Office of Alcoholism and Substance Abuse Services

New York State

Managing the care of individuals with Substance Use Disorder

Commissioner Arlene González-Sánchez
NASADAD Annual Meeting
June 3, 2015

June 19, 2015

Medicaid Redesign – A multi-year process

- Governor Cuomo's 2011 – 2012 agenda included ways to reduce costs and increase quality and efficiency in the Medicaid program

- As part of this agenda, he developed a diverse Medicaid Redesign Team (MRT) comprised of legislators, providers, managed care plans, unions, state agency partners, and consumers tasked with presenting a plan to reduce Medicaid expenditures by 2.35 Billion Dollars

- Last Year NYS Spent **6.3 billion** on 408,529 individuals with at least 1 claim for SUD or MH

- Out of the MRT came many major initiatives all focused on care management:
    - Health Homes
    - Health and Recovery Plans (HARPs)
    - Fully Iintergrated Dual Advantage (FIDA) plans
    - Developmental Disabilities Individulaized Support and Care Coordination Organization (DISCO)
    - Managed Long Term Care (MLTC)
    - Balance Inncentive Program (BIP)
    - And More…….

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Health Homes

"The health home service delivery model is an important option for providing a cost-effective, longitudinal "home" to facilitate access to an inter-disciplinary array of medical care, behavioral health care, and community-based social services and supports for both children and adults with chronic conditions." **CMS Director's letter.**

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Health Homes

Purpose – To improve patient quality outcomes, reduce inpatient, emergency room, and long term care costs.

Intent - Treat the individual's physical and behavioral health condition and provide linkages to long-term community care services and supports, social services, and family services.

Services - Comprehensive care management, coordination and health promotion; transitional care from inpatient to other settings, referral to community and social support services, and use of health information technology to link services.

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Health Homes

Medicaid Analytics Performance Portal (MAPP)

The Medicaid Analytics Performance Portal (MAPP) is a performance management system that will provide tools to the Health Home network to support providing care management for the Health Home population. Additionally, MAPP will support the Health Home (HH) and Delivery System Reform Incentive Payment (DSRIP) program performance management technology needs.

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Health Homes

- 62 Counties
- 32 Health Homes
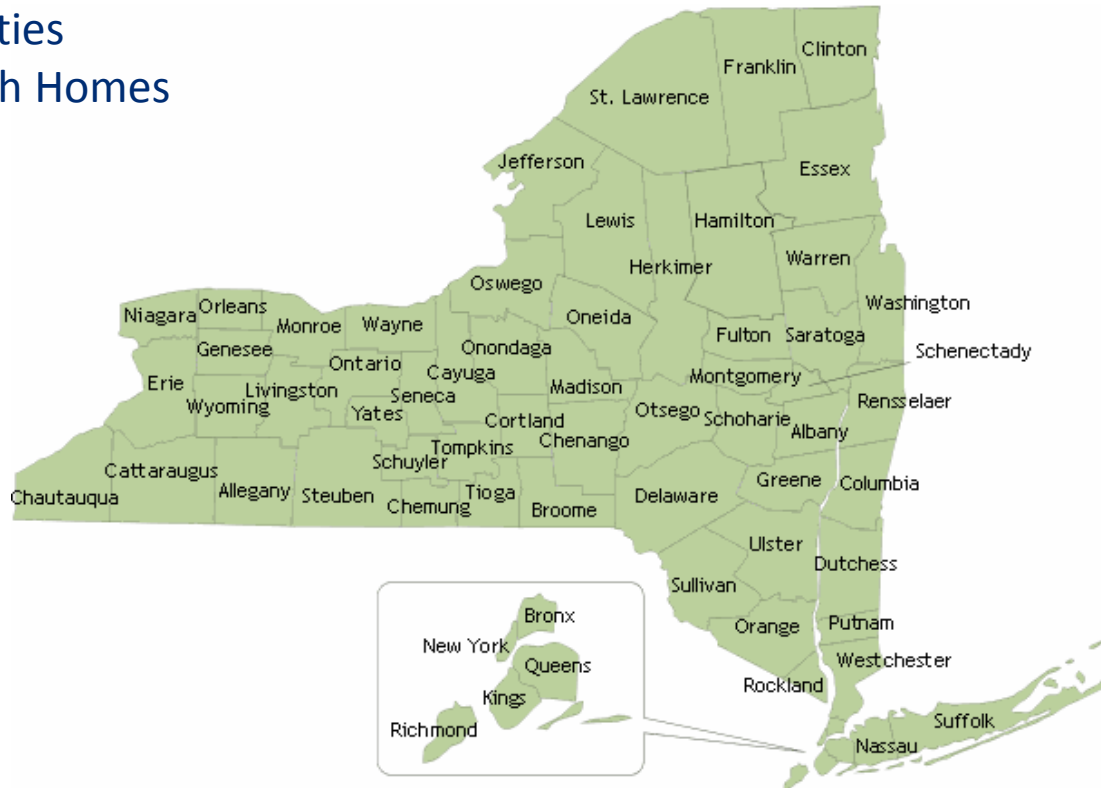
Health Homes

Who is Eligible ?

