JMOC Update: Behavioral Health Redesign

September 22, 2016

Why is Ohio Changing?

Current State

- Limited billing codes for all of behavioral health
- Lack of detail on specific services rendered and reimbursed for
- Outdated billing code structure
- Not compliant with national coding standards
- Rates not tied to provider type
- Little information regarding billing practitioner available
- Limited ability of practitioners to practice at the top of their scope of professional practice
- Historically Fee-for-Service
- Difficult to coordinate care
- Physical and behavioral health treated separately
- Difficult to transition to managed care

Vision and Outcomes

- All providers practice at the top of their scope of professional practice
- Integration of behavioral health & physical health services
- High intensity services available for those with SPMI and SED, and addiction
- Improved health outcomes for Ohioans with mental illness and/or addictions
- Services and supports available are sustainable with budgeted resources
- Implementation of value-based payment methodology
- Coordination of benefits across payers

Behavioral Health Redesign Updated Timeline

The BH Redesign is composed of numerous initiatives with different implementation dates and milestones

August 2016

Specialized Recovery Services

- Peer Recovery Support
- Individual Placement and Support Supported Employment
- Recovery Management

2016 Continuous Training and Stakeholder Engagement

JANUARY 2017

Opioid Treatment Programs

The following will be available for opioid treatment programs (OTPs) on January 1st, 2017:

- Daily and weekly administration of buprenorphine and methadone
- Naloxone (Narcan) overdose rescue drug
- Injectable and oral naltrexone

Require Identification of Rendering Provider

- Provider information required on all claims per federal statute.
- Rendering providers associated with agencies.
 Respite
- Respite care for families and caregivers of children with severe emotional disorder implemented by managed care plans

JULY 2017

Updated Benefit Package

- Office and home-based primary care services
- Full range of psychotherapy services
- Psychological testing and diagnostic assessment
- Mental health day treatment
- Restructuring SUD benefit package according to ASAM levels of care
- · SUD residential treatment

Mental health rehabilitation services available:

- Assertive Community Treatment (for adults, includes peer support)
- Intensive Home Based Treatment— (for youth)
- Therapeutic behavioral services
- Psychosocial rehabilitation

Children Intensive Behavioral Services

- Updating codes for services for children with autism spectrum disorders
- Provided by Ohio-certified behavioral analysts and other qualified practitioners

Improvement of Program Performance

- Alignment of behavioral health with National Correct Coding standards.
- · Alignment of CPT and HCPCS codes with AMA standards
- Ensure Medicaid is payer of last resort (maximize TPL and Medicare cost-avoidance).
- Require Medicare participation for providers serving Medicare enrollees.

IMD Services

• Inclusion of IMD services for Managed Care regulations

JANUARY 2018

Managed Care

- Behavioral health services carved into Managed Care as of January 2018.
- 12 month continuation of behavioral health policies

Updated Benefit Package



Added evidence-based/state-best practices and associated payments



Aligned SUD Benefit with ASAM levels of care



No diagnosis edits for children's services provided by licensed practitioners



EKGs

Monitoring of cardiac health for individuals receiving BH medications through use of EKG



Covered entire psychotherapy code set, including family psychotherapy.



Expanded Code Set

Expanded code set and practitioner list (e.g., physician-administered J-codes) to more accurately represent services and practitioners



Inclusion of certain clinical laboratory tests and vaccinations



Medical Services

Registered Nurse and Licensed Practical Nurse coding solution Compliance with national correct coding



MH para-professionals with 3+ years of experience (on or before June 30th, 2017) will be able to provide Therapeutic Behavioral Services



Added psychological testing codes

Updated Benefit Package



Expanded coverage to include buprenorphine-based medication dispensing and administration.



Introduced peer recovery support as a covered Medicaid service

Peer Support: Medicaid

MH Day Treatment

Added MH day treatment hourly and per diem codes and rates as replacements to MH partial hospitalization code and rate



Added Screening, Brief Intervention and Referral to Treatment to the mental health benefit package as a best practice



ASAM Outpatient Level of Care is available to everyone (not subject to prior authorization; limited only by total hours)



Per diem payments are available for SUD residential levels of care, including withdrawal management. Providers only need access to a psychiatrist.



SUD and MH payment rates are the same for common codes/activities (e.g., E&M, nursing, psychotherapy)



Implementing Specialized Recovery Services program for adults identified with a SPMI



Total investment into the BH System of \$37.5M above budget neutrality

BH Redesign Feedback & Training Timeline

Stakeholders were given numerous opportunities to provide feedback as well as many training opportunities to understand the changes coming to Ohio's BH system

	2015				2016											
	May - Jul	Aug - Oct	Nov – Dec	Jan.	Feb.	Mar.	Apr.	May	Jun.	Jul.	Aug.	Sep.	Oct.	Nov.	Dec.	Jan.
Stakeholder Meetings																
							ore Team between				B&SD meetin 8/23	ng I	B&SD meeting 10/6	3 B&SD mo	0	B&SD meeting early January 2017
Manuals & Coding Chart					町			[W)	
				C	Code Chart V Shared S	ersion V	evised ersion ared 3/9		Revised Code & Draft Prov Manual Share	vider	Final Code Chart Shared 8/23	Jan. 1 Manual Finalized	Stakehold Feedbad	k on Mar	Trainings nual and g chart	
Trainings							oric contract of the second						ox ox			ture Trainings As Needed
							CPT code training 4/14	BH 101 Train 7 sessions April & Ma	in	10 sessio	nal Trainings ons in July & ugust	CPT code tra 3 sessions in & Septem	August 8 ses	H 201 Training ssions in Octol November		

The Ohio Department of Medicaid and Department of Mental Health and Addiction Services has consistently and continually engaged stakeholders throughout the BH redesign process.

