



Psychiatric Residential Treatment Facility (PRTF)

1. What is a Psychiatric Residential Treatment Facility (PRTF)?

A PRTF is a sub-acute level of psychiatric care for children in the state of Kansas. It is not a permanent or long-term placement, but a treatment facility. A PRTF is a treatment facility in a residential setting that will provide all psychiatric services needed by the child with family/guardian involvement. PRTFs are paid a daily rate for the services.

A PRTF, which is a Kansas Medicaid billable service for Kansas based PRTFs, is not the same as a Residential Treatment Center (RTC). Kansas does not have RTCs and RTC's are not reimbursable by Medicaid.

2. How can parents/guardians avoid using a PRTF?

If children start receiving psychiatric services earlier in the process from the local Community Mental Health Center (CMHC) or local provider, the need for PRTF for a child may not be necessary.

3. What if the child/youth is escalating and the parent/guardian is not getting the help they need?

The parent/guardian should check with the following resources for help:

- The local Community Mental Health Center (CMHC), case manager, therapist, social worker or administrator.
- [Mobile Crisis Helpline](#); available 24/7 - (833) 441-2240 School Counselor, School Social Worker or School Administrator
- [Families Together](#) (assisting families)
- The child/youth's Managed Care Organization (Aetna, Sunflower, United)
- [Keys for Networking](#); info@keys.org or (785) 233-8732
- [Disability Rights Center](#); (785) 273-9661 or toll free at (877) 776-1541
- KanCare Ombudsman Office, (855) 643-8180

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4. What are the Program Eligibility requirements for a child to be admitted?

All community-based services must be exhausted before looking at the use of PRTF, including Home and Community Based waiver services if appropriate (i.e. SED waiver, IDD waiver). The state must treat children in the least restrictive setting for meeting their needs. In all cases, the team of stakeholders, including the parent/guardian, will need to evaluate all treatment and/or services that are available and in the best interest of the child.

PRTF eligibility requirements:

- Guardian must request PRTF services for the child from the MCO; then the MCO has 14 calendar days to make a decision.
- The child's condition must meet the medical necessity definition. See in the [KMAP PRTF Provider Manual](#); 8400 on page 8-3 for the definition and criteria.
- The MCO can choose to evaluate the medical necessity using several options.
 - The MCO can request a preauthorization review (PAR) and/or Community Based Services Team review (CBST review). The provider has seven days from the date of MCO request to return the information to the MCO.
 - The MCO can request additional information from the local Community Mental Health Center (CMHC) or local providers.
- The MCO gathers all information and makes a determination as to whether a child/youth meets medical necessity for admission OR they can be appropriately diverted from PRTF admission. If diverted (to local services), they will give recommendation on suggested additional services. If diverted, the family has the right to appeal to the MCO.

Note: **Pre-Authorization Review** or **PAR** is like a screen; the MCO will review what is currently happening with child; is there a reason to be looking at a PRTF. PAR will make recommendations as to whether they meet criteria; but they do not make the decision.

Community Based Services Team review or **CBST** looks at all current services; child and family's involvement in services, barriers to services, and any possible services that can be added. CBST will make recommendations.

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- After a parent/guardian requests admission to a PRTF, the MCOs have 14 calendar days to make their determination. If a PRTF admission is requested, and the MCO denies that but decides to divert and approve another form of treatment, the family can appeal the denial of PRTF services.
- If approved, the child can be placed on the waitlist with the agreed upon PRTF(s). See number 11 below for additional information on wait lists.

Note: A child is considered “on a waitlist” once the parent/guardian chooses the PRTF(s) and signs a Release of Protected Health Information form for that PRTF. If the parent chooses more than one PRTF, then the “Release” must be signed and turned in to each PRTF that is chosen. The PRTF will then determine if child/youth will be accepted on the waitlist based on their ability to meet the needs of the child.

5. Appeals and State Fair Hearings for Admission

Q. How long does the family have to submit the appeal?

A. They have 63 calendar days from the date of the Notice of Adverse Benefit Determination (aka Notice of Action) to request an appeal.

Q. Does the MCO send a notice of action in the mail?

A. Yes. When the MCO decides to divert, they are denying the request for admission to the PRTF. The family/guardian can appeal the denial of admission to the PRTF.

