Magellan Compliance Notebook – May, 2015

Magellan Behavioral Health of Pennsylvania, Inc. (Magellan) strives on being proactive and using education as a preventative tool to provide our members the highest quality of care through you, the provider. The Compliance Department at Magellan is committed to sending monthly e-mails to targeted providers regarding a Compliance related subject.

This e-mail communication is specific to your HealthChoices (Pennsylvania Medicaid) Contract with Magellan.

This month we'd like to address a critical component of eligibility for both Targeted Case Management (TCM, including BCM, ICM, RC) and Certified Peer Support (CPS) services eligibility. <u>Please review this communication in its entirety as recent audits and data mining</u> <u>activities of TCM and CPS programs have revealed significant issues with eligibility criteria</u> (determined by the diagnoses submitted on claims) as defined by Federal guidelines and <u>Pennsylvania Medicaid Regulations.</u>

*Please note that the definition of Serious Mental Illness (SMI) for Adult TCM services is based on the broader definition in the federal regulations; while CPS eligibility is based on the more limited state definition of "Adult Priority Group" (see attached MA bulletin).

Targeted Case Management Services

Medicaid is a federal/state program where the federal government partially funds state medical services meeting certain federal requirements. Thus, Medicaid/Medical Assistance (MA) reimbursement assumes the services meet definitions in federal statute and comply with federal laws and requirements.

Targeted Case Management is intended for specific classes of individuals within Medicaid. It is designed for individuals with Serious Mental Illness (SMI) in the PA State Plan. Pursuant to Section 1912 (c) of the Public Health Services Act, as amended by Public Law 102-321, *SMI is defined as: "Adults with serious mental illness" are persons age 18 and over, who currently or at any time during the past year, have had a diagnosable mental, behavioral or emotional disorder of sufficient duration to meet diagnostic criteria specified within DSM-III-R that has resulted in functional impairment, which substantially interferes with or limits one or more major life activities. These disorders include any mental disorders (including those of biological etiology) listed in DSM-III-R or their ICD-9-CM equivalent (and subsequent*

revisions), with the exception of DSM-III-R "V" codes, substance use disorders, and developmental disorders, which are excluded unless they co-occur with other diagnosable serious mental illness. All of these disorders have episodic, recurrent, or persistent features; however, they vary in terms of severity or disabling effects. Functional Impairment is defined as difficulties that substantially interfere with or limit role functioning in one or more major life activities including basic daily life skills (e.g. eating, bathing, dressing); instrumental living skills (e.g. maintaining a household, managing money, getting around the community, taking prescribed medication); and functioning in social , family, and vocational/ educational contexts. Adults who would have met functional impairment criteria during the referenced year without benefit of treatment or other support services are considered to have serious mental illness."

Per PA Code 55 CHAPTER 5221 MENTAL HEALTH INTENSIVE CASE MANAGEMENT, Children & Adolescents are eligible for Case Management if they are *"mentally ill or emotionally disturbed and who meet one of the criteria described as follows:*

(i) Children, 6 years of age or younger, who are enrolled in, or require, early intervention services under section 671 of the Education of the Handicapped Act (20 U.S.C.A. § 1400). (ii) Children who, with their families, are receiving services from three or more publicly funded programs such as, Medical Assistance, Aid to Families with Dependent Children and Special Education.

(iii) Children who are returning from State mental hospitals, community inpatient units or other out-of-home placements, including foster homes and juvenile court placements. (iv) Children who are recommended as needing mental health services by a local interagency team which shall include county agency representatives.

Per MA Bulletin OMHSAS-09-02, Blended Case Management, Children & Adolescents are eligible for Blended Case Management under the following criteria: *"diagnosed mental illness or serious emotional disturbance as defined by meeting the criteria for Diagnosis, Treatment History & Functioning Level:*

- 1. Diagnosis with DSM IV R (or succeeding revisions thereafter)
- 2. Treatment History
 - a. Six or more days of psychiatric inpatient treatment in the past 12 months;
 - b. Without blended case management services would result in placement in a community inpatient unit, state mental hospital, or other out-of-home placement, including foster homes or juvenile court placements;
 - c. Currently receiving or in need of mental health services and receiving or in need of services from two or more human service agencies or public systems such as Education, Child Welfare, Juvenile Justice, etc.
- 3. Global Assessment of Functioning Scale (as defined in DSM IVR or revisions thereafter) ratings of 70 or below

Per PA Code 55 CHAPTER 5221 MENTAL HEALTH INTENSIVE CASE MANAGEMENT and OMHSAS-09-02 BLENDED CASE MANAGEMENT, Eligibility for Case Management <u>excludes</u> those with a <u>principal</u> diagnosis of Mental Retardation (Intellectual Disability), substance abuse, Organic Brain Injury or a v-code. The diagnosis supporting TCM/ BCM eligibility should be indicated in the **first** position on all claims submissions to Magellan; while any co-occurring condition should also be indicated in the secondary (tertiary, etc) position.

