

CYBHWG Youth & Young Adult Continuum of Care (YYACC) subgroup

Tuesday, November 30, 2021
1:00 – 2:30 p.m.

Zoom link | Zoom | <https://zoom.us/j/92073016913>

Leads: Representative Lauren Davis, Representative Carolyn Eslick, Michelle Karnath (parent), and Lillian Williamson (young adult)

#	Agenda Items	Time	Lead
1.	Welcome & Community Agreement Please introduce yourselves in Chat!	1:00 – 1:05 pm	Lillian Williamson
Topic: Neuropsych evaluations			
2.	Introduction FYSVRT issue <i>Please read the attached FYSVRT challenge/ solution document in advance of the meeting.</i>	1:05 – 1:07	Michelle Karnath
3.	Overview	1:07 – 1:27	Dr. David Breiger (Seattle Children's)
4.	Network capacity/Medicaid reimbursements	1:27 – 1:50	Dr. Sasha Waring & Dr. Naudia Pickens (Molina Healthcare)
5.	Updates on recommendations	1:50 – 2:30	

Join Zoom Meeting

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FYSPRT: Challenge and Solution Submission Form

Date: 02-08-2021	
To: Statewide FYSPRT (i.e. Statewide, Executive Leadership Team)	
From: NE FYSPRT (i.e. Regional, Statewide. Also, please include contact name, email and phone number)	
Subject: Regional issue identified at November 2020, December 2020 and January 2021 NE FYSPRT meetings with high probability this is actually a Statewide issue	
Category (check all that apply): <input checked="" type="checkbox"/> Services and Supports (access and quality); <input type="checkbox"/> Child and Family Team Meeting (process); <input type="checkbox"/> Roles/Responsibilities (follow-through); <input type="checkbox"/> Legal Mandates; <input type="checkbox"/> Policies and Procedures (laws, rules); <input type="checkbox"/> Cultural & Linguistic Considerations; <input type="checkbox"/> Unknown; <input type="checkbox"/> Other:	

Description (including solution, best practice, success story, or challenge/barrier):

At the November 2020 meeting of the NE FYSPRT, a WISE clinician in the Spokane area made a query of the NE FYSPRT group regarding inadequate capacity and long wait times (up to 6 months reported by some clinicians at the meeting) for neuropsychological evaluations for complex children and youth. Issues noted by both parents and providers in attendance were local providers with the capacity to conduct the evaluations who refuse to accept the Medicaid reimbursement rate or who due to the low rate of Medicaid reimbursement, prohibit Medicaid enrollees to very few appointments each month.

In between the November and the December NE FYSPRT meeting, a clinical representative from a Managed Care Organization that serves the NE FYSPRT region needed help understanding why a Master's level Mental Health Professional (MHP) at an outpatient clinic would not be able to conduct a neuropsychological evaluation and the representative also needed help understanding the criteria that would prompt a MHP at an outpatient clinic to make this type of referral. This query may be indicative of a gap between funders' knowledge of the provider base needed for comprehensive children's behavioral health and best practices.

At the December 2020 meeting of the NE FYSPRT the issue of capacity and neuropsychological evaluations was placed on the agenda for further review and a parent shared that they "paid out of pocket" for their Medicaid enrolled child's neuropsychological exam due to frustration with the reluctance of their child's MCO to assist with finding a provider in the area that would take their MCO insurance. A WISE provider at this meeting shared that the wait for a youth they were serving was six months.

At the January meeting of the NE FYSPRT, it was noted that a local Medicaid funded outpatient behavioral health agency that is contracted with the MCO's for neuropsychological evaluations had reduced capacity due to the COVID pandemic. MCO's in attendance did not offer any information regarding providing additional providers to increase capacity for neuropsychological exams. The NE FYSPRT acknowledges there is a behavioral workforce shortage.

Solutions Tried: The members of the NE FYSPRT think this capacity issue is most likely an issue across Washington and that remediation would start with the Division of Behavioral Health & Recovery/HCA and the Managed Care Organizations.

Desired outcome(s):

The Healthcare Authority and the Managed Care Organizations work toward network adequacy along the full continuum of providers needed to meet the needs of children and families in publicly funded mental health. \