TEXAS Health and Human Services Commission

SB 58 Behavioral Health Integration

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TEXAS Health and Human Services Commission

Advisory Committee

- Established by the Senate Bill 58 of the 83rd Legislative Session
- Tasked with providing formal recommendations to HHSC by September 2014
  - The inclusion of mental health targeted case management and mental health rehabilitative services in Medicaid managed care
  - The integration of behavioral and physical health services within managed care
  - The selection of two health home pilots programs in two health service areas of the State
- Expires September 1, 2017

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Behavioral Health Integration

- September 1, 2014
  - Targeted case management and mental health rehabilitative services will also be included in the managed care benefit package
- The NorthSTAR service area will continue to receive targeted case management and mental health rehabilitative services through the NorthSTAR delivery model
  - NorthSTAR service area:
    - Dallas, Ellis, Collin, Hunt, Navarro, Rockwall and Kaufman counties

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Eligible Populations

- Mental health rehabilitative services and mental health targeted case management are available to Medicaid recipients who are assessed and determined to have:
  - A severe and persistent mental illness such as schizophrenia, major depression, bipolar disorder or a other severely disabling mental disorder
  - Children and adolescents ages 3 through 17 years with a diagnosis of a mental illness or who exhibit a serious emotional disturbance

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Future Managed Care Service

- Targeted Case Management
  - Must be face to face
  - Include regular, but at least annual, monitoring of service effectiveness
  - Proactive crisis planning and management for individuals
  - Targeted case management is a Medicaid billable service
- Mental Health Rehabilitative Services include
  - Crisis Intervention Services
  - Medication Training and Support Services
  - Psychosocial Rehabilitative Services
  - Skills Training and Development Services
  - Day Programs for Acute Needs

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Health Home Pilots

- S.B. 58 requires HHSC to develop two home health pilot programs in two health services areas for persons who are diagnosed with:
  - A serious mental illness, and
  - At least one other chronic health condition

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Additional Legislative Requirements

- DSHS to create community collaboratives for persons who are homeless, persons with mental illness, and persons with substance use disorders
- DSHS to establish and maintain a mental health and substance abuse treatment public reporting system

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Managed Care Programs in Texas

- STAR (State of Texas Access Reform)
  - Temporary Assistance for Needy Families (TANF) recipients, Pregnant women, Newborns, Low-income families and children
- STAR Health
  - Children in foster care or in the conservatorship of the state
- STAR+PLUS
  - Designed to integrate delivery of acute care and long-term services and supports (LTSS) through a managed care system
- CHIP (Children's Health Insurance Program)
- CHIP and Children's Medicaid Dental

Managed Care Client Enrollment

- As of August 2013:
  - 3,643,414 clients enrolled in Texas Medicaid
  - 2,959,403 members are enrolled in:
    - STAR
    - STAR Health
    - STAR+PLUS

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Implementation Timeline

- **Fall 2013**: Request federal approval and amend managed care contracts
- **Fall/Winter 2013 through implementation**: Continue stakeholder communications and information sessions
- **Late Winter 2014**: Anticipated health plan contract effective date *(contingent on federal approval)*
- **Spring/Summer 2014**: Operational and system readiness review
- **September 1, 2014**: State begins providing mental health targeted case management and rehabilitative services through STAR, STAR+PLUS and STAR health managed care health plans

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Operational Assumptions

- MCOs will:
  - Contract and reimburse providers directly for services
  - Be responsible mental health rehabilitative and mental health targeted case management service authorization in managed care
  - Be required to utilize the current DSHS utilization management guidelines (Texas Resilience and Recovery) until September 2015
    - Workgroup to redesign the current Texas Resilience and Recovery utilization management guidelines for managed care to better integrate physical health and behavioral health care services
- Adults Needs and Strengths Assessment (ANSA) and the Child and Adolescent Needs and Strengths Assessment (CANS) will be leveraged in managed care for consistency in assessment for services across the indigent and Medicaid populations
- Providers will be responsible for assessment completion and recommendation of level of care to MCOs

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Operational Assumptions

- Existing client service packages will be grandfathered in to continue care and reauthorization will not be required during transfer from fee-for-service to managed care
- LMHAs may contract with Medicaid managed care organizations (MCOs) as Significant Traditional Providers (STPs)
- Individuals currently served through the NorthSTAR program will continue to receive their services through NorthSTAR
- Some populations will continue to receive services in fee-for-service Medicaid for a few years (e.g., children in fee-for-services)

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Advisory Committee Recommendations

- Workgroups can be established to develop recommendations
- Suggested areas for Workgroups/Recommendations are:
  - MCO Contracts
  - Quality Measures
  - Stakeholder communications
  - Integration of behavioral health and physical health services
  - Health Home Pilots
- Establish process for development of formal written recommendations report
- Recommendations must be voted on by June 2014