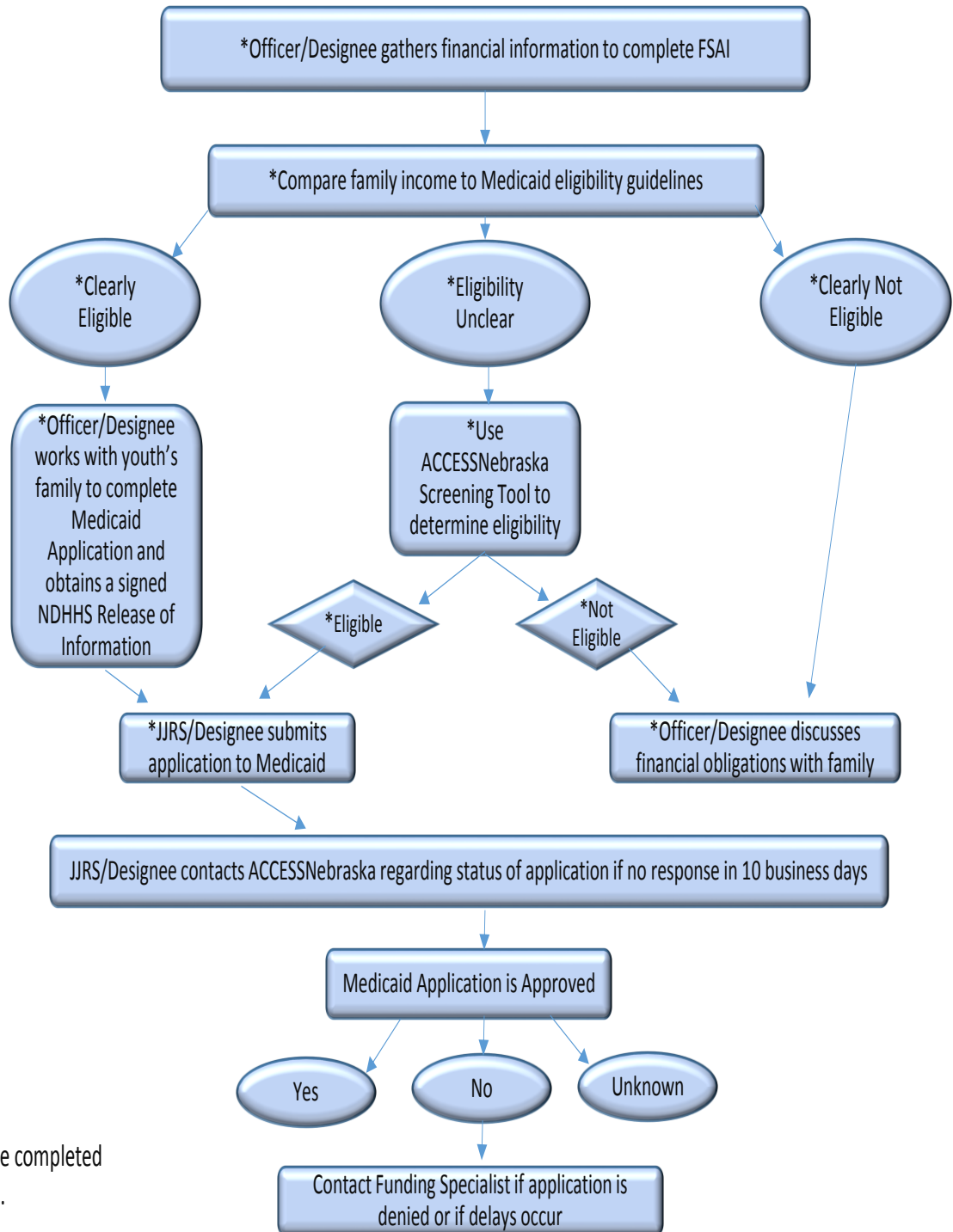
As a part of gathering financial information from youths and their families, information about whether the youth is enrolled in Medicaid is gathered. All Juvenile Justice Resource Supervisors have access to the Nebraska Medicaid Eligibility System and can confirm or disconfirm a youth's enrollment in Medicaid. If a youth is not enrolled in Medicaid, this guide should be utilized to screen youth for Medicaid. Although it is expected that the youth's parent/guardian and/or some Registered Service Providers will assist with the Medicaid application process, it is the responsibility of the Probation Officer to ensure that the Medicaid application is completed as soon as possible.

