

United States General Accounting Office

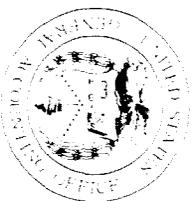
**GAO**

Report to the Honorable  
Daniel K. Inouye, U.S. Senate

May 1990

# MEDICAID

## Sources of Information on Mental Health Services



141306

**Human Resources Division**

B-239070

May 7, 1990

The Honorable Daniel K. Inouye  
United States Senate

Dear Senator Inouye:

The availability of mental health services under Medicaid has been a concern to many health experts. In an earlier report, we summarized changes that state Medicaid and mental health officials believe could improve the delivery of such services.<sup>1</sup> In response to your request, this report identifies sources of information on the types of mental health services offered under each state's Medicaid program.

**Background**

Medicaid, authorized under title XIX of the Social Security Act, is a federally aided, state-administered medical assistance program for low-income people. Generally, those receiving cash assistance under the Aid to Families With Dependent Children or Supplemental Security Income programs are eligible for Medicaid assistance. In addition, each state has the option of providing Medicaid benefits to those who cannot afford needed health care, but have income above the maximum allowable for public assistance. The Health Care Financing Administration (HCFA), within the Department of Health and Human Services (HHS), is the federal agency responsible for developing program policies, setting standards, and ensuring compliance with Medicaid legislation and regulations. Each state has considerable flexibility concerning its Medicaid program. Within broad federal guidelines, states determine who will be eligible, what services will be provided, and what limits will be placed on the services. As a result, between the states over the years, wide variations have developed in Medicaid services in general and mental health services in particular.

Mental health services are provided to treat a variety of mental conditions including developmental, behavioral, and emotional problems, as well as substance abuse, schizophrenia, and depression. At a minimum, Medicaid mental health services cover long-term institutional care, outpatient hospital care, and consultations with a physician, as well as clinic and laboratory services. Drug therapy might also be provided.

<sup>1</sup>Medicaid: Views on Changes Needed in Mental Health Benefits (GAO/HRD-88-96FS, Sept. 27, 1988).

Medicaid specifically excludes federal reimbursement for the care of the mentally ill aged 22 through 64 in institutions for mental diseases.<sup>2</sup> These are defined in Medicaid regulations as institutions primarily engaged in providing diagnosis, treatment, or care (which includes medical attention, nursing care, and related services) for people with mental diseases. States are not required, but have the option, to provide institutional care for the mentally ill who are under 21 years of age and 65 years of age or older. If the states exercise this option, the federal government will pay its share of the cost of such institutional care.

Each state is allowed to set use and dollar limitations on the duration, scope, and dollar amount of Medicaid coverage. Each state also has the option of covering or not covering certain mental health services. As a result, there is considerable variation across states in the nature and extent of mental health services available to Medicaid recipients.

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## Objectives, Scope, and Methodology

To find out what information is available on the types of mental health services offered under state Medicaid programs, we interviewed officials knowledgeable about mental health issues and reviewed reports by organizations concerned with these issues. These included HCFA, HHS's National Institute of Mental Health (NIMH), the Library of Congress's Congressional Research Service (CRS), the National Mental Health Association (NMHA), the Intergovernmental Health Policy Project (IHPP) at the George Washington University, the National Alliance for the Mentally Ill, the American Psychiatric Association, the National Governors Association, and the National Association of State Mental Health Program Directors.

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## Results in Brief

As shown in table 1, several federal agencies publish data about (1) Medicaid and mental health expenditures and (2) numbers of recipients of services for each state. These agencies publish relatively little information, however, about the specific mental health services available to Medicaid recipients in each state.

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<sup>2</sup>The federal government will not share costs if a person is under 65 years of age, except for a person under 21. If a person receives psychiatric services just before reaching the age of 21, he or she may continue to receive them until the age of 22.

Academic, professional, and advocacy organizations publish more detailed information than federal agencies about the mental health services available to Medicaid recipients. The reports by these organizations and groups include information on expenditures, eligibility criteria, services covered, and limitations on the availability of those services.

