

LA.CLI.031 Multi-Systemic Therapy (MST)

Effective Date: April 15, 2023

Accountable Dept.: LA Medicaid Utilization Management
~~Market Behavioral Health~~Last Reviewed Date: October 1, 2024~~3~~

Summary of Changes:

No changes; reviewed due to an annual review

10/22/2024: Annual Review, minor grammatical changes and updated references to the most recent edition reviewed

Scope:

This policy applies to all Humana Healthy Horizons® in Louisiana (Plan) associates who administer, review, or communicate covered physical and behavioral health benefits and services to eligible enrolled members.

Procedures:

Multi-Systemic Therapy (MST) provides an intensive home/family and community-based treatment for youth with a target age of 12-17 years old who are at risk ~~for~~ of out-of-home placement or who are returning from out-of-home placement. The MST model is based on empirical data and evidence-based interventions that target specific behaviors with individualized behavioral interventions.

Services are primarily provided in the home, but workers also intervene at school and in other community settings. All MST services must be provided to, or directed exclusively toward, the treatment of the ~~Medicaid-~~ membereligible youth.

MST services are targeted for youth primarily demonstrating externalizing behaviors, such as conduct disorder, antisocial or illegal behavior, or acts that lead to costly and, oftentimes, ineffective out-of-home services or excessive use of child-focused therapeutic support services.

Criteria:

Medicaid Eligibility for MST:

~~To be eligible for Multi-Systemic Therapy the member must be a Humana Healthy Horizons in Louisiana youth.~~

- ~~Youth~~

Medical Necessity for MST (Initial Course of Treatment):

MST is considered medically necessary when ALL the following criteria are met (member with substance use issues may be included if below criteria are met and MST is deemed clinically more appropriate than focused drug and alcohol treatment):

- Member exhibits significant externalizing behavior, such as chronic or violent juvenile offenses; and
- Member is at risk for out-of-home placement or is transitioning back from an out-of-home setting ~~placement~~; and

- Member exhibits externalizing behaviors symptomology, resulting in a DSM-5 diagnosis of Conduct Disorder or other diagnoses consistent with such symptomology (oppositional defiant disorder, other disruptive, impulse-control, and conduct disorders, etc.)^{*}; and
 - Ongoing multiple system involvement due to ~~high-risk~~^{high-risk} behaviors and/or risk of failure in mainstream school settings due to behavioral problems; and
 - Less intensive treatment had been ineffective or is ~~in-appropriate~~^{inappropriate}; ~~and/or~~
 - ~~Member's~~ treatment planning team or Child Family Team (CFT) recommends MST
- ^{*}~~-Depression and other disorders are considered as long as the existing mental and behavioral health issues manifest in outward behaviors that impact multiple systems (i.e., family, school, community).~~

Possible Exclusions for MST:

MST services may not be clinically appropriate for individuals who meet the following conditions:

- ~~Member~~ referred primarily due to concerns related to suicidal, homicidal, or psychotic behavior;
- ~~Youth~~ living independently, or youth whom a primary caregiver cannot be identified despite extensive efforts to locate all extended family, adult friends or other potential surrogate caregivers;
- The referral problem is limited to sexual offending in the absence of other delinquent or antisocial behavior;
- Youth with moderate to severe difficulties with social communication, social interaction, and repetitive behaviors, which may be captured by a diagnosis of autism;
- Low-level need cases; or
- Youth who have previously received MST services or other intensive family- and community-based treatment

~~Medical Necessity for MST (Additional Course of Treatment):~~

Member may be allowed an additional course of treatment if all of the following criteria are met:

- MST program eligibility criteria are currently met; and
- Specific conditions have been identified that have changed in the youth's ecology, compared to the first course of treatment; and
- It is reasonably expected that successful outcomes could be obtained with a second course of treatment

Medical Necessity for Continuing MST:

Member receiving MST services must meet all of the following criteria for continuing treatment with MST:

- Treatment does not require more intensive level of care;
- The treatment plan has been developed, implemented, and updated based on the youth's clinical condition and response to treatment, as well as the strengths of the family, with realistic goals and objectives clearly stated;
- Progress is clearly evident in objective terms, but goals of treatment have not yet been achieved, or adjustments in the treatment plan to address the lack of progress are evident; and
- The family is actively involved in treatment, or there are active, persistent efforts being made which are expected to lead to engagement in treatment.

Criteria for Discharge from Services:

Members who meet the following criteria no longer meet medical necessity criteria for MST and shall be discharged from MST treatment:

- The member's treatment plan goals or objectives have been substantially met;
- The member meets criteria for a higher or lower level of treatment, care or services;
- The member's, family, guardian and/or custodian are not engaging in treatment or not following program rules and regulations, despite attempts to address barriers to treatment; and
- Consent for treatment has been withdrawn, or youth and/or family have not benefitted from MST, despite documented efforts to engage, and there is no reasonable expectation of progress at this level of care, despite treatment.

Documentation Requirements:

~~Initial and Subsequent Prior Authorization Requests~~

All initial and subsequent prior authorization requests for MST require the following documents to be submitted; shall be made through submission of an electronic or faxed request form accessed on Humana's Healthy Horizon's website or requested by contacting HHH provider services department. The following documents shall be completed in accordance with Louisiana Department of Health, Behavioral Health Services Provider Manual, Chapter Two of the Medicaid Services Manual and copies of such documents may be requested to support IPS requests as appropriate;

- Psychosocial Assessment
- Case Summary/Treatment Plan
- Any other documentation provided that supports the member meeting service criteria

Definitions:

N/A

References:

Louisiana Department of Health, ~~Behavioral Health Services Provider Manual, Chapter Two the Medicaid Services Manual (1/12/2024); Accessed 10/23/2024. October 30, 2022 and January 27, 2023.~~

Version Control:

4/15/23: Policy ~~creation~~Creation-Approved by LDH for Readiness

5/15/23: Approved by LA UM Committee

9/28/23: Changed to new template for Annual Review Due by 5.15.24. K Wise, MCD Clinical Delivery Experience

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Non-Compliance:

Failure to comply with any part of Humana’s policies, procedures, and guidelines may result in disciplinary actions up to and including termination of employment, services, or relationship with Humana. In addition, state and/or federal agencies may take action in accordance with applicable laws, rules, and regulations.

Any unlawful act involving Humana systems or information may result in Humana turning over all evidence of unlawful activity to appropriate authorities. Information on handling sanctions related to noncompliance with this policy may be found in the Expectations for Performance, and Critical Offenses policies, both of which may be found in the Associate Support Center via Humana’s secure intranet on Hi! (Workday & Apps/Associate Support Center).