



**Behavioral Health Partnership** 

## Report to the Operations Sub-Committee March 19, 2010

## Rapid Response Team

## Rapid Response Team Recent Project Reconciliations

 Providers obtaining registration services utilizing incorrect Medicaid identification numbers

⇒Authorizations have been reconciled and reprocessed

Hospital merges / service transitions

Authorizations have been identified and applied to the appropriate NPI

Admin denials / Timely filing

Affected high volume hospital(s) have been re-educated on authorization guidelines and timely filing protocols

## Rapid Response Team Claims / Billing Updates

#### **High Volume Facilities**

For inquiries involving multiple claims research, please submit your inquiry using the RRT Claims template in place of any written correspondence. Any of the RRT members can provide you with this template.

## Rapid Response Team Claims / Billing Updates (Cont.)

Quarterly HP Provider Newsletter can be accessed at <u>www.ctdssmap.com</u>

Newsletter provides information and training workshop schedules including:

- Web claims submissions
- New provider claims workshops
- Other insurance billing protocols

## Rapid Response Team HP Claims Workshops

 The HP Provider Relations team holds ongoing workshops with their provider communities at several locations throughout the State. Training announcements are mailed to all provider types involved in each workshop. If you do not regularly receive these types of mailings, the current class schedule is posted on the Web site at www.ctdssmap.com. To access the schedule, select Provider, Provider Services, scroll to the bottom of page, and click on the link under Provider Training. So check back regularly to see what training is available for you and your team. https://www.ctdssmap.com/CTPortal/portals/0/StaticContent/Publ ications/Provider\_Training.pdf

## Rapid Response Team HP Claims Workshops (Cont.)

 The HP team is also utilizing a new training option which uses an internet virtual classroom. This new option allows class participants to attend a live training class without leaving their office. Participants are provided a key to an internet classroom to view the workshop presentation. At the same time, participants will dial into a conference call and have an opportunity to ask questions. Providers that register for this type of training receive instructions on how to log in prior to the workshop.

Rapid Response Team HP Claims Workshops (Cont.)

# First Quarter 2010 Workshops held in January, February, March: All Providers

- Professional Claim Web Submission Workshop
- Medicare Cost Avoidance Claim Submission Requirements
- Be on the look out for our upcoming workshops *Exact dates to be announced:* 
  - Hospital Refresher Workshop
  - Professional Web Claim Submission Workshop
  - New Provider Workshop

## Rapid Response Team Recent Provider Bulletins

- EDS PB 2010-11 Clarification of Observation Service Guidelines for Hospital Providers
- PA 2010-03 (Feb) CT BHP Bypass Program for CT BHP Adult Inpatient Psychiatric Providers
- PA 2010-04 (Feb) CT BHP Bypass Program for CT BHP Child/Adolescent Inpatient Psychiatric Providers
- PA 2010-05 (Feb) DCF Residential Program Specifications to All CT BHP Providers
- PA 2010-06 (Mar) UPDATED DCF Residential Program Specifications to All CT BHP Providers
- PA 2010-07 (Mar) CT BHP Bypass Program for CT BHP Adult Inpatient Psychiatric Providers

#### Rapid Response Team 2010 CT BHP Provider Training Workshops

#### **Upcoming 2010 Provider Workshops**

All workshops are scheduled from 10:00 a.m. to 11:30 a.m. & will be held at the CT BHP ASO office

#### Thursday, March 25<sup>th</sup> - CT BHP Web Registration/Re-Registration:

This workshop will give CT BHP providers an overview of the CT BHP website, registration system installation, and a step-by-step tutorial of how to enter and complete registered services and re-registrations/concurrent reviews.

#### **Tuesday, April 13th - GAIN-Short Screener (GAIN-SS) Train-the-Trainer:**

This workshop is specifically designed for Enhanced Care Clinic provider staff as part of the co-occurring requirement. The goals of this workshop are: to provide an overview of the GAIN-SS tool, learn how to introduce, administer and score the GAIN-SS, and provide opportunities for practice using the tool. After completing this workshop attendees will be able to administer the GAIN-SS tool and train others at their agency.