**Table 1: Summary of Information Available**

Information available	Data sources													
	A	B	C	D	E	F	G	H	I	J	K	L	M	N
<b>Document date</b>	6/89	4/89	8/87	10/89	1987	11/88	1990 <sup>a</sup>	1987	10/88	8/89	7/89	1989	1/84	1988
<b>Periodically updated</b>	Yes	Yes	Yes	Yes	Yes	No	Yes	Yes	Yes	Yes	Yes	Yes	No	No
<b>State-by-state lists:</b>														
Total mental health payments	No	No	No	No	Yes	No	No	Yes <sup>b</sup>	No	No	No	No	No	No
Medicaid payments	Yes	Yes	Yes	No	No	Yes	No	No	No	No	No	No	No	Yes
Medicaid recipients	Yes	Yes	Yes	No	No	Yes	No	No	No	Yes	Yes <sup>c</sup>	No	No	Yes
Medicaid eligibility criteria	No	Yes	Yes	No	No	Yes	Yes	No	No	No	No	No	No	Yes
Medicaid services covered	No	Yes	Yes	Yes	No	Yes	Yes	No	Yes	No	No	Yes	Yes	Yes
General coverage limits	No	Yes	Yes	No	No	Yes	Yes	No	No	No	No	Yes	Yes	Yes
Details on coverage limits	No	No	No	No	No	No	Yes	No	No	No	No	No	Yes	No

Legend

- A = HCFA management information system, unpublished data (see p. 8)  
 B = HCFA, Program Statistics, Medicare and Medicaid Data Book, 1988 (see p. 8)  
 C = HCFA, Program Statistics, Analysis of State Medicaid Program Characteristics, 1986 (see p. 8)  
 D = HCFA, Medicaid Services State by State (see p. 17)  
 E = National Institute of Mental Health, Mental Health, United States (see p. 19)  
 F = Congressional Research Service, Medicaid Source Book: Background Data and Analysis (see p. 19)  
 G = Commerce Clearing House, Medicare and Medicaid Guide (see p. 20)  
 H = National Association of State Mental Health Program Directors, Funding Sources and Expenditures of State Mental Health Agencies: Revenue/Expenditure Study Results, Fiscal Year 1985 (see p. 20)  
 I = National Association of State Mental Health Program Directors, Medicaid: An Inventory of Community Mental Health Financing Alternatives of 38 Responding State Mental Health Agencies (see p. 20)  
 J = National Association of State Mental Health Program Directors, 43 States Have HCFA Approved ADPs [alternative disposition plan] for Persons With Mental Illness (see p. 21)  
 K = National Association of State Mental Health Program Directors, State MH Agencies Report Initial Experience in Implementing OBRA NF [nursing facility] Reform (see p. 21)  
 L = American Psychiatric Association, The Coverage Catalog (see p. 21)  
 M = The Intergovernmental Health Policy Project, Mental Health Benefits Under Medicaid: A Survey of the States (see p. 22)  
 N = National Mental Health Association, Operation Help, A Mental Health Advocate's Guide to Medicaid (see p. 22)

<sup>a</sup>Varies by state, but kept up to date.

<sup>b</sup>Excludes data on mental retardation and substance abuse.

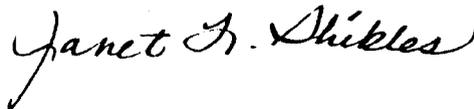
<sup>c</sup>Lists states and shows total number of people for all states.

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Further information on the data available from federal sources, along with specific examples, is included in appendix I. Information on the reports issued by academic, professional, and advocacy organizations is included in appendix II.

We did not request written comments on a draft of this report from the organizations consulted during our review. We discussed matters in this report with HCFA officials, however, and incorporated their comments where appropriate. We are sending copies of this report to interested parties and will make copies available to others on request. Please call me on 275-5451 if you or your staff have any questions about this report. Other major contributors are listed in appendix III.

Sincerely yours,



Janet L. Shikles  
Director, Health Financing  
and Policy Issues



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**Abbreviations**

ADP	alternative disposition plan
CCH	Commerce Clearing House
CRS	Congressional Research Service
HCFA	Health Care Financing Administration
HHS	Department of Health and Human Services
IHPP	Intergovernmental Health Policy Project
NIMH	National Institute of Mental Health
NMHA	National Mental Health Association

# Data Available From Federal Sources

## Health Care Financing Administration

The Health Care Financing Administration (HCFA) annually obtains data from the states concerning (1) the numbers of Medicaid recipients under 17 general categories of services and (2) Medicaid payments for such services. Mental health services are included in categories such as physician services, clinic services, and prescribed drugs, but are generally not separately identified. Only 2 of the categories relate exclusively to mental health services—inpatient mental hospital and intermediate care facilities for the mentally retarded. HCFA does not publish data separately on the 17 general categories, but may include them in reports on Medicaid.

