

OMPP 2024 IHCP Roadshow

OMPP Provider Relations

Spring 2024

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Agenda

- Aligning Continuity of Care policies between fee-for-service and managed care entities
- Doula Updates
- Mobile Crisis Units
- Certified Community Behavioral Health Clinics (CCBHCs)
- Collaborative efforts between OMPP, Gainwell, Acentra to resolve PA issues
- Unwind Update/Reminder to check member eligibility
- Cost Share Restarting July 1, 2024
- Resources Available



Aligning Continuity of Care Policies Between Fee-for-Service and Managed Care Entities

Aligning Continuity of Care



- Starting May 1, 2024
 - IHCP will be aligning FFS continuity of care policies with MCEs
- Transitioning to FFS from another source of coverage?
 - Acentra will honor the previous care authorizations for one of the following durations, whichever comes first:
 - 90 calendar days from the member's date of enrollment with FFS
 - The remainder of the prior-authorized days of service
 - Until the approved units of service are exhausted

Continuity of Care: Eligibility



- Always check eligibility before rendering services
 - Notify the FFS prior authorization and utilization management (PA-UM) contractor of any outstanding authorizations and supply documentation to substantiate the authorization
 - Phone: 866-725-991
 - Fax: 800-261-2774
 - Electronically: <u>Atrezzo Provider Portal</u>



Continuity of Care: Disenrollment

- Disenrollment during inpatient stay
 - Member's prior health coverage program is responsible for care coordination after the member has disenrolled from the program
- For more information, view the supporting **Bulletin 202434**



Doula Updates

Current Doula Updates



- Formal stakeholder meetings have concluded
- Continued efforts in the northern and southern portion of the state
- Doula Advisory Board still in the works
- OMPP Subject Matter Expert
 - Kelly Eby, MSW, Policy Developer
 - Email: kelly.eby@fssa.in.gov
 - Phone: 317-899-8546



Mobile Crisis Units

Mobile Crisis Background



- Introduced in <u>BT202364</u>
- Implemented as a part of *House Enrolled Act 1222* (2022) as part of the 988 Suicide and Crisis Lifeline initiative
- Effective July 1, 2023



Mobile Crisis Provider Specialty

BT202430

- Provider Type 11 *Behavioral Health Provider*
- Provider Specialty 622 Mobile Crisis Unit
- Must have the following to enroll under the new provider specialty:
 - IRS W-9 form
 - Federal Employer Identification Number (FEIN)
 - National Provider Identifier (NPI)
 - Signed copy of the Agency Designation Agreement for Mobile Crisis Response Services from the Indiana FSSA Division of Mental Health and Addiction (DMHA)

If previously designated by DMHA as a mobile crisis unit and currently enrolled as a community mental health center (CMHC), providers are required to add provider specialty 622 – Mobile Crisis Unit.

Additional Enrollment Rules



- Mobile crisis units must enroll as a **group** provider classification with at least one of the following rendering providers associated with the enrollment:
 - Type 09 Advanced Practice Registered Nurse
 - Type 11 Behavioral Health Provider
 - Specialty 618 Licensed Clinical Social Worker (LCSW)
 - Specialty 619 Licensed Marriage and Family Therapist (LMFT)
 - Specialty 620 Licensed Mental Health Counselor (LMHC)
 - Specialty 621 Licensed Clinical Addiction Counselor (LCAC)
 - Type 31 Physician

Additional Enrollment Rules Continued



- Provider specialty 622 Mobile Crisis Unit can be a stand-alone specialty or be added to an existing provider type 11 – Behavioral Health Provider enrollment. Stand-alone mobile crisis units will only be allowed reimbursement for the services identified in <u>BT2023173</u>
- Mobile crisis units are not allowed to enroll out of state
- Mobile crisis units will be considered a moderate risk level at both initial enrollment and upon revalidation (every five years)



Certified Community Behavioral Health Clinics

What is a CCBHC?



Certified Community Behavioral Health Clinics (CCBHC) provide a comprehensive range of mental health and addiction services for anyone seeking services, regardless of their diagnosis, insurance, place of residence, or age. The CCBHC model:

- **Ensures access** to integrated services including 24/7 crisis response and medication-assisted treatment
- Meets strict criteria regarding access, quality reporting, staffing, and coordination with social services, justice, and education systems
- **Receives funding** to support the real costs of expanding services to fully meet the need for care in communities through a Prospective Payment System (PPS) rate

Why are CCBHCs important?