- If appealed, the MCOs have 30 calendar days after receipt of the appeal to review their denial decision, decide to uphold it or reverse it, and issue an appeal resolution notice.

5. Age Clarification: ages 6-21years old (child must be under the age of 22)

Each PRTF is licensed to treat a certain population, based on age. Each PRTF sets the age range and population that they work with. Most PRTFs will not accept for admissions, a person age 18-21 without them being in the custody of a guardian.

6. What is the Kansas Medicaid criteria for the PRTF program?

- All Community Based Services with Community Mental Health Center have been exhausted.
- Once the family has requested a PRTF level of care there is an MCO approval process.

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- This is a Medicaid approved service.
- PRTF's are billed with a Medicaid code, so therefore are covered by Medicaid participants. Some third-party insurances have limited coverage.

Note: If the child is admitted with private insurance the MCO should also be involved from the beginning as they would become the primary payor if and when the third-party insurance stops paying. This is something that happens fairly regularly.

7. Is there a share of cost for a PRTF?

Generally, children do not have a share of cost. There are rare exceptions to this based on Medicaid eligibility regulations.

8. How do I request PRTF services?

Guardian or parent must request it through the child/youth's managed care organization (MCO.)

9. What are the PRTF Services?

PRTFs provide services including family therapy, individual therapy, psycho-social groups and other specialty therapies. PRTFs may serve specific population groups. (i.e. age and/or gender, serving children with IDD, sexual offender, autism).

10. What happens once the child/youth is approved for PRTF Services?

- The parent/guardian will work with the CMHC, the private therapist and MCO to determine the appropriate PRTF options for the child/youth.
- The parent/guardian must sign a release for each PRTF chosen for the referral to be submitted to a PRTF.
- The PRTF will review the referral and decide if they are able to meet the needs of the child/youth and family. If so, the child/youth will go on the waiting list.
- The MCO will notify the parent of acceptance or denial of PRTF referral.
- The child/youth should be given recommendations to start additional services if needed while waiting for PRTF admission.
- It is essential for the family and child to be involved in all recommended services.

11. Wait List Information

How does the waiting list work? The parent or guardian will choose the PRTF(s) to be wait listed for admissions. The more PRTFs chosen by the parent/guardian normally

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results in a decreased waitlist time. Parent or guardian should only choose PRTFs that they believe will be able to meet their child's need and are willing to accept admission to.

Each PRTF keeps its own waitlist. Admissions are decided based on several factors (age, sex, ability to serve the child's needs).

When parent/guardian is making the list of PRTFs they would like their child considered for admission to; the CMHC, local provider and/or the member's MCO can provide additional information about each PRTF to assist with the selection process.

Note: A child is considered "on a waitlist":

- Once medical necessity has been determined by the Managed Care Organization (Aetna, Sunflower, United)
- once the parent/guardian chooses the PRTF(s) and
- signs a Release of Protected Health Information form for each PRTF
- the MCO sends referral to selected PRTFs
- PRTF reviews and accepts the referral.

12. Is there a Crisis and Exception process for PRTF?

There is not a crisis exception. Crisis services are provided through local CMHCs and/or acute psychiatric hospitals.

If a parent/guardian believes that their child needs additional care, they should first contact the CMHC or local provider for additional services. See resources listed on number three (above), page one.

If the child is in need emergency psychiatric care, the parent/guardian should reach out to the CMHC, local provider or acute child psychiatric hospital. The MCO would be able to assist the parent/guardian in find resources for acute/crisis child psychiatric services.

- [Mobile Crisis Helpline](#): available 24/7 - (833) 441-2240

13. How does discharge planning work?

Discharge planning begins when the child/youth is admitted to the PRTF. The goal is to provide services that allow the child/youth to return home. The PRTF and MCO have weekly or bi-weekly meetings to discuss progress of the child/youth and activities that may need to be done to move the child/youth toward discharge. The child/youth,

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parent/guardian and family working together with the PRTF team are an essential part of the process.

