



## 2018 IHCP Annual Workshop

### MDwise Behavioral Health

*Providing health coverage to Indiana families since 1994*

- MDwise History
- Updates
- Contracting
- Eligibility & Benefits
- Prior Authorization (PA)
- Claims
- Drug Screening
- ABA Services
- SUD Residential Services
- Opioid Treatment Program (OTP)
- Contact
- Resources
- Questions

- 1994: MDwise founded as Indiana-based nonprofit health care company Central Indiana Managed Care Organization, Inc. (CIMCO), utilizing a delivery system model
- 2001: CIMCO teamed up with IU Health Plan and formed into MDwise, Inc., serving more than 55,000 Hoosier Healthwise members.
- 2007: MDwise begins service Care Select (now Hoosier Care Connect) members
- 2007: MDwise selected to provide care through the Healthy Indiana Plan
- 2018: MDwise acquired by Michigan-based McLaren Health Care; one of Michigan's largest integrated health systems

## McLaren Health Care:

- Is one of the largest integrated health care systems in Michigan
- Owns 15 hospitals, including Barbara Ann Karmanos, nationally renowned for their cancer care and outcomes
- Employs over 500 physicians
- Trains over 550 residents annually
- Has a workforce of over 20,000
- Owns McLaren Health Plan, who covers over 265,000 members in Medicaid, commercial, and Medicare Supplemental markets.

- Sharing Best Practices between MDwise and McLaren Health Plan, such as:
  - Care Management
  - Opioid Crisis Management
  - Effectively managing inappropriate ER utilization
  - Streamlining Prior Authorizations
  - Pay for Value Physician Incentive programs
  - Claims adjudication
- Results are Demonstrating:
  - Improvement in health care outcomes for our members
  - Enhanced access for members
  - Greater administrative efficiencies, which allow more health care dollars to be spent on the actual delivery of medical care

## Effective 1/1/19:

- MDwise is restructuring its Delivery System model to:
  - Improve claim payment timeliness and accuracy
  - Streamline and reduce administrative redundancy for providers
  - Provide greater access for our members
- One standard authorization list
- One point of contact for all authorization requests
- One claim submission address
- Non-Excel Delivery System contracts
  - Providers not contracted with MDwise Excel must contract to stay in network.

To become a MDwise Behavioral Health Provider:

- Complete the Behavioral Health Contract Inquiry Form
  - <https://www.mdwise.org/for-providers/behavioral-health>
- Submit to [prenrollment@mdwise.org](mailto:prenrollment@mdwise.org)
- A ticket number (ex: PR000xxxxx) will be issued for your request
- Questions or inquiring on a current contract request?
  - Provider Relations: 317-822-7300 ext. 5800
  - Be sure to reference the ticket number in you call

## Effective 1/1/19:

When determining eligibility, verify:

- Is the member eligible for services today?
- Which Indiana Health Coverage Program plan are they enrolled?
- If the member is in Hoosier Healthwise or Healthy Indiana Plan, are they assigned to MDwise?
- Who is the member's Primary Medical Provider (PMP)?

Provider Healthcare Portal	MDwise Provider Portal
<ul style="list-style-type: none"> <li>• IHCP Program</li> </ul>	<ul style="list-style-type: none"> <li>• Delivery System: MDwise Excel</li> </ul>
<ul style="list-style-type: none"> <li>• MCE</li> </ul>	<ul style="list-style-type: none"> <li>• Assigned PMP History</li> </ul>
<ul style="list-style-type: none"> <li>• Assigned PMP</li> </ul>	
<ul style="list-style-type: none"> <li>• Delivery System: MDwise Excel</li> </ul>	



## Services covered based on member's benefit package:

- Inpatient psychiatric services
- Emergency/crisis services
- Alcohol and drug abuse services (substance abuse)
- Psychotherapy and counseling (individual, group or family)
- Psychiatric drugs included on MDwise PDL
- Laboratory and radiology services for medication regulation and diagnosis
- Screening and evaluation and diagnosis
- Transportation (medically necessary or emergent)
- Neuropsychological and psychological testing

All Behavioral Health services are self-referral.

