



Amerigroup Community Care
Juvenile Court

Quick Reference Guide



1-800-600-4441 (TTY 711)
www.myamerigroup.com/GA

Juvenile Court Quick Reference Tool

Easy access to information for Juvenile Court personnel

We've made it easy for Juvenile Court personnel to get information on members in our program quickly. There is a centralized email box for all of your questions and concerns.

Use Gf360juvenilecourt@anthem.com to:

- Get in contact with a child's care coordinator
- Get information about services
- Connect to resources and training for your court

Important contact information

The Intake Line is a special phone line for members in Georgia Families 360SM. Members can get:

- Answers to nonclinical questions about benefits and services
- Needed information
 - Case specifics
 - How to schedule an appointment



The Intake Line is used mainly by legal guardians of youth, although anyone can call for general information on topics such as location of providers in the area. Please note that the Intake Line should not be used for emergency or crisis situations. You can reach the Georgia Families 360SM Member Intake Line by:

- Phone: 1-855-661-2021
- Fax: 1-888-275-5064

Ombudsman liaison

If you have concerns about health care-related issues for a youth in Georgia Families 360SM, the Ombudsman is a neutral advocate for them. You can reach the Ombudsman in a variety of ways:

- By phone: 1-855-558-1436
- By email: www.helpOMB@amerigroup.com

How to get member ID cards

Member ID cards are available online. Only legal guardians (Division of Family and Children Services [DFCS] and Department of Juvenile Justice [DJJ] personnel) can access the online system. DFCS/DJJ workers register members and print member ID cards for foster parents/placement agencies/institutes.



To get a member ID card:

- Go to www.myamerigroup.com/GA.
- Click on Your ID Card.
- Log in to print your card.
- If you are not registered, make sure to do so. You'll need the member's Amerigroup ID number.

Note: DFCS caseworkers will register the member and print a member ID card for foster parents/placement agencies/institutes.

Georgia Families 360SM program eligibility and entry into care process

We do not decide eligibility for the Georgia Families 360SM program. DFCS/DJJ must submit the Medicaid application for youth. The Department of Community Health makes the final determination regarding a youth's Medicaid status. The following paperwork must be completed by DFCS/DJJ to ensure a youth is found eligible and to ensure timeliness of services:



- Medicaid application/eligibility as soon as possible (per agency policy)
- Submit an E-form to notify us of the new member
- Respond to all Amerigroup communications as they impact timeliness of care

Communication and E-forms

The key method we use to be informed of changes to a youth's information (including how to get in touch with case managers and current placement) is through the E-form. The DFCS case manager is required to submit an E-form notifying us that a member has entered into care immediately following the deprivation and 72-hour hearing. The timeliness of submitting the E-form impacts many downstream processes for youth entering foster care, including the assignment and outreach of a **care coordinator**.

The E-form should have the following information:

- The date the youth entered into care
- Youth's demographic information (address, age, DOB and medical history, as known)
- Current placement provider with contact information
- DFCS case manager and supervisor's information
- Medical diagnosis, medical needs and medication list
- Other referrals such as Babies Can't Wait

After the initial E-form is submitted, all other E-forms updating us should be sent within 24 hours of the change. **Only** the updated information needs to be sent. The entire form **does not** have to be redone.

New youth assessments

When a child first enters foster care, there are three assessments he or she should have completed:



- A medical exam also known as an Early and Periodic, Screening, Diagnostic, and Treatment (EPSDT) check within 10 calendar days
- A dental exam check within 10 calendar days
- A trauma assessment by an Amerigroup behavioral health provider within 15 calendar days

Trauma assessment

H0031 Trauma Assessment is a required evaluation when a new member enters foster care. The trauma assessment consists of:

- A trauma history
- A scored trauma assessment tool (providers have a choice to use one of five evidence-based trauma tools)
- A Child and Adolescence Needs and Strengths (CANS) tool

Per DFCS policy, a psychological test is not needed for placement reasons. Also, a psychological test is not needed to begin behavioral health services. If a psychological test is being requested for a youth, please discuss the need with an Amerigroup care coordinator.

Dental services

DentaQuest is the Amerigroup dental vendor. Amerigroup members use the DentaQuest provider network for all of their covered Medicaid dental service needs:



- All Georgia Families 360SM members have a primary care dentist (PCD)
- Exam and cleaning every six months starting at age 1
- X-rays every six months
- Fillings, extractions and other treatment as medically needed
- Fluoride and sealant treatment

To find a DentaQuest provider, go to www.dentaquest.com or call 1-800-895-2218 (TTY 711).