* Claims submitted with a primary/ principal diagnosis of Mental Retardation/ Intellectual Disability, substance abuse, Traumatic Brain Injury or a v-code may be denied. This will also be monitored via internal data mining activities as well as during routine and targeted audits conducted by Magellan's QI/ Compliance Departments. Services provided that do not meet these guidelines may be identified for retraction.

Certified Peer Support Services

The target population for Peer Support Services is individuals that meet the criteria for the **Adult Priority Group** as defined in Mental Health Bulletin number OMH-94-04. In order to be in the Adult Priority Group, a person:

"must meet the federal definition of serious mental illness; must be 18+ (or age 22+ if in Special Education); must have a diagnosis of schizophrenia, major mood disorder, psychotic disorder NOS or borderline personality disorder; <u>and must meet at least one of the following</u> <u>criteria</u>:"

1. Treatment History

- a. Current residence in or discharge from a state mental hospital within the past two years; or
- b. Two admissions to community or correctional inpatient psychiatric units or crisis residential services totaling 20 or more days within the past two years; or
- c. Five or more face-to-face contacts with walk-in or mobile crisis or emergency services within the past two years; or
- d. One or more years of continuous attendance in a community mental health or prison psychiatric service (at least one unit of service per quarter) within the past two years; or
- e. History of sporadic course of treatment as evidenced by at least three missed appointments within the past six months, inability or unwillingness to maintain medication regimen or involuntary commitment to outpatient services; or
- f. One or more years of treatment for mental illness provided by a primary care physician or other non-mental health agency clinician, (e.g., Area Agency on Aging) within the past two years.

2. Functioning Level

- a. Global Assessment of Functioning Scale rating of 50 or below (please reference OMHSAS-14-04, DSM-5 which describes new guidelines regarding changes to functionality assessments)
- 3. Coexisting Condition or Circumstance
 - a. Coexisting diagnosis of Psychoactive Substance Use Disorder; or Mental Retardation; or HIV/AIDS; or Sensory, Developmental and/or Physical Disability; or

- b. Homelessness (Homeless persons are those who are sleeping in shelters or in places not meant for human habitation, such as cars, parks, sidewalks or abandoned buildings)
- c. Release from criminal detention (Applicable categories of release from criminal detention are jail diversion; expiration of sentence or parole; probation or Accelerated Rehabilitation Decision (ARD)
- 4. In addition to the above definition of the Adult Priority Group, any adult who met the **standards for involuntary treatment** (as defined in Chapter 5100 Regulations Mental Health Procedures) within the 12 months preceding the assessment is automatically assigned to this high priority consumer group.

The SMI-Adult Priority Group diagnosis should be indicated in the first position on all claims submissions to Magellan for Certified Peer Support services. A process exists whereby providers may request an exception to the eligibility criteria by contacting Magellan.

Exception Protocol:

Please call the designated Provider Line (877-769-9779 for Bucks/ Montgomery Counties; 800-686-1356 for Delaware County; and 866-780-3368 for Lehigh/ Northampton Counties) and request to speak to the Care Manager assigned to the county specified in EVS. Providers will need to provide clinical information about the reason for peer support and what the identified goals are. If appropriate, the Magellan Care Manager will grant the exception and make a note in the record.

* Claims submitted with a primary/ principal diagnosis of substance abuse, Traumatic Brain Injury, Mental Retardation/ Intellectual Disability or a v-code may be denied. Claims submitted that do not meet the criteria for Adult Priority Group, which do not have a documented exception in the Magellan record, may be identified for retraction. This will be monitored via internal data mining activities as well as during routine and targeted audits conducted by Magellan's QI/ Compliance Departments.

At Magellan, we will continue to educate our providers with updated MA Bulletins, Regulations and other pertinent information in order to ensure Compliance.

Thank you for your ongoing hard work and dedication to our members!

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