## Effective 1/1/19

- One standard authorization list
- One point of contact for all authorization requests
- Submission timelines and process will not change
- Go to MDwise.org for most up-to-date version of PA lists



You will need two key items when filing a request for Medical Prior Authorization (PA):

- I. Universal Prior Authorization Form
  - Located on our website
2. Documentation to support the medical necessity for the service you are requesting to prior authorize:
  - Lab work
  - Medical records/physician notes
  - Test results
  - Therapy notes

Tips:

- Completely fill out the universal PA form including the rendering provider's NPI and TIN, the requestor's name along with phone and fax number.
- Be sure to note if PA is for a retroactive member.

Please Note: Not completely filling out the universal PA form may delay the prior authorization timeframe.

## Prior Authorization Turn-Around Time

- All emergency inpatient admissions require authorization within 2 business days of the admission.
- Urgent prior authorizations can take up to 3 business days
- Requests for non-urgent prior authorization will be resolved within 7 calendar days.
  - It is important to note that resolved could mean a decision to pend for additional information.
- If you have not heard response within the time frames above, contact the Prior Authorization Inquiry Team and they will investigate the issue.
- PA Inquiry Line
  - 1-888-961-3100

## Effective 1/1/19:

- Claim Submission is date of service driven.

<b>Hoosier Healthwise &amp; Healthy Indiana Plan</b>
MDwise/McLaren Health Plans P.O. Box 1575 Flint, MI 48501

- Electronic Submission

<b>Hoosier Healthwise</b>	<b>Healthy Indiana Plan</b>
Payer ID: 3519M	Payer ID: 3135M

Please note: Paper claims must be on red/white form with black ink.

## Claim Timelines:

- Claim Submission:
  - Primary: 90 days from the date of service
  - Secondary: 90 days from the date of the explanation of benefits (EOB)
  - Effective 1/1/19, non-contracted providers will have 180 days for claim submission.\*
- MDwise Adjudication: (clean claims)
  - Electronic Claims: 21 days
  - Paper Claims: 30 days
- Claim Disputes:
  - 60 days from the date of the explanation of benefits (EOB)
  - Dispute Response: 30 business days from date of submission

\*Reference BT201829 for more information

## Effective 7/1/18

- Presumptive drug testing no longer requires authorization (no limit)
  - 80305 - 80307
- Definitive drug screening requires PA every time
  - G0480, G0481, G0482, G0483
- Updates are based on the date of service
- <http://www.mdwise.org/for-providers/forms/prior-authorization>
  - Review authorization guides for most recent versions

Applied Behavioral Analysis (ABA) Therapy is for the treatment of Autism Spectrum Disorder (ASD) for members ages 20 and under:

- Authorization is required for persons diagnosed with Autism Spectrum Disorder:
  - Diagnosis Codes: F84.0 or F84.9
- Authorizations will be given in accordance with the members treatment plan.
  - Authorization is required every 6 months.

Be sure to check the Authorization guide on our website for the most up to date listing of authorization requirements.



## ABA Therapy Codes and Modifiers

- CPT codes: 96150-96155
  - Authorization required except for 96150 with modifier U1 or U2
- U modifier (U1, U2, U3) required to designate the provider level rendering services.
- Claims must be billed on CMS 1500 claim form
- Please reference the following IHCP Bulletins for additional information:
  - Bulletin BT201606
  - Bulletin BT201774
  - Bulletin BT201705

Please note: MDwise does not reimburse ABA providers for education.

## ABA Specific Providers:

Providers must be registered with IHCP as provider type 11 and specialty type 615.

- HSPP = Health Service Provider in Psychology, Psychologist
- BCBA = Board Certified Behavior Analyst
- BCBA-D = Doctoral Level Board Certified Behavior Analyst

The following providers must bill under one of the above supervising providers:

- BCaBA = Bachelor Level Board Certified Behavioral Analyst
- RBT = Credentialed Registered Behavior Technician

## MDwise Covered Treatment

- Mental Health/Substance Abuse Services rendered in one of the following:
  - State Psychiatric Hospital
  - Freestanding Psychiatric Facility
  - Substance Abuse Residential Treatment Center

