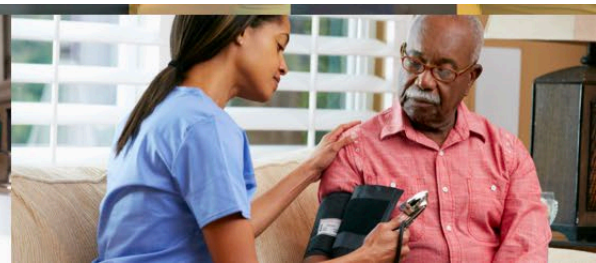
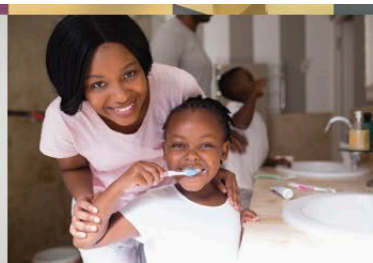
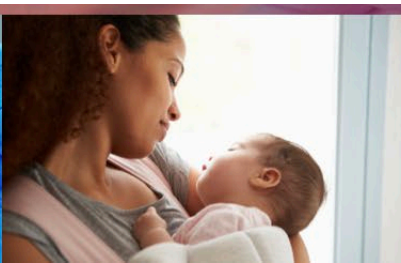




Behavioral Health System of Care Integration and Optimization Workgroup

November 2, 2021



Agenda

- Welcome and Call to Order – Deputy Secretaries Jones and Schuh
- Housekeeping and Roll Call – Chris Yeiser
- Recap of Previous Meeting – Laura Spicer
- Discuss Project Ideas
 - SBIRT – Laura Spicer and Tricia Roddy
 - Co-Occurring Billing
- Other Updates – Tricia Roddy and Linda Rittelmann
- Public Comments
- Next Steps – Laura Spicer

Recap of Previous Meeting

Staff Process to Identify Projects

- Met with Steering Committee
- Revisited previous project idea submissions and formal letters submitted by:
 - Maryland Hospital Association
 - Maryland Medicaid MCO Association
 - Maryland Behavioral Health Coalition
- Identified key themes across the stakeholder groups

Work Plan

- Continued/more in-depth discussion of specific projects during November 2 and December 10 meetings
- Rank order projects for staff/Steering Committee to review

Potential Projects

- Value-Based Payment, Measure-Based Care, Quality Measurement, and Provider Management
 - Project In Progress: BHA Total Quality Management process and provider survey
 - Potential New Project: Revisit provider network/quality standards, beginning with documenting minimum/shared practices within the MCOs
- Case Management, Care Coordination, and Clearly Defining Roles within the System
 - Project in Progress: Provider manual updates, developing systems flowchart, and documenting the roles/responsibilities of local systems management
 - Potential New Project: Develop a formal structure for addressing high utilizers/high needs individuals

Potential Projects continued

- Integration of Care
 - Potential new projects:
 - **Identify barriers to billing for co-occurring disorders**
 - **Review SBIRT take-up by MCOs and supports needed**
 - Review results of upcoming Collaborative Care evaluation
- Data Sharing
 - Potential new project – CRISP enhancements, such as hospitalization alerts

Workgroup Comments at Last Meeting

- Role of local providers in data sharing
- Suggestions that were budget initiatives:
 - Collaborative care expansion
 - Reimbursement for case management services
 - Reimbursement for peers
- Other suggestions:
 - Stakeholder input on the ASO RFP
 - Addressing shortages of inpatient psych beds and adolescent/child RTC beds

Discussion

SBIRT Overview

- Screening, Brief Intervention, and Referral to Treatment
- Evidence-based approach to the delivery of early intervention and treatment to people with substance use disorders and those at risk of developing those disorders
- Reimbursable by Medicaid

SBIRT Overview continued

- SBIRT can reduce:
 - Healthcare costs: Studies show cost savings of \$3.81 to \$5.60 for every \$1.00 invested in SBIRT services.
 - Emergency department visits, non-fatal injuries, hospitalizations, arrests, and motor vehicle crashes.
 - Severity of drug and alcohol use: Studies show that substance use screening and intervention help people recognize and change unhealthy patterns of use.
 - Risk of physical trauma and percentage of patients who go without specialized substance use treatment.
- Through multiple grants provided by SAMHSA beginning in 2014, BHA implemented SBIRT into healthcare settings across the state including hospital emergency departments, hospital mother-baby units, OB/GYN practices, detention centers, public school health centers, college health centers, and primary care practices.

SBIRT Overview continued

- In response to stakeholder feedback regarding variability in time invested in providing SBIRT to participants, Medicaid issued updated guidance and coding, effective July 1, 2016

W7000	Alcohol and/or substance (other than tobacco) use disorder screening; self-administered
W7010	Alcohol and/or substance (other than tobacco) use disorder screening; provider-administered structured screening (e.g., AUDIT, DAST)
W7020	Alcohol and/or substance (other than tobacco) use disorder intervention; greater than 3 minutes up to 10 minutes
W7021	Alcohol and/or substance (other than tobacco) use disorder intervention; greater than 10 minutes up to 20 minutes
W7022	Alcohol and/or substance (other than tobacco) use disorder intervention; greater than 20 minutes

SBIRT Medicaid MCO Encounters

Procedure Code	CY 2019		CY 2020	
	Unique Users	Services	Unique Users	Services
99408	2,774	3,042	1,849	2,196
99409	113	137	118	135
W7000	6,396	6,612	5,541	5,610
W7010	12,827	13,370	9,014	9,193
W7020	904	949	291	293
W7021	76	98	35	36
W7022	77	163	51	86
Total Services	.	24,371	.	17,549
Unique Users	23,167	.	16,899	.

Discussion

- What are the barriers to SBIRT take-up?
- What resources do the MCOs need to increase take-up?

Discussion: Billing Challenges

- What are the challenges to billing for co-occurring disorders?
- What are potential solutions to these challenges?

Other Updates

Request for Proposal (RFP) for BH ASO

- MDH launched a formal Request for Proposal (RFP) Process for a BH ASO Vendor in Summer / Fall 2021.
- Complex Enterprise IT System Procurement which takes time to develop and implement successfully.
- The entire process is planned to coincide with the end of the current BH ASO contract on 12/31/24.
 - Procurement - 2022
 - Design Development and Implementation - 2023
 - Testing and Acceptance – 2023-24

RFP Stakeholder Engagement

- MDH would like to solicit stakeholder feedback in the RFP process.
- Developing a survey instrument to solicit feedback.
- Email suggestions always welcome!

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American Rescue Plan Act (ARPA) Reinvestment Fund Update

- ARPA provides 10% enhanced federal match for home- and community-based services, including community behavioral health services
- Maryland's spending plan partially approved by CMS
 - 75% of funds for one-time provider rate increases
 - Remaining 25% must be reinvested
- Collecting stakeholder comments on the 25% reinvestment funds through November 15, 2021
- More information available here:
<https://health.maryland.gov/mmcp/Pages/Public-Notices.aspx>

Public Comment

Next Steps

- Discussion groups will remain on hold
- Next meeting date (virtual):
 - December 10, 2:30-4