# Welcome

We will start promptly at 11:00 a.m.

#### We are Recording



Avoid sharing protected health information

#### **Listening by Phone**



Press \*6 to unmute your line or \*9 to raise hand

#### **Use Chat**



We are managing questions in the chat function panel

#### **Closed Captioning**



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#### **Recording & Slides**

Shared via Newsletter and Website



# HCPF/BHA/CDPHE Behavioral Health Secure Transportation Stakeholder Meeting

May 30, 2023 11:00am



# Agenda

- Welcome and Introductions
- Overview
- HCPF Rule Published to CCR
- HCPF Reimbursement Strategy
- BHA Reimbursement Option
- Get Enrolled!
- Q&A About Behavioral Health Secure Transportation



### Introductions



Meghan Morrissey
Behavioral Health
Secure Transportation
Policy Advisor
Colorado Department
of Health Care Policy
& Financing (HCPF)



Emily Holcomb

Mobile Crisis Policy
Advisor
Colorado
Department of
Health Care Policy
and Financing
(HCPF)



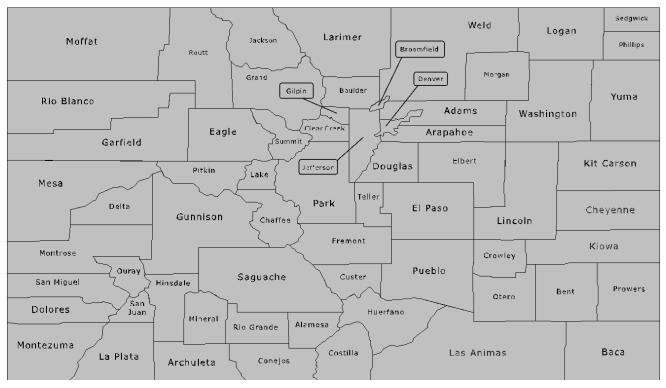
John Lentz
Wraparound
Services Unit
Supervisor
Colorado
Department of
Health Care Policy
and Financing
(HCPF)



Megan Lee Manager of Crisis Services Colorado Behavioral Health Administration (BHA)







# Stakeholders



# Behavioral Health Secure Transportation (BHST) Overview

# Behavioral Health Secure Transportation (BHST) Goals

- New alternative option for secure transportation throughout levels of behavioral health care
- Administratively simple
- Billed separately from other services, including Mobile Crisis Response (MCR)

### **BHST Basics**

- HB 21-1085 mandates secure transportation for behavioral health crises with payments from Health Care Policy and Financing (HCPF) no later than July 1. 2023.
- HCPF is developing this new benefit for Medicaid members in alignment with mobile crisis response and transportation best practices.
  - > HCPF Rule adopted on April 14, 2023
    - Anticipated publication to <u>Colorado Code of Regulations</u> on May 30, 2023
    - Anticipated invitation to enroll June 1, 2023



# Behavioral Health Secure Transportation (BHST) Reimbursement

# Medicaid Transportation Spectrum

**Scheduled** Unscheduled Non-Emergent Medical **Behavioral Health Secure** Non-Medical Transport **Emergency Transport** Transport Transport Scheduled trips to non-Urgent transportation to Scheduled trips to Urgent and emergent medical places that provide continuity of care members in behavioral transportation due to support member health to members, including health crisis medical emergency to and community planned outpatient or highest level of care integration

\*eligible to Medicaid waiver members only inpatient appointments

### Medicaid Reimbursement

Behavioral Health Secure Transport

Urgent transportation to members in behavioral health crisis

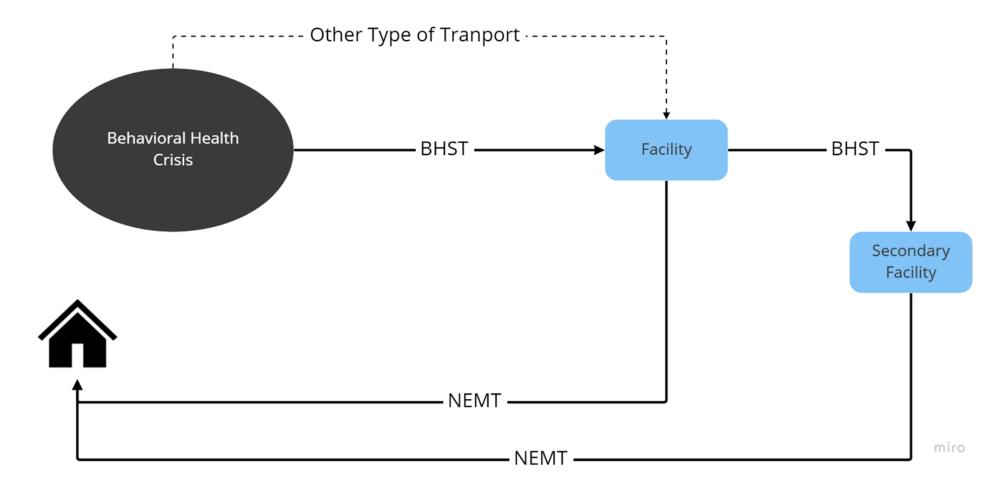
- Will align with current transportation mileage rates
- No payment differential based on licensure nor vehicle type
- Preliminary rates (subject to change)
  - > A0999 = \$262.66
  - > A0425 = \$6.10 per mile

