ENHANCEMENT OF MEDICAID BEHAVIORAL HEALTH SERVICES: ICT/ACT PROVIDER INFORMATION SESSION

Advancing Proactive, Evidence-Based Solutions

February 17, 2021

Meeting Information

- We have a Webex meeting format to allow participation and questions at the end of the presentation.

- Please make sure your line is muted if you are not speaking.

- We will mute all lines if there is a lot of background noise.

- If you are having issues with audio, please type questions or comments in the chat box.

- If you show up on the participant list as a phone number or code, please right click and change this to your name.

- There will be time for questions at the end of the presentation.

- You may put questions in the chat box function or verbally ask your questions at the end of the presentation.

- We are recording this meeting and will post to the DMAS website with the powerpoint.
PRESENTERS TODAY

- Alyssa M. Ward, Ph.D., LCP
  Behavioral Health Clinical Director, DMAS
- Laura Reed, LCSW
  Behavioral Health Senior Program Advisor, DMAS
- Lisa Jobe-Shields, Ph.D., LCP
  Deputy Director, Community Services, DBHDS
- Jeff VanArnam, BSW, QMHP-A
  Adult Mental Health Services Coordinator, DBHDS
- Lisa Jobe-Shields, Ph.D., LCP
  Deputy Director, Community Services, DBHDS
- Emily Bowles, Esq.
  Associate Director of Licensing, DBHDS

Agenda Today

- Overview: Vision and Scope of BH Enhancement
- Timeline: What has been accomplished?
- ICT/ACT Specific Timeline
- Steps to ACT Licensure
- ACT/ICT “Routes”
- Next Steps
Enhanced Behavioral Health Services for Virginia

**Vision**

Implement fully-integrated behavioral health services that provide a full continuum of care to Medicaid members. This comprehensive system will focus on access to services that are:

- **High Quality**
  - Quality care from quality providers in community settings such as home, schools and primary care

- **Evidence-Based**
  - Proven practices that are preventive and offered in the least restrictive environment

- **Trauma-Informed**
  - Better outcomes from best-practice services that acknowledge and address the impact of trauma for individuals

- **Cost-Effective**
  - Encourages use of services and delivery mechanism that have been shown to reduce cost of care for system

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### Current Medicaid-funded Behavioral Health Services

<table>
<thead>
<tr>
<th>Prevention</th>
<th>Recovery</th>
<th>Outpatient</th>
<th>Community Mental Health Rehabilitation Services</th>
<th>Inpatient / Residential</th>
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</thead>
<tbody>
<tr>
<td>Early Intervention Part C: Screening</td>
<td>EPSDT services</td>
<td>Peer and family support partners</td>
<td>Outpatient psychotherapy + Psychiatric medical services</td>
<td>Inpatient hospitalization</td>
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<td></td>
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<td></td>
<td></td>
<td>Psychotic residential treatment</td>
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<td>Therapeutic group home</td>
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</tbody>
</table>

- Therapeutic day treatment
- Mental health skill building services
- Intensive in-home services
- Crisis intervention & stabilization
- Behavioral therapy
- Psychosocial rehabilitation
- Partial hospitalization / Day treatment
- Mental health case management
- Treatment foster care case management
- Intensive community treatment
**Continuum of Behavioral Health Services Across the Life Span**

- **Promotion & Prevention**
- **Recovery Services**
- **Outpatient & Integrated Care**
- **Intensive Community Based Support**
- **Intensive Clinic-Facility Based Support**
- **Comprehensive Crisis Services**
- **Group Home & Residential Services**
- **Inpatient Hospitalization**

**Behavioral Therapy Supports**
- Case Management
- Recovery & Rehabilitation Support Services

**Home visitation**
- Comprehensive family programs
- Early childhood education
- Screening & assessment

**Stakeholder Implementation Workgroups**
- Mercer Rate Study & Fiscal Impact Analysis
- Interagency Prioritization and Alignment Efforts
- CORONAVIRUS

- **RESUMED IMPLEMENTATION ACTIVITIES**
  - Interagency Project Teams launched
  - MCO/BHSA Readiness activities
  - Provider Outreach
  - Manual/Policy/Regulation development

**INTEGRATED PRINCIPLES/MODALITIES**
- Trauma informed care
- Universal prevention / early intervention
- Seamless care transitions
- Telemental health

