Healthy Louisiana Behavioral Health Services for Nursing Home Residents

Presentation to Nursing Facilities

September 14 and 20, 2016
Background

Effective December 1, 2015, behavioral health services for Medicaid eligible nursing home residents are provided through one of the five Healthy Louisiana Plans:

- Aetna Better Health
- Amerigroup Real Solutions
- AmeriHealth Caritas
- Louisiana Healthcare Connections
- United Healthcare

To find out which plan a resident belongs to:

- Look at the Electronic Medicaid Eligibility Verification System (eMEVS)
- Check the insurance card issued by the Healthy Louisiana Plan
What is changing because of Healthy Louisiana?

 '>' Individuals residing in nursing facilities are now eligible to receive Mental Health Rehabilitation Services

 '>' Managed Care Organizations (MCOs) will be providing Case Management and developing Plans of Care for certain Nursing Facility residents

 '>' Changes to the PASRR Preadmission Screening and Resident Review process, including face to face evaluations conducted by the MCOs
Medicaid behavioral health services

Medicaid recipients living in nursing homes may receive the following mental health and substance use services if medically necessary:

- Inpatient psychiatric hospital services
- Outpatient mental health treatments (individual, family and group)
- Substance use treatments
- Psychiatric medication management

Mental Health Rehabilitation (MHR) services

- Psychosocial Rehabilitation (PSR)
- Crisis Intervention (CI)
- Community Psychiatric Support and Treatment (CPST)
- Assertive Community Treatment (ACT)
Medicare behavioral health services

- Inpatient hospitalization
- Partial hospitalization
- Clinician coverage and outpatient mental health services
  - One depression screening per year
  - Individual and group therapy with doctors or state licensed professionals (excluding licensed professional counselors)
  - Family counseling for the purpose of helping with treatment
  - Psychiatric evaluation
  - Medication management

Note 1: For additional information regarding eligibility or requirements, consult Medicare & Your Mental Health Benefits

Note 2: Medicare Advantage Plans may offer benefits beyond those provided by traditional Medicare
Medicaid substance use treatment

Substance use treatment, also known as Addiction Services, include an array of services designed to promote skills for coping and with managing substance use symptoms and behaviors.

Service types are determined by the MCO based on the person’s needs and level of care and can include:

- Outpatient treatment
- Intensive Outpatient (IOP) treatment
- Detox
  - Ambulatory – which is outpatient but medically monitored
  - Residential – which is inpatient and medically driven
- Residential treatment
Mental Health Rehabilitation (MHR) Services

- **Psychosocial Rehabilitation (PSR)** – skill development: social and interpersonal skills, daily living skills, coping strategies and effective functioning. Services may be provided individually or in a group setting.

- **Crisis Intervention (CI)** – services provided to someone experiencing a psychiatric crisis. Designed to avoid more restrictive levels of treatment such as inpatient psychiatric care. CI can occur in a variety of locations.

- **Community Psychiatric Support and Treatment (CPST)** - individual supportive counseling. Goal is minimize symptoms, disturbances, stressors which interfere with the individual’s daily living, personal recovery, family and/or interpersonal relationships and community integration.

- **Assertive Community Treatment (ACT)** – therapeutic interventions provided by an interdisciplinary team. Designed to increase ability to cope and enhance highest level of functioning in the community.
Mental Health Rehabilitation (MHR) eligibility

All mental health rehabilitation services must be medically necessary. The medical necessity for services shall be determined by a licensed mental health practitioner (LMHP) or physician who is acting within the scope of their professional license and applicable state law.
MHR target groups

MHR service are specifically targeted to:

- Residents with SMI who are preparing to transition to the community
- Residents for whom MHR services are recommended through the Level II determination process
- MCO identified high service users (e.g., emergency room, potentially avoidable hospitalizations)
Pathways to receive MHR services

