



MARYLAND

Department of Health

Notes

Behavioral Health System of Care Optimization and Integration Workgroup Meeting October 5, 2021

Members In Attendance

Dr. Aliya Jones, Co-Chair
Deputy Secretary Steve Schuh, Co-Chair
Linda Raines
Lori Doyle
Ann Ciekot
Crista Taylor
Vickie Walters
Eric Wagner
Dr. Marketa Wills
Dr. Jocelyn El-Sayed

Introduction

The Co-Chairs welcomed members and introduced two new workgroup members: Dr. Marketa Wills, Chief Medical Officer, Johns Hopkins Healthcare; and Dr. Jocelyn El-Sayed, Medical Director, Maryland Physicians Care. The Co-Chairs noted that the Workgroup has been rebranded as the System of Care Optimization and Integration Workgroup and emphasized the importance of re-launching this work.

Recap of Workgroup Goals and Prior Work

Staff summarized prior work and progress to date on establishing a set of behavioral health system design principles to better serve Medicaid participants. Staff highlighted the necessary pause in Workgroup activity due to the COVID-19 pandemic but explained that it will be a priority moving forward.

Discussion: Project Ideas and Work Plan

Staff have met internally to re-visit potential project idea submissions. Staff reviewed all previous submissions and identified four key themes that were consistent across all stakeholder groups:

- Quality, including value-based payment, measurement-based care, quality measurement, and provider management

- Case management, care coordination, and clearly defining roles within the System
- Integration of care
- Data sharing

Staff then highlighted existing projects that address these themes and facilitated a discussion of potential new projects.

Under the quality theme, the Behavioral Health Administration (BHA) described a survey of community-based providers on the types of quality metrics that they currently utilize. Staff also noted the possibility of re-visiting provider network and quality standards.

Under the case management theme, Dr. Lisa Burgess, Chief Medical Officer, Medicaid highlighted a project within BHA to document the roles and responsibilities of the local systems managers and updating provider manuals. She also mentioned potentially developing a formal structure for addressing the needs of high utilizers. Workgroup members raised issues including the lack of reimbursement for case management and the potential for improved care management models such as behavioral health homes or collaborative care. Dr. Jones noted that the Workgroup will review the results of an upcoming collaborative care evaluation at a future meeting.

Under the care integration theme, staff discussed potential new projects, including identifying barriers to billing for co-occurring disorders; reviewing Screening, Brief Intervention, and Referral to Treatment (SBIRT) take-up by the managed care organizations (MCOs) and identifying barriers and supports needed to increase take-up; and reviewing the results of the upcoming collaborative care evaluation.

Regarding data sharing, Tricia Roddy, Deputy Medicaid Director, noted that the percentage of individuals authorizing release of information is still considerably low. She also stated that the request for proposals (RFP) process for the behavioral health administrative services organization (ASO) will begin shortly, with the goal of having a contract signed by December 2023.

Finally, Workgroup members discussed related issues, including:

- The lack of reimbursement for peers
- The opportunity to provide input into the ASO RFP process
- Opportunities for quality measurement
- Payment issues related to collaborative care within the primary care setting

American Rescue Plan Funds

Tricia Roddy provided an overview of the opportunity to reinvest funds from a temporary increase in Medicaid federal matching funds via the American Rescue Plan Act (ARPA). She noted that Medicaid submitted a spending plan to the Centers for Medicare & Medicaid Services (CMS) and has received partial approval. She explained that the plan would use 75% of funds for

a provider rate increase, and the Department will be convening stakeholders to discuss how to invest the remaining funds.

Workgroup members discussed issues such as possible rate increases for recovery residences; care management for the chronically mentally ill; and the possibility of accessing opioid settlement funds. Dr. Jones noted that the Opioid Operational Command Center (OCCC) has a stakeholder engagement process to look at how to allocate those settlement dollars.

Public Comment

The Co-Chairs opened the floor to members of the public.

One attendee asked about requirements for the American Rescue Plan funds. Tricia Roddy responded that CMS is looking for plans that can be sustained moving forward.

Another attendee asked for further clarification on the spending plan's approval. Tricia Roddy responded that the plan as a whole received partial approval. Issues to be addressed include ensuring that all services in the proposed provider rate increase are eligible.

Another attendee noted that, moving forward, the behavioral health needs across the state will likely shift and that programs that are innovating to meet these needs require support.

Finally, an attendee raised the issue of a lack of child residential treatment beds and psychiatric inpatient beds. Dr. Jones noted that the Department is focusing comprehensively on the crisis system across the state, thereby seeking to decrease the need for psychiatric inpatient beds. She added that there are conversations ongoing about the need for more child/adolescent residential treatment beds.

Review 2021 Meeting Calendar

The next meeting dates will be November 2 and December 10.

Meeting Close

The Co-Chairs thanked Workgroup members for their participation.