**Key STEP-VA service alignment**
- Permanent supportive housing
- Supported employment
- Psychosocial rehabilitation
- Peer and family support services
- Independent living and recovery/resiliency services
- Outpatient psychotherapy
- Timed school-based behavioral health services
- Integrated physical & behavioral health
- Psychiatric medical services
- Intermediate/ancillary home-based services
- Multisystemic therapy
- Functional family therapy
- High fidelity wraparound
- Intensive community treatment
- Assertive community treatment

**BH Enhancement Timeline May 2019-Feb 2021**

- **Stakeholder Implementation Workgroups**
  - 20+ meetings
  - 100+ stakeholders
  - 5 workgroups (4 service specific) to inform rate study

- **Mercer Rate Study & Fiscal Impact Analysis**
  - Assumptions for Rate Development/Fiscal impact with stakeholder workgroup input: Report Publicly available Jan 2020
  - Presentation of rates and assumptions to stakeholders: December 3, 2019

- **Interagency Prioritization and Alignment Efforts**
  - Made it into Budget following 2020 GA
  - Workforce needs analysis
  - Alignment with other key initiatives
  - Licensing analysis

- **CORONAVIRUS**
  - Un-Allotment of Funding
  - Pivot to COVID-19 Response and Service Flexibilities

- **RESUMED IMPLEMENTATION ACTIVITIES**
  - Interagency Project Teams launched
  - MCO/BHSA Readiness activities
  - Provider Outreach
  - Manual/Policy/Regulation development
**Implementation Timeline**

<table>
<thead>
<tr>
<th>April 2021</th>
<th>May-June 2021</th>
<th>June 30, 2021</th>
<th>July 1, 2021</th>
<th>Present-Dec 2021</th>
<th>July 2022</th>
</tr>
</thead>
<tbody>
<tr>
<td>• DBHDS Licensing begins to accept and review service modifications for new ACT licenses</td>
<td>• ICT License remains</td>
<td>• H0039 (ICT) billing code sunsets</td>
<td>• ICT Teams working toward ACT DBHDS licensure</td>
<td>• DBHDS technical assistance opportunities</td>
<td>• TMACT fidelity reviews begin</td>
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<tr>
<td>• Licensing continues</td>
<td>• BHSA/MCO Contracting/ Credentialing</td>
<td>• H0040 (ACT) rates go live</td>
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<td>• EBP Center of Excellence will launch database</td>
<td>• Go Live for DBHDS Licenses</td>
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<td>• DMAS no longer reimbursing for ICT H0039</td>
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<td>• DBHDS funds may be available to sustain an ICT team during their transition to becoming an ACT team.</td>
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**DBHDS Licensing Crosswalk: BHE Services**

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<thead>
<tr>
<th>Licensed Service</th>
<th>Implementation Date</th>
<th>New DBHDS licenses</th>
<th>DBHDS License Number</th>
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<tbody>
<tr>
<td>Assertive Community Treatment (ACT)</td>
<td>7/2021</td>
<td>New Licenses: ACT (Small Team), ACT (Medium Team), ACT (Large Team)</td>
<td>18-001 will become ACT (large), 18-002 will become ACT (medium), 18-003 will become ACT (small)</td>
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**DBHDS Licensing Info**

- Amendments to align General Regulations with Enhanced Behavioral Health Services.
  - Effective: 2/20/2021
  - Delayed Implementation Date: 7/1/2021
- Delayed implementation will allow time for the Office of Licensing to hold trainings on the emergency action, create and disseminate resource materials to providers, and process service modifications and initial applications as needed.
- Substantive changes have been made to the service specific licensing regulations for ACT.
- These changes are intended to ensure that providers licensed to provide ACT services adhere to a base level of fidelity to the ACT model.

**DBHDS Licensing Info Continued**

- OL will begin to prioritize and process service modifications for small, medium, and large ACT teams in April in anticipation of a licensure go-live date of July 1.
- Providers will need to submit the completed specialized service modification form.
- A conditional license will be issued once service modification has been processed.
  - Pursuant to Code of Virginia § 37.2-415 a conditional license may be granted to a provider to operate a new service in order to permit the provider to demonstrate compliance with all licensing standards.
  - As the regulatory changes to align the Licensing Regulations with the enhanced behavioral health services include new service specific Licensing Regulations for ACT, providers will need to demonstrate compliance with these regulations prior to the issuance of an annual license.
- While OL will not be monitoring fidelity to the ACT model, the DBHDS Office of Adult Community Behavioral Health Services will track adherence to the ACT model & determine annual ACT performance outcomes from teams through their participation in the administration of the most current ACT fidelity assessment.
DBHDS Licensing Info Continued

- Over the next several months, OL will be in touch frequently with additional information related to training opportunities for the emergency regulations as well the service modification process.
- Next communication will include: the specific forms existing providers will need to complete to become licensed for ACT; who to submit information to; and the time-frame by when information must be received by the Office of Licensing in order for materials to be reviewed and new licenses approved by July 1, 2021.