- Individuals who suffer from a single qualifying condition:
  - Serious Mental Illness (SMI)
  - HIV/AIDS

- Individuals with two or more chronic conditions:
  - substance use disorder, mental health condition, asthma, diabetes, heart disease, being overweight (BMI over 25), or other chronic condition.

How many Members are there?

- There are currently 169,821 members enrolled in Health Homes statewide.
  - 66,165 are in outreach status
  - 103,656 are in active enrollment status

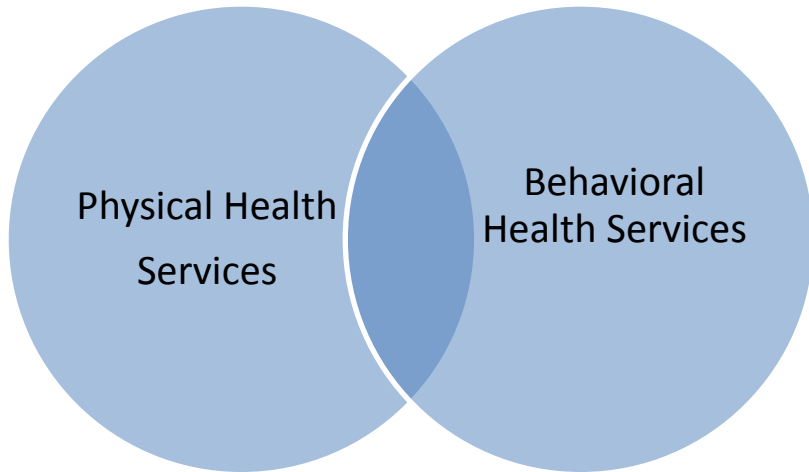NEW YORK STATE | Office of Alcoholism and Substance Abuse Services

Health Homes

Children's Health Homes

- 22 applications were submitted to become a children's Health Home – they are currently under review by the state

- Children's Health Homes are expected to be operating on or about October 1, 2015

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Managed Care and Behavioral Health

Current State

Future State

Physical Health Services

Behavioral Health Services

Physical Health and Behavioral Health Services

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Managed Care and Behavioral Health

The Challenge:

How do we ensure members receive services and providers are paid?

- No Prior Authorization for Outpatient Clinic services (Outpatient, Outpatient Rehabilitation and Opioid Treatment Programs)
- Network Protections
- Government Rates in Outpatient Settings for 2 years
- No "All Products Clauses"
- Use of Level of Care for Alcohol and Drug Treatment Referral Tool (LOCATDR 3.0) mandatory for Medicaid Managed Care Plans
- Enhanced Standards

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Managed Care and Behavioral Health

The Opportunities:

Delivering an integrated benefit package for the first time

Obtaining authority from CMS to demonstrate innovative services:
- Offering community based outpatient services
- Redesign of the OASAS Residential system

Offering a new managed care product for high need individuals – the HARP

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Health and Recovery Plan (HARP)

- Managed care plan serving individuals identified with significant behavioral health needs (SUD and/or MH)

- Eligibility for SUD population
  - Members with two or more services in an inpatient/outpatient chemical dependence detoxification program within the year prior to enrollment.
  - Members with one inpatient stay with a SUD primary diagnosis within the year prior to enrollment.
  - Members with two or more inpatient hospital admissions with SUD primary diagnosis or members with an inpatient hospital admission for an SUD related medical diagnosis-related group and a secondary diagnosis of SUD within the year prior to enrollment.
  - Members with two or more emergency department (ED) visits with primary substance use diagnosis or primary medical non-substance use that is related to a secondary substance use diagnosis within the year prior to enrollment.

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Health and Recovery Plan (HARP)

Enhanced Benefit Package
　HCBS services
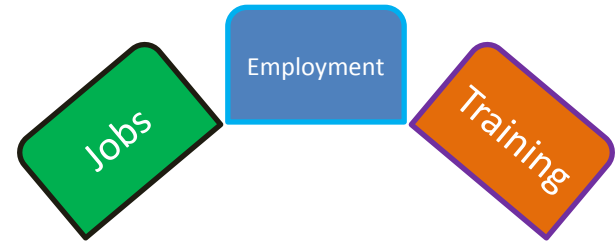
HARPs and Health Homes

- All members of a HARP are eligible for Health Home enrollment.

- 118,000 individuals are currently HARP eligible

- 33,668 HARP eligible individuals are in a Health Home

- Members are assessed by Health Homes for eligibility for home and community based services (HCBS)

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Conclusion

New York State continues to move towards reducing Medicaid costs and providing better care by providing comprehensive care management to all Medicaid members.