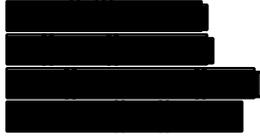




STATE OF WISCONSIN
Division of Hearings and Appeals

In the Matter of



DECISION
Case #: MPA - 175126

PRELIMINARY RECITALS

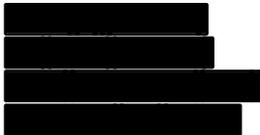
Pursuant to a petition filed on June 20, 2016, under Wis. Stat. § 49.45(5), and Wis. Admin. Code § HA 3.03(1), to review a decision by the Division of Health Care Access and Accountability regarding Medical Assistance (MA), a hearing was held on July 11, 2016, by telephone.

The issue for determination is whether the department correctly denied the petitioner's request for medical assistance reimbursement for Child/Adolescent Day Treatment.

There appeared at that time the following persons:

PARTIES IN INTEREST:

Petitioner:



Respondent:

Department of Health Services
1 West Wilson Street, Room 651
Madison, WI 53703

By: [Redacted]

Division of Health Care Access and Accountability
PO Box 309
Madison, WI 53701-0309

ADMINISTRATIVE LAW JUDGE:

Michael D. O'Brien
Division of Hearings and Appeals

FINDINGS OF FACT

- 1. The petitioner (CARES # [Redacted]) is a resident of Douglas County.

2. On February 4, 2016, the petitioner with Northwest Journey Northern Lights requested 13 weeks of Child/Adolescent Day Treatment (CADT) at a cost of \$26,000. After requesting and receiving additional information, the department denied the request on June 7, 2016.
3. The petitioner received the requested services from February 8, 2016, through May 5, 2016.
4. Northwest Journey did not complete any assessment until sometime in March 2016 and did not complete a full assessment until June 2016.

DISCUSSION

The petitioner and his provider, Northwest Journey Northern Lights, seek reimbursement for three months of Child/Adolescent Day Treatment Services (CADT) from February 8, 2016, through May 5, 2016, at a cost of \$26,000. The Office of Inspector General denied the request for a variety of reasons.

The department considers CADT a “HealthCheck—Other Service” covered under Wis. Admin. Code, § DHS 107.22(4). It is a catch-all category applying to any service described in the definition of “medical assistance” found at 42 USC 1396d(a). CADT guidelines refer to Wis. Admin. Code, Chapter DHS 40, which specifically covers day treatment mental health services for children under 18, so those provisions are relevant in determining whether to approve the services.

To qualify for any day treatment mental health services, a child “must have a primary psychiatry diagnosis of mental illness or severe emotional disorder.” Wis. Admin. Code, § DHS 40.08(3)(a). Each child is evaluated by a psychologist or psychiatrist and has a treatment plan approved by a program. Wis. Admin. Code, §§ DHS 40.08(4) and 40.09(2)(c).

The pertinent interpretation of the requirements that must be met to receive CADT is found at *Wisconsin Medicaid and BadgerCare Update* No. 96-20. Among other things, the policy requires “[e]vidence of an initial multidisciplinary assessment that includes all elements described in [DHS] 40.09, Wis. Admin. Code, including a mental status examination and a five-axis diagnosis.” This is important because the assessment provides the blueprint for going forward with the treatment. It is not enough to establish that the recipient has mental health needs to justify CADT any more than it would be enough to establish that one needs a new house to begin nailing boards together without any idea of what type of house one will build.

CADT is expensive, and for it to be approved, the recipient must show that is medically necessary, cost-effective, and an effective and appropriate use of available services. It must also meet the “limitations imposed by pertinent...state...interpretations.” Wis. Admin. Code § DHS 107.02(3)(e)1.,2.,3.,6., 7, and 9. Wis. Admin. Code. To be medically necessary, it must be consistent with recipient’s symptoms, is not medically contraindicated, is of proven medical value, and is cost-effective compared to an alternative medically necessary service that is reasonably accessible to the recipient. Wis. Admin. Code § DHS 101.03(96m). An assessment demonstrates that the treatment will have medical value for the recipient’s specific problems and that other, less expensive treatment will not meet his needs.

Northwest Journey did not complete any assessment until sometime in March 2016. It continued the assessment process until June 2016. It contends that an assessment was not needed because it relied upon the petitioner’s individualized education program. An IEP is not a substitute for an assessment because it was not prepared by team required by Wis. Admin. Code, § DHS 40.09(1):

- (a) The client's case manager;
- (b) The program's clinical coordinator;
- (c) An occupational therapist, a clinical social worker or a registered nurse;

- (d) An educational professional from the client's school;
- (e) The client, to the degree the client is willing and able to participate, to the extent appropriate to his or her age, maturity and clinical condition;
- (f) The client's parent or guardian, if available and willing to participate;
- (g) Representatives of any other profession or agency necessary in order to adequately and appropriately respond to the treatment needs of the client and family which were identified in the referral materials or the intake screening process; and
- (h) If the client has been placed under the supervision of a county department or the department by a juvenile court order, the social worker who has been assigned to the case.

Because the petitioner has not met this basic requirement, his provider is not eligible for reimbursement for the CADT it provided to him.

CONCLUSIONS OF LAW

The petitioner is not eligible for the requested Child/Adolescent Day Treatment because his provider did not complete the comprehensive assessment required by HealthCheck policies and medical assistance regulations.

THEREFORE, it is **ORDERED**

The petitioner's appeal is dismissed.

REQUEST FOR A REHEARING

You may request a rehearing if you think this decision is based on a serious mistake in the facts or the law or if you have found new evidence that would change the decision. Your request must be **received within 20 days after the date of this decision**. Late requests cannot be granted.

Send your request for rehearing in writing to the Division of Hearings and Appeals, 5005 University Avenue, Suite 201, Madison, WI 53705-5400 **and** to those identified in this decision as "PARTIES IN INTEREST." Your rehearing request must explain what mistake the Administrative Law Judge made and why it is important or you must describe your new evidence and explain why you did not have it at your first hearing. If your request does not explain these things, it will be denied.

The process for requesting a rehearing may be found at Wis. Stat. § 227.49. A copy of the statutes may be found online or at your local library or courthouse.

APPEAL TO COURT

You may also appeal this decision to Circuit Court in the county where you live. Appeals must be filed with the Court **and** served either personally or by certified mail on the Secretary of the Department of Health Services, 1 West Wilson Street, Room 651, **and** on those identified in this decision as "PARTIES IN INTEREST" **no more than 30 days after the date of this decision** or 30 days after a denial of a timely rehearing (if you request one).

The process for Circuit Court Appeals may be found at Wis. Stat. §§ 227.52 and 227.53. A copy of the statutes may be found online or at your local library or courthouse.

Given under my hand at the City of Madison,
Wisconsin, this 8th day of August, 2016

\s _____
Michael D. O'Brien
Administrative Law Judge
Division of Hearings and Appeals



State of Wisconsin \DIVISION OF HEARINGS AND APPEALS

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The preceding decision was sent to the following parties on August 8, 2016.

Division of Health Care Access and Accountability