Maryland Medicaid Health Homes

Program Summary
Health Homes for individuals with chronic conditions augment the State’s broader efforts to integrate somatic and behavioral health services. The program targets populations with behavioral health needs who are at high risk for additional chronic conditions, offering them enhanced care management services from providers with whom they regularly receive care. Health Homes are designed to enhance whole-person, patient-centered care, empowering participants to manage and prevent chronic conditions in order to improve health outcomes, while reducing avoidable hospital encounters. Health Homes provide the following six core services:

- Comprehensive Care Management
- Comprehensive Transitional Care
- Care Coordination
- Individual and Family Support
- Health Promotion
- Referral to Community & Social Support

Participant Eligibility
Individuals eligible for Health Home services include those with diagnoses of serious persistent mental illness (SPMI), opioid substance use disorders (determined to be at risk for a second chronic condition), or children with serious emotional disturbance (SED). Participants must be enrolled to receive the appropriate psychiatric rehabilitation program (PRP), mobile treatment, or opioid treatment program (OTP) services from a Health Home provider in order to qualify for Health Home. The Department anticipates Health Homes will serve up to 15,000 individuals in Maryland.

Provider Qualifications & Supports
To enroll as a Health Home, providers must be:

- enrolled as a Medicaid provider with the State of Maryland;
- licensed as a PRP, Mobile Treatment, or OTP provider;
- accredited, or in the process of seeking Health Home accreditation;
- able to meet minimum Health Home staffing requirements; and
- able to provide Health Home services and meet specified reporting requirements.

In addition to ongoing training and guidance from the Department, several forms of health information technology aid Health Homes in serving their participants, at zero or minimal cost to providers. This includes real-time hospital encounter alerts and pharmacy use data from the Chesapeake Regional Information System for our Patients (CRISP), as well as an eMedicaid online portal that acts as an enrollment, reporting, and tracking mechanism. Health Home providers receive a per member, per month reimbursement of $98.87, contingent upon minimum service delivery and adherence to all requirements.