Understanding Changes to Medicaid Behavioral Health Care in New York

Consumer/Recipient Education Forum

October 2015
Presentation Overview

- What are the Goals for the Medicaid Changes?
- What is Medicaid Managed Care?
- Changes to Medicaid Behavioral Health (mental health and substance use) Care
- Health and Recovery Plans (HARPs)
- Behavioral Health Home and Community Based Services (BH HCBS)
- Qualifying for a HARP
- Questions
What are the Goals for the Medicaid Changes?

1. Better Health
2. Better Care
3. Greater Access
4. Lower Costs
WHAT IS CHANGING?

• Medicaid Managed Care Plans pay for and coordinate physical health care for their members
• Medicaid Managed Care Plans already provide some mental health and substance use services to their enrollees
• On October 1, 2015, Medicaid Managed Care Plans will offer more behavioral health care for all of their enrollees
• Beginning October 1, 2015 enrollees with SSI will receive behavioral health care services through their plan.
• Behavioral health services means mental health and substance use disorder services
Changes to Medicaid Behavioral Health Services

• Who will see these changes?
  • People 21+ with Medicaid Managed Care will access more behavioral health services through their plan
  • People 21+ with Medicaid Managed Care and getting SSI will get behavioral health services using their health plan ID card
Right now, these changes are not for people who:

- Have both Medicaid and Medicare
- Live in a nursing home
- Are in a Managed Long Term Care Plan
- Are under age 21
- Have services from the Office for People with Developmental Disabilities (OPWDD)
What is Medicaid Managed Care?
Medicaid Managed Care Plan

- A health insurance plan for Medicaid recipients
- Responsible for ensuring that enrollees have access to a full range of preventative, primary and behavioral health services
- Contracts with a network of providers to deliver all covered benefits and services
Changes to Medicaid Behavioral Health
What Do These Changes Mean?

• Medicaid Managed Care Plans will expand their efforts with behavioral health care to help enrollees reach their health, recovery, and life goals

• Doctors and other service providers will work together with Medicaid Managed Care Plans to help enrollees meet their chosen health, recovery, and life goals
Medicaid Managed Care Expanded Benefits
- Mental Health

- Mental Health Inpatient Rehabilitation
- Mental Health Clinic
- Partial Hospitalization
- Personalized Recovery Oriented Services (PROS)
- Assertive Community Treatment (ACT)
- Continuing Day Treatment (CDT)
- Comprehensive Psychiatric Emergency Program (CPEP)
- Intensive Psychiatric Rehabilitation Treatment (IPRT)
- Crisis Intervention
Medicaid Managed Care Expanded Benefits - Substance Use Disorders

- Inpatient Substance Use Disorder Treatment
- Opioid, Including Methadone Maintenance, Treatment
- Outpatient Clinic
- Detox Services
- Residential Services
Health and Recovery Plans (HARPs)
Health and Recovery Plans (HARPs)

• New type of Medicaid Managed Care Plan
• Designed for people with serious mental health conditions and substance use disorders
• Covers all benefits provided by Medicaid Managed Care Plans, including expanded behavioral health benefits
• Also provides additional specialty services to help people live better, go to school, work and be part of the community
How are HARPs different than other Medicaid Managed Care Plans?

• HARPs specialize in serving people with severe behavioral health conditions

• HARPs cover additional services called Behavioral Health Home and Community Based Services (BH HCBS)

• Some HARP enrollees will be eligible for BH HCBS

• A Care Manager, providers and Plans will work together to assist HARP members
Behavioral Health
Home and Community Based Services (BH HCBS)
Behavioral Health Home and Community Based Services (BH HCBS) - GOALS

- Help people improve their quality of life, including getting and keeping jobs, getting into school and graduating, managing stress, and living independently
- Help people meet their recovery and life goals
- Only available to people in HARP or HIV Special Needs Plan
Behavioral Health Home and Community Based Services (BH HCBS)