- Residents transitioning to community:
  - May be referred by DHH staff: Transition Coordinators, Waiver Support Coordinators, OBH PASRR staff
  - May be referred by NF staff
  - May be referred by advocates such as Advocacy Center or NH Ombudsman
  - May self-refer or be identified by family

- Services recommended by OBH Level II PASRR:
  - Has significant behavioral health issues identified at admission or by Resident Review during the PASRR Level II process

- MCO identified, e.g.:
  - Frequent emergency room referrals for behavioral issues
  - Frequent in-patient psychiatric hospitalizations
# Role of Healthy Louisiana in PASRR

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<thead>
<tr>
<th>Staying the same</th>
<th>Changing</th>
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**Staying the same**

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**Changing**

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- NF will continue to contact OBH
  - For status of Level II reviews and determinations (both on admission and resident reviews)
  - For resident reviews when there has been a significant change in status
  - For extension requests
  - Any Level II PASRR Questions

- NF will contact the Healthy Louisiana Plans to establish services for residents with behavioral health (mental health and substance use services)
Case management

MCOs are responsible for providing case management for:

- Individuals who are approved for specialized behavioral health services as a result of a PASRR Level II determination
- Individuals receiving MHR services
Case management functions

- Assessment of a member’s risk factors associated with the behavioral health condition;

- Development of an individualized behavioral health plan of care;

- Referrals and assistance to ensure timely access to behavioral health providers;

- Care coordination that links members to needed services;

- Monitoring of the delivery of behavioral health services; and

- Continuity of care between treatment settings and residences
Case management Plan of Care

MCOs will prepare an individualized Plan of Care around the behavioral health needs of the resident. The Plan must:

- Be prepared at least annually at the time of reassessment or when the member experiences a significant change in condition or circumstance
- Include goals
- Include services and intensity of services to meet goals
- Be coordinated with other service providers, including the NF

Note: This is in addition to the plan of care prepared by the NF in accordance with federal and state regulations.
Benefits to NF of working with MCOs

- MCO provides information regarding behavioral health eligibility, benefits, services, and providers.
- MCO case manager can be part of the multidisciplinary team and treatment planning (like hospice, rehab, dialysis providers).
- MCO and OBH are available for behavioral health consultation.
- MCO plans are a valuable resource for discharge planning.
# Healthy Louisiana contacts

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<tr>
<th>Plan</th>
<th>Member Contact</th>
<th>Provider Contact</th>
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| Aetna                    | 1-855-242-0802  
www.Aetna.com              | Lance Miguez  
504-667-4481  
MiguezL@aetna.com |
| Amerigroup               | 1-800-600-4441  
www.myamerigroup.com/la  
Mental Health and Substance Use Services  
1-844-227-8350  
On Call/24-hour nurse helpline  
1-866-864-2544 | Michelle Marrocco, RN, BSN, MSHCA  
504-836-8892  
Michelle.Marrocco@amerigroup.com |
| AmeriHealth Caritas LA   | 1-888-756-0004  
www.amerihealthcaritasla.com | Julie Zeno  
225-300-9229  
jzeno@amerihealthcaritasla.com |
| Louisiana Healthcare Connections | (866) 595-8133  
www.louisianahealthconnect.com/for-members/ | Bridget Suire  
Director, Medical Management (Behavioral Health)  
225-337-6619  
BSUIRE@LOUISIANAHEALTHCONNECT.COM |
| United Healthcare        | 1.866.675.1607  
www.liveandworkwell.com        | Kathleen Carson, LPC  
763-321-2500  
Kathleen.Carson@uhc.com        |
Related resources

► Medicaid
   http://new.dhh.louisiana.gov/assets/docs/BayouHealth/BHIntegration/BH_Specialized_Fee_Schedule_7-1-16.pdf

► Making Medicaid Better.com
   Informational Bulletin 15-17: Billing for Specialized Mental Health and Substance Use Services for Dual Eligibles

► Medicare

► OBH –PASRR Website
   http://dhh.louisiana.gov/index.cfm/page/2467
QUESTIONS