## Coverage by Program

- Hoosier Healthwise:
  - Package A: Covered when medically necessary for members under 21
  - Package C: Coverage is reimbursed when deemed medically necessary and is subject to the same coverage policies and limitations as Package A
- Healthy Indiana Plan:
  - HIP Basic Plan: Covered
  - HIP Plus Plan: Covered
  - HIP State Plan: Covered

- Low-Intensity Residential Treatment:
  - Procedure Code: H2034
  - Includes individual/group therapy, medication training and support, case management, drug testing and peer recovery supports
  - American Society of Addiction Medicine (ASAM) Level 3.1
  
- High-Intensity Residential Treatment:
  - Procedure Code: H0010
  - Includes individual/group therapy, medication training and support, case management, drug testing, peer recovery supports and skills training and development
  - ASAM Level 3.5 (considered medium-intensity treatment for adolescents & high-intensity treatment for adults)
  
- Modifiers:
  - U1: Adult members (19 years and older)
  - U2: Adolescent members (0-18 years older)

The Opioid Treatment Program (OTP) is a specific bundled service that includes the administration of Methadone. Only approved providers are able to provide this service.

Opioid Use Disorder: A problematic pattern of opioid use leading to clinically significant impairment or distress.

## Common Opiates:

- Oxycodone
- Hydrocodone
- Fentanyl
- Heroin

## OTP Specific Codes

- H0020: Alcohol and/or drug services
  - Methadone administration and/or service (provision of the drug by a licensed program) for each day a member presents for treatment
- Reimbursement for code H0020 will be based on a daily bundled rate
  - Includes reimbursement for the following services:
    - Oral medication administration, direct observation, daily
    - Methadone, daily
    - Drug testing, monthly
    - One office visit every 90 days
- Providers that allow members take-home doses of methadone must bill code H0020 with modifier UA – for each DOS a take-home dose of methadone is dispensed (42 CFR 8-12).
- Additional therapy codes are allowed outside of bundle when a relapse occurs.
  - Reference BT201755 for services billable outside of the bundled rate.

## OTP Provider Requirements:

- Must be Division of Mental Health and Addiction (DMHA) certified and hold DEA license to prescribe Methadone
- Registered and active with IHCP
- Enrolled as Type 35, Addiction Services and Specialty 835, Opioid Treatment Provider
- Contracted and enrolled with MDwise Behavioral Health
- Be an Health Service Provider in Psychology (HSPP) or under the supervision of an HSPP/Physician to provide services within bundle
  - Licensed Psychologist
  - Licensed Clinical Social Worker (LCSW)
  - Licensed Marriage and Family Therapist (LMFT)
  - Licensed Mental Health Counselor (LMHC)
  - Licensed Clinical Addiction Counselor (LCAC)
  - Physician Assistant, Nurse Practitioner, Clinical Nurse Specialist

## Prior Authorization

- Review services for authorization prior to rendering services
  - Authorization not required for contracted, IHCP/DMHA approved providers
  - Authorization required for non-contracted, IHCP/DMHA approved providers
- Request blocks of dates for outpatient care to include additions to the members treatment plan
- List treatment plan goals that are diagnosis specific and measurable to facilitate the review and approval of services.

## Claim Submission

- File OTP and Behavioral Health claims following the same process for medical claims
- Check eligibility prior to rendering services
- Copays may apply to OTP services, depending on the member's health plan

