

Update on 1915 b/c Waiver Expansion

Joint Legislative Oversight Committee on
Health and Human Services
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Status of LME-MCO Transitions

- 56 counties now under the b/c waiver
 - PBH
 - Western Highlands Network
 - ECBH
 - Smoky Mountain Center
- **December 1, 2012--Sandhills Center**
 - Sandhills & Guildford will merge effective Jan 1, 2013
 - Guilford County will be added under the b/c waiver in April 2013
 - This allows for transition and closure activities from the merger

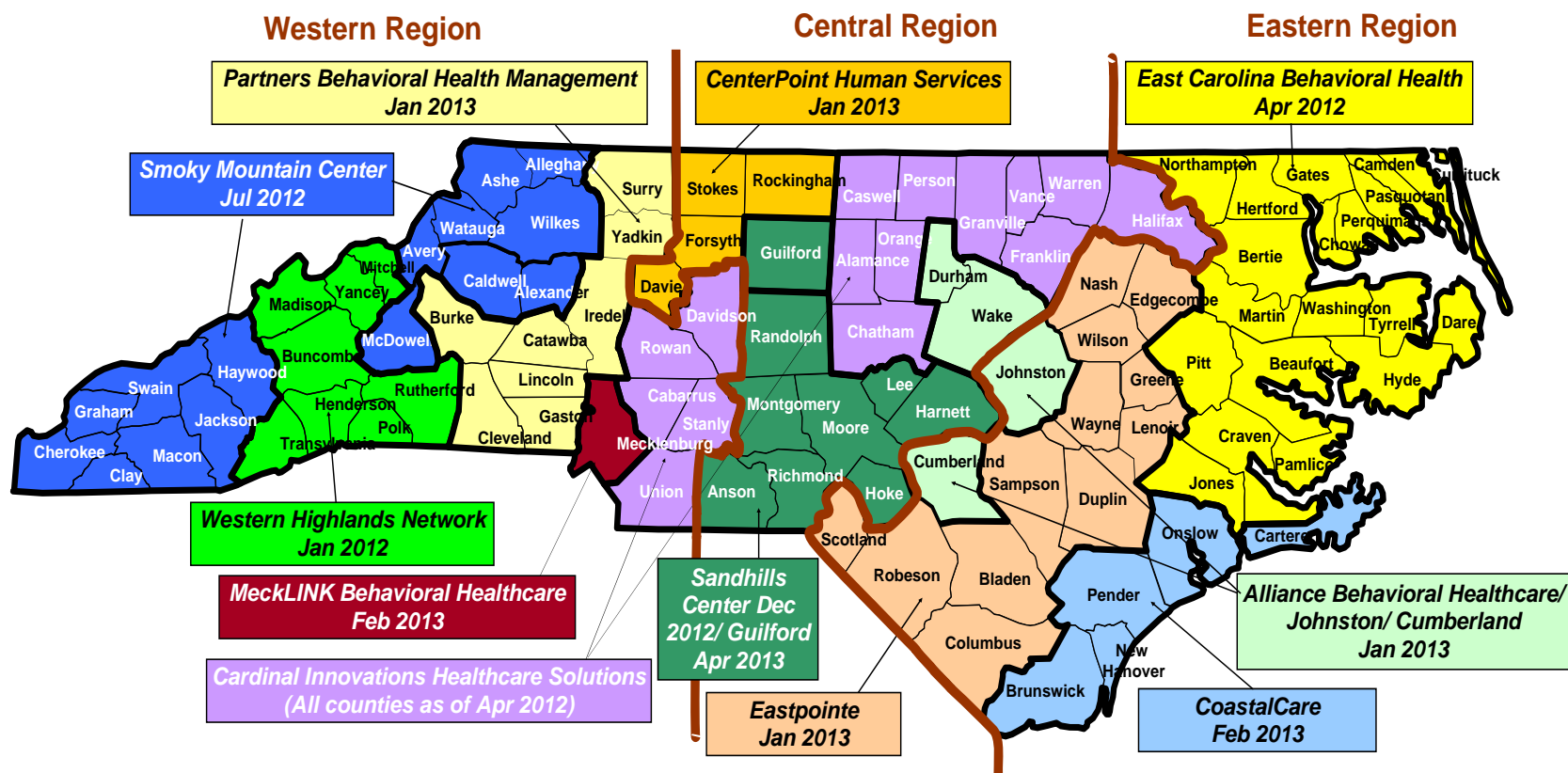
Status of LME-MCO Transitions

- **Mercer has completed the 120-day readiness reviews**
 - Reports details strengths & necessary updates for January 1, 2013 start-date
 - On track for January 1, 2013
 - Alliance Behavioral Healthcare
 - CenterPoint Human Services
 - Eastpointe
 - Partners Behavioral Health Management
- **Mercer suggests that MeckLink & CoastalCare may need more time**
- 60-day readiness reviews in November (for all)
- Final readiness reviews in December for LMEs that will not meet the January 1, 2013 schedule

Status of LME-MCO Transitions

- SL 2011, HB916 requires that an approval or denial of readiness must be made by December 31, 2012
 - If LME is not prepared for 2/1/13 start date, DHHS will transition MCO functions to another LME-MCO to meet the June 30th date for statewideness
 - Final start date of Feb 1, 2013 subject to December final readiness reviews for any remaining LME
 - **(SL2011, HB916) SECTION 1.(d)** The Department shall require LMEs that have not been approved by the Department to operate a 1915(b)/(c) Medicaid Waiver by January 1, 2013, to merge with or be aligned through an interlocal agreement with an LME that has been approved by the Department to operate a 1915(b)/(c) Medicaid Waiver. If any LME fails to comply with this requirement, the Department shall assign responsibility for management of the 1915(b)/(c) Medicaid Waiver on behalf of the noncompliant LME to an LME that is successfully operating the Waiver and successfully meeting performance requirements of the contract with the Department.

