



October 1, 2025

[REDACTED]

RE: [REDACTED] A JUVENILE v. DoHS/BUREAU FOR MEDICAL SERVICES  
ACTION NO.: 25-BOR-2852

Dear [REDACTED]:

Enclosed is a copy of the decision resulting from the hearing held in the above-referenced matter.

In arriving at a decision, the State Hearing Officer is governed by the Public Welfare Laws of West Virginia and the rules and regulations established by the Department of Human Services. These same laws and regulations are used in all cases to ensure that all persons are treated alike.

You will find attached an explanation of possible actions you may take if you disagree with the decision reached in this matter.

Sincerely,

Kristi Logan  
Certified State Hearing Officer  
Member, State Board of Review

Encl: Recourse to Hearing Decision  
Form IG-BR-29

cc: Bureau for Medical Services  
PC&A

**WEST VIRGINIA OFFICE OF INSPECTOR GENERAL  
BOARD OF REVIEW**

██████████ A JUVENILE,

**Appellant,**

v.

**Action Number: 25-BOR-2852**

**WEST VIRGINIA DEPARTMENT OF HUMAN SERVICES  
BUREAU FOR MEDICAL SERVICES,**

**Respondent.**

**DECISION OF STATE HEARING OFFICER**

**INTRODUCTION**

This is the decision of the State Hearing Officer resulting from a fair hearing for █████ a Juvenile. This hearing was held in accordance with the provisions found in Chapter 700 of the Office of Inspector General Common Chapters Manual. This fair hearing was convened on October 1, 2025.

The matter before the Hearing Officer arises from the August 25, 2025, decision by the Respondent to terminate services through the Children with Serious Emotional Disorders program.

At the hearing, the Respondent appeared by Kristen Blanks, consulting psychologist for the Bureau for Medical Services. The Appellant appeared by her mother, █████. Appearing as a witness for the Appellant was █████, therapist with █████. The witnesses were placed under oath, and the following documents were admitted into evidence.

**Department's Exhibits:**

- D-1 Bureau for Medical Services Provider Manual §502.14
- D-2 Child and Adolescent Functional Assessment Scale (CAFAS) dated September 9, 2024
- D-3 Behavior Assessment System for Children, Third Addition (BASC-3) dated September 9, 2024
- D-4 Independent Evaluation dated September 12, 2024
- D-5 CAFAS dated August 14, 2025
- D-6 WV Child and Adolescent Needs and Strengths (CANS) dated August 14, 2025
- D-7 Notice of Termination dated August 25, 2025

**Appellant's Exhibits:**

None

After a review of the record, including testimony, exhibits, and stipulations admitted into evidence at the hearing, and after assessing the credibility of all witnesses and weighing the evidence in consideration of the same, the Hearing Officer sets forth the following Findings of Fact.

## **FINDINGS OF FACT**

- 1) The Appellant receives services through the Children with Serious Emotional Disorders (CSED) program.
- 2) In August 2025, the Appellant underwent an annual redetermination of medical eligibility for the CSED program.
- 3) The Appellant has diagnoses of major depressive disorder, somatic symptom disorder, and unspecified anxiety disorder (Exhibit D-4).
- 4) The Appellant was administered the Child and Adolescent Functional Assessment Scale (CAFAS) and the WV Child and Adolescent Needs and Strengths (CANS) on August 14, 2025 (Exhibits D-5 and D-6).
- 5) The Appellant received a youth total score of 70 on the CAFAS and received scores of 0, 1, and/or 2 in all areas assessed on the CANS (Exhibits D-5 and D-6).
- 6) On August 25, 2025, the Respondent sent a notice to the Appellant advising that CSED services were being terminated as functional impairment is not substantiated by a youth total score of 90 or above on the CAFAS and does not support the need for Psychiatric Residential Treatment Facility level of care (Exhibit D-7).