# **BHA Reimbursement Option**

### General Accounting Encumbrance (GAE)

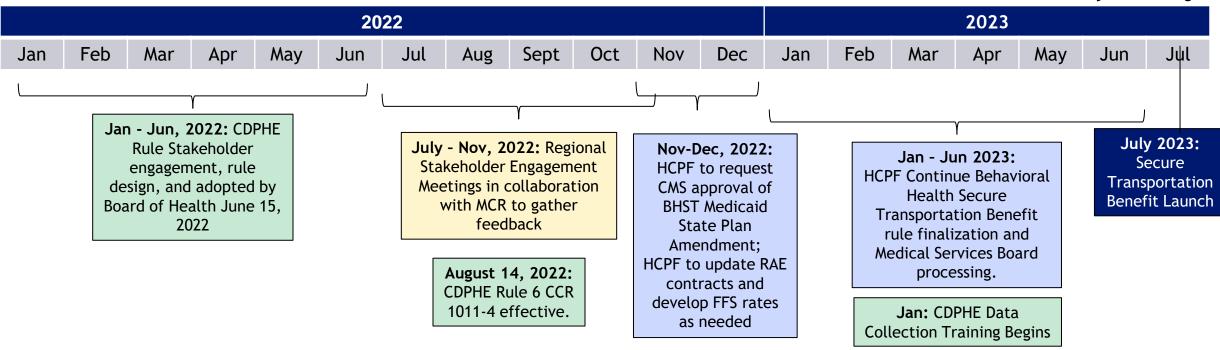
- Available to Administrative Service
   Organizations (ASO) and Community Mental
   Health Centers (CMHC) only
- contact <u>megan.lee@state.co.us</u> for more information

# BHST in Practice: Client Journey



# **BHST Implementation Timeline**

All dates are subject to change.



HCPF has been mandated to pay for Secure Transportation Services by July 1, 2023 and looks forward to collaborating with all system partners in the finalization of the initial benefit and continually improving based on the needs of Medicaid Members and Coloradans across the state.



# Current Responsibilities

**CDPHE** 

**Data Collection** 

**HCPF** 

Stakeholder rule and reimbursement strategy

BHA

Reimbursement strategy and best practices

Counties

License BHST providers and permit BHST vehicles

**BHST Providers** 

Obtain BHST licenses and permits from each county of planned operation Optional: Enroll as NEMT provider if interested in providing return trip



# Get Enrolled!

### **BHST Licensing/Permit Matrix**

	Type 1 Vehicle means a permitted vehicle with a permanent safety partition that separates the driver from the passenger compartment.  1:1 Staff ratio	Type 2 Vehicle means a permitted, non-partitioned vehicle.  1:1 Staff ratio plus Driver	
Class A means secure transportation services licensed to use physical restraint during secure transport pursuant to the parameters set forth at Part 8.	Capacity to restrain in a partitioned vehicle	Capacity to restrain in a non- partitioned vehicle	
Class B means secure  ransportation services that are partitioned vehicle partitioned vehicle estraint during secure transport.		No capacity to restrain in a non- partitioned vehicle	

### **BHST Provider Enrollment**

Secure Transportation will be a specialty type under the new Behavioral Health Crisis Services Provider Type. As this provider type becomes available, an email will be sent inviting BHST providers to follow the <u>Medicaid Enrollment Process</u>. To learn more about this process, please review <u>provider resources</u>. Providers enrolling as a BHST provider will be required to submit licenses and permits from each county in which they operate.

