

Welcome to the Magellan Provider IBHS Workgroup

FEBRUARY 18, 2020

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Welcome and Opening Remarks



IT is NOT Business as Usual

Effective 1/17/2020, all providers must follow the new written order/assessment process. Life Domain Evaluations completed after the promulgation of the regulations may be used as the written order as long as it meets the requirements. Please continue to prescribe BHRS as the network does not currently have contracted IBHS agencies.



- Thank you for your thoughtful questions regarding implementation, these are helpful to us as we develop processes. Thank you to the agencies who have come prepared to the TA calls with specific questions. These seem to be a productive use of time.
- We appreciate everyone's continued flexibility and partnership as we try to develop process that are efficient and effective.
- We ask that everyone treat 2020 as a pilot year and recognize that based on our experiences, we may adjust and change workflows for 2021.

Agenda



- Review/Important Notes
- Codes
- MIS Changes
- Authorization process during transition period
- Review written order requirements and proposed template
- Assessment procedure
- CANS
- Transition plan for BHRS to IBHS authorizations
- Member communication
- FAQ Update
- Approved Service Description submissions
- Referral list
- Magellan Workgroups and Technical Assistance Calls
- Questions
- Next steps



Review & Important to Note

Review



- Expect all BHRS/ABA contracted agencies to accept calls from new families seeking BHRS/IBHS for evaluation/assessment/written order process regardless of ability to staff the prescribed services.
- If an agency does not have capacity to accept new calls from families for written order or assessment, we ask that you follow the required procedure to alert the Magellan Network team of your access issue so we can hold new referrals to your agency until you are prepared.
- Providers should continue to prescribe BHRS until the network is able to accommodate requests for IBHS.
- Magellan will issue contracts for IBHS after agencies are licensed and MA enrolled for IBHS. Provider contracts will keep BHRS and IBHS codes for 2020.
- Please send all approved Service Descriptions with a copy of the approval letter to IBHS@magellanhealth.com



Questions related to Review/Important to Note?



Enrollment



All current groups contracted for BHRS that receive a license for IBHS will be required to be contracted as an organization. Each of these providers will receive a new Magellan MIS provider number. These providers will also need to go through credentialing with Magellan prior to contracting. A Network communication will be issued with more details.



Codes



Codes

The codes have been released January 31, 2020 for an effective date of January 17, 2020.

- Some of the previous codes are being utilized for IBHS-Individual and IBHS-Group services.
 - H0032 and H2021 will be on new IBHS fee schedules

Magellan is working on creating three new IBHS rate sheets with the newly issued codes.

1. Individual Services – (Prov Type: 11 Spec: 590). This will include the Assessment and Evaluation codes and all Individual codes identified in the bulletin.
2. Group Services – (Prov Type: 11 Spec: 591). This will only have one code with three specific modifiers to identify Group size.
3. ABA Services (Prov Type: 11 Spec: 592). This will be new codes for PAHC but have been utilized for commercial plans. There will also be group codes associated with this fee schedule and modifiers based on group sizes.

Fee schedules will be issued with contract amendments once providers are Licensed and Medicaid Enrolled.



- Since the codes have now been released, Providers have the option of requesting to bill for IBHS prior to licensure if they can attest to meeting all IBHS requirements and will not be applying for any waivers. Currently Magellan would not have a process for paying for IBHS through the traditional payment methods and would need to work with providers to develop a process. As of today, the rates will be the same, as Magellan/County contractors has not received additional capitation dollars to account for IBHS.
- If you are interested in pursuing this, please outreach to the Network team to discuss next steps.



Authorization Process During the Transition Period

Initial Requests



- Written orders need to be completed for any member seeking BHRS/IBHS on 1/17/20 or later
- For initial requests, providers will request authorization for the Assessment utilizing current BSC and BSC-ABA codes on the current BHRS TAR. Authorization requests for Assessment will include the TAR submitted with copy of written order.
- Magellan will authorize 15 hours (60 units) for the assessment for non-ABA for 30 calendar days of BSC (H0032 HP EP) or 24 hours (96 units) for the assessment for ABA for 45 calendar days of BSC-ABA (H0046 HO HA/H0046 HO HA EP).
- Assessments need to be completed in the home/community for services being delivered in the home/community.
- Assessments should be completed within 15 business days (non-ABA) and 30 business days (ABA) as per the regulations.

