

YSHCN in the DJJ System

Teleconference Notes from 12-16-10, 2 PM EST

Participating: DJJ Health Services - Dr. Lisa Johnson, Debra Morris, Jack Ahearn, Jean Becker-Powell; DJJ Education Services – Cindy Jones; DJJ Medicaid Liaison- Lytha Belrose; USF - Dr. Diane Straub, Janet Hess; UF – Dr. John Reiss; CMS – Susan Redmon; Project 10 - Rick Casey; SEDNET – Khush Jagus

The following items and action steps were discussed:

Family/Youth Educational Brochure

Rick Casey has been working with Cindy Jones and others to develop materials targeted to families of **youth with disabilities or special health care needs (YSHCN)** about what to expect if they come into contact with the DJJ system. The information will address questions or concerns families might have about how their child's special needs or functional limitations would be handled in the DJJ process (e.g., detention, residential placement, etc.). It was suggested that legal-related information include a note emphasizing that it is **not** legal advice. The materials should include information about medication management and health insurance (including Medicaid/CMS disenrollment and/or reenrollment); it would also be helpful to include DJJ policy concerning interaction with community providers (such as CMS Care Coordinators or other agency case managers) during residential placement. There is a FAQ section on the DJJ web site with some health-related questions (www.djj.state.fl.us/AboutDJJ/faq.html#Health) that could be included in the materials.

Follow-up Information: After the teleconference, Debra Morris forwarded the following information:

- 1. The Florida Network of Youth and Family Services was paid via grant funding from DJJ to create an educational tool to provide information for parents. Please go to www.floridanetwork.org/parents.php and read the portions that pertain to “the rights of parents” and the “parent handbook.” Either of these could be amended to include medical information.*
- 2. In 2008, the Florida Juvenile Justice Foundation contracted with the Network to develop a resource guide and a training program for librarians, parents and community members to understand what help is available for families and at-risk youth. That deliverable is attached here as a PDF document.*

ACTION STEPS:

Draft educational materials to be sent by Rick Casey to the group for review and suggestion edits/additions.

Janet Hess to post DJJ links and resources on FloridaHATS web site.

Interagency Agreement

Jack Ahearn mentioned there is an existing interagency agreement between DJJ, APD, AHCA, DCF, and DOH (see attached; effective until July 2011). Though others did not seem to be aware of the agreement, it could be helpful for future information-sharing between the agencies, including CMS as a division of DOH.

ACTION STEP: Group members to review the document and provide feedback they might have about its development or subsequent implementation.

Identification of YSHCN

It appears that DJJ relies on parents/caregivers or youth to self-identify their special health care needs during the intake process (i.e., probation officers do not have direct access to Medicaid files). Given the likelihood that CMS clients may not be identified, it was suggested that DJJ provide CMS with an electronic file of youth entering residential placement, to be cross referenced with the CMS patient file (DJJ currently provides a CD to DCF in order to identify DCF clients). CMS area offices could then be notified about clients in the DJJ system. While this would not impact youth in detention, the information could facilitate assistance from CMS Care Coordinators early in placement.

ACTION STEP: Susan Redmon to check with CMS administrators about using this procedure (or at least testing it). Jack Ahearn would be the DJJ contact to talk to a CMS database manager about technical requirements.

DJJ Information for CMS Nurses

CMS nurses should be directed to the DJJ web site FAQs to find information about health services guidelines for committed youth (www.djj.state.fl.us/AboutDJJ/faq.html#Health).

Follow-up Information: After the teleconference, Debra Morris forwarded this:

The following information is from a DCF Child In-Care Supervisor from Sarasota and is specific information about CMS being able to bill Medicaid for a child's care. They stated that CMS manages a child's entire medical treatment and their nurse can bill Medicaid as a provider. If a youth is enrolled in CMS, even if the youth is put in DJJ Medicaid (MCE) they will not be disenrolled from CMS. It is their understanding from ACHA that only CMS can have a child disenrolled from CMS. So it may be that when a youth goes into commitment and the CMS cannot bill for Medicaid (see this information online: www.doh.state.fl.us/AlternateSites/CMS-Kids/home/resources/es_policy_0710/Definitions.html), some of the CMS offices then start to have a budget impact that they cannot recoup.

ACTION STEP: Susan Redmon/John Reiss to communicate with CMS Care Coordinators about the FAQ section on the DJJ web site.

ACTION STEP: Janet Hess will send out notes from this meeting and coordinate a subsequent teleconference for the group in early 2011.

Attachments: Interagency Agreement, Resource Guide for At-Risk Youth