IACCT Retro Special Considerations

This educational document is intended to assist providers and members in understanding some special processes involved when youth are referred to IACCT as retroactive (retro) eligibility cases. The two main categories of retro eligibility cases are:

1. Youth in foster care who are placed in residential according to the Emergency Placement by DSS in which they become Medicaid eligible.

2. Youth who are already in residential treatment under an alternative funding or commercial insurance and become Medicaid eligible while in placement.

Retro Eligibility Process

- In cases where a youth is already in residential and becomes Medicaid eligible, or was placed at the time of eligibility as an emergency placement, the facility will be required to notify Magellan immediately and no later than 5 business days of eligibility.

- As part of this notification, the residential facility will support the parent/legal guardian in submitting the IACCT Residential Inquiry Form to Magellan.

- After the IACCT Residential Inquiry is received, the IACCT Residential Care Manager (RCM) will contact the parent/legal guardian within 5 business days to provide education about community resources and the IACCT process. (See IACCT Guide, Section 2, for more details about this process)

- If the parent/guardian wishes to proceed with the IACCT process, the RCM will obtain the parent/guardian’s verbal consent and complete the residential referral form.

- The RCM will then submit the referral to the IACCT Licensed Mental Health Provider (LMHP) responsible for the member’s plan of care to assess needs and review for medical necessity back to the date of eligibility.

- The IACCT process is the same during this stage as is designated in steps 4-9 in the IACCT Guide. In cases where the residential facility or group home is far away from the child’s medical home, the IACCT LMHP may:
  - Use telemedicine to complete assessment
  - Meet with the parent/guardian face to face and speak to the child telephonically
  - Coordinate with the facility’s clinician to obtain clinical information and psychosocial assessment
• Coordinate with the IAACT where the facility is located to complete any needed assessments.

NOTE: All placements of children in custody of an Local Department of Social Services (LDSS) will be initiated by the LDSS as the legal guardian through established Virginia Department of Social Services) VDSS regulations and policies as well as local CSA policies governing “emergency” and “non-emergency” placements. As the legal guardian, LDSS will be expected to participate in the defined IACCT processes in addition to the current FAPT requirements. (Virginia's Office for Children Services, 2016, p. 1)

Clarification of Certificate Need (CON) Process

• When a youth has been placed in a residential facility, an initial CON has already been completed by the Residential Facility in order to secure the placement.

• Once this youth has been determined to be Medicaid eligible (per guidelines reviewed above), the Residential Facility will submit an IACCT inquiry to the Magellan RCM.

• When the RCM reviews the inquiry, they will assure that the parent/legal guardian is aware of the IACCT process and can ask any clarifying questions about this process.

• The IACCT process would then begin, with the Magellan RCM providing the contracted IACCT LMHP with the referral form and any information needed by the IACCT LMHP to complete an independent assessment of the residential need.

• If the IACCT process results in a determination that Medical Necessity is met for a residential placement, then residential services would be authorized through Magellan. If the IACCT process results in a determination that medical necessity is NOT met, then Magellan will send a non-authorization letter to the Residential Facility, the Legal Guardian, and the IACCT LMHP.

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1 LMHP includes LMHP-Resident (LMHP-R), LMHP-Resident in Psychology (LMHP-RP) and LMHP-Supervisee (LMHP-S)