Addiction Roundtable Co-Chair Clark County Department of Job and Family Services

Aetna Coalition of Homelessness and Housing in Ohio

Alcohol Drug and Mental Health (ADAMH) Board Common Ground Family Services

BASIC Connections Cleveland

Beech Brook Consumer Support Services

Buckeye Health Plan CSAO

Buckeye Ranch CSH

Care Source Franklin County Children Services

Care Star Greater Cincinnati Behavioral Health Services

Case Western Reserve University Center for Evidence Based

Practices

Catholic Charities Dioceses of Cleveland Harbor

Cenpatico Behavioral Health Homes for Kids

Children's Advantage Family Behavioral Health Services Joint Medicaid Oversight Committee

Children's Home of Cincinnati Knox County Department of Job and Family Services

Lake County Alcohol, Drug Addiction and Mental Health

Hamilton County Job & Family Services

Cincinnati Children's Hospital Medical Center
Services Board

Ohio Association of County Behavioral Health Authorities

The Ohio Department of Medicaid and Department of Mental Health and Addiction Services has consistently and continually engaged stakeholders throughout the BH redesign process.

Magnolia Club House Ohio Association of Child Caring Agencies

Mental Health & Recovery Board of Clark, Greene and

Madison Counties

Mental Health and Addiction Advocacy Coalition Ohio Association of Health Plans

Molina Healthcare Ohio Children's Hospital Association

Montgomery County Department of Job and Family Services Ohio Citizen's Advocates

Morrow County Public Children Services Agency Ohio Community Corrections Association

Murtis Taylor Ohio Council of Behavioral Health & Family Services Providers

NAMI Ohio Department of Developmental Disabilities

National Association of Social Workers Ohio Department of Job and Family Services

Nationwide Children's Hospital Ohio Empowerment Coalition

NCH Ohio Family and Children First

Northern Ohio Recovery Association OhioGuidestone

Ohio Judicial Conference Ohio Hospital Association

Ohio Alliance of Recovery Providers Ohio Hospital for Psychiatry

The Ohio Department of Medicaid and Department of Mental Health and Addiction Services has consistently and continually engaged stakeholders throughout the BH redesign process.

Ohio Psychiatric Physicians Association South Community Inc.

Vorys Health Care Advisors Stark County Child & Adolescent Behavioral Health

Wingspan Stark County Mental Health and Recovery Services Board

Youth Advocate Services (YAS)

Summa Health

Zepf Center Summit County ADM Board

Ohio Psychological Association Summit County Children Services

Ohio State University Wexner Medical Center (OSUMC) Talbert House

Ohio University The Batchelder Company

Paramount Health Plans

The Ohio Council of Behavioral Health and Family Services

Providers

Positive Leaps The Peer Center

ProMedica Health Systems Trumbull County Children Services

Public Children Services Association of Ohio (PCSAO) UMCH Family Services

Public Health – Dayton & Montgomery County United Healthcare

Quest Recovery and Prevention Services Rainbow Babies Hospital

Quest Smith House Signature Health Inc

The Ohio Department of Medicaid and Department of Mental Health and Addiction Services has consistently and continually engaged stakeholders throughout the BH redesign process.



The Ohio Departments of Medicaid and Mental Health and Addiction Services have partnered with the following consulting firms as part of BH Redesign:

Deloitte, Mercer, and Milliman

Stakeholder Communication Approach

Communication Tools Utilized



A **centralized** behavioral health redesign **website** acts as a **single**, **two-way** communication resource.



Newsletters are frequently sent to stakeholders. Newsletters cover general policy and detailed technical information.



Whitepapers were published on the website explaining Ohio's behavioral health redesign background and future changes.



Detailed billing-related resources and manuals are **posted** on the **website**.



Stakeholders are able to **submit questions** and **concerns** via the website.



All **trainings** are **posted** on the **website** as reference for providers and stakeholders who are unable to participate.



Videos were developed and posted on the website to **actively** and **visually** engage stakeholders.

Mental Health Day Treatment



Mental Health Day Treatment Ideology

Preserves Current Service Structure and Scope



Reimbursement Model Supports How Providers Deliver Services



Pays for Practitioner Licensure and Education

Rate Development



MH and SUD Service Codes

Were Out of Compliance with

National Standards



All Codes Were Updated to be NCCI Compliant



All Codes are Now Subject to National and State Standards



Compliance Affects
Reimbursement Rates

Rate Example



Specific procedure codes may not be reimbursed above Medicare according to State law (ORC 5164.70) and in accordance with federal policies, which impacts the rates we are able to pay for nursing services.

Can only pay 85% of the physician rate for services delivered by advanced practice nurses

Due to Medicare's limited coverage for RN and LPN services, Medicaid chose additional procedure codes that are not covered under Medicare and have a Medicaid specific rate

This may require agencies to modify their current business models

Supporting Continued Access

Ensure Sustainability

All changes and stakeholder engagement are intended to ensure changes to the Behavioral Health program are sustainable into the future

Provide Training and Support

Numerous training and technical assistance opportunities have been provided to support the goal of sustainability

Encourage Organizational Awareness

Organizations must also be attentive to changes and adjust business models where necessary **Ensure Access**

The state will collaborate with boards, providers, and other local entities to ensure ongoing access to services and continuity of care for individuals

Next Steps

Next Steps



Policy and Regulatory

- Seek State Plan Amendment approvals from CMS
- Begin the Ohio Rules process



Stakeholder Meetings, Trainings, and Ongoing Communications

- Upcoming stakeholder meetings: October 6th and November 30th
- BH 201 Trainings: Eight sessions throughout October and November
- Ongoing communication with stakeholders



Provider Manuals

- Finalize the January 1 Provider Manual
- Continue to refine the July 2017 Provider Manual