Safety Net Provider Forum February 23, 2024

Presented by:

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Meeting Agenda

- BHA Updates:
 - Safety Net Application
 - Safety Net Resources
- Comprehensive and Essential Provider Process (BHA/HCPF)
- HCPF Updates:
 - New Provider Types (PT)
 - Payment/Funding Updates
- Health Management Associates (HMA) Updates
 - Provider Training and Technical Assistance (TTA) Updates
- Provider questions/concerns/etc.





Meeting Purpose

The purpose of this meeting is to:

- Provide a learning space for providers highlighting the ongoing and upcoming behavioral health safety net system changes
- Provide discussion opportunities regarding new provider types through a Medicaid lens
- Ensure ongoing availability of BHA team members for discussions regarding licensing requirements and regulations
- Continue educating providers about changes to the behavioral health safety net





Follow-Up Questions

- How will we know the difference between a state PPS rate and what it would be if we do provide requested encounter data?
- What is the timeline for the new Behavioral Health Group sign-up? And how does encounter data factor into PPS rates?
- How does becoming a safety Net Provider relate (or not) to being able to provide BHA HLPG services?

Providers are not required to be safety net approved to provide BHA HLPG services. They must be appropriately licensed, if applicable.





Safety Net Application

- Rules effective January 1, 2024.
 - Includes BHE, Safety Net and 27-65 Provider Rules
 - Available at <u>Secretary of State website</u>
- Application for Safety Net Approval is <u>now available</u>.
- First step is to submit a Letter of Intent to BHA.

- Policies and Procedures for Safety Net Approval required to process the application.
- Need help? Technical assistance appointments available!
- Sign up for BHA Quality & Standards newsletter for ongoing updates: <u>http://eepurl.com/isj-PA</u>





Provider resources

BHA staff are hard at work developing resources to help during this period of transition and beyond. We encourage you to bookmark and visit this page frequently, as resources will be added below as they are completed.

General

resources

- <u>Agency Guide for New</u>
 <u>Providers</u>
- Agency Transition Guide
- <u>Behavioral Health Acronym</u> <u>Glossary</u>
- <u>BHA Provider Rules Outline</u> and Sources
- <u>Chapter 2 Reference Guide</u> for 27-65 Designated <u>Facilities</u>
- Policy and Procedure
 <u>Guidance</u>
- <u>Regulatory Transition FAQ</u>

BHE resources

- <u>Behavioral Health Entity</u>
 (BHE) Endorsement
- <u>Structure</u>
- BHE Fee Schedule
- Delayed Enforcement
 <u>Guidance</u>
- <u>Fingerprinting instructions</u>
 <u>guide</u>
- Is my agency a Behavioral <u>Health Entity?</u>
- Level of Care Timelines

Safety net

- <u>Behavioral Health Safety</u>
 <u>Net Providers Fact Sheet</u>
- <u>Safety Net Approval Paths</u> <u>visual resource</u>
- <u>Safety net provider</u> <u>transition memo from BHA</u> and HCPF
- <u>Reimbursement and</u>
 <u>engagement with HCPF</u>

Related pages

- <u>Colorado LADDERS</u>
- <u>Treatment Management</u>
 <u>System</u>
- Involuntary Mental Health
 <u>Treatment</u>
- BHA DUI/DWAI Services
- BHA Resources for Providers
- BHA Compliance Toolbox









How does my agency become a Comprehensive or Essential Provider?

- If your agency is <u>a CMHC</u>, your agency will need to be
 - $\circ~$ Licensed by the BHA as a Behavioral Health Entity
 - Approved by BHA as a Comprehensive Community Behavioral Health Provider
 - Enrolled with Medicaid as a Comprehensive Safety Net Provider
 - $\circ~$ Contracted with a Managed Care Entity either RAE or MCO
- If your agency is <u>not a CMHC</u>, your agency will need to complete all of the steps as above as applicable, but
 - be approved by BHA as a Comprehensive or Essential Safety Net Provider
- Participation is voluntary, but highly encouraged and those who participate are eligible for alternative payment models
 - Comprehensive providers PPS Model begins July 2024

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 $\circ~$ Essential Providers - Enhanced Fee Schedule begins July 2024







What are the general requirements to become an Essential or Comprehensive Provider?

- Holding a license in good standing to provide behavioral health services
 - May include a BHE license from BHA or a license from the Department of Regulatory Agencies
- Providing care coordination
- Providing the required services for the Comprehensive or Essential Providers
- Meeting all standards for Safety Net provider found in BHA rule (Chapter 12)

Additional information can also be found in <u>Joint Operational Memo 23- 077 Safety Net</u> <u>Provider Timeline</u>, which outlines key timelines and expectations related to safety net providers.





Questions?





Comprehensive and Group Enrollment

New Provider and Specialty Types

- 1. Creating a Provider Type (PT) for Comprehensive providers
 - a. Comprehensive providers will only enroll as this 1 PT they will NOT need to enroll as a SUD provider also (PT 64) since OP SUD services are required of Comprehensive providers.
- 2. Creating PT for Behavioral Health Group w/Prescriber AND Behavioral Health Group w/o Prescriber
 - a. These will allow providers who currently enroll under PT 16 and 25 but are distinctly BH providers to have an identified pathway to enroll.
 - b. This will accommodate the Group Providers that will require a BHE license
 - c. This will accommodate other distinct BH group providers (i.e. Psychiatrists, Psychologists, Day Treatment, etc.)