Find Housing. Live Independently.
- Psychosocial Rehabilitation
- Community Psychiatric Support and Treatment
- Habilitation
- Non-Medical Transportation for needed community services

Return to School. Find a Job.
- Education Support Services
- Pre-Vocational Services
- Transitional Employment
- Intensive Supported Employment
- Ongoing Supported Employment

Manage Stress. Prevent Crises.
- Short-Term Crisis Respite
- Intensive Crisis Respite

Get Help from People who Have Been There and Other Significant Supporters
- Peer Support Services
- Family Support and Training
BH HCBS Assessment

- HARP or HIV SNP enrollees must have an assessment to determine need for BH HCBS
  - Assessment shows if people are eligible for BH HCBS and which BH HCBS they need
  - To get BH HCBS, a Health Home Care Manager must complete the assessment
- Care Managers also help people eligible for BH HCBS to make a Plan of Care
  - A Plan of Care identifies life goals and the services needed to help people reach their goals
- The Plan of Care MUST focus on what the person needs and wants
When Do These Changes Happen?
When do these changes happen?

Medicaid Managed Care enrollees who live in New York City

- Medicaid Managed Care Plans began coverage of expanded behavioral health services on October 1, 2015

- Behavioral Health Home and Community Based Services will become available January 1, 2016 to eligible people enrolled in a HARP or HIV Special Need Plan
When do these changes happen?

Medicaid Managed Care enrollees who live outside of New York City

• Medicaid Managed Care Plans are scheduled to cover the expanded behavioral health services in July 2016, pending federal approval
Qualifying for a HARP
How do people know if they qualify for HARP enrollment?

HARP eligible people get a written notice telling them they are eligible and how to enroll. The notice will tell people:

- About their choices for joining a HARP
- What to do next
- Where to get more information

Questions? Ask New York Medicaid Choice at:

1-844-HARP-999 OR 1-844-427-7999
Joining a HARP – Passive Enrollment

HARP eligible enrollees of a Medicaid Managed Organization that runs a HARP do not have to do anything to join. These people have received or will get a notice to tell them:

- That they are eligible for HARP enrollment
- That they do not need to take action to join a HARP, they will be automatically enrolled in the HARP (Passive Enrollment)
- How to choose a different HARP, if they want
- They must notify New York Medicaid Choice if they choose not to enroll in a HARP (opt-out) and want to stay in their current Medicaid Managed Care Plan
Joining a HARP – Active Enrollment

HARP eligible enrollees of a Medicaid Managed Organization that does not offer a HARP must take action to join a HARP.

These people have received or will get a notice to tell them:
- That they are eligible for HARP enrollment
- How to choose the right HARP
- Who to call if they have questions about HARPs
Joining a HARP - HIV Special Needs Plan (HIV SNP) Enrollees

- HIV Special Needs Plans (HIV SNPs) cover the same expanded behavioral health services covered by a Medicaid Managed Care Plan
- Plus, HIV SNPs cover the same specialty services covered by HARP (BH HCBS)
- HIV SNPs also provide specialty care that is NOT covered by other plans
- HIV SNP enrollees who are also eligible for a HARP will get a notice telling them:
  - They are eligible for HARP enrollment
  - If they stay in their HIV SNP, they can get all the specialty HARP benefits if they are eligible
  - If they choose to join a HARP, they will lose some specialty services that are only available through the HIV SNP and they may have a disruption in care
Where Can People Get More Information?

New York Medicaid Choice at 1-844-HARP-999 OR 1-844-427-7999

NYS Office of Mental Health (OMH):
http://www.omh.ny.gov/omhweb/bho/changes-bh.html

NYS Office of Alcoholism and Substance Abuse Services (OASAS):
http://www.oasas.ny.gov/mancare/index.cfm

NYS Department of Health (DOH):

For information about Behavioral Health Home and Community Based Services (BH HCBS):
http://www.omh.ny.gov/omhweb/bho/hcbs.html