

Maine

Data as of July 2003

Mental Health and Substance Abuse Services in Medicaid and SCHIP in Maine

As of July 2003, 238,634 people were covered under Maine's Medicaid/SCHIP programs. There were 196,151 enrolled in the Medicaid program, 7,194 enrolled in the Medicaid SCHIP expansion program, and 4,701 enrolled in the separate SCHIP program. In addition, in the Medicaid expansion parents program, 14,300 were enrolled and the childless adult waiver program enrolled 15,538. In state fiscal year 2002, Maine spent about \$1.3 billion to provide Medicaid services.

Approved and implemented in 2002, Maine obtained a HIFA waiver from the federal government to expand Medicaid eligibility to cover all parents of Medicaid and SCHIP-eligible children and all childless adults with incomes of 125% FPL or less. As of July 2003 the State had implemented the expansion to cover all individuals with incomes of no more than 100% FPL.

In Maine children are served by Medicaid, an SCHIP Medicaid expansion program, or a separate SCHIP program depending on the child's age and the family's income.

- The Medicaid program serves infants in families with incomes of no more than 185% FPL, children ages 1-5 in families with incomes of no more than 133% FPL, and ages 6-18 in families with incomes of no more than 125% FPL.
- The SCHIP Medicaid expansion program serves children from families with incomes of no more than 150% FPL who do not otherwise qualify for Medicaid.
- The Separate SCHIP program serves uninsured children through age 18 from families with incomes of no more than 200% FPL who do not qualify for Medicaid or the Medicaid SCHIP expansion. Families with children in this program must pay a monthly premium between \$5 and \$40 based on family size and income.

Maine requires low-income families and children who participate in the state's Medicaid or SCHIP programs to enroll into a Primary Care Case Management (PCCM) program. Mental health and substance abuse services are not within the PCCM providers' scope of authority—those services are delivered through the unmanaged fee-for-service system. As of July 2003, about 134,188 Medicaid and SCHIP participants were enrolled in the PCCM program.

Medicaid

Who is Eligible for Medicaid?

Families and Children

1. Parents of Medicaid and SCHIP-eligible children with incomes of 100% FPL or less
2. Pregnant women and infants with family income of 185% FPL or less.
3. Children from ages 1 through 5 from families with incomes of 133% FPL or less.
4. Children from 6-19 from families with incomes of 125% FPL or less.
5. Recipients of adoption assistance and foster care under Title IV-E of the Social Security Act

Aged, Blind, and Disabled

1. Individuals receiving SSI and people receiving the state SSI supplementary payment.

Maine

Data as of July 2003

2. All working individuals between the ages of 16 and 64 who meet the SSI definition of disability and have an income of 250% FPL or less. Those with incomes between 150 and 250% FPL must pay a premium of \$10 or \$20 per month. The amount varies based on income.
3. Persons who are residents of medical institutions for a period of 30 consecutive days and meet specific income, resource, and medical criteria.
4. Certain disabled children (18 or under) living at home, who would be eligible for Medicaid if in a medical institution.
5. Adults over age 65 and those who meet the state's definition of disability with incomes no greater than 100% FPL and whose resources do not exceed those allowable under SSI.

Medically Needy

Members of the following groups may qualify for Medicaid coverage as Medically Needy if they have sufficient medical expenses.

1. Pregnant women (who except for income/resources would be eligible), and newborn children
2. Children under age 18
3. Aged, Blind, and Disabled
4. Caretaker relatives

Waiver Populations

Maine has several 1115 waivers, including one that enables them to cover all individuals with incomes of no more than 125% FPL who do not otherwise qualify for Medicaid. As of July 2003 the State had implemented the expansion to cover all individuals up to 100% FPL.

What Mental Health/Substance Abuse Services are Covered by Medicaid?

Medicaid must cover some types of services (mandatory services) and may cover some other types of services (optional services). The information presented here identifies the types of service Maine Medicaid covers and the coverage requirements for those services. These services are presented grouped as they are in the Medicaid State plan that Maine must maintain under Medicaid law. Only those types of services that include mental health or substance abuse services are discussed.

Mandatory State Plan Services

Inpatient Hospital		
Service	Description	Coverage Requirements
Inpatient hospital	<ul style="list-style-type: none"> • Services, including mental health and substance abuse services, ordinarily furnished in a hospital under the direction of a physician or dentist. • The institution must be maintained primarily for the care and treatment of patients with disorders other than tuberculosis or mental diseases 	<ul style="list-style-type: none"> • Prior authorization is required for extension of hospital benefits beyond 60 days. • All non-emergency admissions must be prior authorized by the Medicaid agency or its designated agent.