Initial Requests (continued)



- Providers will have 7 calendar days to schedule first assessment appointment from completion of the written order or from the initial call from the family with a verified written order. Providers should document any family cancellations or no-shows that impact timeline.
- Following the completion of the Assessment and development of the Individualized Treatment Plan (ITP), the authorization request for BHRS/IBHS should be submitted utilizing the current BHRS Treatment Authorization Request (TAR). Packet submission elements for IBHS include the following:
 1. Treatment Authorization Request (TAR) Form – updated 1/2020
 2. Written order – Magellan template available
 3. Assessment – Please be sure this includes specific service(s) recommendation
 4. Individualized Treatment Plan (ITP)
 5. CANS summary report – To be completed for all members 3 years of age and older
 6. ISPTM summary note if TSS/RBT/BHT services are requested in school

Continued Stay Requests



- During the current BHRS authorization period, a written order will be completed as per the regulation requirements. The provider will utilize currently authorized BSC units to complete the assessment. If the provider requires additional units of BSC (H0032 HP EP) or BSC-ABA (H0046 HO HA/H0046 HO HA EP) services to complete the assessment the provider should submit a brief statement of explanation which includes the additional units needed.
- If the provider requires additional units for MT (H2019) services to complete the assessment, the provider should submit a brief statement of explanation which includes the additional units needed.
- Following the completion of the Assessment and development of the Individualized Treatment Plan (ITP), the authorization request for BHRS/IBHS should be submitted utilizing the current BHRS TAR. Packet submission elements for IBHS include the following:
 1. Treatment Authorization Request (TAR) Form – updated 1/2020
 2. Written order – Magellan template available
 3. Assessment – Please be sure this includes specific service(s) recommendation.
 4. Individualized Treatment Plan (ITP)
 5. CANS summary report – To be completed for all members 3 years of age or older
 6. ISPTM summary note if TSS/RBT/BHT services are requested in school

MT only cases



- If the MT is rendering the service, and they are qualified to do the assessment, then they should bill MT units to complete the assessment.



This process will remain in place until the agency is contracted for IBHS services. We appreciate your continued partnership and flexibility as we implement the new regulations.



Questions related to Authorization Process During the Transition?



Written Order

Written Order Requirements



- A written order is based on a face-to-face interaction with the youth within 12 months of initiation of IBHS.
- Includes the following:
 - Behavioral Health Diagnosis
 - Specifies the IBHS service, hours, and setting
 - Clinical information that supports the medical necessity of the order
 - The measurable improvements that would indicate when services may be reduced, changed or terminated

Who can write a Written Order?



- Written by a licensed physician, licensed psychologist, certified registered nurse practitioner, or other licensed practitioner, whose scope of practice includes diagnosis and treatment of behavioral health disorders and the prescribing of behavioral health services, including IBHS.
- There will not be a unique code for written orders—these should be completed under another billable service.
- Written orders must be completed by staff who are ORP (Ordering/Referring/Prescribing) enrolled.
- Magellan has a page on our website about ORP:

<https://www.magellanofpa.com/for-providers/provider-resources/orderingreferring-prescribing-orp/>

Written Orders



- The Magellan written order template is available on the [Magellaofpa.com](https://www.Magellaofpa.com) website. The template is not required, but optional.
- The template can be utilized to order the assessment; the assessment and co-occurring services for stabilization; or assessment and then resulting IBS services.
 - It is recommended that the Written Orders use the language of "up to" for services, which will allow the assessment to fine tune the prescription.
- If using a written order, an assessment must then be completed that meets regulation requirements.
- Services cannot be authorized one year past the date of the written order without a new order. BHRS services cannot be authorized past 1/17/21.
 - For example, a written order is completed on 2/1/2020. An authorization to start services starts 11/1/2020. The authorization cannot go beyond 1/31/2021.