Vision services

Avesis is our vision services vendor. Members use the Avesis provider network for all of their covered Medicaid vision service needs. Members receive the following vision services every 12 months:

- Routine refractions
- Routine eye exams
- Medically needed eyeglasses or contact lenses

All Georgia Families 360SM members may self-refer to a participating vision provider. Call **Avesis Vision** at 1-866-522-5923 for help in finding a network eye doctor.

Pharmacy services



- Pharmacy benefits cover medically necessary prescription and over-the-counter medications (OTC) prescribed by a licensed provider.
- Exceptions and restrictions exist as the benefits are provided under a closed formulary/Preferred Drug List (PDL). The formulary is available at <https://client.formularynavigator.com/Search.aspx?siteCode=7596004980> and the PDL is available at https://providers.amerigroup.com/AGP%2Documents/GAGA_CAID_PDL.pdf. Please check the list to determine which medication requires an authorization.
- A provider can contact our Pharmacy Unit at **1-800-454-3730** to generate an authorization for the prescribed medication.
- Providers will also need to submit a prior certification request for all antipsychotic medications starting September 2017. This includes all previously prescribed antipsychotic medications.
- A Reference Guide for Psychotropic Medication Utilization Parameters for Foster Children is available online and via electronic copy.

Behavioral health and substance abuse

Many behavioral health services do not require preauthorization. This means as soon as a child is eligible for Amerigroup benefits, he or she can begin services. This is one of the most important reasons to submit the youth's E-form and Medicaid timely. The most commonly used behavioral health services and requirements for preauthorization are listed below.

- **Precertification is required for:**
 - Inpatient mental health
 - Partial hospitalization program
 - Intensive outpatient program
 - Chemical dependency services
 - Residential treatment facility
 - Psychological and neuropsychological testing
 - Crisis stabilization
- **No precertification is needed for:**
 - Individual therapy
 - Group therapy
 - Family therapy
 - Trauma assessments
- **Preauthorization will be needed for individual, group and family therapy after 20 sessions.**

Children's preventive guidelines	Birth	3-5 days	Months								
			1	2	4	6	9	12	15	18	
History	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Height or length/weight	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Head circumference	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Body mass index (BMI) (percentile if <16 yrs.)											
Blood pressure ¹	•	•	•	•	•	•	•	•	•	•	•
Nutrition assessment/counseling	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Physical activity assessment/counseling											
Vision exam	•	•	•	•	•	•	•	•	•	•	•
Hearing exam	✓	•	•	•	•	•	•	•	•	•	•
Developmental assessment	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Autism screening											✓
Psychological/behavioral assessment	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Alcohol/drug use assessment											
Physical exam (unclothed)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Oral/dental assessment	•	•	•	•	•	✓	✓	✓	•	✓	✓
Dental referral ²											
Immunization assessment	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Hematocrit or hemoglobin					•			✓			•
Lead screening						•	•	✓			•
Urinalysis											
Tuberculin test if at risk			•			•		•			•
Dyslipidemia screening											
Sexually transmitted infection (STI) screening ³											
Cervical dysplasia screening ⁴											
Anticipatory guidance	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Counseling/referral for identified problems	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓

Notes:

All well visits should include, at a minimum, an unclothed physical exam, developmental assessment, anticipatory guidance and age-appropriate screenings and immunizations, as indicated.

Health education should include counseling for issues and risk factors, as well as inform patients about the benefits of a healthy lifestyle, safety practices/accident avoidance and disease prevention.

Screenings are as recommended by AAP and AAPD. An initial screening may be done at any time, even if the patient's age does not correspond with the periodicity schedule.

HEDIS is a registered trademark of the National Committee for Quality Assurance (NCQA).

		Years					
24	30	3	4	5	6	7-12	
✓	✓	✓	✓	✓	✓	Yearly	
✓	✓	✓	✓	✓	✓	Yearly	
✓	✓					Yearly	
✓	✓	✓	✓	✓	✓	Yearly	
•	•	✓	✓	✓	✓	Yearly	
✓	✓	✓	✓	✓	✓	Yearly	
		✓	✓	✓	✓	Yearly	
•	•	✓	✓	✓	✓	Yearly	
•	•	•	✓	✓	✓	Yearly	
✓	✓	✓	✓	✓	✓	Yearly	
✓	•						
✓	✓	✓	✓	✓	✓	Yearly	
						Yearly	
✓	✓	✓	✓	✓	✓	Yearly	
✓	✓	✓	•	•	•	Yearly	
		✓			✓	Refer	
✓	✓	✓	✓	✓	✓	Yearly	
•	•	•	•	•	•	Yearly	
✓		•	•	•	•		
					✓	16 years	
•		•	•			•	
•			•			•	
						18-21	
						•	
						11-21	
						•	
						11-21	
✓	✓	✓	✓	✓	✓	Yearly	
✓	✓	✓	✓	✓	✓	Yearly	

1 Children with specific risk factors should have their blood pressure taken at visits before age 3.

2 Referrals for dental care should be given for any problem identified or if there is no dental home. AAPD recommends a dental exam every six months after tooth eruption.

