



**Presentation to LHHS Behavioral Health Subcommittee
Wayne Lindstrom, BHSD Director HSD, BHC CEO
Julie Weinberg, Medical Assistance Division Director
September 17, 2014**

New Mexico Human Services Department



Behavior Management Services (BMS)

- ▶ Service Definition:
- ▶ BMS is provided to children & youth who need behavioral management intervention & are provided as part of a comprehensive approach to treatment & is not provided as a stand alone service
 - To avoid hospitalization, residential treatment, & separation from families, or
 - Who require continued intensive treatment following hospitalization, or
 - As a transition to avoid return to a more restrictive environment.



Behavior Management Services (BMS)

- ▶ BMS includes:
- ▶ Development of a behavior management plan;
- ▶ Implementation of the plan;
- ▶ Assisting caregivers with implementation;
- ▶ Monitoring the plan's implementation; and
- ▶ Using basic techniques:
 - Reinforcement;
 - Redirection;
 - Voluntary time-outs; and
 - Verbal redirection.



Behavior Management Services (BMS)

Basic Elements of BMS

- ▶ Part of the Medicaid Early Periodic Screening Diagnosis & Treatment (EPSDT) program
- ▶ When the need for BMS is identified in a tot-to-teen health check screen or other diagnostic evaluation
- ▶ Must be based on a relevant clinical assessment
- ▶ Must be specified in an individualized treatment plan
- ▶ Uses teaching, training & coaching activities to help a child function successfully within his or her home & community
- ▶ Includes a regimen of positive intervention & reinforcement





Behavior Management Services (BMS)

Provider BMS Inputs

- ▶ Every child must have a current assessment & treatment plan
- ▶ Misbehaving isn't a diagnosis
- ▶ Schools may be involved, but they are not the only setting in which BMS should be offered
- ▶ Looking at the child's whole environment is critical to success





Behavior Management Services (BMS)

BMS Utilization Trend Analysis

- ▶ During 1st 6 mths. of Centennial Care implementation, BMS services have increased significantly
- ▶ BMS, as stated, is not intended as a stand-alone service & should be analyzed within context of the entire service spectrum to children & teens
- ▶ BH services to children for inpatient & outpatient are both increasing;
- ▶ More intensive BH services to children have lessened which appears attributable to past over-utilization; &
- ▶ Given that Centennial Care implementation data is only for the 1st 6 months, BHSD will continue to monitor access & utilization data to determine appropriate service levels.



Behavior Management Services (BMS)

Future Development of BMS

- ▶ BH system needs new & creative ways to encourage BMS family participation, as schools aren't the only place children interact with others
- ▶ Family & peer positions can augment the clinical services & assist both family & child in achieving treatment plan goals