HCFA's Medicare and Medicaid Data Book, 1988 includes (1) overall and state-by-state Medicaid eligibility criteria and (2) information on the number of Medicaid recipients and payments in each state.<sup>1</sup> Although most of the information in the data book deals with the Medicaid program in general, the book does include, for each state, the number of recipients and days of care provided in intermediate care facilities for the mentally retarded. In addition, states that limit the use of outpatient hospital psychiatric services and psychiatric services provided by physicians are noted, although the limits are not specified.

In August 1987, HCFA published Analysis of State Medicaid Program Characteristics, 1986, with information on services provided and limits placed on the use of those services. Intermediate care facility services for the mentally retarded are shown on a state-by-state basis (see table I.1); also shown are limits placed on the services and whether prior authorization,<sup>2</sup> periodic reauthorization, or both are required. In addition, similar information on inpatient psychiatric services in mental institutions provided to patients aged 65 and older and aged 21 and under is shown (see tables I.2 and I.3). Other tables in the HCFA analysis show the restrictions each state places on other services, such as outpatient psychiatric services, and the number of psychiatric visits per year.

<sup>1</sup>A new version of the data book, a HCFA representative said, should be published this spring.

<sup>2</sup>Prior authorization is a requirement to obtain approval before services are provided.

**Appendix I  
Data Available From Federal Sources**

**Table I.1: Summary of Limitations on Optional Services for Intermediate Care Facility Services for the Mentally Retarded**

<b>State</b>	<b>Provided</b>	<b>Limits</b>	<b>Prior authorization required</b>	<b>Periodic reauthorization</b>	<b>Other limits</b>
Alabama	Yes	Yes	Yes	No	No
Alaska	Yes	Yes	Yes	No	No
Arkansas	Yes	Yes	Yes	No	No
California	Yes	Yes	Yes	Yes	No
Colorado	Yes	Yes	Yes	Yes	No
Connecticut	Yes	No	No	No	No
Delaware	Yes	No	No	No	No
District of Columbia	Yes	No	No	No	No
Florida	Yes	No	No	No	No
Georgia	Yes	Yes	Yes	No	No
Hawaii	Yes	Yes	Yes	No	No
Idaho	Yes	No	No	No	No
Illinois	Yes	No	No	No	No
Indiana	Yes	Yes	No	No	Yes
Iowa	Yes	No	No	No	No
Kansas	Yes	No	No	No	No
Kentucky	Yes	Yes	Yes	Yes	No
Louisiana	Yes	No	No	No	No
Maine	Yes	No	No	No	No
Maryland	Yes	No	No	No	No
Massachusetts	Yes	No	No	No	No
Michigan	Yes	Yes	No	No	Yes
Minnesota	Yes	No	No	No	No
Mississippi	Yes	Yes	Yes	No	No
Missouri	Yes	Yes	No	No	Yes
Montana	Yes	No	No	No	No
Nebraska	Yes	Yes	No	No	Yes
Nevada	Yes	Yes	Yes	No	No
New Hampshire	Yes	Yes	Yes	Yes	No
New Jersey	Yes	Yes	No	No	Yes
New Mexico	Yes	No	No	No	No
New York	Yes	Yes	Yes	No	No
North Carolina	Yes	Yes	Yes	No	No
North Dakota	Yes	No	No	No	No
Ohio	Yes	Yes	No	No	Yes
Oklahoma	Yes	Yes	Yes	No	No
Oregon	Yes	Yes	Yes	No	No

(continued)

