



IDAHO DEPARTMENT OF
HEALTH & WELFARE

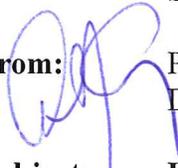
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Medicaid Information Release MA13-11

To: Mental Health Clinics, Psychosocial Rehabilitation Agencies, Mental Health Service Coordination Agencies, Children's Service Coordination Agencies, Healthy Connection Primary Care Providers (PCPs), Health Homes, Hospitals, Schools, and Substance Use Disorder Agencies

From:  Paul J. Leary, Administrator
Division of Medicaid

Subject: **Implementation of Idaho Behavioral Health Plan (IBHP)**

Effective September 1, 2013, Medicaid-reimbursed outpatient mental health, substance use disorder, and related service coordination services, collectively called "behavioral health" benefits, will be provided under a managed care structure rather than the current fee-for-service structure. The managed care program structure allows for a contractor to be reimbursed for the management of benefits on a per-member-per-month capitated basis. United Health Care, doing business as Optum Health, is contracted by the Department for a term of three years, with two two-year extensions possible, to provide the benefits identified in the Idaho Behavioral Health Plan (IBHP).

Optum will manage all aspects of the IBHP. The contractor will recruit, hire, train, manage, and reimburse a network of qualified providers. Therefore, Medicaid provider agreements with mental health clinics, psychosocial rehabilitation agencies, and mental health service coordination agencies will end on August 31, 2013. No new provider applications will be accepted for any type of mental health service agency providers after this date. Agencies that have imbedded a primary care component into their structure need to make sure that their practitioners have the appropriate provider agreement in place with Molina to provide ongoing physical health services.

In order to continue to provide Medicaid-reimbursed outpatient behavioral health services, agencies must enroll in the Optum provider network. Optum will enroll agencies as well as individual practitioners. Optum will process behavioral health service claims beginning with dates of service on or after September 1, 2013. Outstanding claims for behavioral health services provided for dates of service on or before August 31, 2013, may be submitted to Molina Medicaid Services for payment consideration up to 364 days after the date of service.

In order to promote a smooth transition to the managed care structure and minimize any potential disruption in care, Optum has agreed to maintain each member's existing plan of care for at least 60 days after implementation of services. Optum will honor any existing prior authorizations through October 30, 2013. This transition will also allow for existing providers to continue with service delivery to participants on their current caseload, as appropriate. **Current providers that do not enroll with the Optum network, or that do not make other formal arrangements with Optum to continue providing services, must cooperate with efforts to transition their Medicaid participants to an Optum network provider.**

Some Medicaid providers may not be able to meet the Optum requirements for credentialing and enrollment by September 1, 2013; however, Optum has agreed to work closely with the provider community to arrange for a sufficient number of providers to avoid creating any access issues. In order to obtain the Optum provider network enrollment information, interested parties should email Optum's Idaho Network Manager at Regina.hanley@optum.com, or by telephone at (714) 445-0723.

Transitional Impacts to Other Medicaid-Reimbursed Programs

Children's Service Coordination Agencies

The process to request services for children with severe emotional disturbances (SED) will not change between July 1 and August 31, 2013. Children with SED who currently receive service coordination will automatically have their prior authorizations extended until October 30, 2013. New service requests should be submitted by fax to (208) 334-6616, or by email to CSCRequests@dhw.idaho.gov. Children's service coordination providers serving children with SED who need further clarification about this process should call (208) 528-5784.

Extension of the prior authorizations does not mean that services provided on or after September 1, 2013, should be billed to Medicaid. Providers must make arrangements with Optum in order to be reimbursed for services provided after August 31, 2013.

Healthy Connections Primary Care Providers (PCPs)

Effective September 1, 2013, Healthy Connections referrals will no longer be required for behavioral health services. Optum Idaho is requiring all of its network providers to obtain a release of information from each of their members in order to facilitate the coordination of services with each member's PCP, including sharing reports, documents, and invitations to participate in treatment planning. When a member obtains a service from an Optum provider a notification to the member's PCP is automatically generated that does not provide any private health care information but notifies the PCP of the member's interest in obtaining behavioral health services. After the Optum provider secures the release of information document, the PCP will be sent information from the member's medical record. Optum is including the requirement for its providers to refer all members to their PCPs annually to obtain a physical examination. Optum will also provide behavioral health screening tools and psychiatric consultation (at no charge) to PCPs at their request.

Health Homes

Optum Idaho and the Idaho Health Home Program share the common goal ensuring that the services provided to a Medicaid participant are holistic and coordinated. Optum will be contacting all health homes to begin the collaboration that will be needed for those Medicaid participants who access both programs.

Hospitals

Optum Idaho will be operating services designed to divert members from a hospital level of care when it is not needed. They are also required to establish an interface with hospitals so that they can facilitate discharge planning to outpatient behavioral health services. In order to accomplish these objectives, Optum will establish working relationships with hospitals across Idaho.

Schools

School-based services are not included in the IBHP. Schools should continue billing Medicaid for the Medicaid-covered mental health services identified on their students' individualized education programs (IEPs).

Substance Use Disorder Agencies

Medicaid-reimbursed substance use disorder benefits are included in the IBHP. In order to continue to provide Medicaid-reimbursed substance use disorder services, agencies must enroll as an Optum network provider. Agencies that accept multiple payers must work with Optum to establish the correct billing method for obtaining reimbursement for Medicaid benefits.

Medicaid is notifying all eligible Medicaid participants of the upcoming changes. Optum will send out information packets to all eligible Medicaid participants in early August. Information updates on the IBHP can be found on the Department of Health and Welfare's website at www.healthandwelfare.idaho.gov.

If you have questions about this information, please contact the Office of Mental Health and Substance Abuse in the Division of Medicaid at (208) 364-1844.

Thank you for participating in the Idaho Medicaid program.

PJL/rs