

# NEBRASKA



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**DEPT. OF HEALTH AND HUMAN SERVICES**

Division of Medicaid and Long-Term Care  
Medicaid Mental Health Authorization Request Report

December 20, 2019

Prepared in Accordance with Neb. Rev. Stat. 68-2004

December 20, 2019

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

Dear Clerk of the Legislature:

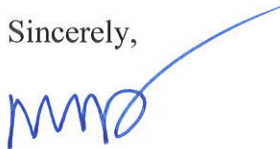
In accordance with Neb. Rev. Stat. §68-2004, please find the attached reports on authorization and denial rates for Medicaid behavioral health services for children under 19 years of age. The dates for this report are August 1 to October 31, 2019.

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.

With the implementation of the Heritage Health program in 2017, Medicaid behavioral health services for children are administered by the three Managed Care Organizations in the program. Attached you will find three separate reports from Nebraska Total Care, UnitedHealthcare Community Plan of Nebraska, and WellCare of Nebraska.

Please contact me if you have any questions about this submission.

Sincerely,



Matthew A. Van Patton, DHA, Director  
Division of Medicaid and Long-Term Care  
Department of Health and Human Services

MVP/dp

Document Name	LB 1063-Children's Health and Treatment Act
Contract Section(s) Referenced	Attachment 38
Health Plan Name	Nebraska Total Care
Contract Number	71165 o4
Health Plan Contact	Ellen McEliderry
Health Plan Contact Email	ellen.l.mceliderry@nebraskatotalcare.com
Report Period Start Date	8/1/2019
Report Period End Date	10/31/2019
Report Original Submission Date	12/13/2019
Report Revision Submission Date	12/18/2019

Service Type	Initial Service Requests			Reauthorization Requests			All Requests		
	# of Persons	# of Requests	Denial Rate	Authorized	Denial Rate	Authorized Rate	Authorized	Denial Rate	Authorized Rate
23:55 Observation	0	0	0	0	0	0	0	0	0
Community Treatment Aid	4	4	75.00%	1	1	25.00%	3	3	75.00%
Day Treatment	17	25	28.00%	18	7	28.00%	7	18	72.00%
Inpatient	179	326	7.36%	279	24	7.36%	24	279	85.58%
Intensive Outpatient Program	14	19	5.26%	18	1	5.26%	1	18	94.74%
Outpatient	40	60	16.67%	50	10	16.67%	10	50	83.33%
Partial Hospitalization	0	0	0.00%	0	0	0.00%	0	51	100.00%
Professional Resource Family Care	0	0	0.00%	0	0	0.00%	0	0	0.00%
Psych. Testing	5	5	40.00%	2	3	60.00%	2	3	40.00%
Psychiatric Residential Treatment Facility	19	20	15.00%	17	18	85.00%	21	150	12.14%
Therapeutic Group Home	4	7	42.86%	3	4	57.14%	3	4	42.86%
Other Services	241	307	0.65%	295	0	96.09%	2	285	0.65%
All Services Total	523	773	7.12%	685	204	88.62%	77	869	88.85%

Document Name	LB 1063-Children's Health and Treatment Act
Contract Section(s) Referenced	Attachment 38
Health Plan Name	UnitedHealthcare Community Plan of Nebraska
Contract Number	71163 04
Health Plan Contact	Sandra Hashman sandra.hashman@uhc.com
Health Plan Contact Email	8/1/2019
Report Period Start Date	10/31/2019
Report Period End Date	12/16/2019
Report Original Submission Date	12/18/2019
Report Revision Submission Date	