Outpatient Hospital Including Rural Health Center and Federally Qualified Health Center Services		
Service	Description	Coverage Requirements
Outpatient	Mental health and substance abuse services provided in an outpatient hospital setting	Mental health and substance abuse services provided by an outpatient hospital clinic must meet the same requirements as those provided in another setting.

Maine

Data as of July 2003

Outpatient Hospital Including Rural Health Center and Federally Qualified Health Center Services		
Service	Description	Coverage Requirements
Federally Qualified Health Centers (FQHCs) and Rural Health Centers (RHCs)	Mental health and substance abuse services provided by an FQHC or RHC	Mental health and substance abuse services provided by an FQHC or RHC must meet the same requirements as those provided in another setting.

Physician Services		
Service	Description	Coverage Requirements
Physician Services	<ul style="list-style-type: none"> • Medicaid-covered mental health and substance abuse services provided by a physician acting within the scope of licensure. • Services that psychiatrists may provide include: <ul style="list-style-type: none"> - Psychiatric Evaluation and Diagnosis - Individual, group, and family psychotherapy - Electro-shock - Hospital care - Psychometric testing 	<ul style="list-style-type: none"> • Substance abuse and mental health services provided by a physician must <ul style="list-style-type: none"> - be within the providing physician's scope of practice - must meet the same coverage requirements as those provided by other providers. • Only Board-certified psychiatrists may provide the psychiatric services defined here.

Early Periodic Screening, Diagnosis, and Treatment (EPSDT) Screening for Children Under 21		
Service	Description	Coverage Requirements
Early Periodic Screening, Diagnosis, and Treatment (EPSDT) Mental Health Services	<ul style="list-style-type: none"> • Maine specifies specific services that are covered for only for children in the categories that define adult services. • Standard Medicaid service limits do not apply when the service is needed to treat or ameliorate a condition identified in an EPSDT screen • A service that could be covered under federal Medicaid law but which Maine has chosen not to cover will be covered if needed to treat or ameliorate a condition identified in an EPSDT screen. 	<ul style="list-style-type: none"> • Service must be needed to ameliorate or treat a condition identified in an EPSDT screen • Beneficiary must be under age 21. • All services that would not normally be covered under Medicaid must be prior authorized by the Medicaid agency or its designated agent.

Maine

Data as of July 2003

Optional State Plan Services

Other Licensed Practitioners		
Service	Description	Coverage Requirements
Psychologists	<p>Services provided by a licensed psychologist, including:</p> <ul style="list-style-type: none"> • evaluation • individual or group psychotherapy, • psychometric testing and • collateral contacts 	<ul style="list-style-type: none"> • Individual psychotherapy is limited to 2 hours per week. • Emergency treatment is limited to 8 visits per emergency. • Psychometric testing is limited to a total of four hours except for <ul style="list-style-type: none"> - Halstead-Reitan Battery (seven hours) - Intellectual Level (two hours) and - self administered tests (thirty minutes) • Beneficiaries may receive no more than ninety minutes per week of group therapy, unless the person is a patient in an inpatient psychiatric facility or in a group for trauma treatment.
Psychological examiners	<p>psychometric testing and intervention services, as follows:</p> <ul style="list-style-type: none"> • consultation, • behavior management and • social skills training 	<ul style="list-style-type: none"> • Psychometric testing is limited to a total of four hours except for <ul style="list-style-type: none"> - Halstead-Reitan Battery (seven hours) - Intellectual Level (two hours) and - self administered tests (thirty minutes)
Licensed Clinical Social Workers and Licensed Clinical Professional Counselors	<p>Evaluation, diagnostic and treatment services within scope of license, including:</p> <ul style="list-style-type: none"> • counseling • collateral contacts • evaluations 	<ul style="list-style-type: none"> • All services must be prior authorized by the Medicaid agency • Services covered for children up to age 21

Clinic Services		
Service	Description	Coverage Requirements
Mental health agencies, substance abuse treatment facilities, and methadone clinics.	<p>Clinics may provide substance abuse and mental health services including, diagnosis, assessment, counseling and therapy, medication management, therapeutic services, methadone maintenance, and intensive outpatient treatment for substance abuse.</p>	<ul style="list-style-type: none"> • Beneficiaries may receive no more than five non-emergency therapy services in any consecutive seven-day period. • Beneficiaries may receive up to eight therapy visits per emergency, • Opiate treatment with methadone maintenance is covered. • Intensive Outpatient Services for Substance Abuse treatment are limited to a maximum of twelve consecutive calendar weeks, five days per week and four hours per day up to twenty hours per week.