**Appendix I  
Data Available From Federal Sources**

<b>State</b>	<b>Provided</b>	<b>Limits</b>	<b>Prior authorization required</b>	<b>Periodic reauthorization</b>	<b>Other limits</b>
Pennsylvania	Yes	Yes	No	No	Yes
Rhode Island	Yes	Yes	Yes	No	No
South Carolina	Yes	Yes	Yes	No	No
South Dakota	Yes	Yes	No	No	Yes
Tennessee	Yes	No	No	No	No
Texas	Yes	Yes	No	No	Yes
Utah	Yes	No	No	No	No
Vermont	Yes	No	No	No	No
Virginia	Yes	No	No	No	No
Washington	Yes	No	No	No	No
West Virginia	Yes	Yes	Yes	Yes	No
Wisconsin	Yes	Yes	Yes	No	Yes
Wyoming	No	No	No	No	No

Source: Analysis of State Medicaid Program Characteristics, 1986, Health Care Financing Administration.

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**Appendix I**  
**Data Available From Federal Sources**

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**Appendix I**  
**Data Available From Federal Sources**

**Table I.2: Summary of Limitations on  
Optional Services for Patients Aged 65  
and Over in Mental Institutions**

State	Provided	Inpatient hospital		
		Limits	Prior authorization required	Other limits
Alabama	No	No	No	No
Alaska	Yes	Yes	Yes	No
Arkansas	Yes	Yes	No	Yes
California	Yes	Yes	Yes	Yes
Colorado	Yes	Yes	No	Yes
Connecticut	Yes	No	No	No
Delaware	Yes	No	No	No
District of Columbia	Yes	Yes	No	Yes
Florida	Yes	No	No	No
Georgia	No	No	No	No
Hawaii	No	No	No	No
Idaho	No	No	No	No
Illinois	Yes	No	No	No
Indiana	Yes	Yes	Yes	No
Iowa	Yes	No	No	No
Kansas	Yes	Yes	No	Yes
Kentucky	Yes	No	No	No
Louisiana	Yes	Yes	No	Yes
Maine	Yes	No	No	No
Maryland	Yes	No	No	No
Massachusetts	Yes	No	No	No
Michigan	Yes	Yes	No	Yes
Minnesota	Yes	No	No	No
Mississippi	No	No	No	No
Missouri	Yes	Yes	No	Yes
Montana	Yes	No	No	No
Nebraska	Yes	No	No	No
Nevada	Yes	Yes	Yes	Yes
New Hampshire	Yes	No	No	No
New Jersey	Yes	Yes	No	Yes
New Mexico	No	No	No	No
New York	Yes	Yes	Yes	No
North Carolina	Yes	No	No	No
North Dakota	Yes	No	No	No
Ohio	Yes	Yes	No	Yes
Oklahoma	Yes	Yes	No	Yes
Oregon	Yes	No	No	No

**Appendix I  
Data Available From Federal Sources**

<b>Skilled nursing facilities</b>				<b>Intermediate care facilities</b>			
<b>Provided</b>	<b>Limits</b>	<b>Prior authorization required</b>	<b>Other limits</b>	<b>Provided</b>	<b>Limits</b>	<b>Prior authorization required</b>	<b>Other limits</b>
Yes	Yes	Yes	No	Yes	Yes	Yes	No
No	No	No	No	No	No	No	No
Yes	Yes	Yes	No	Yes	Yes	Yes	No
Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Yes	Yes	Yes	No	Yes	Yes	Yes	No
No	No	No	No	No	No	No	No
No	No	No	No	Yes	No	No	No
Yes	Yes	No	Yes	Yes	Yes	No	Yes
No	No	No	No	No	No	No	No
No	No	No	No	No	No	No	No
No	No	No	No	No	No	No	No
No	No	No	No	Yes	Yes	No	Yes
Yes	No	No	No	Yes	No	No	No
No	No	No	No	No	No	No	No
No	No	No	No	No	No	No	No
Yes	No	No	No	Yes	No	No	No
No	No	No	No	No	No	No	No
Yes	No	No	No	Yes	No	No	No
Yes	No	No	No	Yes	No	No	No
Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Yes	No	No	No	Yes	No	No	No
No	No	No	No	No	No	No	No
No	No	No	No	No	No	No	No
Yes	No	No	No	Yes	No	No	No
Yes	No	No	No	Yes	No	No	No
Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Yes	No	No	No	Yes	No	No	No
No	No	No	No	No	No	No	No
No	No	No	No	No	No	No	No
Yes	No	No	No	Yes	No	No	No
Yes	No	No	No	Yes	No	No	No
Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
No	No	No	No	Yes	Yes	Yes	Yes
Yes	Yes	Yes	No	Yes	Yes	Yes	No
No	No	No	No	No	No	No	No
No	No	No	No	No	No	No	No
No	No	No	No	Yes	Yes	Yes	No
No	No	No	No	No	No	No	No
Yes	Yes	No	Yes	Yes	Yes	No	Yes
No	No	No	No	No	No	No	No
No	No	No	No	No	No	No	No

