Division of Prevention and Behavioral Health Services
Department of Services for Children Youth and Their Families
State of Delaware

CS 001	**DPBHS SERVICE ELIGIBILITY**		
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Signature:	Susan A Cycyk 1/5/16	Revisions: 12/19/99; 11/19/03; 8/31/05; 11/29/06; 11/1/07; 12/17/08; 8/10/10, 7/11/11; 4/18/12; 4/15/13, 4/1714; 9/8/15	Originated: 5/1/97

PURPOSE: To define eligibility criteria for services provided by the Division of Prevention and Behavioral Health Services ("DPBHS"), State of Delaware.

DEFINITIONS: Applicable definitions are given in the appendix to DPBHS policy "Development and Revision of Policies."

POLICY: Consistent with statutory authority (16 Del C. chapter 90), agreement with the State Medicaid Office under the Medicaid waiver, DPBHS hereby establishes eligibility criteria for mental health and substance abuse services for children and youth who are served by DPBHS. Eligibility for service is established when criteria 1., 2., 3., and 4. below are all met or when criteria 5. is met.

1. Age: Children and youth are eligible:

   A. Up to Age 18 - Children and youth are eligible for services until their 18th birthday.
   B. Over age 18 - For those youth active with DFS or DYRS and over the age of 18 and less than 19 years of age, DPBHS may provide consultation, monitoring , and or diagnostic services.

2. Residence: Delaware residents are eligible for services.
3. Medical Necessity: Medical necessity is established by the application of DPBHS "Level of Care Criteria." These criteria are available on the DPBHS website.

4. Categorical Eligibility:

   A. Insurance and Medicaid Benefits: DPBHS services are intended as a primary resource for those who have
      1) Medicaid benefits, and who require more than the basic Medicaid 30-hour annual outpatient benefit; or
      2) Uninsured, or
      3) Exhausted all applicable private insurance mental health or substance abuse benefits. The absence of a specific level of care or specific provider in a mental health insurance package is not sufficient grounds for categorical eligibility.

   B. Co-Insurance: DPBHS does not function as a secondary payor for the purpose of funding insurance co-payment or deductibles for the privately insured. There are two exceptions:

      1) If a youth is hospitalized in a DPBHS designated psychiatric hospital on an involuntary basis, or is hospitalized on an emergency basis with DPBHS authorization, and the hospital is unsuccessful in obtaining reimbursement for the private insurance, then DPBHS may reimburse the Provider up to the allowable Contract rate for up to 72 hours.
      2) If a youth has both private insurance and Medicaid, the private insurer is the primary payor and Medicaid is the secondary payor. However if the youth is treated by a participating Medicaid provider, then the parent, legal guardian or other legally liable individual is not responsible for any copay amount and, by federal regulation, private providers may not bill parents for that amount. In such a situation, Medicaid providers who have a contract with DPBHS may be reimbursed up to the Medicaid rate in cases pre-authorized by DPBHS. If the provider and Medicaid recipient wish to utilize any applicable Medicaid coverage to pay costs after the primary insurance has paid allowable

charges, the provider must obtain DPBHS authorization upon exhaustion of private insurance for the service, in addition to any other authorizations which may be required by other payors.

C. DPBHS does not provide services that substitute for services which are the responsibility of another agency. However, for clients meeting eligibility requirements for DPBHS services, and who also qualify for services from other state agencies, divisions within state agencies, school districts, physical/medical health care services, and/or other services, DPBHS will provide medically necessary mental health and substace abuse services arranged in concert with other involved agencies. For example, when eligibility criteria are met and the child has a moderate to severe mental health disorder that is not explained by an underlying developmental disorder, PBHS may authorize or co-fund medically necessary care in concert with the education system and/or the Division of Developmental Disabilities Services. Also, DPBHS may provide or co-fund mental health and substance abuse treatment for children and youth active with another DSCYF division when the child meets PBHS eligibility criteria.

5. Mental Health Crises – Crisis services may be provided to children and youth meeting criteria A. or B. below.

A. DPBHS crisis services and short-term emergency hospitalizations may be provided to non-resident youth under the age of 18 years of age who are in the State of Delaware and are at imminent danger to self or others arising from mental health or substance abuse disorders. DPBHS reserves the right to seek reimbursement for services provided to non-Delaware residents.

B. The DPBHS crisis service also may be utilized by privately insured persons if they meet criteria 1., 2., and 3. above for initial crisis response (excluding crisis bed) intervention, but subsequent treatment is the responsibility of the insurance carrier unless the youth otherwise meets eligibility criteria and is admitted to DPBHS services.

APPLICATION:

A. The application of this policy in a particular circumstance may be appealed by the affected parent or guardian, custodian or other legal caregiver if the parent is unavailable. (See also DPBHS Appeals Policy).

1) Providers and advocates may assist children and families with an appeal under this policy.

2) Families will be advised of their appeal rights whenever a client is determined to be ineligible for DPBHS servces under this policy.

When DFS or DYRS has legal custody, staff in disagreement with DPBHS decisions should use the DSCYF case dispute resolution procedures instead of the appeal procedures.

B. DPBHS staff may request a review by the Division Director if application of the policy would yield a result substantially contrary to the combined interests of the State and the client. The decision of the Director will be documented in writing and signed by the Director, and kept on file by the DPBHS Quality Improvement unit.