Maine

Data as of July 2003

Inpatient Psychiatric Services (for persons under the age of 21)		
Service	Description	Coverage Requirements
Inpatient Psychiatric Services (for persons under the age of 21)	Services provided by a licensed psychiatric facility, including partial hospitalization	<ul style="list-style-type: none"> • To qualify for services the beneficiary must <ul style="list-style-type: none"> - Be under age 21 - Have needs that cannot be met in a less restrictive setting • All non-emergency admissions must be prior authorized by the Medicaid agency or its designated agent. • Stays longer than 120 days must receive additional prior authorization based on a psychiatric evaluation. • Services may only be provided as part of a written plan of care.

Rehabilitative Services		
Service	Description	Coverage Requirements
Private non-medical institutions for substance abuse treatment, mental health services, child-care services and services for people with mental retardation	Covered services include only detoxification, rehabilitation, extended care, extended shelter, halfway house, mental health and child-care services.	<ul style="list-style-type: none"> • Services must be recommended by a physician or other licensed practitioner of the healing arts. • Services may only be provided as part of a written plan of care
Mental Health Services	Rehabilitation and community support services, including <ul style="list-style-type: none"> • For adults and children: <ul style="list-style-type: none"> - Emergency services - Outpatient services, including individual and family counseling services - Crisis intervention/ resolution and support - Family Psycho-education Treatment Program • For children-only <ul style="list-style-type: none"> - Home-based mental health services (Crisis-oriented services for those at-risk of removal) - Day treatment - Infant mental health - Family and community support services - Assertive Community Treatment (ACT) 	<ul style="list-style-type: none"> • Services may only be provided as part of a written plan of care • To qualify for services <ul style="list-style-type: none"> - children must be diagnosed with severe emotional or behavioral disturbance - Adults must be diagnosed with a major mental illness and symptoms of severe functional impairment • Services may only be provided by staff of licensed or approved mental health facilities • Beneficiaries must be under age 21 to receive the following services <ul style="list-style-type: none"> - Home-based mental health service - Day treatment
Substance Abuse Treatment Services	Evaluation and clinical services needed to treat substance abuse, including <ul style="list-style-type: none"> • Intensive Outpatient Services • Outpatient Services, other than hospital outpatient and hospital intensive outpatient services 	<ul style="list-style-type: none"> • Services must be <ul style="list-style-type: none"> - provided under the direction of a physician or psychologist - provided as part of an active treatment plan - Delivered by qualified staff of an outpatient and/or on-residential facility certified as such by the Office of Alcoholism and Drug

Maine

Data as of July 2003

Rehabilitative Services		
Service	Description	Coverage Requirements
	<ul style="list-style-type: none"> • Methadone Maintenance Services • Evaluation • individual, group and/or family counseling 	<ul style="list-style-type: none"> • Abuse Prevention for the rehabilitation of substance abuse. • Beneficiaries may receive no more than the following amounts of service without the prior authorization of the Medicaid agency <ul style="list-style-type: none"> - 12 consecutive calendar weeks of Intensive Outpatient Services - 30 consecutive calendar weeks of outpatient services
School-Based Rehabilitative Services	<p>School-Based Rehabilitative Services include</p> <ul style="list-style-type: none"> • Individual, group, and activities therapies, • therapeutic treatment oriented toward <ul style="list-style-type: none"> - minimizing the effect of a child's disabling conditions(s) and/or - to enhance or restore a child's physical or mental ability. 	<ul style="list-style-type: none"> • Services must be referred by a Pupil Evaluation Team and <ul style="list-style-type: none"> - included in an Individual Education Plan or - an integral part of a program included in an Individual Education Plan or - an evaluation necessary to determine the need for or scope an Individual Education Plan. -
Residential Services	Residential services necessary to treat mental health and substance abuse.	<ul style="list-style-type: none"> • Beneficiaries may receive medical or remedial services when determined to be necessary by a physician or other licensed practitioner of the healing arts.
Community Integration Services	<p>involve the identification, assessment, planning, linking, monitoring, and evaluation of services and supports, specific covered services include:</p> <ul style="list-style-type: none"> • Intensive Community Integration Services • Intensive Case Management • Assertive Community Treatment (ACT) • Daily Living Support Services • Skills Development Services • Day Supports Services (day treatment) • Specialized Group Services (group education, peer, and family support) 	<ul style="list-style-type: none"> • To qualify for services, a beneficiary must <ul style="list-style-type: none"> - have functional limitations and - a state-specified diagnosis, including specific mental health, mental retardation, and substance abuse diagnosis. • Services may only be provided as part of a written support plan that is reviewed at least every 90 days. • The following services may not continue for more than 1 year without the prior authorization of the Department of Behavioral and Developmental Services: <ul style="list-style-type: none"> - Daily living support - Skills Development • ACT services may only be provided after prior authorization from the Bureau of Behavioral and Developmental Services

