



Ties That Bind

Strengthening Families Regardless of Payer


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Who is Casa Pacifica?

- ▶ Serving youth and families in Ventura and Santa Barbara Counties
 - ▶ Campus-based
 - ▶ Community-based
 - ▶ Campus located in Camarillo, California
 - ▶ We help kids and families overcome some of life's most difficult circumstances, including complex trauma, emotional and behavioral issues, family crises
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Casa Pacifica Programs offer a Continuum of Care

Public

- ▶ Short-Term Residential Therapeutic Programs (STRTP)
- ▶ Therapeutic Behavioral Services (TBS)
- ▶ Wraparound Services (WRAP)
- ▶ Safe Alternatives for Treating Youth (SAFTY)
- ▶ Transitional Youth Services
- ▶ Parent Child Interaction Therapy
- ▶ Non-public School
- ▶ Foster Family Agency
- ▶ Intensive Services Foster Care
- ▶ School-Based Services

Private

- ▶ Short-Term Adolescent Residential Treatment
- ▶ Partial Hospitalization Program (PHP)
- ▶ Intensive Outpatient Program (IOP)
- ▶ Intensive In-Home Behavioral Health Services (IIHBHS)
 - ▶ Tier 1 – TBS-like
 - ▶ Tier 2 – WRAP-like
 - ▶ Mobile Crisis Response



Lives We Touch

- ▶ 15% clients served on campus
- ▶ 78% of the children we serve are in a home environment
- ▶ Casa Pacifica serves over 600 youth per day
- ▶ Each month, 100 youth served by our 24/7 mobile crisis response team

*2018 calendar year



Focus of Services

- Family-centered
- Youth-guided
- Strengths-based
- Culturally competent
- Individualized
- Evidence-based
- Supporting youth exploring SOGIE



Admission and Referral Process

- Internal Referrals
- Community/Provider Referrals
 - Private clinician/psychiatrist
 - Parents
 - Pediatrician/Primary Care Physician
 - Inpatient hospital
 - Insurance providers
- Authorizations
- Co-pays, Deductibles, Co-Insurance
- Assessments
- Protocols
- Speaking the language
- Knowing your “customer”
- Available and appropriate resources

Camino a Casa

- ▶ Program started in 2015, formerly known as START
- ▶ Serving private pay or commercially insured youth/families
- ▶ 235 youth served in 2018-2019
 - ▶ 95 male/ 131 female/ 9 transgender
- ▶ Three levels of care
 - ▶ RTC
 - ▶ PHP
 - ▶ IOP



CAMINO A CASA
BY
CASA PACIFICA



Camino a Casa – RTC (Residential Treatment Center)

- ▶ Short-term adolescent residential treatment – 24/7 care
 - ▶ At least 2 individual therapy sessions per week, at least 1 family session per week, academics, and full participation in all therapeutic groups
- ▶ Highest level of intensity both in terms of client/family as well as case management with insurance plan
 - ▶ Assessment
 - ▶ Utilization Reviews
 - ▶ Collaboration
 - ▶ Planned and unplanned discharges



Camino a Casa – PHP (Partial Hospitalization Program)

- ▶ Day treatment (6 hours/day; 5 days/week)
 - ▶ At least 2 individual therapy sessions per week, at least 1 family session per week, academics, and full participation in all therapeutic groups M-F.
- ▶ Decreased level of intensity
- ▶ Supportive services often needed to achieve successful outcome



Camino a Casa – IOP (Intensive Out Patient)

- ▶ Day treatment (3-5 hours/day; 3 days/week)
 - ▶ At least 1 individual therapy session per week, family sessions as needed, and participation in therapeutic groups 3 afternoons per week.
- ▶ Decreased level of intensity
- ▶ Supportive services often needed to achieve successful outcome



Camino a Casa

Step-down/Step-up

- ▶ 3 levels allow the ability to gradually step-down services, as appropriate
- ▶ Can step-up as deemed appropriate
- ▶ IOP and PHP can also serve as step-up interventions from traditional outpatient mental health services



Camino a Casa Results

- ▶ Average length of stay?
 - ▶ Residential – 40 days
 - ▶ Partial Hospitalization Program – 29 days
 - ▶ Intensive Outpatient Program – 34 days



Camino a Casa Story



Jess





Intensive In-Home Behavioral Health Services (II-HBHS)

