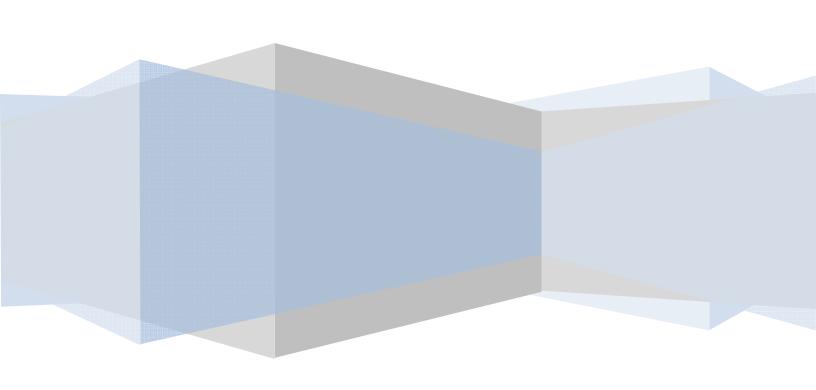
Maryland Medicaid Chronic Health Homes Quarterly Report

January to June 2016



I. Executive Summary

January through June 2016 for Health Homes were marked by an increase in provider and participant enrollment. As of June 2015, 81 Health Home sites have about 5,400 active participants. Claims paid since the launch of the program total approximately \$8,956,661.45 and monthly claims averaged \$398,171 in Quarters 1 and 2.

The first half of 2016 included the launch of Health Home compliance/ technical assistance site visiting and the release of a letter from the Department asking for coordination from Health Home partners. It also included a renewed emphasis on system changes to streamline data entry into eMedicaid.

II. Background

The Health Home program targets populations with behavioral health needs who are at high risk for chronic conditions, offering care management services from providers from whom they regularly receive care. Individuals with diagnoses of serious persistent mental illness (SPMI), opioid substance use disorders (SUD), or children with serious emotional disturbance (SED) can qualify for services if they are eligible for and engaged with a psychiatric rehabilitation program (PRP), a mobile treatment (MT) provider, or an opioid treatment program (OTP) that is enrolled as a Health Home.

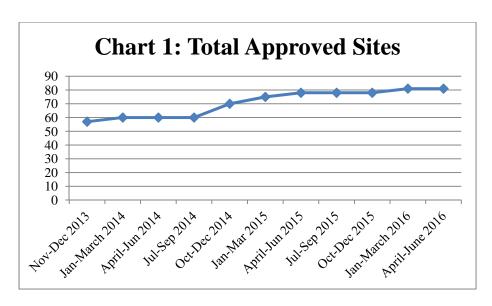
III. By the Numbers

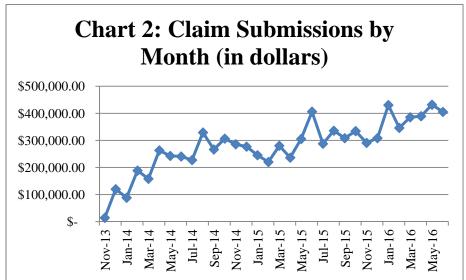
The Health Homes program enrollment has increased to 5400 active participants in Q2 of 2016. The tables below provide detail regarding participant and provider enrollment:

Table 1: Participant Summary	
Total Participants	5416
Adult Participants (>18)	4793
Youth Participants (<18)	623
Participation by Provider Type	
Psychiatric Rehabilitation Programs	4009
Mobile Treatment	231
Opioid Treatment Programs	1176

Table 2: Provider Summary	
Approved Sites (total)	81
Psychiatric Rehabilitation Programs	63
Mobile Treatment	10
Opioid Treatment Programs	8

Charts 1 and 2 below illustrate the increases in program enrollment and claims submission since the launch of the Health Homes program, respectively. Both provider enrollment and claims submission have increased during the first half of 2016. The increase in provider enrollment came mostly from OTPs and this may explain the increase in claim submission as well.





IV. Program Data Analysis

The Department's Planning Administration in collaboration with The Hilltop Institute has prepared an evaluation of the first eight quarters of the Health Homes Program from October 2013 through September 2015. The report provides a description of the population of Health Home enrollees and their interactions with the program and the health care system at large. Performance measures included in the report were selected from the original Maryland State Plan Amendment (SPA) application and quality measure recommendations published by the Centers for Medicare & Medicaid Services. The Quarterly Report and all other evaluations can be accessed online: https://mmcp.dhmh.maryland.gov/Pages/Health-Home-Program-Evolution-and-Outcomes.aspx.

V. Policy and Process Updates

a. Provider Training and Outreach

The Department's focus on program outreach and OTP provider enrollment in 2015 paid off in early 2016 with three new OTP health homes enrolled.

The Department began compliance and technical assistance based site visits to Health Home providers in April 2016. These site visits provide an added opportunity for Health Home staff to interface with State officials and an experienced Health Home technical advisor. Health Homes are reviewed for compliance to State regulations, have an opportunity to receive feedback from technical advisors, and are able to ask questions of/ provide suggestions to the State.

b. Systems Improvements

The Department made several improvements to the eMedicaid reporting system to ensure measures collected are appropriate and logical and based on provider feedback and clinical review including a change to the way care plan updates are documented in eMedicaid. The Department continues to collect feedback from providers offering suggestions for improvements to the eMedicaid system and is actively working on many of these suggestions.

c. Claims Review

In April, the Department completed an extensive review of all claims with a date of service from January to October 2015 to identify trends and ensure providers fully understand and adhere to billing requirements. Providers were very responsive in working with the Department to correct any identified issues and educate billing staff to avoid errors. The next review will take place in December 2016 and will include claims from November 2015 to June 2016.

d. Policy Updates

The Department released a letter a letter asking hospitals, primary care providers, and any other providers to collaborate and coordinate with Health Homes, especially as related to information sharing. The letter gives a brief overview of health homes and why cooperation is important to the goals of health homes and then goes into more detail to attempt to reduce barriers caused by privacy concerns. This letter was drafted by the Department after hearing concerns from Health Homes that they have difficulty getting needed patient information and that this barrier is impacting Health Homes' abilities to provide quality care for those patients. Health Homes are free to use this letter however they think it will benefit their Health Home the most. The Department suggests mailing/ emailing this letter to providers that Health Homes often work with and attaching it to requests for patient information.

The fiscal 2017 State budget approved under Senate Bill 190 and assigned Chapter 143 in the 2016 Laws of Maryland Volume V, includes a two percent rate increase for community behavioral health providers, in accordance with Article III, §52(6) of the Maryland Constitution, April 12, 2016. Effective July 1, 2016, this included an increase in the rate for health homes. The new fee schedule can be found here:

 $\underline{https://mmcp.dhmh.maryland.gov/Documents/Health\%20 Homes\%20 Fee\%20 Schedule-\%207-1-16.pdf.}$

VI. Looking Forward

In the coming quarter, the Department will continue its site visits and place an emphasis on needed system updates. Evaluation of the program is ongoing.