

Division of Medicaid and Long-Term Care

December 1, 2015

Patrick O' Donnell, Clerk of the Legislature State Capitol, Room 2018 P.O. Box 94604 Lincoln, NE 68509

Dear Mr. O'Donnell:

In accordance with Nebraska Revised Statue 68-2004, please find attached the report on authorization and denial rates for Medicaid behavioral health services for children under 19 years of age for the third quarter of Calendar Year 2015.

Specifically, this report includes, but is not limited to, rates of initial service authorizations, reauthorizations subsequent to initial service authorizations and denials for behavioral health services.

If you have any questions, please contact me. Thank you.

Sincerely;

Calder Lynch, Director Division of Medicaid and Long-Term Care Department of Health and Human Services



LB1063 Medicaid Auth Requests - FY2016 Qtr 1 Youth Medicaid Mental Health Authorization Requests Reporting Period: 1st Quarter, FY 2016

	All Youth (Ages 0 - 19)										
	Initial Service Requests				Reauthorization Requests				All Requests		
Service Type	# of Persons	# of Requests	Denied	Authed	# of Persons	# of Requests	Denied	Authed	# of Requests	Denied	Authed
23:59 Observation	37	38	4	34					38	4	34
Community Treatment Aid	12	13	1	12	11	17		17	30	1	29
Crisis Residential	1	2		2					2		2
Day Treatment	18	18		18	11	23		23	41		41
Inpatient	353	416	21	395	17	17	15	2	433	36	397
Intensive Outpatient Program	190	199	3	196	29	36	1	35	235	4	231
Outpatient	27	27	9	18	2	2		2	29	9	20
Partial Hospitalization	82	88	1	87	47	86	1	85	174	2	172
Professional Resource Family Care											
Psych Testing	536	546	7	539					546	7	539
Psychiatric Residential Treatment Facility	113	118	64	54	64	113	4	109	231	68	163
Therapeutic Group Home	20	20	16	4	13	29	1	28	49	17	32
Other Services	320	372		372	60	97		97	469		469
All Services Total	1709	1857	126	1731	254	420	22	398	2277	148	2129

	All Youth (Ages 0 - 19)								
	Initial Ser	vice Req.	Reaut	n Req.	All Requests				
Service Type	Denial	Auth	Denial	Auth	Denial	Auth			
Service Type	Rate	Rate	Rate	Rate	Rate	Rate			
23:59 Observation	10.5%	89.5%			10.5%	89.5%			
Community Treatment Aid	7.7%	92.3%	0.0%	100.0%	3.3%	96.7%			
Crisis Residential	0.0%	100.0%			0.0%	100.0%			
Day Treatment	0.0%	100.0%	0.0%	100.0%	0.0%	100.0%			
Inpatient	5.0%	95.0%	88.2%	11.8%	8.3%	91.7%			
Intensive Outpatient Program	1.5%	98.5%	2.8%	97.2%	1.7%	98.3%			
Outpatient	33.3%	66.7%	0.0%	100.0%	31.0%	69.0%			
Partial Hospitalization	1.1%	98.9%	1.2%	98.8%	1.1%	98.9%			
Professional Resource Family Care									
Psych Testing	1.3%	98.7%			1.3%	98.7%			
Psychiatric Residential Treatment Facility	54.2%	45.8%	3.5%	96.5%	29.4%	70.6%			
Therapeutic Group Home	80.0%	20.0%	3.4%	96.6%	34.7%	65.3%			
Other Services	0.0%	100.0%	0.0%	100.0%	0.0%	100.0%			
All Services Total	6.8%	93.2%	5.2%	94.8%	6.5%	93.5%			