According to the DMHA, CCBHCs are changing the mental health and substance use care landscape.

- Data provided by the National Council in 2022 showed that:
 - 27 new staff positions were filled per clinic since becoming a CCBHC
 - 33% of all CCBHCs can see a client with any condition in the same day
 - 71% of all CCBHCs can see a client with any condition within one week
 - 90 more people per clinic served, prior to becoming a CCBHC

CCBHC Timeline

December 2022 **March 2023** Apply for CCBHC Establish Goals & **Planning Grant Stakeholders** Planning grants are After receiving the CCBHC approximately \$1 million planning grant, begin key steps July 2024 March 2024 Apply for the CCBHC Launch the CCBHC Model Demonstration Certify the clinics that meet Indiana's criteria and provide them Apply for the Medicaid Demonstration to receive an enhanced match a bundled payment (PPS) July 2025 July 2027 Submit a State **Review CCBHC Impacts Plan Amendment** Look to strengthen opportunities for improvement If not selected for the Demonstration, a SPA may be needed sooner in this with clinic and state efforts process to stay competitive

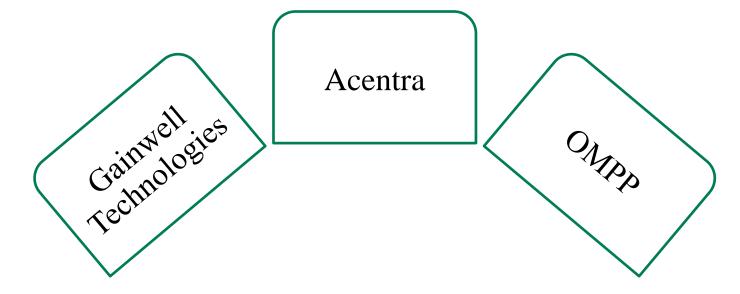




Collaborative efforts on FFS PA Concerns

Shared efforts for PA Resolution

- OMPP acknowledges siloed efforts at the beginning of the transition.
- Established a shared process for providers to relay PA concerns and receive resolution
- Best route is to contact Gainwell Provider Relations
- ¹⁹ representative



Provider Relations Map and Contact Information



Public Health Emergency Unwind Updates

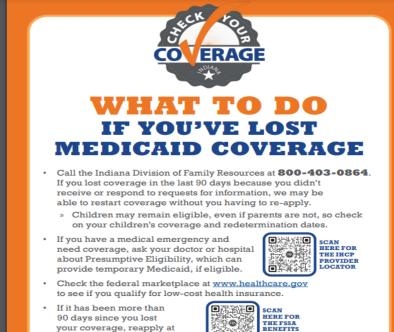


Unwind Update

- Redetermination and the impact on members.
- Communication efforts.
- Why is this important for providers?



What to do if your member has lost coverage?



https://fssabenefits.in.gov/bp. • If you are 65 or soon will be, you may be eligible for Medicare. Find out more at www.medicare.gov/basics/get-started-with-medicare or contact SHIP at 800-452-4800.

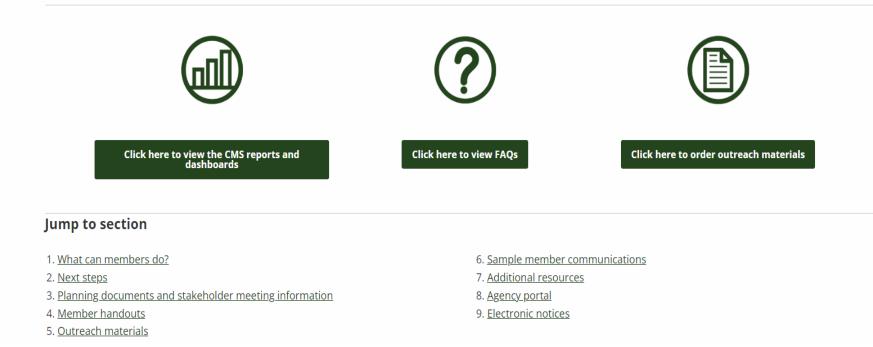
BENEFITS

PORTAL

· If you are employed, check with your employer about whether you are eligible for health insurance through the workplace.