- ▶ Since February 2017
 - ▶ 67 youth served in both counties
 - ▶ 37 Female / 30 Male
- ▶ TBS - like
 - ▶ Ventura (18 youth) Santa Barbara (6 youth)
- ▶ Wraparound - like
 - ▶ Ventura (16 youth) Santa Barbara (2 youth)
- ▶ Safe Alternatives for Treating Youth (SAFTY) – Mobile crisis team
 - ▶ Assessment and in person crisis response
 - ▶ Referral gateway in Santa Barbara and Santa Maria area (25 youth)



Incorporating into existing TBS program

- ▶ Behavioral support to youth and caregivers in their homes to decrease aggression and self-harming behaviors so that a youth and their caregiver can continue to live with one another
- ▶ Ages 0-21
- ▶ Full Scope Medi-Cal (90%), Private insurance (10%)
- ▶ Adjunct service to Therapy (Specialty Mental Health Services)
- ▶ High-risk clients who have been psychiatrically hospitalized
- ▶ Foster youth in transition between placements



Incorporating into existing Wraparound program

- ▶ A way to improve the lives of youth and families who have complex needs. It is not a program or a set type of services, but rather, a needs driven process which is family centered, builds on strengths, uses both informal supports and formal supports, utilizes community resources that are appropriate and culturally relevant and always includes a plan for step-down and transition from formal services.
- ▶ Ages 0-21
- ▶ Full Scope Medi-Cal (90%), Private insurance (10%)
- ▶ Private youth hospitalized and stepping down from IOP and PHP
 - ▶ Multiple hospitalizations prior to referral



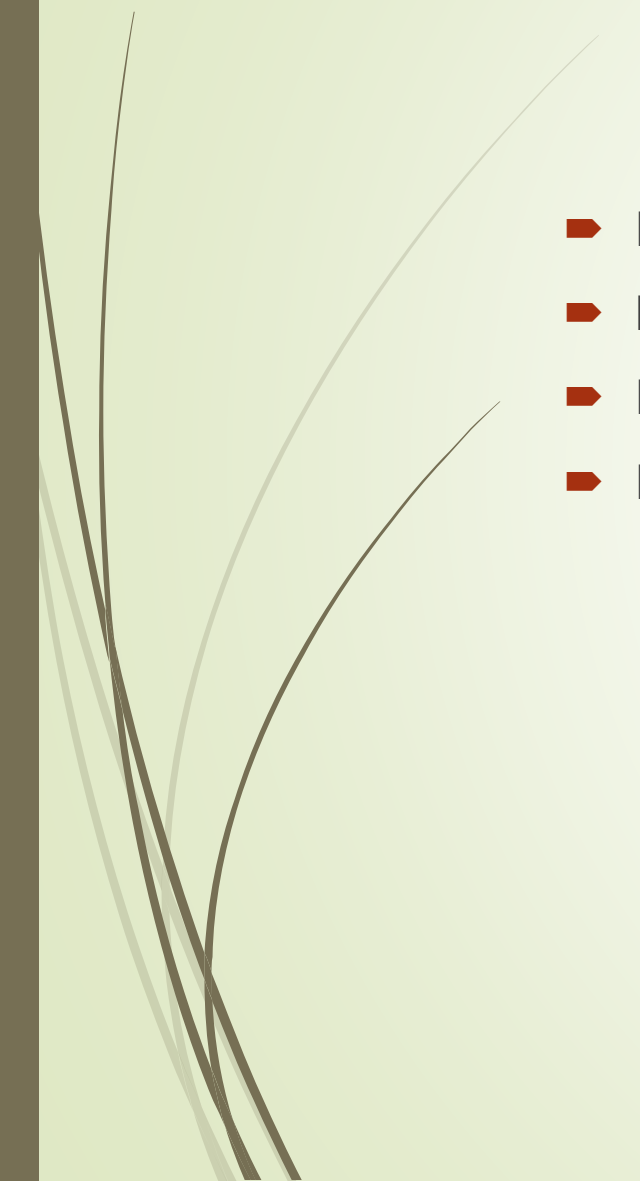
Rapport



- Initial Phone calls with caregivers (Admissions line and with Program Managers)
- Assessment (Licensed Clinical Supervisors in CBS)
- Family teaming
 - Clinician
 - Parents
 - Child
 - Community Resources