Maine

Data as of July 2003

Targeted Case Management		
Service	Description	Coverage Requirements
Targeted Case Management (TCM) for Individuals with Psychoactive Substance Abuse Dependence	Services to identify the medical, social, educational and other needs of the eligible member, identify the services necessary to meet those needs, and facilitate access to those services, including <ul style="list-style-type: none"> • intake and assessment, • plan of care development, • service coordination and advocacy, • monitoring of the client and • evaluation of the appropriateness of the plan of care. 	To receive TCM services the beneficiary must : <ul style="list-style-type: none"> • be diagnosed as having psychoactive substance-abuse dependence; or • be receiving <ul style="list-style-type: none"> - active substance-abuse treatment or - individual/group follow-up or - after-care services
Targeted Case Management (TCM) for Children who are exhibiting high risk behavior	Services to identify the medical, social, educational and other needs of the eligible member, identify the services necessary to meet those needs, and facilitate access to those services, including <ul style="list-style-type: none"> • intake and assessment, • plan of care development, • service coordination and advocacy, • monitoring of the client and • evaluation of the appropriateness of the plan of care. 	To receive TCM services the beneficiary must be: <ul style="list-style-type: none"> • 5 - 21 years of age • enrolled in a school administrative district or a private school approved for the provision of special education and supportive services in Maine • exhibiting high risk behaviors that may result in social, emotional or academic failure
TCM for children with emotional or behavioral impairments	Services to identify the medical, social, educational and other needs of the eligible member, identify the services necessary to meet those needs, and facilitate access to those services, including <ul style="list-style-type: none"> • intake and assessment, • plan of care development, • service coordination and advocacy, • monitoring of the client and • evaluation of the appropriateness of the plan of care. 	To receive TCM services the beneficiary must: <ul style="list-style-type: none"> • be under 21 years of age, • have been diagnosed as <ul style="list-style-type: none"> - having an emotional disturbance, - at risk of a mental impairment, - emotional or behavioral disorder or - have been determined to have a functional impairment

SCHIP Medicaid Expansion Program

Who is Eligible for the SCHIP Medicaid Expansion Program?

Maine's SCHIP Medicaid expansion program serves all children from families that earn 150% FPL or less but who do not otherwise qualify for Medicaid.

- Children aged 1 through 5 from families with incomes between 133% and 150% FPL; and
- Children aged 6 through 18 from families with incomes between 125% and 150% FPL.

Maine

Data as of July 2003

What Mental Health/Substance Abuse Services are Covered by the SCHIP Medicaid Expansion Program?

Mental health and substance abuse coverage in the Medicaid expansion SCHIP program is identical to that of the Medicaid program (described in the previous section).

Separate SCHIP Program

Who is Eligible for the Separate SCHIP Program?

The separate SCHIP program expands the eligibility of two groups of children:

- Uninsured infants from families with incomes between 185% and 200% FPL; and
- Uninsured children aged 1 through 18 in families with incomes between 150% and 200% FPL.

Families with incomes between 150% and 200% FPL must pay a monthly premium that ranges between \$5 and \$40 depending on family size and income.

What Mental Health/Substance Abuse Services are Covered by the Separate SCHIP Program?

Benefits in Separate SCHIP programs must be actuarially equivalent to a benchmark selected by the State, among federally established options. The Maine program offers the Medicaid package of benefits, which was previously described.