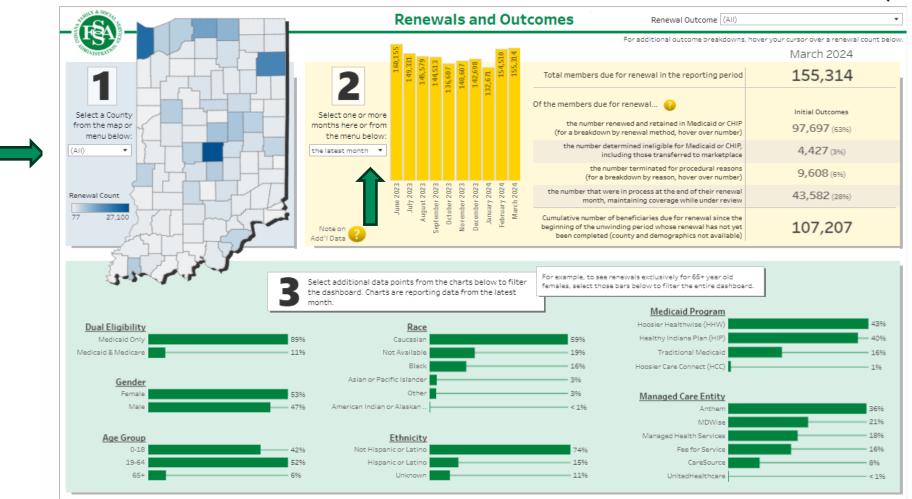


Communication Efforts



Indiana Medicaid for members return to normal

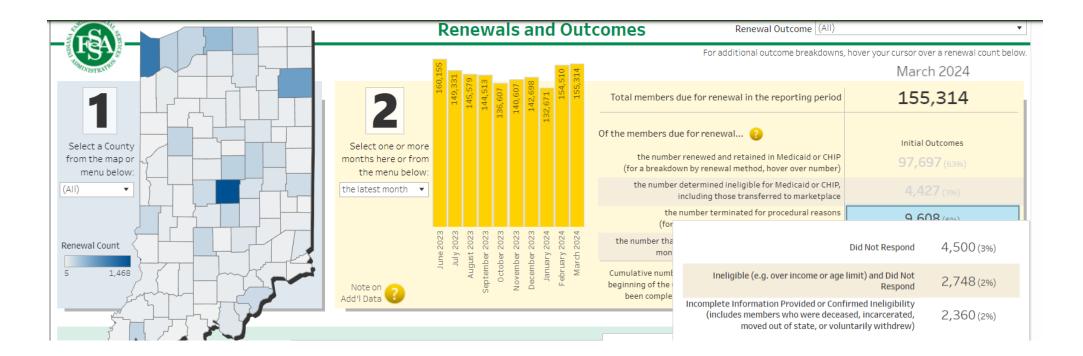
Renewals and Outcomes







Terminated for Procedural Reasons



Cost Share Restart



- Copayments for Healthy Indiana Plan (HIP) and Children's Health Insurance Plan (CHIP) begin July 1, 2024.
- Cost Share Invoices for HIP, CHIP and MEDWorks monthly payments will be sent early July 2024 for August benefits.

COST SHARE FAQ

Member Eligibility



- Before rendering services, a provider should verify:
- The member has IHCP coverage on the date of service.
- What type of IHCP coverage the member has on the date of service.
- Does the member have other insurance coverage.
- Does the member have a copayment responsibility for certain services.
- Is the member enrolled through a managed care program (MCE).
- Is the member restricted through the Right Choice Program.
- Has the members benefit limitations been reached?

Member Eligibility and Benefit Coverage



Resources Available

Resources Available

- What resources are available to providers?
 - Provider Relations Consultants
 - Provider Reference Materials
 - Provider Education







Sign Up for Updates!

- Register for updates on the Indiana Medicaid Provider Website:
 - Email Address

Sign up for email and/or text notices of Medicaid and other FSSA news, reminders, and other important information. When registering your email, check the category on the drop-down list to receive notices of Medicaid updates; check other areas of interest on the drop-down list to receive notices for other types of FSSA updates.	Get Important News & Updates			
	When registering your email, check the category on the drop-down list to receive notices of Medicaid updates; check			
Enter your email address Sign Up	Enter your email address	Sign Up		

How Can We Help You?



Be sure to utilize your provider relations reps first

- <u>OMPPProviderRelations@fssa.IN.gov</u>
 - For individual provider concerns requiring assistance from the State
- IHCPListens@fssa.in.gov
 - Feedback on IHCP presentations
 - Ideas for future presentations/workshops
 - Questions to be answered in future publications

Survey