Essential Provider Enrollment

- Creating an enrollment indicator (flag/button) for Essential Providers.
 - Applicable to existing provider types that provide BH services
 - This will allow for the enhanced reimbursement rate.
- January 15, 2024 Apply for Essential Provider Approval through BHA
- March 1, 2024 Enroll with HCPF. There will not be a distinct Provider Type or Specialty Type for this it will be a "flag" you select in the enrollment portal
 - Current Provider would submit maintenance request and select "Essential Provider" in the enrollment portal
 - New Providers Enroll as an Essential Provider with HCPF by selecting "Essential" in the enrollment portal at the time of enrollment
- July 1, 2024 Will be able to bill





Reimbursement Updates

Safety Net Provider Reimbursement Updates

- Comprehensive Prospective Payment System (PPS)
 - PPS logic and list of trigger services have been sent to the provider community.
 - Working on test files with potential comprehensive providers in order to get appropriate counts of encounters.
 - $\circ~$ Cost reports have been submitted and the audit process has begun.
 - For any provider who chooses to become a Comprehensive and has not historically completed a cost report, they will be reimbursed at the State PPS rate for the first year.
- Essential Enhanced fee schedule

- Signed contract with HMA to work on value-based payment methodology
- Optimas is starting the build of the enhanced fee schedule





Reimbursement Updates

Comprehensive Safety Net Provider Prospective Payment System (PPS) Code List

- There are 153 distinct codes included in the Capitated Behavioral Health Benefit.
- There are 144 codes included in the PPS. There are 9 codes NOT included in the Comprehensive PPS (residential, withdrawal management, ECT).
- 10 codes are "add-on" codes and will not trigger an encounter
- All codes are allowed for any covered diagnosis (mental health or substance use disorder) except 4 SUD Only codes and 3 MH Only codes.

This resource will be posted to our website: <u>https://hcpf.colorado.gov/safetynetproviders</u>



HCPF Updates

Safety Net Provider Reimbursement Updates

- Community Mental Health Centers (CMHC)
 - CMHC designation will be discontinued at the end of December 2024
 - As the CMHC provider type is end-dated, these providers must enroll as new provider types (Comprehensive, Essential, BH Group, etc.)
 - Comprehensive Safety Net Providers will be billing providers and <u>will not</u> be able to bill as the rendering provider (as current CMHCs are allowed).





Auditing & Accounting Committee

The A&A Committee meets in order to provide feedback to HCPF and the BHA relating to what **can** and **cannot** be included in cost reports for safety net providers. These cost reports factor into rate setting so affect the ways that managed care providers are paid.

Organizations or individuals interested in applying for this committee should:

- Understand how cost reports interact with their systems
- Be interested in contributing feedback on the contents of the codes which are and are not allowed on the cost report
- Have the ability to attend committee meetings

https://docs.google.com/forms/d/1smmaHdcPFmLgr_REryrcq8UcKW_V7PBAttVnR7b_zK Q/edit

Please reach out to <u>Spencer.Green@state.co.us</u> for additional information

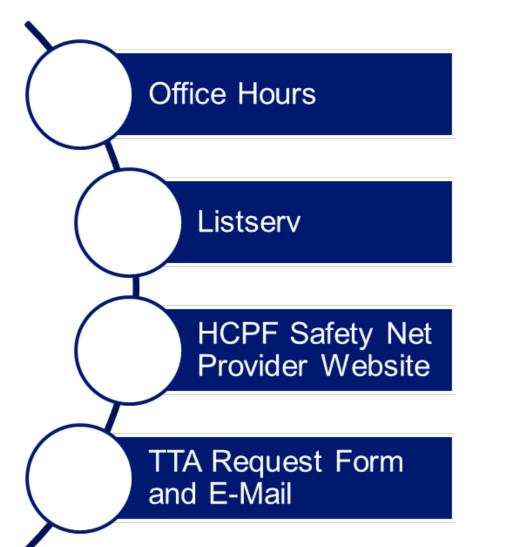


Questions?





Health Management Associates Provider Training & Technical Assistance Updates



Last Friday of the month (March-June) @ 12pm MST, Register Here

Join the Listserv to receive notifications of trainings, technical assistance, and other stakeholder engagement opportunities: <u>Register Here</u>

Visit the website for details on upcoming training topics and announcements, training recordings and presentation decks, FAQs and more: <u>https://hcpf.colorado.gov/safetynetproviders</u>

Request TTA support or share your ideas, questions and concerns about this effort using the <u>TTA Request Form</u> or e-mail questions and comments to: <u>info@safetynetproviders.com</u>







Questions?





Thank You For Joining Us!

- Next meeting: March 29th 10:00am-11:00am
 - SNP updates, meeting recordings, and training information SNP Webpage
 - SNP rules, BHE resources, and BHA enrollment information <u>BHA Laws and Rules</u>

Webpage

- For questions:
 - Universal Contract/SNP/Forum Agenda Requests <u>hcpf_safetynetforum@state.co.us</u>
 - Licensing and Safety Net Approval <u>cdhs_bharulefeedback@state.co.us</u>
 - Training or technical assistance questions <u>safetynettta@healthmanagement.com</u>