### **MEDICAID 101:**

#### ***When should a Medicaid application be submitted?***

For youth in the community. A Medicaid application can be submitted at any time. The online assessment on the ACCESSNebraska website can be utilized to screen a family's eligibility for Medicaid. Information about all individuals residing in the family home will be required for the application.

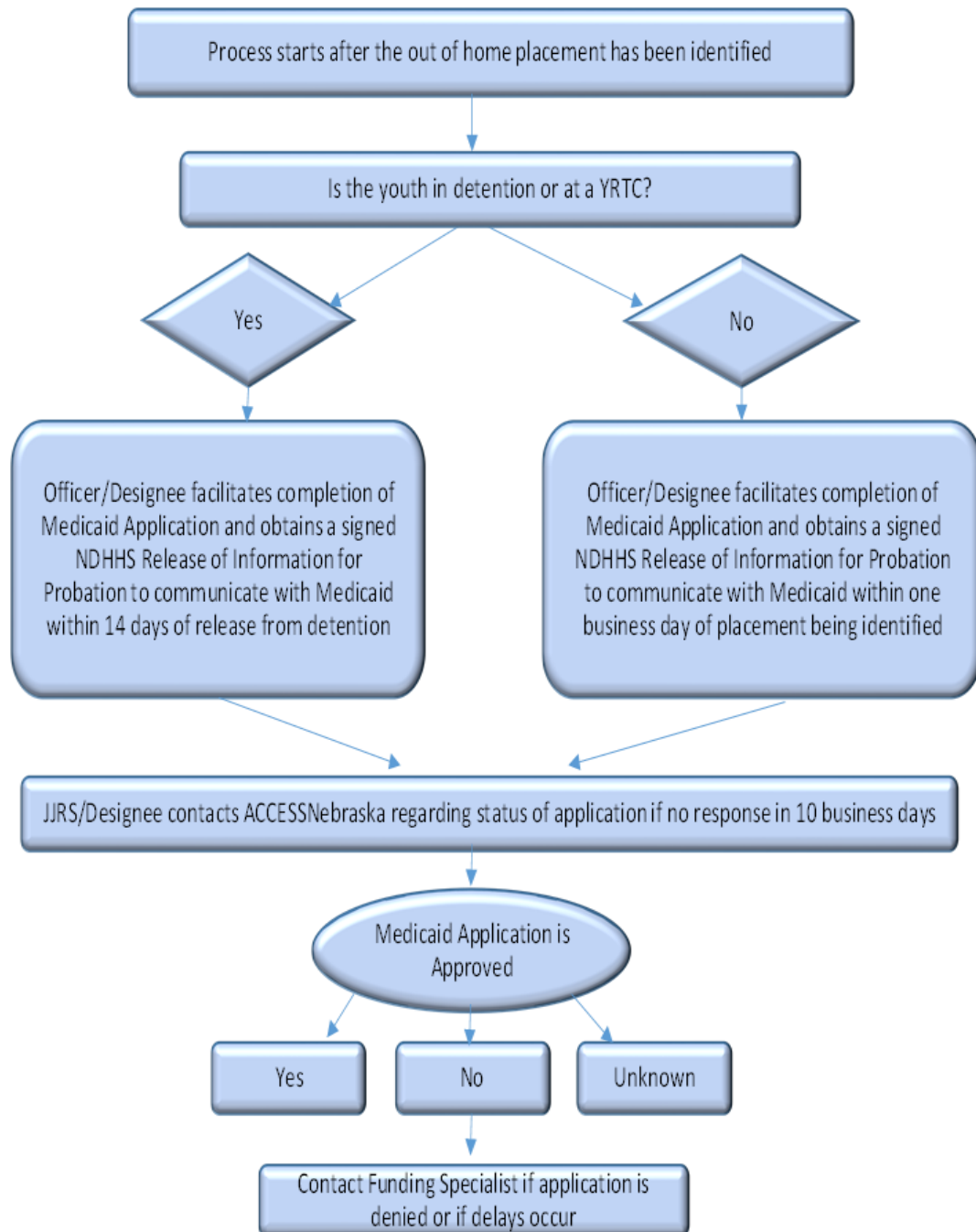
# Medicaid Application Process for Youth at Home