Local Management Entity - Managed Care Organizations (LME-MCOs) and their Member Counties (Current and Proposed on January 1, 2013)



*February 2013 date based on final readiness review before 12/31/2012

Western Highlands Network (WHN) Update

- **Mercer & DHHS performed on-site audit on October 4, 2012**
- **Draft report expected this week**
- **Mercer reviewed**
 - Financial operations & staffing
 - Claims processing/IT system
 - Reporting capabilities
 - Internal managed care operations

Innovations Plus--Update

- Supports Intensity Scale (SIS) assessments have begun across the state
 - All individuals on the Innovations (c) waiver will have this assessment completed over the next year.
- Sample (~5200) will be completed by April 2013
 - Human Services Research Institute (HSRI) will begin to develop resource allocation model for state in April 2013

Standardization of the “PBH Model”

- **Provider Applications**
- **Provider credentialing process**
- **Provider contracts***
 - *Sec. Cansler asked for workgroups/AGs to update
- **Treatment request forms**
- **ALL processes/forms for the Innovations waiver**
- **Provider Monitoring protocol (Gold Star)**
 - Tools, forms
- ***DHHS partnered with PBH for training***

Additional DHHS Standardization Requirements

- **Program Integrity operations**
 - Policies/procedures, forms, tools, letters
- **Recipient appeals**
 - workflow, consumer letters
- **HIPAA-compliant claims processing**
- **Financial reporting formats (*recently updated*)**
- ***DHHS has provided training in these areas***

LME-MCO Standardization

- **CAQH Database for enrollment**
 - 9 of 11 MCOs use
 - Exploring database or streamlined enrollment for hospitals
- **7 of 11 MCOs use AlphaMCS for claims processing**
 - Exploring ways to standardize & streamline billing across different MCO-payors
 - Clean/accurate encounter claims from AlphaMCS are coming into MMIS
- ***DHHS has partnered with the Council of Community Programs to provide additional standardization training***