Service Type	Initial Service Requests				Reauthorization Requests				All Requests								
	# of Persons	# of Requests	Denied	Authorized	Denial Rate	Authorized Rate	# of Persons	# of Requests	Denied	Authorized	Denial Rate	Authorized Rate	# of Requests	Denied	Authorized	Denial Rate	Authorized Rate
23:59 Observation	0	0	0	0	0.00%	0.00%	0	0	0	0	0.00%	0.00%	0	0	0	0.00%	0.00%
Community Treatment Aid	18	41	0	41	0.00%	100.00%	0	0	0	0	0.00%	0.00%	41	0	41	0.00%	100.00%
Day Treatment	20	39	0	39	0.00%	100.00%	0	0	0	0	0.00%	0.00%	39	0	39	0.00%	100.00%
Inpatient	118	143	1	142	0.70%	99.30%	105	138	0	138	0.00%	100.00%	281	1	280	0.36%	99.64%
Intensive Outpatient Program	11	12	1	11	8.33%	91.67%	0	0	0	0	0.00%	0.00%	12	1	11	8.33%	91.67%
Outpatient	0	0	0	0	0.00%	0.00%	0	0	0	0	0.00%	0.00%	0	0	0	0.00%	0.00%
Partial Hospitalization	15	17	0	17	0.00%	100.00%	8	16	0	16	0.00%	100.00%	33	0	33	0.00%	100.00%
Professional Resource Family Care	0	0	0	0	0.00%	0.00%	0	0	0	0	0.00%	0.00%	0	0	0	0.00%	0.00%
Psych Testing	2	2	1	1	50.00%	50.00%	0	0	0	0	0.00%	0.00%	2	1	1	50.00%	50.00%
Psychiatric Residential Treatment Facility	41	41	2	39	4.88%	95.12%	35	99	3	96	3.03%	96.97%	140	5	135	3.57%	96.43%
Therapeutic Group Home	5	13	0	13	0.00%	100.00%	0	0	0	0	0.00%	0.00%	13	0	13	0.00%	100.00%
Other Authorized Services	7	7	1	6	14.29%	85.71%	0	0	0	0	0.00%	0.00%	7	1	6	14.29%	85.71%
All Services Total	237	315	6	309	1.90%	98.10%	148	253	3	250	1.19%	98.81%	568	9	559	1.58%	98.42%

Document Name	LB 1063-Children's Health and Treatment Act Attachment 38
Contract Section(s) Referenced	WellCare Nebraska, Inc.
Health Plan Name	71164 O4
Contract Number	Lori Hack
Health Plan Contact	Lori.Hack@wellcare.com
Health Plan Contact Email	8/1/2019
Report Period Start Date	10/31/2019
Report Period End Date	12/17/2019
Report Original Submission Date	
Report Revision Submission Date	

Service Type	Initial Service Requests				Reauthorization Requests				All Requests				
	# of Persons	# of Requests	Denied	Authorized	# of Persons	# of Requests	Denied	Authorized	# of Requests	Denied	Authorized	Denied	Authorized
			Denial Rate	Authorized Rate			Denial Rate	Authorized Rate			Denial Rate	Authorized Rate	
23:59 Observation	1	1	0.00%	100.00%	0	0	0.00%	0.00%	1	0	0.00%	0.00%	1
Community Treatment Aid	1	1	0.00%	100.00%	0	0	0.00%	0.00%	1	0	0.00%	0.00%	1
Day Treatment	0	0	0.00%	0.00%	0	0	0.00%	0.00%	0	0	0.00%	0.00%	0
Inpatient	126	152	7.24%	92.80%	54	60	5.00%	95.00%	212	14	198	6.60%	93.40%
Intensive Outpatient Program	13	17	0.00%	100.00%	0	0	0.00%	0.00%	17	0	17	0.00%	100.00%
Outpatient	60	74	8.11%	91.90%	6	6	0.00%	100.00%	80	6	74	7.50%	92.50%
Partial Hospitalization	14	15	0.00%	100.00%	11	12	0.00%	100.00%	27	0	27	0.00%	100.00%
Professional Resource Family Care	0	0	0.00%	0.00%	0	0	0.00%	0.00%	0	0	0	0.00%	0.00%
Psych Testing	98	98	6.12%	93.90%	0	0	0.00%	0.00%	98	6	92	6.12%	93.90%
Psychiatric Residential Treatment Facility	34	36	2	34	15	15	14	6.67%	51	3	48	5.88%	94.10%
Therapeutic Group Home	5	4	0.00%	100.00%	2	2	0.00%	100.00%	6	0	6	0.00%	100.00%
Other Authorized Services	0	0	0.00%	0.00%	0	0	0.00%	0.00%	0	0	0	0.00%	0.00%
All Services Total	320	398	25	373	91	95	91	5.21%	493	30	464	6.15%	89.90%