**Behavioral Health Crisis Services** 

Provider Type: 95

**Specialty:** Secure Transportation

Specialty Code: 773

**Enrollment Type:** Atypical

• Each service location must complete a separate application.

# BHST Provider Enrollment Requirements

**Behavioral Health Crisis Services** 

**Provider Type: 95** 

**Specialty:** Secure Transportation

Specialty Code: 773

Enrollment Type: Atypical

Each service location must complete a separate application.

#### **Required Attachments:**

- Board of County Commissioners license for secure transportation services for each county of operation.
- Board of County Commissioners vehicle permit for each vehicle.
- W9 (signed and dated within the last 6 months)
- Voided business check (no temporary checks or deposit slips) or bank letter (dated within the last 6 months)
- Malpractice/Liability insurance information must be entered in the application; however, proof of insurance is not a required attachment.

#### **General Requirements:**

• Employer Identification Number (EIN); IRS 147C EIN Verification Letter is not a required attachment

Risk Level:	Limited	Fee Req'd?	No	NPI Req'd?	No
Medicare Req'd?	No	OOS Allowed?	No	BT Allowed?	No

# **Administrative Simplicity**

No application fee No National Provider Number (NPI)

### **Enrollment Best Practices**

- Keep contact information current. Communications will go to the contact email address in the application. If the contact information changes but is not updated in the system, important communications will not be received.
- Save username and password for enrollment applications. If the password and security questions are forgotten, a new application must be started. It cannot be reset.

## **Enrollment Attachments**

- Submit each document separately and label each one.
- Do not submit more information than is required.
- Data in the data fields must match the supporting documentation. Common reasons for applications to be returned are:
  - Missing Licenses (dates or license #)
  - Incorrect W-9 tax classification
  - Incorrect Banking or Electronic Funds Transfer (EFT) information
  - Outdated insurance policies (applicable to Nursing Facilities and HCBS providers only)

## **Enrollment Attachments**

- Verify data is being entered in the correct field. If multiple licenses are attached, add the data for all licenses in the data panel. The data must match between what is entered in the application and the copy attached to the application.

## **Enrollment Attachments**

- Read the instructions regarding assessments questions (i.e. Ownership & Control interest). The questions relate to who or what has an ownership/control interest in the provider that is applying. If the applicant is an Individual Within a Group or a Billing Individual, it is unlikely that someone has an ownership interest in that person. Ownership interest for groups must be completed according to the Assessments quick sheet. Interest can be entered as "0%" for Board of Directors or must be entered for 5% or greater ownership/control interest (if companies or individuals own the provider). If a group is enrolled with Medicare, ownership information should match with that enrollment.

## Provider Resources

Beginner Billing Training: Professional Claims (CMS-1500)

Second and Fourth Thursday of Each Month from 9am-11:30am

sign up: <a href="https://hcpf.colorado.gov/provider-training">https://hcpf.colorado.gov/provider-training</a>

### NEMT Provider Enrollment

- Provider Type 73 <u>Non-Emergent Medical</u> Transportation
  - > BHST requires providers have CPR and First Aid
  - > NEMT requires providers have BLS
- HCPF <u>Provider Enrollment</u>
  - > Allow up to one month for processing

### Resources

- House Bill <u>21-1085</u>
- CDPHE Rule <u>6 CCR 1011-4</u>
- HCPF Website: https://hcpf.colorado.gov/securetransport
- Colorado Counties, Inc
- HCPF Newsletter

### New Resources

- HCPF Website: https://hcpf.colorado.gov/securetransport
  - > BHST Licensing/Permitting County Contacts List
  - > BHST Billing Manual

# **Funding Opportunities**

EMS Funding: <a href="https://cdphe.colorado.gov/ems-and-trauma-funding">https://cdphe.colorado.gov/ems-and-trauma-funding</a>

# **Next Steps**

- > June 23, 2023 9am-10am
  - Register Here:

https://us06web.zoom.us/webinar/register/WN\_4g6urIIJQsyVMaDVV66lvg

# Thank You and Questions

#### **Meghan Morrissey**

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#### John Lentz

Wraparound Services Unit Supervisor, HCPF john.lentz@state.co.us

#### Megan Lee

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#### Alexandra Haas

Policy Supervisor of Health Facilities & EMS Division, CDPHE alexandra.haas@state.co.us

#### For MCR Questions:

#### **Emily Holcomb**

Mobile Crisis Policy Advisor, HCPF emily.holcomb@state.co.us

#### Megan Lee

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#### For NEMT Questions:

#### **Courtney Sedon**

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