## **APPLICABLE POLICY**

Bureau for Medical Services Provider Manual Chapter 502 explains eligibility for CSED services:

### **502.14.1 Medical Eligibility**

To be medically eligible, the applicant must require the Level of Care and services provided within a PRTF setting as evidenced by required evaluations and other information requested by the independent evaluator or the MECA and corroborated by narrative descriptions of functioning and reported history. To be eligible for the CSEDW, an applicant must have:

- Eligible diagnosis
- Functional impairment
- Otherwise require PRTF Level of Care

Initial medical eligibility is determined by MECA through review of an Independent Evaluation Report completed by a member of the IEN, which must include background information, a mental status examination, functional behavior, and any other

documentation deemed appropriate. West Virginia defines the term "children with a serious emotional disorder" as children/adolescents with a serious emotional disorder who are three years of age through 20 years of age and who currently have or at any time during the past year have had a diagnosable mental, behavioral, or emotional disorder of sufficient duration to meet diagnostic criteria specified within the Diagnostic and Statistical Manual of Mental Disorders (DSM) or International Classification of Disease (ICD) or equivalent that is current at the date of evaluation and results in functional impairment that substantially interferes with or limits the child/adolescent's role or functioning in family, school, and/or community activities.

#### **502.14.2 Diagnosis**

An eligible diagnosis is defined as a diagnosable mental, behavioral, or emotional disorder that meets the current DSM diagnostic criteria. These disorders include any mental disorders listed in the DSM except for "V" codes, substance use, and developmental disorders, which are excluded unless they co-occur with another diagnosable serious emotional disorder. The applicant must also demonstrate an impairment in functioning that is due to an eligible diagnosis to meet eligibility requirements.

#### **502.14.3 Functional Impairment**

The applicant must have a substantial impairment in functioning, which is defined as a Youth Total score of 90 or above on the Child and Adolescent Functional Assessment Scale (CAFAS) and the Preschool and Early Childhood Functional Assessment (PECFAS). The child/adolescent must demonstrate an ability to engage in activities of daily living but lack adequate emotional or behavioral stability to meet the demands of daily living. The child/adolescent must be able to actively engage and participate in services offered through the CSEDW. The CAFAS/PECFAS must reflect elevated scores as noted above. The presence of substantial impairment must be supported not only by relevant test scores, but also the narrative descriptions contained in the documentation submitted for review and other relevant information (e.g., previous psychological testing, Individualized Education Program (IEP), treatment records, discharge summaries, etc.).

The following CAFAS/PECFAS subscales must equal at least a total score of 90:

- School/day care/work role performance
- Home role performance
- Community role performance
- Behavior toward others
- Moods/emotions
- Self-harmful behavior
- Substance use (CAFAS only)
- Thinking/communication

Additionally, ratings on the most current Behavior Assessment System for Children (BASC), must reflect T-scores greater than 60 in two or more of the clinical scales. The criteria must be supported by additional documentation provided (e.g., previous psychological evaluations, IEP, facility records, etc.).

#### **502.14.4 PRTF Level of Care**

Psychiatric Residential Treatment Facilities (PRTFs) provide full-time psychiatric treatment for children and adolescents with complex mental health conditions who are under the age of 21. PRTFs serve individuals with mental, emotional, or behavioral problems who do not require emergency or acute psychiatric care but whose symptoms and needs are not able to be managed in their home or community and require supervision/intervention on a 24-hour basis. The CSEDW approval does not indicate that a child would be approved for PRTF placement, and that insurance approval would still be required. To be eligible for CSEDW, the applicant must meet the criteria and require a hospital Level of Care defined as an inpatient psychiatric facility for individuals ages 21 and under as provided in 42 CFR §440.160. The applicant must also be at imminent risk of placement in a PRTF.

Imminent risk of placement in a PRTF is defined as:

- Residing in a PRTF within the past six months; or
- Through evaluations and documentation submitted to the MECA, it is determined that there is a reasonable indication that the applicant is in danger of being placed in a PRTF within the next 30 days.
- Is at imminent risk of harm due to behavior(s) that are likely to cause physical harm to them self or others. The applicant must indicate the need for PRTF as evidenced by suicidal or homicidal ideation, physical aggression toward others, self-injurious behavior, seriously risky behavior (running away, sexual aggression, or substance use).

#### **502.15 Annual Redetermination of Waiver Eligibility Process**

Federal and state mandates require that all child/adolescent presently enrolled in the CSEDW program, as well as those on the Managed Enrollment List, have their eligibility redetermined annually. In West Virginia, the date by which this must be completed is referred to as the child/adolescent anchor date. To remain in the CSEDW benefit program, the child/adolescent must continue to meet the eligibility criteria as previously defined. Medical eligibility requires input from the CFT. Continued medical eligibility requires the child/adolescent to meet eligibility criteria, including having a substantial impairment as described in Section 502.14.3 Functional Impairment of this manual. The ASO, in coordination with the CFT, will conduct the annual reevaluation to determine ongoing eligibility. Following the assessment, the ASO will promptly submit all pertinent information to the MCO, which may include the Plan of Care, the CANS, and any other relevant documentation. The MCO is responsible for reviewing the submitted information to ensure that provider billing aligns with the child's/adolescent's level of acuity as determined by the assessment. An anchor date, also known as the annual date, is the date by which the medical eligibility must be redetermined to continue participating in the CSEDW program. The anchor date is established by the anniversary date, that is the first day of the month following the date when initial medical eligibility was established by the MECA and is assigned by the ASO.