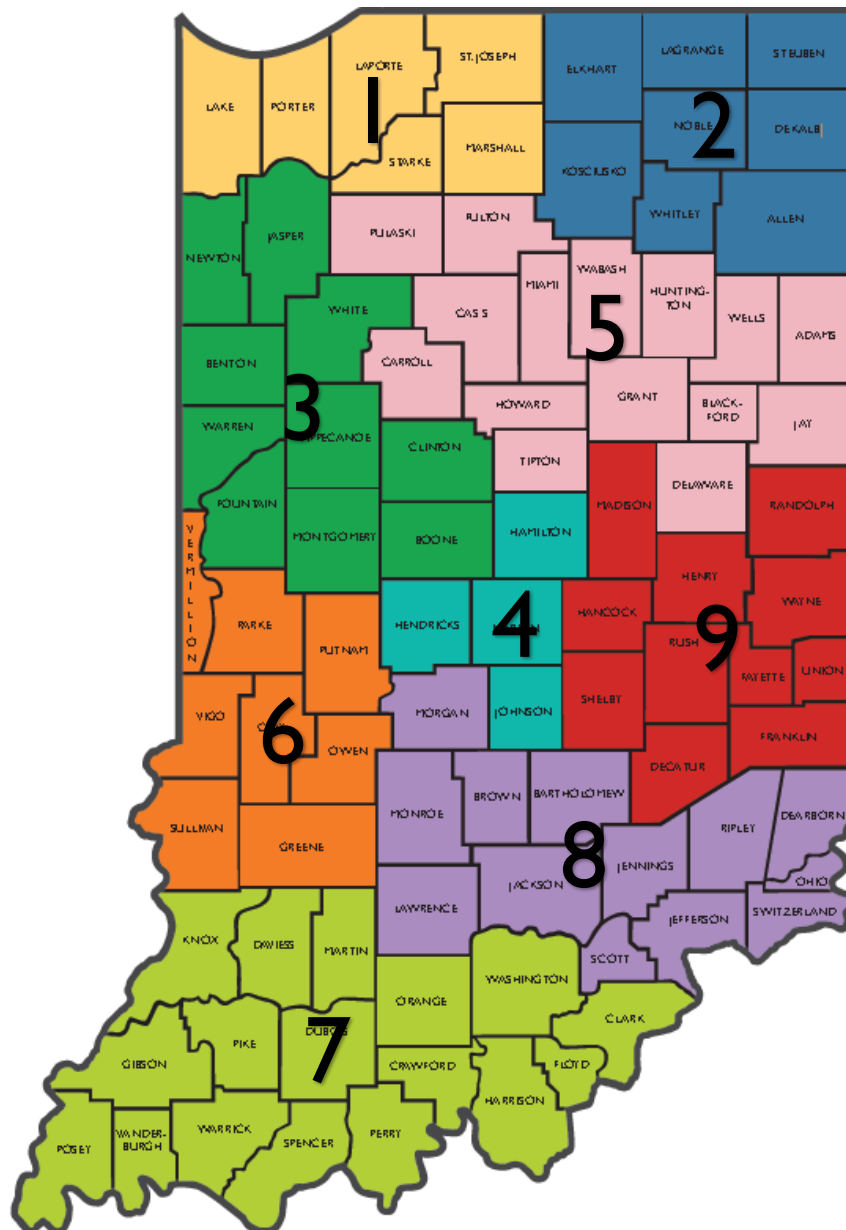


## Reimbursement for OTP Providers

- Hoosier Healthwise Providers
  - Contracted Providers: 100% IHCP Medicaid Fee Schedule amount
  - Non-contracted Providers: 98% of the IHCP fee schedule for medically necessary services
  
- Healthy Indiana Plan Providers
  - MDwise will cover and reimburse medically necessary mental health care services, including substance abuse services.
  - Contracted Providers:
    - Medicare reimbursement if available
    - 130% of Medicaid rates if the service does not have a Medicare reimbursement rate
    - 90% of billed charges if there is no Medicare or Medicaid rate
  - Non-contracted Providers: 98% of the Medicare rate or IHCP fee schedule for medically necessary services if no Medicare rate is available

## Opioid Treatment Program Education

- Please reference the following IHCP Bulletins and Banners for more information:
  - BT201755
  - BT201744
  - BR201738
- Code of Federal Regulations
  - 42 CFR 8-12
- MDwise Behavioral Health Resources (Member and Provider)
  - <http://www.mdwise.org/for-providers/behavioral-health>
- IHCP Provider Module
  - Mental Health and Addiction Services
  - <http://provider.indianamedicaid.com/media/155556/mental%20health%20and%20addiction%20services.pdf>



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## MDwise Website

- <http://www.mdwise.org/>

## MDwise Provider Page

- <http://www.mdwise.org/for-providers>

## Behavioral Health Providers

- <https://www.mdwise.org/for-providers/behavioral-health>

## Behavioral Health Forms

- <https://www.mdwise.org/for-providers/forms/behavioral-health>

## Contact Information

- <http://www.mdwise.org/for-providers/contact-information>

