



SABG for Childcare Policy Guide

CY2020



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Purpose

Substance Abuse Block Grant (SABG) funds are used for planning, implementing, and evaluating activities to prevent and treat substance use, including early intervention services for individuals who are at increased risk of contracting tuberculosis (TB) and other communicable diseases due to substance use. Members must indicate active substance use within the previous 12-months to be eligible for SABG funded services.

The purpose of this guide is to outline the requirements and limitations for the use of SABG funds for childcare for dependent children who are present at the time of treatment for SABG members who are receiving medically necessary MAT or outpatient (non-residential) treatment and/or support services. According to the [AHCCCS Medical Policy Manual, Chapter 300, Exhibit 300-2B](#), SABG funds can be used to cover childcare services for SABG members and Title XIX/XXI members who are receiving substance use treatment who cannot otherwise obtain childcare for their dependent children during treatment. HCA requires all subcontractors who receive SABG funding to adhere to the below policy regarding childcare for dependent children of SABG enrolled members and Title XIX/XXI members who qualify for this support service.

Billing & Limitations

According to the [AHCCCS Behavioral Health Services Matrix](#), the appropriate billing code for childcare services is “T1009”, described as “Child sitting services for children for the individuals receiving alcohol and/or substance abuse services”. Place of Service code “99 – Other” shall be used when billing for childcare services. The Matrix also lists the Provider Types which are qualified to bill for childcare services through SABG. These Provider Types are:

- C2 – Federally Qualified Health Center (FQHC)
- 29 – Rural Health Clinic

No other Provider Types may bill for childcare services through SABG.

The use of childcare services are limited to members who are receiving MAT or Outpatient treatment for substance use where the family is being treated as a whole but the dependent children are not enrolled members who are receiving other billable services from the Provider. Additionally, the member must not have means of other childcare available to them during the time when they are receiving treatment services. Please refer to the AHCCCS memo “T1009 - Childcare for Dependent Children available as of August 9, 2018” attached to this policy as Exhibit A for additional information.

Scope of Childcare Services

Any member receiving services funded by the SABG must meet all regular eligibility requirements as outlined in [Chapter 18.14.1](#) of the HCA Provider Manual and all other federal block grant regulations. In addition to these requirements, to use SABG funds for childcare for a dependent child of the enrolled member, there are requirements outlined below that must be met.

Before any childcare services are provided for a member’s dependent children, an Informed Consent document must be read and signed by the member. A copy of this policy and the Informed Consent form shall be provided to the member.



The amount and duration of childcare services is dependent upon the length and frequency of the MAT or outpatient treatment being received by the member. The scope of childcare services are at minimum what is necessary to ensure the safety and well-being of the dependent child while the member is receiving treatment services, which includes adequate and direct supervision of children and the provision of age-appropriate activities. Childcare services may be provided by any qualified staff member employed directly by the Provider. Childcare services are to be provided during the time in which the children are prevented from being under the direct supervision and care of the member while the member is receiving treatment. Childcare services are to be billed in 15-minute increments, not to exceed the amount of time the member is receiving treatment services. The allowed rate for childcare service is \$2.94 per child, for each 15-minute increment.

A single staff member providing childcare services may care for more than one child at a time; however, a single staff member may not provide childcare for more than the number of children outlined within the current state-mandated caregiver-to-child ratios, as stated in [ARS Title 36 – Public Health and Safety, Chapter 7.1 for Child Care Programs](#). Any staff member(s) providing childcare shall ensure the safety and well-being of each child at all times by directly supervising all children in their care; this may require the staff member's full attention and may cause the inability to perform other duties simultaneously. The accepted ages for childcare services may be set by each Provider for each location that childcare services will be provided. The age range and/or restrictions shall be explicitly included in the Informed Consent form signed by the member.

Any Provider who bills for childcare services under SABG must ensure the proper facilities exists to provide adequate and safe childcare services. This includes, but is not limited to, ensuring children are kept within a secured area where they cannot wander off, hide, or be removed by another person who is not the parent or guardian whom they arrived with. Safety measures must also include adequate planning for emergency situations such as fire, or any other reason to quickly exit a building.

Priority for scheduling appointments shall be given to members who have dependent children and are in need of childcare services. This is to ensure that school-aged children are not negatively impacted in their school attendance due to member appointments, and to ensure that members who are in need of childcare services have the ability to attend an appointment at a time when childcare services are available.

Monitoring & Documentation

All childcare services provided must be thoroughly and appropriately documented for billing and monitoring purposes. Any Provider engaging in childcare services for members receiving substance use treatment must keep detailed records that include, but are not limited to, the date, duration, and location of childcare services provided. Childcare services are subject to the same level of monitoring that any other SABG service is subject to, and the RBHA will ensure that adequate monitoring of this service occurs on an annual basis.



Exhibit A – AHCCCS Memo

“DATE: August 10, 2018
TO: Regional Behavioral Health Authorities and Tribal Regional Behavioral Health Authorities
FROM: Virginia Roundtree, Assistant Director, Division of Health Care Management
SUBJECT: T1009 – Childcare for Dependent Children available as of August 9, 2018

The following provides guidance for the RBHAs and TRBHAs to compensate providers for Childcare Recovery Support Services when providing medically necessary MAT or Outpatient (non-residential) treatment or other recovery support services for substance use disorders (SUD) to members with dependent children. Starting August 9, 2018, the recovery support service is an allowable expense for a member who meets the criteria for SABG funding as defined in AMPM 320-T, Non-Discretionary Federal Grants.

Amount, Duration, and Scope

The amount of services and duration is dependent upon the MAT or Outpatient (non-residential) treatment or recovery support services for SUD being provided to the member and whose child is present with the member at the time of treatment.

The scope of the Child Care Recovery Support Services should be what is necessary to ensure the safety and well-being of the child while the member is in treatment services, which prevent the child(ren) from being under the direct care or supervision of member.

The service is to be billed in 15 minute increments not to exceed the amount of time the enrolled member received services. The rate for this service is \$2.94 for each 15-minute unit/per child.

Limitations

The use of this service is limited to:

- Enrolled members receiving MAT or Outpatient (non-residential) treatment or recovery support services for SUD treatment where the family is being treated as a whole, but the child is not an enrolled member receiving billable services from the provider.
- Where other means of supports for childcare for the child are not readily available or appropriate.
- Only Provider Types that provide MAT or Outpatient (non-residential) treatment or recovery support services are eligible for this service.

Each Contractor/TRBHA and Provider shall have policies and procedures that address the following:

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| • Informed consent | • Service description |
| • Facilities | • Safety measures |
| • Staffing | • Ages accepted |
| • Supervision | • Schooling/ service accessibility to the children |
| • Monitoring | |
| • Documentation | |

The content of the policies and procedures must be included in the informed consent document that must be reviewed and signed by the member acknowledging the potential benefits and risks associated with receiving this Child Care Recovery Support Service as a part of the member’s treatment.”