For youth pending an Out of Home Placement: If the youth is in detention or at a YRTC, a Medicaid application can be submitted two weeks prior to release. For all other youth, a Medicaid application can be submitted as soon as the Out of Home Placement is identified.

## Medicaid Application Process for Youth Pending Out-of-Home Placement



**How do you apply for Medicaid?**

The fastest way to apply for Medicaid is to complete the online application on the ACCESSNebraska website.

Applicants can also call the customer service center (402-473-7000 in Lincoln, 402-595-1178 in Omaha, and 1-855-632-7633 the remainder of Nebraska) to complete the application over the telephone.

A written application (Form MILTC-53) can be completed and emailed to the Medicaid Application Management in Lincoln: ([DHHS.ANDICenterLincoln@nebraska.gov](mailto:DHHS.ANDICenterLincoln@nebraska.gov)). Please note that completing and submitting the application online will provide a quicker response.

**Other useful information:**

An Eligibility Release of Information MLTC-EA-34 signed by the youth’s parent/guardian is required in order for Medicaid staff to share information with Probation staff about the status of a Medicaid application. It is often helpful to obtain the signature of the parent/guardian on such an authorization while they are available in the Probation office.

When a youth leaves a YRTC, the youth’s “place of residence” in NFOCUS must be updated (from YRTC) in order for Medicaid to be active and available for use.

**Eligibility Guidelines:**

There are multiple ways that a youth can gain eligibility for Medicaid. Many people do not realize that the Nebraska income guidelines for youth to be eligible for Medicaid are set at a higher rate than the income guidelines for adults. FYI, the income guidelines for Children’s Health Insurance Program (CHIP) are the “easiest” income guidelines for a family to meet. One important point to remember, youth who have private health insurance can be eligible for Medicaid but cannot be eligible for CHIP

Provided below are the monthly household income maximums (before taxes) for Medicaid (first three columns) and for CHIP.

Household Size	Newborns to age 1	Children ages 1 to 5	Children ages 6 to 18	CHIP
1	1,604	1,436	1,317	2,109
2	2,163	1,936	1,776	2,844
3	2,722	2,436	2,234	3,578

4	3,281	2,936	2,693	4,313
5	3,839	3,437	3,152	5,048
6	4,398	3,937	3,611	5,783
7	4,959	4,438	4,071	6,520
8	5,521	4,942	4,533	7,259
9	6,081	5,443	4,993	7,996
10	6,644	5,946	5,454	8,735

ONLINE SCREENING:

***Using the Online Screening to Help Determine Eligibility***

For youth residing with their parent/guardian, the online assessment located on the ACCESSNebraska website (<https://dhhs-access-neb-menu.ne.gov/start/?tl=en>) can be utilized to screen for Medicaid eligibility and the following economic assistance programs:

- Help Buying Food - Supplemental Nutrition Assistance Program (SNAP) - formerly known as the Food Stamp Program
- Cash Assistance - Aid to Dependent Children (ADC)
- Help with Heating Expenses - Energy Assistance (EA)
- Help with Child Care Expenses - Child Care (CC)
- Help with Services for the Developmentally Disabled (DD)
- Social Services Aged and Disabled (SSAD)
- Social Services Children and Family (SSCF)

To utilize the online assessment, the following information is needed:

Monthly income from employment, unemployment, social security, SSI, veterans benefits, retirement pensions, child support, and spousal support.