14. Considerations for transition from the PRTF back to the school setting

Transitioning from the PRTF setting back to the school setting can be challenging and stressful for the student and school staff. It is vital that the student feel welcomed back into the school setting and that the supports of ongoing recovery are in place. Further, as a great number of students do not return to their home after leaving a PRTF, foster families should be included. Collaboration is recommended between the school, family, PRTF, and outpatient providers (for example: Community Mental Health Center (CMHC), therapist, Foster Care Agency, case managers, etc.). The following steps are best practice and should be considered for a smooth transition back to school:

- Effectively communicate and share necessary information.
- Document parental permission (release of information) for communication between the PRTF and school.
- Provide PRTF with academic records and schoolwork etc. to ensure continued learning and provide the school with academic progress that was obtained while at the PRTF.
- Review of current (or create new), if applicable, Individual Education Plan (IEP), for student.
- Ensure that a school staff member is identified to act as a contact person to facilitate the school re-entry process and liaison for community partners.
- Consider role of Community Mental Health Center in support of child/youth in school setting.
- Conduct a re-integration meeting with PRTF staff, foster family/family, CMHC and/or therapist, and school to create plan for the school setting.
- Arrange a tour and initial connection for student with a staff support person at the school (in the event of new school)
- Share effective strategies for student behaviors/needs.
- Consider partial day re-entry
- Meetings should utilize a mental health strengths-based approach
- Develop a crisis plan (may be part of IEP)
- Develop a plan for addressing long-term absence and missed work-allowing for flexibility in coursework upon return
- Organize daily check-ins with child (usually a school staff person; have a back-up for when main check-in person is out)

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- Provide regular feedback to entire transition team on adjustment back to school
- Provide family and peer-to-peer support (if available). May be through school for student, through CMHC, or public support groups.

All supports should be integrated within the classroom setting and school wide.

Resources

KSDE TASN ATBS School Mental Health Initiative (n.d.). [*Transitioning Students from Psychiatric Hospitalization Back to School.*](#)

15. Appeal process for discharge

Q. What if the PRTF does not agree with the MCO on the discharge plan/date for a resident?

A. The PRTF may disagree with the MCO, but a disagreement regarding medical necessity is not, by itself, an adverse action. If there is no adverse action, the PRTF has no basis for appeal.

The PRTF may request additional days. If the MCO denies additional days, then that is an adverse action that the PRTF may appeal. The PRTF may file an appeal with the MCO.

Note: An example of an adverse action with a case involving a PRTF regarding discharge: Denial of a request for additional days of PRTF services past the approved days.

Q. If the appeal is denied, can the PRTF file for a state fair hearing (SFH)?

A. Yes. If the PRTF completed the appeal process, the PRTF can ask for a SFH.

- **Note:** If there is no adverse action to appeal, the appeal will be processed, but simply completing the appeal step does not mean the PRTF will be successful in a state fair hearing. The PRTF can ask for a hearing, but it will be dismissed if there is no adverse action.
- Can the parent/guardian file for a SFH? The parents can ask for an appeal. Once the appeal process is completed, the parents can ask for a SFH. The same comments apply in the above bullet point for a PRTF apply to the parents.

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Q. How is the discharge date determined?

A. The MCOs work with the clinical staff at all medical facilities, including PRTFs, to determine what is medically necessary for the member, but the MCO's make the decision regarding approval or denial of days in the PRTF.

Q. If the youth is found to no longer meet Medical Necessity and discharge is recommended, and the parents do not agree, can the parents/guardians request additional days?

A. Yes. If the parent/guardian requests additional days and the MCO denies, that denial is the adverse action that the PRTF or the parents/guardian need for the appeal and for a state fair hearing.

Q. Can the parent/guardian appeal the medical necessity determination?

A. Yes, but only if the MCO determines that the requested services are not medically necessary. All requests will go through a review process for medical necessity. Some request for services are approved and some are denied based on medical necessity.

For example: If the parents request a PRTF admission, and the MCO determines that a certain number of days are medically necessary, that request was approved. Once the member has received that number of days of PRTF service, even if the parents want their child to remain in the PRTF for additional days, there is no adverse decision to appeal at the end of the approved/allowed days.

If the parent wants additional days over what has been approved as medically necessary, they will need to submit a request for additional days in the PRTF, at the review meeting. **If the parents request additional days that the MCO denies as not medically necessary, the parents can appeal that determination.**

Note: PRTFs are not a long term or permanent placement. They are based on the medically necessary treatment needs of the child for institutional care. PRTF's goal is treatment and to get the child back into the home and the least restrictive services

For more information on Medical Necessity: [KMAP PRTF Provider Manual](#)
(See 8400 on page 8-3.)