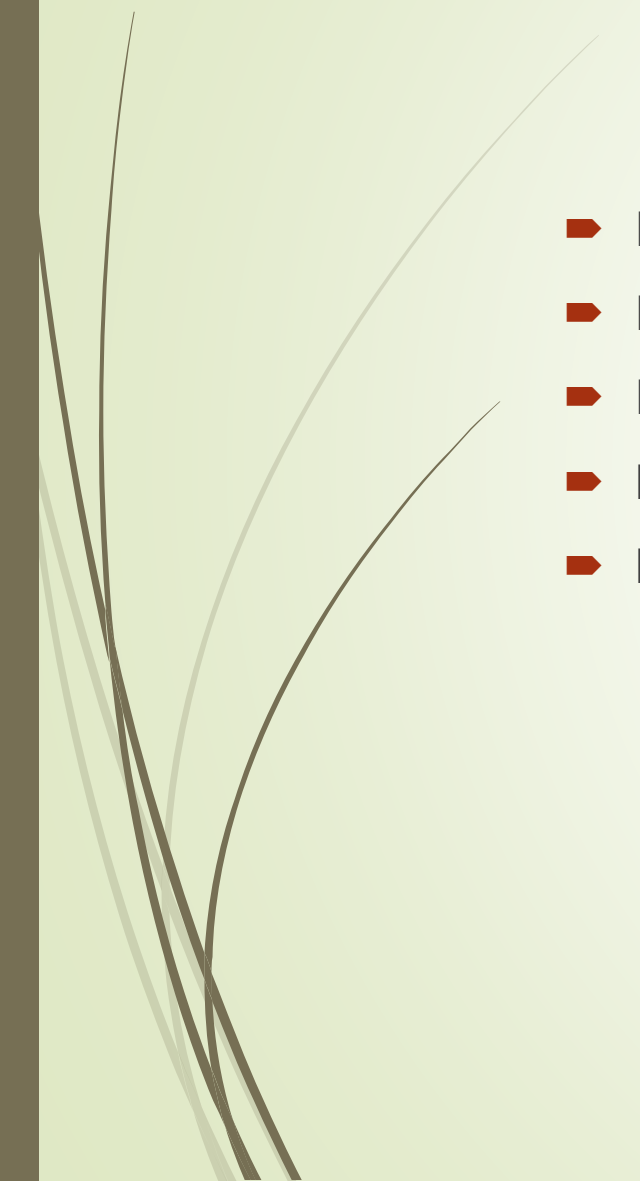


Relationships

- ▶ Private Clinicians
 - ▶ Insurance Providers
 - ▶ Families who refer friends and co-workers
 - ▶ Local PHP and IOP treatment centers (step down to TBS and Wraparound)
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Preliminary TBS Results

- Keep youth with their families
 - Decrease hospitalizations
 - Decrease aggressive behaviors
 - Increase school attendance
 - Increase community resource use
- 



Preliminary TBS Results

- ▶ 18 youth served since February 2017 (2017: 6 youth / 2018: 9 youth / 2019: 3 youth)
- ▶ Median length of stay – 147 days
- ▶ 11 out of 12 discharges stayed with their family
- ▶ Race/Ethnicity – 65% White / 17% Hispanic/Latino / 12% Black/African American / 6% Asian
- ▶ Hours of service provided
 - ▶ **384** hours in 2017 / **1000** hours in 2018 / **250** hours Jan-Mar 2019



Preliminary Wraparound Results

- ▶ Average length of stay - 5 months
- ▶ 6 month follow-up data (N=4)
 - ▶ One youth had any incidence with law enforcement
 - ▶ None of the youth were psychiatrically hospitalized since discharge
 - ▶ All 4 youth were still at home with birth parents



Next Steps

- ▶ Advocate for your families
- ▶ Statewide shift with our collective input – families are entitled to receive medically necessary mental health services
- ▶ Link Insurance plan data with ours to confirm our hypothesis
 - ▶ Decrease in cost and decrease in psychiatric hospitalizations



Filing a Complaint

- ▶ California Department of Managed Health Care (DMHC) – How to file a complaint first with your plan, then with the DMHC: <http://www.dmhc.ca.gov/FileaComplaint.aspx>.
- ▶ DMHC complaint form:
 - ▶ <http://www.dmhc.ca.gov/FileaComplaint/IndependentMedicalReviewComplaintForms.aspx>
- ▶ California Department of Insurance- Contact information/general complaint process
 - ▶ <http://www.insurance.ca.gov/01-consumers/101-help/index.cfm>
- ▶ California Department of Insurance – Complaint Form
 - ▶ http://www.insurance.ca.gov/01-consumers/101-help/upload/RFAhealth_Jan2019.pdf