ACT Team Route 1: PACT to ACT

My team is currently licensed as a PACT team and providing ACT consistent with fidelity to the model.

Great! DMAS and DBHDS are here to help you, please reach out to us if you need technical assistance/individual consultation.

Please notify us in writing of your need for an individual consultation meeting no later than 02/28/2021 @ enhancedbh@dmas.virginia.gov

Make sure you apply for the new DBHDS ACT license beginning April 2021. This will start the process to be credentialed at base fidelity.

Make sure you communicate with BHSA/MCOs and start the contracting process as soon as possible.

Medicaid reimbursement for ICT [H0039] will not be available after 06/30/2021.

ACT [H0040] as a covered Medicaid service will go live on July 1, 2021.

DMAS is currently working with the BHSA/MCOs concerning service auths, contracting and claims. More information to come.
ICT Team Route 1: Transition to ACT

Yes, my team wants to transition to ACT, we are very close to achieving this and can meet the deadline to be licensed by DBHDS and enrolled/contracted with the BHSA/MCOs by July 1.

Great! DMAS and DBHDS are here to help you, please reach out to us so we can set up an individual consultation meeting to discuss training and resource needs.

Please notify us in writing of your need for an individual consultation meeting no later than 02/28/2021 @ enhancedbh@damas.virginia.gov

Make sure you apply for the new DBHDS ACT license beginning April 2021.

Make sure you communicate with and start the BHSA/MCO contracting process as soon as you are ready.

ICT Team Route 2: Transition to ACT

Yes, my team wants to transition to ACT, but we are unsure whether we are able to meet the July 1, 2021 deadline and need assistance/support from DBHDS/DMAS to make the transition.

Great! DMAS and DBHDS are here to help you, please reach out to us so we can set up an individual consultation meeting to discuss training and resource needs.

Medicaid reimbursement for ICT [H0039] will not be available after 06/30/2021.

Please notify us in writing of your need for an individual consultation meeting no later than 02/28/2021 @ enhancedbh@damas.virginia.gov

Based on individual consultations, time-limited DBHDS funds may be available to assist your team during your transition to becoming a licensed ACT provider.

Make sure you apply for the new DBHDS ACT license as soon as you are ready.

Make sure you communicate with BHSA/MCO concerning any member that may need care coordination and/or a referral to an ACT provider.
**ICT Team Route 3: Care Coordination for Members**

No, my team does not want to transition to ACT.

- DMAS/DBHDS want as many teams to transition to continue the great work you all have already been providing in the community to our members.
- DMAS and DBHDS are here to help you, please reach out to us so we can set up an individual meeting to discuss your concerns and answer questions.

**Medicaid reimbursement for ICT [H0039] will not be available after 06/30/2021.**

- Make sure you communicate with BHSA/MCO concerning any member that may need care coordination and/or a referral to an ACT Provider.
- MCO/BHSA will work with your team to provide member care coordination and referrals to an ACT provider/other appropriate services.
- BHSA/MCOs may also reach out to your team to discuss member care coordination.

Please notify of us in writing of your plan no later than 02/28/2021 @ enhancedbh@dmas.virginia.gov

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**Next immediate steps**

Please notify of DMAS/DBHDS in writing of your plan/needs no later than 02/28/2021 @ enhancedbh@dmas.virginia.gov

DMAS and DBHDS are here to help you, please reach out to us so we can set up an individual consultation meeting to discuss technical assistance and answer questions.

Apply for new DBHDS ACT license beginning April 2021, if applicable.

Contact BHSA/MCOs concerning coordination of member services.

More information will be released via bulletins/memos and on our website: https://www.dmas.virginia.gov/#/behavioralenhancement
Additional Questions?

You may put question(s) in the CHAT function or you can unmute yourself and ask your question.

When you are ready to ask a question verbally, please click the red microphone button to unmute. When you are finished, please click it again to mute your line.

When the microphone icon looks like this, you are muted

When the microphone icon looks like this, you are unmuted

Thank you for your partnership, support and participation.

Additional Questions?

Please contact us at: Enhancedbh@dmas.virginia.gov