Written Order Template



- **Part A: Initial Written Order for Initial Assessment, Stabilization and Treatment Initiation**
- A comprehensive, face-to-face assessment is recommended to be completed by an IBHS clinician to further define how the recommendations in this order will be used and to inform and complete an Individualized Treatment Plan (ITP). IBHS Treatment Services may also be delivered during the assessment period for stabilization and treatment initiation provided a treatment plan has been developed for the provision of these services.
- Please select the assessment type and treatment services necessary for stabilization that you are recommending, based on the symptom(s) and/or behavior(s) of concern and the settings/domains in which they are occurring. NOTE: You must complete all sections in one row for a service to be appropriately authorized.

Written Order Template (continued)



- **Part B: Written Order for Intensive Behavioral Health Services (IBHS)**
- A comprehensive, face-to-face assessment has been completed by this prescriber and/or an IBHS clinician to further define how the recommendations in this written order will be used. An Individualized Treatment Plan has also been completed, based on the result of the assessment.
- Please select which one of the following service types you are recommending, based on the symptom(s) and/or behavior(s) of concern and the settings/domains in which they are occurring. NOTE: You must complete all sections in one row for service to be appropriately authorized.
- The assessment and ITP will be sent via e-mail along with this PowerPoint.



Questions related to Written Order?



Assessment

Assessment Registration Process Once IBHS is Contracted



- Magellan will authorize: 15 hours (60 units) approved for the assessment for non-ABA for 30 calendar days.
 - Assessments need to be completed in the home/community for services being delivered in the home/community. For group services, assessments can be office based. 24 hours (96 units) approved for the assessment for ABA for 45 calendar days
- Authorization for Assessment will include the TAR submitted with copy of written order (*New TAR will be issued once codes are finalized, it will eventually transition to online authorization process).
- Assessments should be completed within 15 business days (non-ABA) and 30 business days (ABA).
- Providers will have 7 calendar days to schedule first assessment appointment from initial call from the family.
- Providers should track any family cancellations or no-shows that impact timeline.

Include on Assessment



- Date of written order
- Date written order received
- Date assessment began
- Date assessment complete
- Date IBH service began

Providers should begin developing processes to track these reporting elements.

Assessment for Individual, Group and ABA Services



- A face-to-face assessment is completed by a staff qualified to provide behavior consultation services or mobile therapy services within 15 business days (30 business days for ABA) of the initiation of services
- Assessment shall include the following:
 - Strengths and needs across developmental and behavioral domains
 - Strengths and needs of family system
 - Natural supports
 - Specific services needed to support the child's needs
 - Specific services needed to support parent/caregiver needs

Assessment Continued



Clinical information including:

- Treatment history
- Medical history
- Developmental history
- Family structure and history
- Educational history
- Social history
- Trauma history
- Developmental, Cognitive, Communicative, Social and Behavioral functioning
- Other relevant clinical information
- Cultural, language, or communication needs
- Summary of treatment recommendations

Written Order and Assessment Agreement



- If the assessment recommendations agree with the written order recommendations, submit both as part of the IBHS authorization packet
- If the assessment recommendations differ from the written order recommendations:
 - Provider must go back to the order writer with the updated clinical assessment to review recommendations. Written order writer can update the order to match the assessment or leave the recommendations as originally written based on their clinical judgement. This should be documented and included in the packet submission.
 - If provider is unable to collaborate with the order writer and is able to complete a new order with new recommendations, then this should be completed. Packet should include original order, assessment and new order. All will be reviewed for medical necessity.



Questions related to Assessment?



