



ZERO TO THREE
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Georgetown University
Health Policy Institute
CENTER FOR CHILDREN
AND FAMILIES

Using Medicaid to Ensure the Healthy Social and Emotional Development of Infants and Toddlers

Part V: Getting Started - Questions to Guide Discussions on Medicaid and IECMH

There are many places to begin to assess a state's potential to do more for Infant Early Childhood Mental Health (IECMH) in Medicaid. The following questions may help to uncover possible opportunities for action.

- ▶ Do state or MCO policies, guidance, and/or practice suggest that mental health services and/or a specific service are not allowable for young children? Are providers under the impression that they would not be reimbursed for mental health services to children under 6?
- ▶ Does the state have a medical necessity definition for children that is comprehensive, prevention oriented, and inclusive of mental health (e.g. AAP recommended)? What is the process for establishing medical necessity at the state and/or MCO levels? Are there problems with approval of a specific service that seemingly meets medical necessity criteria for children with a specific diagnosis? Does the state or MCO deny additional services beyond a specified limit, even if the provider deems them medically necessary?
- ▶ Does Medicaid require or allow use of DC:0-5 for diagnosis? If so, is it detailed in Medicaid provider and MCO plan manuals? Is the policy clear for children in both fee-for-service and managed care arrangements (as applicable)? Does the state offer training for Medicaid providers on its use?
- ▶ Are IECMH-related services explicitly included in EPSDT MCO plan and/or provider manuals?
- ▶ Are the provider billing, referral, and treatment processes explicit and well-understood for IECMH services?
- ▶ Does the state support dyadic/parent-child treatment under the child's Medicaid eligibility?
- ▶ Are the state's managed care plans incorporating IECMH in their promotion or quality improvement efforts (e.g. performance improvement plan, or PIP)? Would the state consider encouraging MCOs to develop PIPs with key measures to track improved access to IECMH for children/families in need?
- ▶ Do new provider types or settings need to be recognized in state Medicaid policy to strengthen access to IECMH services?
- ▶ In what ways are young children's mental health needs addressed in broader Medicaid reforms (e.g. payment reforms such as value-based purchasing, or delivery system reforms such as primary care-behavioral health integration or health homes)?

See the full report at <https://ccf.georgetown.edu/2018/11/21/using-medicaid-to-ensure-the-healthy-social-and-emotional-development-of-infants-and-toddlers/>. This report is a collaboration between Georgetown University's Center for Children and Families, and the Think Babies campaign, a project of ZERO TO THREE.