

QRTips

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What is Pathways to Well-Being (PWB) or Intensive Services?

[Pathways To Well-Being \(formerly Katie A.\)](#) services were implemented as a result of a class action lawsuit settlement in 2011 (Katie A. vs. Douglas, previously Bonita). The settlement required that the California Department of Social Services (CDSS) and the California Department of Health Care Services (DHCS) provide comprehensive and integrated services to child welfare children to reduce overdependence on institutional and congregate care services and provide better access to mental health services. PWB services include the provision of Intensive Care Coordination (ICC) and In-Home Based Services (IHBS) to the children and youth of the subclass.

Important Note: While the Katie A. Settlement only concerned children and youth in foster care, or at imminent risk of placement in foster care, membership in the Katie A. class or subclass is no longer a requirement for receiving medically necessary ICC, IHBS, and TFC. **Therefore, a child or youth need not have an open child welfare services case to be considered for receipt of ICC, IHBS, or TFC.** When a child meets criteria for **PWB or Intensive Services**, providers are required to use the **ICC** instead of the Targeted Case Management and IHBS instead of Rehab Services.

What are the documentation and codes requirements?

PWB and Intensive Services currently have two primary billable codes, which are Intensive Care Coordination (ICC) and Intensive Home-Based Services (IHBS). DHCS **requires counties** to use the correct codes for minors that meet the criteria of PWB or Intensive Services. PWB and Intensive Services cases **are required** to code ICC whenever doing 6-month or annual reviews.

How to coordinate services with a PWB or Intensive Services?

The provider will screen all present and in-coming foster youths for PWB or Intensive Services using the Eligibility Form. It is not necessary to document in a progress note the completion of this form. If the clinician has determined PWB or Intensive Services eligibility prior to completing the assessment, a progress note documenting the child/youth has met medical necessity should be completed and the dated entered onto the PWB/Intensive Services Eligibility Assessment form.

Provider will need to update the documents for coordination of care for services provided in collaboration with SSA and/or other programs. Reminder: As the CARE PLAN and other documents are updated, you must notify the other programs of this update as part of coordination of care (e.g., WRAP, etc.) so they can also start using these codes.

PWB and Intensive Services must be reviewed every 90 days. A progress note is required for these reviews. For PWB and Intensive Services cases use the ICC codes for these reviews.

What if we do not code to ICC and IHBS?

If a case meets PWB or Intensive Services eligibility the provider(s) should always utilize ICC or IHBS codes as appropriate. ICC and IHBS need to be on the Care Plan and/or the ICP.

Note: If the provider does not utilize the correct service code for PWB or Intensive Services cases, this will result in recoupments during a chart audit.

See the [Pathways to Well Being Web page](#) for more details eligibility and documentation requirements.

See the link to the [Medi-Cal Manual for Intensive Care Coordination/Intensive Home Based Services and Therapeutic Foster Care](#) for more clarification of documentation requirements.