## Network Operations Provider Relations

## Web Registration

- Security Access / User ID Requests
  - 4,681 User ID's generated as of 3/15/2010
    - 307 DCF / Parole Users for CANS registrations
    - 163 Probation Users for CANS registrations
    - 181 Residential Facility / DCF Users for MTPPR
- Winfax Non Web / Paper Registrations
  - 200 Providers currently using paper registration as of 12/29/06
  - Increase of 86 since 11/2006
  - Efforts continue to engage providers in the web process vs. paper process

## Web Registration (Cont.)

## Total Web Registration Authorization / Review occurrences since 9/1/06:

Outpatient Services 195,2	16
Methadone Maintenance	99
Ambulatory Detoxification7	'56
Family Support Team (Home Based Service) 1,65	51
Psychological Testing	18

#### Total of Home Based Service Authorization / Review occurrences since their transition to the web on 10/1/09:

IICAPS 1,	,261
MDFT	161
MST	. 59
FFT	190

## **Clinical Operations**

## **Clinical Operations Updates**

 Child/Adolescent Inpatient Bypass Programs went live March 1<sup>st</sup>, 2010

 IOP Child/Adolescent/Adult/Substance abuse Bypass programs to go live April 5<sup>th</sup>, 2010

### Clinical Operations CT BHP Membership Trends



\*2010= Membership projected at 2% above average Oct 09-Mar 10; 6.5% annual rate consistent with recent years

Cumulative % increase Above initial year of 2006 -

2007 = 2% 2008 = 8% 2009 = 15% 2010 = 23%

### Clinical Operations CT BHP Call Volume



2010 = Call Volume projected at 1/2 of the 2009 increase or 3%

Cumulative % increase above initial year 2006 –

2007 = 67% 2008

2008 = 96%

2009 = 108%

2010 = 114%

#### Clinical Operations CT BHP Penetration Rates



\*2010 = Penetration rate projection at  $\frac{1}{2}$  of the 2009 increase or 6%

### Clinical Operations CT BHP Authorizations / Registrations



\*2010 = Authorizations/Registrations projected at 2/3 of the 2009 rate or 10%

Cumulative % increase above initial year 2006 –

**2007 = 44% 2008 = 75% 2009 = 102% 2010 = 122%** 

Authorizations

## Intensive Case Management

Partnering with providers for timely access to behavioral health care

#### Intensive Case Management Services - 2009

- 1,486 HUSKY members served through Intensive Case Management Services for CY '09
- Top referral sources IPF facilities, (specifically for members identified as discharge delayed) DCF area offices, MCO, hospital emergency departments and CARES

#### **Intensive Case Management Activities**

- Outreaches to hospital emergency departments to assist with disposition planning, access to care and to address any case management needs
- Attends DCF Area Office MSS Meetings to facilitate case conferences, determine LOC, and address any barriers to care
- Coordinates with Peer / Family Peer Specialists to ensure that the member's clinical needs are being treated in the least restrictive treatment setting
- Works closely with IPF, RTC, PRTF and Outpatient, in-home service providers to ensure timely access to care

## **Quality Management**

## **CT BHP Denials & Appeals**

DENIALS	Administrative	Medical Necessity
2006	116	10
2007	403	48
2008	518	162
2009	578	125
TOTAL	1615	345

APPEALS	Administrative	Medical Necessity
2006	19	0
2007	194	23
2008	248	51
2009	290	46
TOTAL	751	120

## Regional Network Management

## **Provider Analysis and Reporting**

- SFY 2009 PRTF P4P initiative finalized
- Q4 2009 Pediatric Inpatient data being shared
- SFY 2010 Pediatric Inpatient goals underway
- SFY 2010 ED and EMPS P4P initiatives underway
- ECC Mystery Shopper: to date 20 ECCs have been randomly shopped

## Community Interaction: Peer / Family Services

### Peer / Family Peer Specialist Activities - 2009

- Peers outreached to 1,424 Families from January 2009 December 2009
- Peer and Family Peer Specialists activities:
  - ⇒ 395 Home Visits and Member Meetings
  - ⇒ 89 Community Outreach Meetings
  - ⇒ 165 Community Collaborative Meetings and Subcommittees
  - ⇒ 88 Trainings and Workshops
  - ⇒ 57 PPT Meetings
  - ➡ 67 ED Visits
  - ⇒ 10 MSS Meetings
  - ⇒ 38 Discharge Planning Meetings
  - ⇒ 28 Court procedures to support members
  - ⇒ Provided members with 2,522 community-based referrals

### **Community Support and Involvement**

- Peers attended training sponsored through DMHAS and Advocacy Unlimited and obtained certification as Recovery Support Specialists
- Family Peer Specialist attended training and is a NAMI group facilitator
- Facilitation of the Consumer and Family Subcommittee of the CT BHP
- Peers assist members by connecting them with community-based resources such as CCAR, telephone recovery support, sober housing, Favor family advocacy group and parent support groups
- Peers are trained in Wraparound team process and support the efforts of DCF, Family groups and providers in promoting this practice