(continued)

**Appendix I  
Data Available From Federal Sources**

<b>State</b>	<b>Inpatient hospital</b>			
	<b>Provided</b>	<b>Limits</b>	<b>Prior authorization required</b>	<b>Other limits</b>
Pennsylvania	Yes	Yes	No	Yes
Rhode Island	No	No	No	No
South Carolina	Yes	Yes	Yes	No
South Dakota	Yes	Yes	No	Yes
Tennessee	Yes	No	No	No
Texas	No	No	No	No
Utah	Yes	No	No	No
Vermont	Yes	No	No	No
Virginia	Yes	No	No	No
Washington	Yes	No	No	No
West Virginia	No	No	No	No
Wisconsin	Yes	No	No	No
Wyoming	Yes	No	No	No

**Appendix I  
Data Available From Federal Sources**

<b>Skilled nursing facilities</b>				<b>Intermediate care facilities</b>			
<b>Provided</b>	<b>Limits</b>	<b>Prior authorization required</b>	<b>Other limits</b>	<b>Provided</b>	<b>Limits</b>	<b>Prior authorization required</b>	<b>Other limits</b>
Yes	No	No	No	Yes	No	No	No
No	No	No	No	No	No	No	No
No	No	No	No	No	No	No	No
Yes	Yes	No	Yes	Yes	Yes	No	Yes
Yes	No	No	No	Yes	No	No	No
No	No	No	No	No	No	No	No
Yes	No	No	No	Yes	No	No	No
No	No	No	No	No	No	No	No
No	No	No	No	No	No	No	No
Yes	No	No	No	Yes	No	No	No
No	No	No	No	No	No	No	No
No	No	No	No	No	No	No	No
No	No	No	No	No	No	No	No

Source: Analysis of State Medicaid Program Characteristics, 1986, Health Care Financing Administration.

**Appendix I**  
**Data Available From Federal Sources**

**Table I.3: Summary of Limitations on  
Optional Inpatient Psychiatric Services  
for Patients Aged 21 and Under**

<b>State</b>	<b>Provided</b>	<b>Limits</b>	<b>Prior authorization required</b>	<b>Other Limits</b>
Alabama	Yes	Yes	No	Yes
Alaska	Yes	No	No	No
Arkansas	Yes	Yes	No	Yes
California	Yes	Yes	Yes	Yes
Colorado	Yes	No	No	No
Connecticut	Yes	No	No	No
Delaware	No	No	No	No
District of Columbia	Yes	No	No	No
Florida	No	No	No	No
Georgia	No	No	No	No
Hawaii	No	No	No	No
Idaho	No	No	No	No
Illinois	Yes	No	No	No
Indiana	Yes	Yes	Yes	No
Iowa	Yes	No	No	No
Kansas	Yes	Yes	No	Yes
Kentucky	Yes	No	No	No
Louisiana	Yes	No	No	No
Maine	No	No	No	No
Maryland	Yes	Yes	Yes	Yes
Massachusetts	Yes	Yes	No	Yes
Michigan	Yes	Yes	No	Yes
Minnesota	Yes	No	No	No
Mississippi	No	No	No	No
Missouri	Yes	Yes	No	Yes
Montana	Yes	No	No	No
Nebraska	Yes	No	No	No
Nevada	No	No	No	No
New Hampshire	No	No	No	No
New Jersey	Yes	Yes	No	Yes
New Mexico	No	No	No	No
New York	Yes	Yes	No	Yes
North Carolina	Yes	No	No	No
North Dakota	Yes	No	No	No
Ohio	Yes	Yes	No	Yes
Oklahoma	Yes	No	No	No
Oregon	Yes	No	No	No
Pennsylvania	Yes	No	No	No

(continued)