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- Q.** How do the parents submit a request for additional days? Does it need to be in written form and to whom is it sent?
- A.** The PRTF and the MCO will have regular review meetings and the parent will be included in these reviews. During the review, the parent or PRTF can request additional days of the MCO.

16. How long does the parent have to file an appeal? A State Fair Hearing?

Filing an Appeal

The parent/guardian has 63 calendar days to file an appeal after receiving a notice of Adverse Benefit Determination (aka Notice of Action). If a request for additional days in the PRTF is denied, the parent will receive a Notice of Adverse Benefit Determination. The parent should count forward 63 days from the date of the Notice. The parent needs to submit the appeal within 63 days to the address the MCO designates in the Notice of Adverse Benefit Determination. The parent can also call the MCO to file an appeal.

Note: The parent should pay close attention to what they receive because they will also receive a Notice when the MCO approves the days in the PRTF. They cannot appeal based on the approval notice because the MCOs have approved the request at that point.

Filing a state fair hearing (SFH) also known as hearing or fair hearing.

The parent/guardian has 123 calendar days to file a State Fair Hearing (SFH) after they receive a Notice of Appeal Resolution. The parent should count forward 123 calendar days from the date of the Notice of Appeal Resolution. Just completing the appeal process does not guarantee there is an adverse action that qualifies for a fair hearing.

- Q.** Does the child continue to receive PRTF services during an appeal or state fair hearing?
- A.** No. A denial of an authorization request for additional days in a PRTF does not qualify as the type of service that is eligible for continuation during the appeal or state fair hearing.

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17. Frequently Asked Questions

Q. What is the common lengths of stay at a PRTF?

A. The length of stay is based on continued medical necessity. Some stays may be less than a month. The average tends to be between two and four months.

Q. What is the parent/guardian role while the child/youth is in the PRTF?

A. The parent/guardian/family will be expected to participate in family therapy, visits to the PRTF, going on one day outings near the PRTF, one day – to several day home visits. This is all part of the process of the family and child/youth learning to work together again and practice new skills developed during PRTF stay and family visits. Feedback from family on how these visits go are vital to the ongoing treatment for the youth/child. Family visits and passes are expected to reflect normal family activities that will be experienced after discharge.

Q. Where can I find more resources?

A. There is a [provider manual](#) for Psychiatric Residential Treatment Facilities found on the KMAP website. Pages 8-3 to 8-6 include information about Medical Necessity, Admission Criteria, Prior Authorization, and Discharge Planning.

Family run (focused) organizations; Keys for Networking, Families Together and other local organizations. See also number three on page one of this document.

Local Community Mental Health Center and community providers

Q. When does the PRTF start discharge planning?

A. Discharge planning for the residents begins upon admission to the PRTF. This process should include the CMHC staff where the youth will be discharging to (if determined); the treatment team and other facility staff; school where the child/youth will be discharging to, and the resident and their legal guardian (when possible.) The CMHC and the parent/legal guardian should remain in contact with the facility treatment team to assist in any transition discharge planning. Discharge criteria will be established when writing the plan of care.

Prior to discharge, the PRTF shall submit documents related to the resident's care in their facility to any mental health provider who will be providing aftercare. The key components on these documents include:

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- Medical needs including allergies
- Medications: dosage, clinical rationale, prescriber (it is best practice to ensure the child is discharged with 30 days of medication to ensure continuity of care.)
- Discharge diagnosis
- Prevention plan to address symptoms of harm to self or others
- Any other essential recommendations
- Appointments with service providers after discharge including the date, time, and place
- Contact information for internal providers
- Contact information for CMHC/PRTF liaisons
- CMHC Crisis Line number
- PRTF education provider's contact number (for schools)

Resources used for this document:

1. [PRTF Admission Process for Medicaid Covered Beneficiaries 2017](#)
2. [KMAP PRTF Provider Manual](#)

Contacts for additional questions and support:

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Note: This document is not intended to be a manual that will answer all PRTF questions. It is meant to be a guide and to help parents/guardians and behavioral health professionals understand the PRTF process.

This fact sheet was developed in partnership with the KanCare Ombudsman Office, Kansas Department for Aging and Disability Services/Behavioral Health Services Commission, Kansas Department for Health and Environment/Health Care Finance, the PRTF Stakeholder group, and the three managed care organizations: Aetna, Sunflower and United.