Family resources. This does not include cars or the house that the family lives in. It does include cash, money in bank and/or credit union accounts, stocks, savings bonds, certificates of deposit, other real estate, etc.

Expenses. This includes child support, alimony, student loan interest, child care expenses, rent or mortgage payment, and health insurance premiums.

The screening tool will also ask if anyone living in the family home is disabled or blind, has a developmental disability, is pregnant, or is in need of assisted living or nursing home services.

Using the online ACCESSNebraska assessment:

Screen 1: Enter information about the primary wage earner in the family home and provide the requested information about other individuals who live in the family home.

Screen 2: Enter information about the other adult(s) in the family home and how they are related to the primary wage earner.

Screen 3: Enter information about any children living in the family home.

Screen 4: Answer the questions and enter the requested information about household members eating meals, being disabled or blind, having a developmental disability, being pregnant, and living in or needing nursing home or assisted living services. (See the attachment for the follow up questions that are generated by a 'Yes' response to any of these questions).

Screen 5: Answer the questions about income and resources. (See the attachment for the follow up questions that are generated by a 'Yes' response to any of these questions).

Screen 6: Answer the questions about expenses. (See the attachment for the follow-up questions that are generated by a 'Yes' response to any of these questions).

Screen 7: Answer the question about health insurance premium. (See the attachment for the follow up question that is generated by a 'Yes' response to this question).

Screen 8: This screen provides a list of programs for which the applicant may be qualified. Please note the disclaimer that indicates that the applicant will be required to submit proof of citizenship/immigration status for all potential beneficiaries.

Feel free to refer to the enclosed "print screens" of the online assessment for a visual depiction of what the screens look like and for an example of the results page.

## APPLICATION:

### ***Completing the Written Medicaid Application (Form MILTC-53)***

The MILTC-53 is the form used to apply for Medicaid for children and adults.

Information that may be needed for the application form:

- Social Security Numbers (or document numbers for legal immigrants)
- Employer and income information
- Copies of health insurance cards
- Information about employer-sponsored insurance that the youth and/or the parent/guardian is currently eligible to receive (or will be eligible to receive) within three months. This includes:
  - employer name, address, telephone number, contact person
  - EIN
  - premium cost to the employee

### **How to complete the MILTC-53 for youth in the community**

Fill out Step 1 and Step 2 – Person 1 with information about a parent/guardian.

Fill out Step 2 – Person 2 for each person in the family home. This includes the youth's parent/guardian, the parent/guardian's spouse or unmarried partner, children under the age of 21, anyone else under the age of 21 who lives in the family home and is cared for by the parent/guardian, and anyone that the parent/guardian includes on their tax return, regardless of whether they live in the family home.

Fill out Step 3 and Step 4 if applicable. If not applicable, check the "No" boxes.

In Step 5, encourage the parent/guardian to allow automatic renewal. This helps decrease the likelihood of the youth "falling off" Medicaid.

The parent/guardian (or an authorized representative) can date and sign the application. If an authorized representative signs the application, Appendix C must be completed.

Fill out Appendix A, B, and/or C if applicable.

FYI, Appendix C allows the family to appoint an "Authorized Representative" to represent the family in their dealings with the Nebraska Department of Health and Human Services. Examples of people who would serve as an Authorized Representative include positive support persons such as other family members, close friends, or an attorney. Probation staff should not serve as an Authorized Representative.

**How to complete the MILTC-53 for youth in an out-of-home setting (and will be there for at least 90 days) and for youth in detention or a YRTC with plans to go to an out-of-home setting for at least 90 days.**

Fill out Step 1 and Step 2 – Person 1 with information about the youth. For “Home address” include both the name and address of the agency providing the out-of-home service (for example: Boys Town Psychiatric Residential Treatment Facility, Hastings Juvenile Chemical Dependency Program, CEDARS Group Home A). It is also helpful to note on the written application (or comment box if completing an online application) that the youth is expected to remain in the out of home setting for at least 90 days).

Do not fill out Step 2 – Person 2.

Fill out Step 3 and Step 4 if applicable. If not applicable, check the “No” boxes.