**Appendix I  
Data Available From Federal Sources**

<b>State</b>	<b>Provided</b>	<b>Limits</b>	<b>Prior authorization required</b>	<b>Other Limits</b>
Rhode Island	No	No	No	No
South Carolina	Yes	No	No	No
South Dakota	No	No	No	No
Tennessee	Yes	No	No	No
Texas	No	No	No	No
Utah	Yes	No	No	No
Vermont	Yes	No	No	No
Virginia	No	No	No	No
Washington	Yes	No	No	No
West Virginia	Yes	No	No	No
Wisconsin	Yes	No	No	No
Wyoming	No	No	No	No

Source: Analysis of State Medicaid Program Characteristics, 1986, Health Care Financing Administration.

Like the data book, the primary focus of the analysis is the Medicaid program in general rather than specific mental health services. For example, nothing in the analysis indicates to what extent physician services, skilled nursing facility services, or outpatient hospital services are used for mental health needs. In addition, although states with coverage limits are noted, there is little information concerning the nature of the limits.

HCFA also publishes a 1-page summary of the optional services provided under each state's Medicaid program (see fig. I.1). Although more current than other HCFA publications, the summary does not provide a detailed description of the services or limitations under each category. In the summary, HCFA notes that the definitions of, and limitations on, eligibility and services vary from state to state; HCFA refers users of the summary to local welfare offices and state Medicaid agencies for additional details.



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## National Institute of Mental Health

The National Institute of Mental Health (NIMH), within HHS's Public Health Service, publishes data, approximately every other year, about mental health expenditures in the states. The most recent data include mental health services but, like earlier NIMH data, do not separately break out the services funded by Medicaid.<sup>3</sup> Although the data deal primarily with expenditures and funding, some information about overall state services can be inferred. For example, using the data, one can infer that some states rely heavily on state mental hospitals for their mental health services; other states emphasize community-based programs.

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## CRS Medicaid Source Book

CRS's Medicaid Source Book: Background Data and Analysis contains state-by-state listings of general eligibility criteria, coverage, limitations, and expenditures, but limited information on mental health services.<sup>4</sup> Two of the book's appendixes provide general descriptions of Medicaid services for the mentally ill and for people who are mentally retarded or have some related conditions. The appendixes contain descriptions of the services used to treat these conditions and such data as numbers of recipients and payments. But the appendixes do not include each state's specific mental health services.

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<sup>3</sup>R.W. Manderscheid and S.A. Barrett, eds., *Mental Health, United States, 1987*, National Institute of Mental Health, DHHS Pub. No. (ADM)87-1518 (Washington, D.C.: U.S. Govt. Print. Off., 1987).

<sup>4</sup>Issued to the Subcommittee on Health and Environment, House Committee on Energy and Commerce (Nov. 1988).

# Data Published by Academic, Professional, and Advocacy Organizations

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## Commerce Clearing House

Commerce Clearing House (CCH) publishes its Medicare and Medicaid Guide in looseleaf binders so that information can be kept up-to-date with changes in federal and state laws and regulations. In the state charts section of the guide, CCH summarizes the (1) eligibility criteria used by each state for Medicaid coverage, (2) types of services each state's Medicaid program covers, and (3) basis used by each state to pay for services provided to Medicaid recipients. Included in the descriptions are various limitations established by each state, such as the maximum number of certain types of services, the maximum payment for selected services, or the days of the week when services are provided. To facilitate collection of additional information, the CCH guide also includes the names, addresses, and telephone numbers of the officials in each state responsible for administering the state Medicaid programs.

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## National Association of State Mental Health Program Directors

The association periodically publishes reports and studies concerning mental health issues. Its most extensive publication describes funding sources and expenditures.<sup>1</sup> Because the association is one of the sources of the data used in the NIMH publication described in appendix I, the association publication contains data similar to that in the NIMH publication.

The association also conducts special studies. One of them gives information, for each of the responding states,<sup>2</sup> on 10 general categories of mental health services under Medicaid. For 4 of the categories, this study gives information on (1) how many of the states reported providing such services, as well as the types of services provided, or (2) who provides the services in each state, or (3) both. For the other services, the study only indicates whether each state covers each service.

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<sup>1</sup>National Association of State Mental Health Program Directors, Funding Sources and Expenditures of State Mental Health Agencies: Revenue/Expenditure Study Results, Fiscal Year 1985.

