Child Welfare Placements in In-State

Psychiatric Residential Treatment Facilities (PRTFs)

Fact Sheet Updated Jan 2022

# Q1: What is a PRTF?

A: A PRTF is any non-hospital facility with a provider agreement with a State Medicaid Agency to provide the inpatient services benefit to Medicaid-eligible individuals under the age of 21 (psych under 21 benefit). Services must be provided under the direction of a physician and by an interdisciplinary team as detailed on a care plan. The facility is licensed by CDPHE and must be accredited by the Joint Commission on Accreditation of Healthcare Organizations (JCAHO) or any other accrediting organization with comparable standards recognized by the State. PRTFs must comply with standards for restraint and seclusion (CFR §483 Subpart G) as well as meet the requirements in CFR §441.151 through 441.182. [See also 10 CCR 2505-10 8.765].

# Q2: How is a PRTF different from a “sub-acute hospital” program?

A: A sub-acute hospital program is generally referring to a facility treating medical conditions at the level of care above a nursing facility and under hospitalization.  This term is not helpful in the context of behavioral health programs/facilities since a PRTF does not treat medical conditions, is not a medical facility, and does not have the full array of medical services that sub-acute facilities provide.

# Q3: How is a PRTF different from a Qualified Residential Treatment Program (QRTP)?

A: A PRTF is a higher level of care than a QRTP and operates from primarily a medical approach for higher acuity mental health conditions that may require stabilization efforts, medication management, and care for physical risk factors (i.e. self-harm, aggression, etc.).  A QRTP has primarily a behavioral health treatment approach with a behavioral health clinical treatment team.  QRTPs are required to have access to 24-hour nursing and a trauma-informed program.

# Q4: Is there a different process for placing a youth in a PRTF when discharging from a hospital versus coming from the community?

A: A referral for placement in a PRTF is needed regardless of where a youth is moving from. The entity who makes the referral may be different, but there are no different requirements for authorization or payment, except when the decision is related to 27-65 services (see Q8).

# Q5: Can county Child Welfare agencies directly place into a PRTF?

A: Yes. There are no restrictions on Referral Agencies who can place youth in PRTFs.

# Q6: Do counties need approval or pre-authorization from the RAE to place a youth in an in-state PRTF?

A: No. County Departments and Division of Youth Services (DYS) can place youth in their custody in PRTF level of care. The Colorado Client Assessment Record (CCAR) is the document used to indicate that the youth meets medical necessity for payment in PRTF. This tool is completed by the independent team from the facility where the youth is placed, which includes a physician/ psychiatrist, and which must certify a client’s need for PRTF level of care.

# Q7: Is there a specific CCAR rating required for admission?

A: No, a specific CCAR score is not defined. However, admissions must meet the following 5 criteria:

* Be between the ages of three and twenty-one.
* Be certified to need PRTF level of care by an Independent Team.
* Be certified to have a diagnosis of a psychiatric disorder classified as a Diagnostic Statistical Manual (DSM) diagnosis that is the primary reason for placement.
* Be certified to have a DSM Axis 5 GAF score of 40 or less.
* Be assessed using a current valid Colorado Client Assessment Record (CCAR) that supports medical necessity.

\**HCPF is intending to update this section in Rule effective July 1, 2022.*

# Q8: What happens when a youth is placed on an M1 Hold under CRS 27-65-101?

A: The county does not have decision-making once the hold is placed. The avenue by which the individual enters the hold (ED, ambulance, police, mobile crisis) determines where the person is taken for evaluation for up-to 72-hours. If the evaluation determines further treatment under 27-65 is necessary, then the RAE must secure and fund medically necessary treatment covered under the scope of the RAE contract.

# Q9: What is the scope of a RAEs responsibility regarding PRTF services for children in county custody?

A: The RAEs are not financially responsible for covering residential treatment services for children and youth in the custody of the Colorado Department of Human Services—Division of Child Welfare (DCW) or the Division of Youth Services (DYS) who are placed by those agencies into a PRTF (as defined in C.R.S. 25.5-4-103).

# Q10: When does a RAE need to submit a denial letter for PRTF services?

A: The RAE is expected to add a denial letter to the EPSDT packet prior to submission to the EPSDT Program Administrator for out of state (OOS) PRTF services. This letter is submitted with claims by the OOS provider and enables the facility to be reimbursed.

# Q11: How does funding work for PRTF placements?

Counties who place a child or youth in their custody into a PRTF enter the placement in TRAILS with a $0 cost. There is no charge to the counties.\* The PRTF bills HCPF directly for these services. These services are not billed to the RAE. HCPF pays the total cost of care (a per diem that includes room and board) using both general fund dollars (GF) and federal fund/match dollars (FF).

Additional guidance:

* **Funding ($13.7M in FY 2022-23) for Medicaid services (PRTF placements) is included in the Block allocation to counties and goes through the county block allocation in CFMS**. Services are entered in Trails as a "no pay" to counties. CDHS Program Accounting makes an entry of the expenditure in CFMS from a Medicaid Claims data report the State Research Analysis and Data Team receives from HCPF. The total expenditure (State GF and Medicaid) is charged to the Block. Counties are not charged a 20% share of the cost.
* As of November 2022, counties have typically underspent this funding and the unspent State GF has been used in close-out to make the counties whole. If counties spend the entire $13M Medicaid funding that was allocated in the Block to counties, counties will continue to bill Medicaid for the expenditures and counties will not be charged any of it against the Block. Counties will not have to cover overexpenditures.

*\*Please note, CWAC voted to end imputing a 20% county share for Medicaid eligible services effective July 1, 2021.*

# Q12: Does a PRTF receive funds to cover educational costs?

A: Yes. A PRTF that operates an approved facility school is eligible for both Tuition costs and PPR for each student that is “publicly placed” (counties are public placing entities). PPR is billed by the facility school to CDE, which then pays the facility monthly. The district where the parents reside is responsible for the tuition costs unless parental rights have been terminated. In this case the responsibility falls to the district where the facility itself is located. View the complete Out of District Manual

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