In Step 5, check the box for 5 years of automatic renewal. This will decrease the likelihood of the youth “falling off” Medicaid.

The youth, the youth’s parent/guardian, or an authorized representative can sign the application. If an authorized representative signs the application, Appendix C must be completed.

Fill out Appendix A, Appendix B, and Appendix C if applicable.

FYI, Appendix C allows the family to appoint an “Authorized Representative” to represent the family in their dealings with the Nebraska Department of Health and Human Services. Examples of people who would serve as an Authorized Representative include positive support persons such as other family members, close friends, or an attorney. Probation staff should not serve as an Authorized Representative.

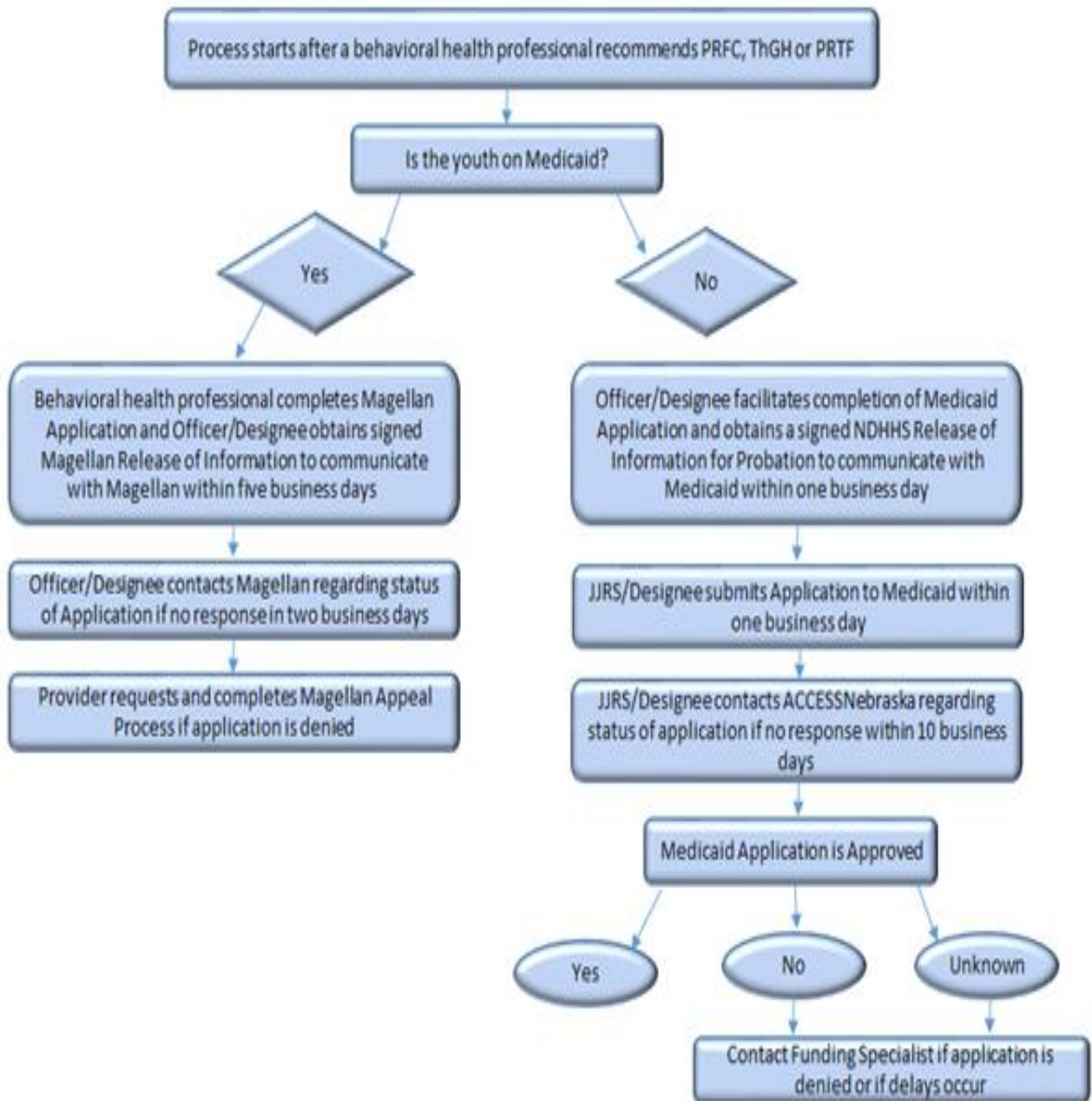
## **Magellan**

APPLICATION:

***Magellan Applications for Professional Resource Family Care (PRFC), Therapeutic Group Home (ThGH), & Psychiatric Residential Treatment Facility (PRTF)***

**When are these applications necessary?** When a youth is on Medicaid and when a behavioral health provider recommends PRFC, ThGH, or PRTF.

# Magellan Application Process for Youth Pending Out-of-Home Placement In PRFC, ThGH or PRTF



### **Why does Probation require providers to complete Magellan applications?**

Completing these applications is a requirement of the provider's contract with Magellan. Probation expects Registered Service Providers to comply with Magellan (and all other insurance company) contracted requirements. This includes filing appeals when services are denied.

### **Helpful information.**

Clinical information must be submitted along with these applications. This clinical information can consist of one or more behavioral health evaluations or other clinical documentation (such as a discharge summary or a treatment plan update from a behavioral health provider that recommends PRFC, ThGH, or PRTF). This clinical recommendation must have been provided within the past 30 days.

If necessary, the same behavioral health provider can perform an updated Initial Diagnostic Interview if the application process extends beyond the 30 days.

The parent/guardian must sign the appropriate page within the application.

If the youth is involved in treatment, the current behavioral health provider must sign the appropriate page within the application.

### **Information applicable to PRFC.**

A "team" of behavioral health providers can sign the PRFC application; however, one of the signatures must be that of a psychologist or a physician.

### **Information applicable to ThGH.**

On the application, the provider is required to choose one of the following "types" of ThGHs:

- Mental Health Only (OMNI Behavioral Health in Seward)
- Juveniles Who Sexually Harm (Child Guidance Center in Lincoln)
- Mental Health/Substance Use Disorder (Dual) (ABH and Journeys – both in Omaha)

If the provider recommends Dual MH/SUD ThGH, the clinical information must include diagnoses for both MH and SUD and must include the ASAM Six Dimensions of Multidimensional Assessment.

A "team" of behavioral health providers can sign the ThGH application; however, one of the signatures must be that of a psychologist or a physician.



**Information applicable to PRTF.**

On the application, the provider is required to choose one of the following “types” of PRTFs:

- Mental Health Only (Alegent Health and Boys Town, both in Omaha)
- Juveniles Who Sexually Harm (LRC-Whitehall in Lincoln)
- Substance Use Disorder Only (Hastings Juvenile Chemical Dependency Program in Hastings & Bryan Independence Center in Lincoln)
- Eating Disorder Specific (None in Nebraska)
- Mental Health/Substance Use Disorder (Dual) (NOVA in Omaha)
- Mental Health/Cognitively Impaired (MH/CI) (None in Nebraska)

A “team” of behavioral health providers can sign the PRTF application; however, one of the signatures must be that of a physician.

The Bryan Independence Center PRTF program is 28-30 days in length,

**Expectations of Probation Officers.**

It is the responsibility of the provider to complete the appropriate Magellan application. However, it is reasonable for Probation Officers to assist in obtaining the signatures of a youth’s parent/guardian.

Once all signatures and clinical documents have been collected, the Magellan application and other documents will be mailed or faxed to the Magellan office in Lincoln. The mailing address and fax number are available on the Magellan applications. Typically the provider sends these documents to Magellan. However, there may be some benefit to having the provider send the information to the Probation Officer. This would provide the Probation Officer with a copy of these documents. However, it then becomes the responsibility of the Probation Officer (or designee) to ensure that the documents are submitted to Magellan in a timely manner.