<sup>2</sup>National Association of State Mental Health Program Directors, Medicaid: An Inventory of Community Mental Health Financing Alternatives of 38 Responding State Mental Health Agencies, Study #88-604 (Oct. 31, 1988).

Another association study discusses alternative disposition plans (ADP).<sup>3,4</sup> The study includes (1) which states have approved ADPs, (2) the time frames allowed by the plans, and (3) state-by-state estimates of the number of nursing facility residents who require transfer to alternate care settings.

In addition, the association issued a study of (1) states reporting the use of preadmission screening for mental illness among nursing facility applicants and (2) the total number of people who received such screening during the first quarter of 1989.<sup>5,6</sup> The study also includes the costs reported by the states for the screening and describes who does it in each state.

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## American Psychiatric Association's Coverage Catalog

The American Psychiatric Association's The Coverage Catalog (2nd ed. rev., 1989) is a detailed compendium of public and private sector health insurance plans covering mental and nervous disorders. The catalog also describes (1) the general types of mental health services available under Medicaid and (2), briefly, each state's Medicaid mental health coverage, limitations, and prior authorization requirements for the following services:

- inpatient general hospital,
- outpatient hospital,
- physician services,
- nonphysician services,
- clinic services, and
- inpatient psychiatric specialty hospital for patients aged 65 and over or aged 21 and under.

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<sup>3</sup>National Association of State Mental Health Program Directors, 43 States Have HCFA Approved ADPs [alternative disposition plan] for Persons With Mental Illnesses (Aug. 10, 1989).

<sup>4</sup>The Omnibus Budget Reconciliation Act of 1987 requires that state mental health authorities determine the appropriateness of current placements for all nursing facility residents with mental illness. Of all inappropriately placed residents, those who have not continuously lived in a nursing facility for at least 30 months before the date of the determination must be transferred to facilities providing the appropriate care unless states have ADPs approved by HCFA.

<sup>5</sup>National Association of State Mental Health Program Directors, State MH Agencies Report Initial Experience in Implementing OBRA NF [nursing facility] Reform, Study #89-635 (July 24, 1989).

<sup>6</sup>Preadmission screening for nursing facility applicants is an independent review, based on an applicant's mental condition, of his or her need to be admitted into a nursing facility. The review is done before admission.

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## Intergovernmental Health Policy Project

The Intergovernmental Health Policy Project (IHPP) at the George Washington University monitors, on an ongoing basis, changes in state health laws and programs. IHPP is funded by HCFA and Public Health Service contracts, as well as by various foundation awards and corporate contributions. IHPP produces regular newsletters (State Health Notes and State Health Reports) and an annual report summarizing major legislation enacted by the states concerning mental health and substance abuse.

IHPP published a report in 1984 describing each state's coverage of mental health services under Medicaid.<sup>7</sup> It includes information concerning mental health coverage and limitations for the same basic services included in the American Psychiatric Association's Coverage Catalog. The primary difference is that IHPP's descriptions are more complete and detailed for many of the states. The American Psychiatric Association catalog, however, is more recent.

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## National Mental Health Association

The National Mental Health Association (NMHA) published a guide to mental health coverage under Medicaid.<sup>8</sup> The guide, designed to help mental health advocates encourage changes in Medicaid plans and policies, generally describes the Medicaid program and mental health services provided under the program. It also contains an annotated bibliography of resource materials and various tables; the tables include information on expenditures, eligibility criteria, and types of services covered by each state's Medicaid program. Also included is a table with outpatient services under the various state Medicaid programs, including outpatient treatment in clinics and hospitals, as well as other services, such as personal and home health care for Medicaid recipients with mental health problems (see fig. II.1). Whether states place limits on psychiatrists' services is shown on the table, but there are no indications concerning the nature or extent of the limits. Although some of the information in the NMHA publication had already been published by HCFA, other sources were also used to show a more complete picture of state mental health programs.

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<sup>7</sup>Gail E. Toff, Mental Health Benefits Under Medicaid: A Survey of the States, Intergovernmental Health Policy Project, George Washington University (Jan. 1984).

<sup>8</sup>Chris Koyanagi, Operation Help: A Mental Health Advocate's Guide to Medicaid, National Mental Health Association (1988).