CANS

CANS Update for Cambria County



- CANS is still required to be submitted with every authorization request for BHRS/IBHS
- Change in process for BSC/MT
 - CANS will be done by BSC/MT during every assessment/treatment plan development (every 6 months)
 - BSC/MT will have a chance to review decision support on level of care matching for each member
 - BSC/MT will input their treatment plan details (what services, number of hours and service location)
 - Community Data Roundtable will alert you when the system has been updated for implementation



ISPT Meetings



Please note that when having an ISPT meeting for TSS/BHT in school, it is expected that member/family AND school representation are present for this discussion.

Additional reasons for an ISPTM



- Magellan supports providers continuing to utilize ISPTM's as needed for members and families
- Magellan will require ISPTM's to occur for the following reasons:
 - Family request
 - Team member request
 - When out of home case is being considered
 - When a 24-hour level of care or crisis services has been utilized



Transition from BHRS to IBHS Once IBHS Contracted

BHRS to IBHS Authorization Transition Plan




- Magellan proposes that agencies should continue to prescribe and request authorization for BHRS until the agency is contracted for IBHS.
- Magellan will alert the network when we have enough IBHS contracted agencies to meet the needs of new families being assessed for services.
- Once an agency is contracted for IBHS, as authorizations for BHRS expire, the youth should be considered for IBHS. If clinically appropriate, the youth should be recommended for IBHS and an authorization request submitted accordingly.
- Magellan does not plan to uniformly end BHRS authorizations and transition to IBHS authorization upon the agencies contracted date for IBHS.
- BHRS authorizations cannot go past 1/17/2021.
- Providers should keep BHRS enrollments open through 2020 until all authorizations have transitioned to IBHS. Once that has occurred, a change/closure form will need to be sent to OMHSAS.



Questions related to Transition Process?



Member Communication

- 
- Magellan is hosting a webinar for families on March 5, 2020 at 2:00 pm.
 - Please share this information with your families.

Understanding IBHS for Family Members and Members

Thursday March 5, 2020 2:00 P.M – 3:30 P.M. Via zoom

<https://magellanhealth.zoom.us/j/888510650>

Or Telephone: Dial: +1 646 558 8656 (US Toll)

+1 669 900 6833 (US Toll)

Meeting ID: 888 510 650

This session is intended for family members who currently have children.



Frequently Asked Questions



- Magellan has posted a FAQ document on the www.MagellanoFPA.com website IBHS page. This will continue to be updated as new questions are resolved. Please continue to refer to that prior to sending in questions.



Service Description Process



- Please continue to send approved service descriptions with a copy of the approval letter to the IBHS@MagellanHealth.com email.



Referral List



- What drives a provider to accept a case from the referral list?
- What process is most helpful to providers?



Upcoming Forums & Technical Assistance

Technical Assistance calls



- Magellan will continue to offer ½ hour IBHS technical assistance calls to any provider interested.
- We would like any provider needing to transition members as well as agencies proposing to provide group services for the first time to sign up.
- Please use the sign up genius link to sign up and we will email you the zoom connection. <https://www.signupgenius.com/go/9040C44ADA72DA5FD0-ibhs>

Additional IBHS Provider Forums



- **Monday, March 16, 2020 9:00 A.M. - 11:00 A.M. Via zoom**
<https://magellanhealth.zoom.us/j/421676222>
- **Tuesday, April 14, 2020 2:00 P.M - 3:30 P.M. Via zoom**
<https://magellanhealth.zoom.us/j/438197967>
- **Thursday, May 14, 2020 12:00 P.M. - 1:30 P.M. Via zoom**
<https://magellanhealth.zoom.us/j/588495428>
- **Wednesday, June 17, 2020 1:00 P.M. - 2:30 P.M. Via zoom**
<https://magellanhealth.zoom.us/j/37464032>
- **Registration will be required for all future forums so we can maximize zoom capabilities. Please register in advance.**

OMHSAS Updates



- OMHSAS website link:
<http://www.healthchoices.pa.gov/providers/about/behavioral/inbehavioralhs/index.htm>
- Submit questions to **RA-PWIBHS@pa.gov**



Questions? Suggestions?

Magellan Contact



Please send all questions to IBHS@MagellanHealth.com



Thank you!

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