3 STI and cervical dysplasia screenings should be conducted on all sexually active females 11-21 years of age.

- Conduct a risk assessment. If high-risk conditions exist, perform screening.

Use the chart on the left to be sure your youth are receiving the appropriate age-specific treatment according to clinical practice guidelines.

An EPSDT visit should be scheduled and completed for all newly enrolled Georgia Families 360°SM members within 10 days of entering care. Subsequent EPSDT visits should be scheduled based on the recommended age guidelines.

3-5 days	12 months
1 month	15 months
2 months	18 months
4 months	24 months
6 months	30 months
9 months	3-21 years, annually

Any member who has not had the recommended services should be brought up-to-date as soon as possible.

For complete information, see the American Academy of Pediatrics (AAP) periodicity schedule at https://www.aap.org/en-us/Documents/periodicity_schedule.pdf and the American Academy of Pediatric Dentistry (AAPD) guidelines at www.aapd.org/media/Policies_Guidelines/G_CariesRiskAssessmentChart.pdf.

Helpful hints



Work with the youth's assigned Georgia Families 360°SM staff to obtain dates of the completed EPSDT exam.

The assigned Georgia Families 360°SM care coordinator can assist with obtaining clinical documentation.

Recommended childhood immunizations							
	Birth	1 month	2 months	4 months	6 months	12 months	15 months
Hepatitis B	Hep B	Hep B			Hep B		
Rotavirus			RV	RV	RV		
Diphtheria, tetanus, pertussis			Dtap	Dtap	Dtap		Dtap
Haemophilus influenza Type b (Hib)			Hib	Hib	Hib	Hib	
Pneumococcal			PCV	PCV	PCV	PCV	
Inactivated polio virus			IPV	IPV	IPV		
Influenza							
Measles, mumps, rubella						MMR	
Varicella						Varicella	
Hepatitis A						Hep A, dose 1	
Meningococcal							

- Range of recommended ages for all children except certain high-risk groups
- Range of recommended ages for certain high-risk groups
- Range of recommended ages for catch-up immunization

Placement

DFCS determines and ensures placement for foster children. DJJ determines and ensures placement for committed youth in nonsecure settings. It is important to note that Psychiatric Residential Treatment Facilities (PRTF) are considered a treatment source and not a placement. To be admitted to a PRTF using Amerigroup benefits, the youth must meet medical necessity criteria.

A psychiatric residential treatment center is considered medically necessary when **ALL** of the following are present:

- The member is showing symptoms and behaviors that denote a decline from his or her usual state. This includes the following behaviors that risk serious harm:
 - Self-injurious behaviors
 - Risk-taking behaviors
- The behaviors cannot be managed outside of a 24-hour, structured setting or other fitting outpatient setting

- The social setting is made up of temporary stressors or limitations that would undermine treatment
- The temporary stressors or limitations could likely be improved with treatment while the member is in the residential facility
- There is a reasonable expectation:
 - The illness, condition, or level of functioning will become stable and improve
 - A short-term, subacute residential treatment service will have a likely benefit on the behaviors and symptoms that required this level of care
 - The member will be able to return to outpatient treatment

A continued stay at a psychiatric residential treatment center is considered medically necessary when the member continues to meet severity of illness criteria and has one of the following:

- Progress with the psychiatric symptoms and behaviors is documented and the member is cooperative with treatment and meeting treatment plan goals

18 months	23 months	2-3 years	4-6 years
			Dtap
			PPSV
			IPV
Influenza yearly			
			MMR
			Varicella
		Hep A series	
			MCV

Recommended adolescent immunizations			
	7-10 years	11-12 years	13-18 years
Tetanus, diphtheria, pertussis		Tdap	Tdap
Human papillomavirus		HPV (3 doses)	HPV series
Meningococcal	MCV	MCV	MCV
Influenza	Influenza yearly		
Pneumococcal	PPSV		
Hepatitis A	Hep A series		
Hepatitis B	Hep B series		
Inactivated polio virus	IPV series		
Measles, mumps, rubella	MMR series		
Varicella	Varicella series		

For complete information, see The Advisory Committee on Immunization Practices (<http://www.cdc.gov/vaccines/acip/index.html>), the American Academy of Pediatrics (www.aap.org) and the American Academy of Family Physicians (www.aafp.org). Department of Health and Human Services • Centers for Disease Control and Prevention

- Progress is not occurring and the treatment plan is being re-evaluated and amended with goals that are still achievable or
 - There is no access to needed partial hospital care
- Remember, all points of medical necessity must be met to use Amerigroup benefits for admission to a PRTF. Please discuss the need for a PRTF with the youth's Amerigroup care coordinator.