Appendix II  
Data Published by Academic, Professional,  
and Advocacy Organizations

Figure II.1: Medicaid Outpatient Options by State

States	CLINIC				HOSPITAL											
	Case Management	Rehabilitation	Outpatient Therapy	Day Treatment/ Partial Rehabilitation	General Hospit. Day Treatment/Partial Hospitalization	Psych. Hospit. Outpatient Services	Limits Placed on Psychiatrists Services	Psychologists Services	Social Worker Services	EPSDT Expanded Services	Drugs	Mental Health Personal Care	Mental Health Home Health Care	Home & Comm. Based Care Waiver		
ALABAMA																
ALASKA						X										
ARIZONA																
ARKANSAS		X	X	X	X					X	X					
CALIFORNIA			X	X		X	X	X			X			X		
COLORADO	X		X	X	X	X	X	X			X	X	X	X		
CONNECTICUT				X	X	X	X	X			X	X	X			
DELAWARE			X	X						X	X					
D.C.										X	X	X	X			
FLORIDA		X	X	X							X	X				
GEORGIA	X		X	X	X			X			X		X			
HAWAII			X	X				X		X	X					
IDAHO		X	X					X	X		X					
ILLINOIS			X	X	X			X		X	X					
INDIANA			X	X		X	X	X			X	X	X			
IOWA			X					X	X		X		X			
KANSAS			X	X				X	X		X	X	X			
KENTUCKY			X	X				X	X		X	X	X			
LOUISIANA			X	X	X						X	X	X			
MAINE		X			X	X		X	X		X	X	X			
MARYLAND			X	X	X	X	X			X	X	X	X			
MASSACHUSETTS			X	X	X	X		X	X		X					
MICHIGAN			X	X	X	X					X	X				
MINNESOTA			X		X	X		X			X	X	X			
MISSISSIPPI			X		X		X				X					
MISSOURI			X	X		X					X					
MONTANA			X	X				X	X		X					
NEBRASKA			X	X		X					X					
NEVADA			X	X				X			X					
NEW HAMPSHIRE	X	X	X	X			X	X			X					
NEW JERSEY			X		X	X	X	X		X	X	X				
NEW MEXICO			X					X			X					
NEW YORK		X	X	X	X	X		X		X	X	X	X			
N. CAROLINA		X	X	X	X	X	X				X					
N. DAKOTA			X	X	X	X					X		X			
OHIO	X	X	X	X	X	X	X	X			X		X			

**Appendix II  
Data Published by Academic, Professional,  
and Advocacy Organizations**

**Medicaid Outpatient Options By State**

*(Continued)*

States	CLINIC				HOSPITAL				Psychologists Services	Social Worker Services	EPSDT Expanded Services	Drugs	Mental Health Personal Care	Mental Health Home Health Care	Home & Comm. Based Care Waiver
	Case Management	Rehabilitation	Outpatient Therapy	Day Treatment/Partial Rehabilitation	General Hospit. Day Treatment/Partial Hospitalization	Psych. Hospit. Outpatient Services	Limits Placed on Psychiatrists Services								
OREGON	-	X	X	-	X	X	-	-	X	-	X	-	-	-	X
S. CAROLINA	X	X	X	X	-	X	-	-	-	X	X	X	X	-	-
TEXAS	-	-	-	-	-	-	-	X	-	-	X	X	-	-	-
VIRGINIA	-	-	X	-	-	-	X	X	X	X	X	-	X	-	X
WISCONSIN	-	X	X	-	-	X	-	X	X	X	X	-	-	-	-

\*Rural health clinics only.

SOURCES:

"Mental Health Benefits under Medicaid: A Survey of the States, January 1984," Intergovernmental Health Policy Project, Washington, DC.

"State Medicaid Plan Provisions for Mental Health," Mental Health Policy Resource Center, Washington, DC, July 1987.

"Medicaid: An Inventory of Community Mental Health Financing Alternatives," Preliminary Study - 88-604, National Association of State Mental Health Program Directors, A Report by E. Clarke Ross, July 1988.

"Health Care Financing: Program Statistics: Analysis of State Medicaid Program Characteristics," 1986, Health Care Financing Administration, August 1987.

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