

2014-15 DOH Budget Medicaid Investments– IMPLEMENTATION UPDATE DECEMBER 2014

Behavioral Health Transformation Initiatives Including Investments for Managed Care/Health and Recovery Plans (HARPs)

Proposal	Update – September 2014	2014-15		2015-16	
		Gross	State	Gross	State
<p>Managed Care Start-up: Funding for system readiness activities to develop the infrastructure and capacity to facilitate the transition of behavioral health services for adult and kids into managed care.</p>	<p>Funds support start-up activities underway across the next two fiscal years including:</p> <ul style="list-style-type: none"> - Managed Care Technical Assistance Center training activities (\$6M); - Targeted information technology technical assistance and grants to non-Medicaid providers (\$12M); and - County regional planning consortiums (\$2M). 	\$10M	\$ 5M	\$10M	\$ 5M
<p>HARP Home and Community Based Services (HCBS): Funding for new HARP HCBS services based on a functional assessment including rehabilitation, peer supports, habilitation, respite, non-medical transportation, family support, and training, employment supports, and supports for self-directed care.</p>	<ul style="list-style-type: none"> -Funds for HARP HCBS services capacity building and start-up grants starting January 1, 2015 (\$10M in 2014-15). -The expansion of HCBS services will be available under HARPs starting April 1, 2015 (\$30M in 2015-16). 	\$10M	\$5M	\$30M	\$15M
<p>Integrated Care Initiatives: Funding for the integration of behavioral health and physical health including the pilot for integrated licensing and the implementation of collaborative care.</p>	<ul style="list-style-type: none"> - Pilot underway for 7 integrated license programs starting April 1, 2014; NYS will expand statewide in 2015-16. - State Plan submitted to establish Collaborative Care as a Medicaid service effective January 1, 2015. 	\$10M	\$ 5M	\$15M	\$7.5M
<p>OASAS Residential Restructuring: Funding for reimbursable services provided in a new redesigned residential treatment model.</p>	<ul style="list-style-type: none"> -Funds will be used when services are carved in beginning April 1, 2015. 	\$5M	\$2.5M	\$5M	\$2.5M

<p>Health Homes Plus: reimbursement for individuals receiving care management under a court order for Assisted Outpatient Treatment (AOT) and high need forensic populations.</p>	<p>Health Home Plus rates were implemented effective April 1, 2014 and program guidance issued to providers.</p>	<p>\$10M</p>	<p>\$5M</p>	<p>\$10M</p>	<p>\$5M</p>
<p>Preserve Critical Access: Targeted Vital Access Provider (VAP) program to preserve critical access to behavioral health inpatient and other services.</p>	<p>Funds support efforts already underway to preserve critical access to behavioral health services including:</p> <ul style="list-style-type: none"> -Rural status expanded to four additional counties and upstate inpatient psychiatric rates were increased by 10 percent effective July 1, 2014 (\$6.9M Full Annual). - Psychiatrist fees for facility and office based visits were increased to 80% of the Medicare fees effective July 1, 2014 (\$3M Full Annual) -Targeted VAP program for Article 32 OASAS inpatient services (\$5M Full Annual). - Targeted VAP proposals for several upstate Article 28 hospitals for restructuring to preserve needed psychiatric inpatient capacity (\$6.5M Full Annual) -Targeted VAP program for Article 31 freestanding clinics (\$30M in 2014-15 and \$15M Full Annual) -Targeted Ambulatory Patient Grouping (APG) Updates for mental health clinics effective October 1, 2014 and January 1, 2014 (\$8.7M Full Annual) 	<p>\$60M</p>	<p>\$32.5M</p>	<p>\$45M</p>	<p>\$25M</p>
<p style="text-align: right;">TOTAL</p>		<p>\$105M</p>	<p>\$55M</p>	<p>\$115M</p>	<p>\$60M</p>