What does an Amerigroup care coordinator do?

- Addresses gaps in the care of a youth's physical and behavioral health
- Creates an individualized care plan to address a youth's identified needs
- Educates the families and team members about the service needs of the youth
- Serves as a liaison between caretakers, service providers and the Amerigroup Service Authorization department
- Ensures youth adhere to their EPSDT preventive health care schedule



To connect with an assigned care coordinator, contact the Juvenile Court email box at Gf360juvenilecourt@anthem.com.

Transitional Aged Youth (TAY) — Medicaid coverage over 18

In 2010, the Patient Protection and Affordable Care Act (ACA) was passed and signed into law to help Americans get affordable health care insurance. A part of the ACA focuses on young adults who have aged out of foster care. Georgia has two options for these young adults to maintain no-cost health insurance.

The Foster Care Independence Act allows former foster care youth to remain covered by Medicaid from age 18-21 years of age as part of the Chafee program. The Affordable Care Act allows youth to remain covered by Former Foster Care Medicaid until the last day of the month the youth turns 26 years of age.

Transitional Aged Youth — COACHES Program

The Georgia Families 360SM partners with the COACHES Program through Families First. The COACHES Program focuses on supporting young adults in gaining the knowledge and skills necessary to access health care services and preparing to live self-sufficiently. Youth are eligible for the program between the ages of 14-20 (past 18 they must remain in DFCS custody). They must have been in foster care for 12 months or longer, and must reside in a group home, ILP, TLP or foster home. Contact the assigned care coordinator for additional information on the COACHES Program and the program's service areas.

Extra benefits at no cost

Our members get extra benefits on top of their regular Medicaid services. These are called value-added benefits. Some of these benefits include:

- GED vouchers for all tests for eligible members
- Gas card or Marta Breeze Pass for college students 21 and up
- Unlimited over-the-counter (OTC) items, like Tylenol, vitamins and more, from drugstores in the plan with a prescription

Extra benefits sometimes change, so visit www.myamerigroup.com/GA for the most up-to-date list. You can also contact the Member Intake Line at 1-855-661-2021 (TTY 711) or the assigned care coordinator.

Nonemergency transportation for Georgia Families 360SM members

Youth and families can access transportation services to and from official medical appointments through nonemergency transportation.



- **North – Southeastrans**
 - Toll free: 1-866-388-9844
 - Local: 678-510-4555
- **Atlanta – Southeastrans**
 - Local: 404-209-4000
- **Central – Southeastrans**
 - Toll free: 1-866-991-6701
 - Local: 404-305-3535
- **East – LogistiCare**
 - Toll free: 1-888-224-7988
- **Southwest – LogistiCare**
 - Toll free: 1-888-224-7985

Other health insurance

Youth in foster care should never be charged a copay or fee for using their Medicaid benefits. Per federal rules and regulations, Medicaid is always considered the payer of last resort. This means that if a youth has another form of insurance, it will be considered primary and Medicaid benefits will be considered secondary. Sometimes youth enter foster care, or are committed to DJJ, and are still on their parents' health insurance or some other type of health insurance. In these instances, a child's other health insurance will be used as the primary insurance and their Amerigroup (Medicaid) benefits will be considered secondary. In some instances, children will have inactive other health insurance. If a child has inactive other health insurance, contact the juvenile court mailbox at Gf360juvenilecourt@anthem.com. We can assist with getting the inactive other health insurance removed from his or her record.



Education and training requests

We have a team dedicated to providing education and outreach to community stakeholders, including the juvenile court system. If you would like to arrange an in-person training at your location or other ways we can collaborate, contact the email box below:

- By email: gf360juvenilecourt@anthem.com

Our member website:

www.myamerigroup.com/GA

This website has useful information on how to:

- Search for providers in your area
- Download an ID card



You can also get the latest newsletters.

Our training website: We have a training website with helpful information and resources for community stakeholders on a variety of topics like:

- Trauma
- Frequently asked questions (FAQ)
- Webinars
- Relias, a computer-based, self-paced learning program

Go to www.myamerigroup.com/GA and look for Stakeholder training.