Medicaid and Behavioral Health

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Federal Medicaid Goals for Behavioral Health

- Federal policy supports the offering of effective services and supports
- Improved integration of physical and behavioral health care
- Person-centered, self-directed care that supports recovery, resiliency and successful community integration
- Improved accountability and program integrity to assure Medicaid is a reliable funding option

Key Areas

- Primary Care and Behavioral Health Integration
- Developing Strategies to Implement Parity
- Expanded Opportunities for Home and Community-Based Services
- Children and Youth with Behavioral Health Needs





Primary Care and Behavioral Health Integration

Major emphasis is the development of Health Home under Section 2703.

- >improved quality of care/outcomes for individuals;
- improved experience of care for beneficiaries;
- >reduction in hospital admissions and readmissions;
- ➤ reduction in ER use;
- >less reliance on LTC facilities and
- > reduction in overall health care costs.

Working closely with SAMHSA and HRSA



Status of Health Home SPAs

States with Approved SPA as of March 2012:

- Missouri (two Approved SPAs)
- Rhode Island (two Approved SPAs)
- New York
- Oregon

States with SPAs on the Clock:

- North Carolina
- lowa
- Alabama

Draft Proposals:

Ohio, Oklahoma, West Virginia, Maine, Idaho

Parity

- Developing Guidance regarding the Mental Health Parity and Addictions Equity Act.
 - Benchmark
 - CHIP
 - Medicaid managed care





Section 1915 (i)

- State option to offer waiver-like HCBS under state plan
- Breaks "eligibility link" for HCBS with institutional level of care
- 1915(i) was modified through the ACA, effective October 1, 2010
 - Allows waiver of comparability, expands service definitions
 - Eliminates ability to "cap" enrollment or waive statewideness
- Regulation was posted May 3rd for public comment



Services for Children and Youth

- EPSDT Screening
- Good Behavioral Health Benefits and Payment
- Caregiver Supports
- Focus on Services for Children in Foster Care (ACYF and SAMHSA)
- Psychotropic Medication Use and Children in Foster Care
- Quality Measures





SMD Letters and Regulations

- Medicaid Prescription Drug Rebates: SMD 10006, SMD 10019
- Community Living Initiative (Olmstead Tool Kit): SMD 10008
- Money Follows The Person Extension: SMD 10012
- **1915(i):** SMD 10015;
- Concurrent Hospice Care for Children: SMD 10018
- 5yr Approval/Renewal Period: SMD 10022





SMD Letters and Regulations

- Health Homes for Enrollees w/ Chronic Conditions: SMD 10024
- Code of Regulations Rx AMP Withdrawal: CMS-2238-P2
- Final Rule: Community First Choice CMS-2337-F
- Notice of Proposed Rulemaking: Home and Community-Based State Plan Benefit CMS-2249-P2





Additional Information

CMS: Community Services and Long-Term Supports

http://www.medicaid.gov/Medicaid-CHIP-Program-Information/By-Topics/Long-Term-Services-and-Support/Long-Term-Servicesand-Support.html

State Medicaid Director Letters

http://www.medicaid.gov/Federal-Policy-Guidance/Federal-Policy-Guidance.html?filterBy=SMD%23dynamic-list

MFP Technical Assistance Website

http://mfp-tac.com/





Additional Information

- Health Homes information on Medicaid.gov
- http://www.medicaid.gov/Medicaid-CHIP-Program-Information/By-Topics/Long-Term-Services-and-Support/Integrating-Care/Health-Homes/Health-Homes.html
- Health Homes State Medicaid Director Letter
- http://www.medicaid.gov/SMDL/SMD/list.asp
- Health Homes mailbox for any questions or comments
- healthhomes@cms.hhs.gov
- Health Homes Technical Assistance Website
- http://www.integratedcareresourcecenter.com/healthhomes.asp

