



DEPARTMENT OF
HEALTH AND MENTAL HYGIENE



Maryland Medicaid's Partnership in Improving Behavioral Health Services

September 24, 2014



How are MCO's connected to Substance Use Disorder Programs?

- As a result of Behavioral Health Integration set to take effect January 2015, SUD services will be "carved-out" of Maryland Medicaid's HealthChoice managed care program and administered along with Mental Health Services by an Administrative Service Organization.



RFP for Behavioral Health

- Worked with stakeholders to develop requirements for Integrated Behavioral Health ASO
- Goal was to take a good system and make it better by integrating and coordinating mental health and substance use services
- Challenge is to build in care coordination for physical health care



What is an ASO?

- An Administrative Service Organization (ASO) is an organization contracted by the State to help manage services.
- ASOs do not provide health services but are responsible for:
 - Helping consumers get proper services
 - Handling authorizations
 - Ensuring quality and appropriateness of services
 - Processing claims
 - Evaluating the system and compiling data for the management information system

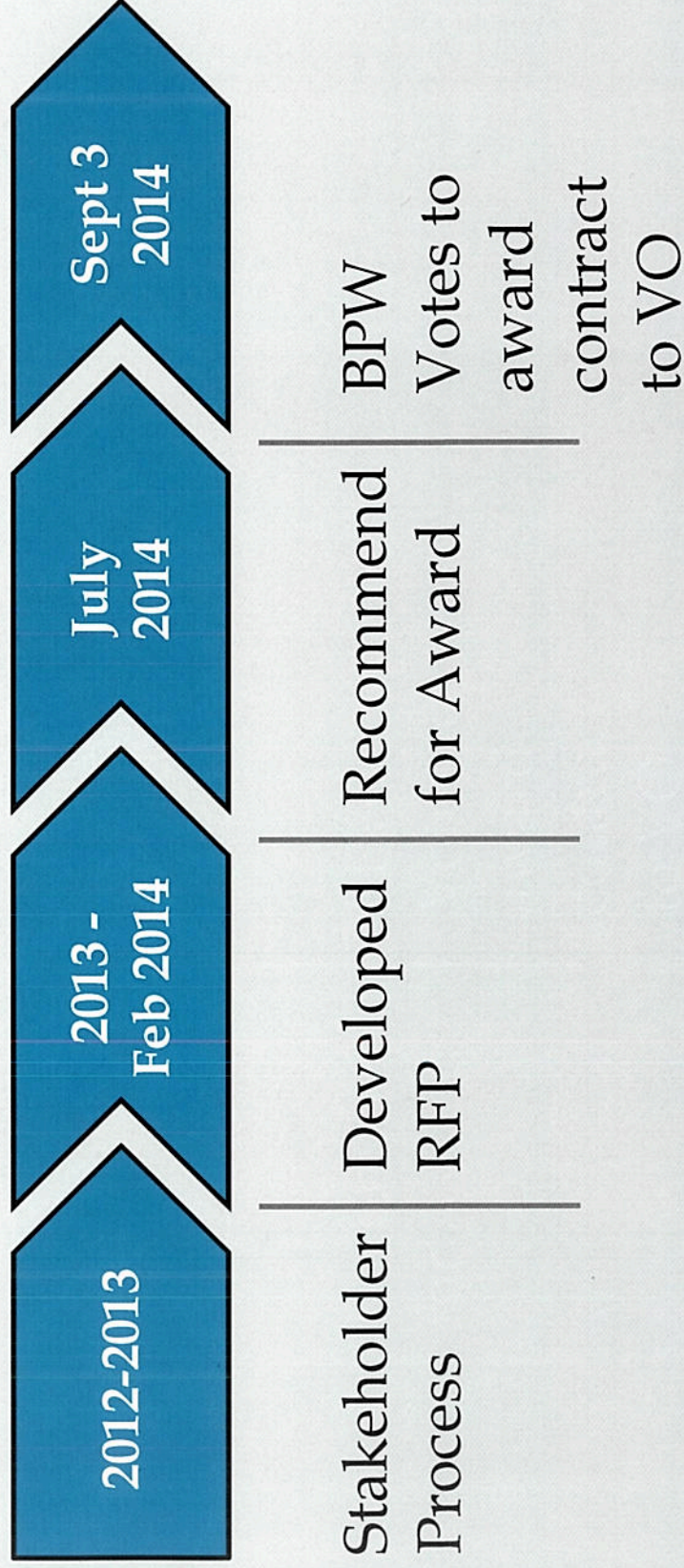


ASO History

- Persons needing “specialty mental health care” have received their health benefit through managed fee-for-service by an ASO under contract to the Mental Hygiene Administration since 1997
- Starting in January 2015, Medicaid in collaboration with the Behavioral Health Administration will manage the ASO contract



ASO Transition





Impact of Transition

- Starting on 1/1/15, submit claims to ASO called Value Options
- Any willing, credentialed providers can participate in ASO
- There will be a requirement to notify ASO at beginning of treatment and there will be preauthorization using ASAM criteria for certain services

The ASO will:

- Offer trainings to providers on how to bill



Impact of Transition

The ASO will:

- Automate the notification/ preauthorization process
- Offer trainings to providers on how to enroll patients
- Medicaid and BHA will be involved in making sure this happens in a timely manner so that there is a smooth transition



Big Picture on Transition

- The Department is actively engaged with the ASO in frequent meetings towards a smooth transition
- Medicaid and BHA will work together with ASO and stakeholders to make sure that:
 - Participants receive needed SUD services
 - Providers are paid so that they can continue to provide care for participants



Keys to Successful Transition to ASO

- We are confident of a successful launch of the Behavioral Health ASO on January 1, 2015. This is in part because Value Options is already administering the specialty mental health system. This means that the eligibility, provider and claims processing interfaces with the Medicaid Management Information System (MMIS) are already in place.



First Key Implementation Task

- Enrolling SUD providers into the VO system. This task will be made easier by the fact that many providers are already enrolled in MMIS and therefore that data can be shared with the vendor and by the fact that VO has been administering SUD benefits for two of the current MCOs. VO also has commercial providers in Maryland that they plan to recruit to provide services for Medicaid patients.



Second Key

- Setting up notification/ authorization screens and medical necessity standards for SUD services. This task is doable because VO has experience setting up authorization screens for mental health services and has used ASAM medical necessity standards in Maryland for SUD services.



Third Key

- Setting up a user friendly provider portal and training providers to use the authorization screens for SUD services. This will be a critical job, but it will be made easier by the fact that it will be automated and that providers will only have to seek notification/authorization from one ASO rather than eight MCOs. Providers will need to be trained concerning obtaining authorization, and billing for services.



Fourth Key

- Developing a user friendly participant website which includes participant handbooks, provider directories, and education and outreach materials. There is already such a site for mental health services which can be strengthened and enriched with information for individuals with SUDs.



Fifth Key

- Coordinating care for individuals with co-occurring conditions - the Department and VO will work with MCOs to provide data concerning individuals receiving behavioral health services.



Sixth Key

- Developing a state of the art call center for participants and providers. The current call center will be enhanced with additional staffing and with individuals that have expertise in SUD services.



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Questions?