Prior to completing the annual redetermination, the CFT should conduct a review of relevant documentation. This documentation could include, but is not limited to, the following:

- Incident reporting within the current eligibility period
- Service utilization
- Psychological evaluations
- Progress reports provided by the school, facility, etc.
- Progress on the Plan of Care
- The IEP
- The behavior plan or positive behavior support plan
- Psycho-social assessment

After completing the review of the CFT-determined relevant materials, the following documentation should be completed:

- Updated CAFAS/PECFAS
- Updated, completed Freedom of Choice form (WV-BMS-CSED-02)
- The Needs Domains of the CANS conducted by the CANS-certified wraparound facilitator

The Child's Adolescent Needs and Strengths (CANS) Needs Domains, completed by the wraparound facilitator, and the CAFAS/PECFAS will be reviewed by the Medical Eligibility Contracted Agent (MECA). A child/adolescent who shows "no evidence of need/no need for action," as defined by the CANS, may not require continued eligibility for the CSEDW program, and eligibility for the CSEDW program will be terminated if the CAFAS/PECFAS total score is also less than 90 overall. Those who are no longer achieving the goals in the wraparound plan need further evaluation from the team to reach agreement that a formal wraparound process is no longer necessary.

## DISCUSSION

To be medically eligible for services through the CSED program, an individual must have an eligible diagnosis of a mental, behavioral, or emotional disorder, have a substantial functional impairment, and require a PRTF level of care. CSED program participants are evaluated annually and must continue to meet medical eligibility criteria. To meet the functionality criteria for CSED services, an individual must have a youth total score of 90 or higher on the CAFAS.

The Appellant underwent an annual redetermination for the CSED program. The Respondent terminated the Appellant's services through the CSED program as it was determined that she no longer met the functionality criteria as set forth by policy.

Kristen Blanks, consulting psychologist for the Respondent, testified that the Appellant's youth total score from the August 2025 CAFAS was 70. Ms. Blanks stated that the Appellant's scores from the CANS did not support the need for PRTF level of care, noting that an eligible score on the CANS is 3. The Appellant did not have any scores of 3 on the CANS.

[REDACTED], the Appellant's mother, testified that the Appellant has improved while receiving CSED services but contended that the Appellant has declined since returning to school. [REDACTED] stated the CAFAS was conducted in August, while school was on summer break, and school is a trigger for the Appellant. [REDACTED] stated the Appellant has been defiant and

uncooperative since the school year started and continues to need the services provided by the CSED program.

The Board of Review cannot judge policy and can only determine if the Respondent followed policy when deciding the Appellant's CSED eligibility. The Board of Review cannot make clinical conclusions regarding diagnosis and functioning and can only determine whether the Respondent correctly terminated the Appellant's eligibility based on the functionality indicated on the CAFAS and corroborated by the submitted documentation.

The Appellant did not meet the functionality criteria of a total youth score of 90 or higher on the CAFAS to continue receiving services through the CSED program. Whereas the Appellant no longer meets the medical eligibility criteria as set forth by policy, the Respondent's decision to terminate CSED services is affirmed.

### **CONCLUSIONS OF LAW**

- 1) To be medically eligible for services through the CSED program, an individual must have an eligible diagnosis of a mental, behavioral, or emotional disorder, have a substantial functional impairment, and require a PRTF level of care.
- 2) The Appellant met the diagnostic criteria with a diagnosis of major depressive disorder.
- 3) The functional impairment criteria is met with a youth total score of 90 or higher on the CAFAS.
- 4) The Appellant had a youth total score of 70 on the August 2025 CAFAS.
- 5) The Appellant no longer meets the substantial functional impairment criteria to continue receiving CSED services.

### **DECISION**

It is the decision of the State Hearing Officer to uphold the decision of the Respondent to terminate the Appellant's services through the Children with Serious Emotional Disorders program.

**ENTERED this 1<sup>st</sup> day of October 2025.**

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**Kristi Logan  
Certified State Hearing Officer**