

**Connecticut**  
**Medicaid Managed Care Council**  
Behavioral Health Subcommittee  
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**Meeting Summary**

**March 21, 2001**

**DSS/DCF Update**

**★ KidCare progress:**

- Both agencies are working on the MOU. DSS will manage the Medicaid dollars and federal reimbursement rules, DCF will be responsible for the program design. The MOU will define each agency role, with a joint contract with an ASO. The concept of 'braided' funding will allow an integrated system with wrap around services to all children in HUSKY A, B, DCF and Juvenile Justice.
- DCF will be choosing the first regional site for KidCare as well as the scheduling and placement of incremental rollouts for LSAs. Budgeted money will be used to provide the first region with a full complement of services that are needed for success in a community based level system of care.

**★ BH Outcomes study:** The Commissioners of DSS and DCF will meet with Senator Harp April 12 to review specific issues with the study, including:

- Provider participation; while some providers are participating, more are needed.
- Review confidentiality, reimbursement, and methodology issues.
- Determine admission to discharge time for the average number of sessions to better forecast the timeframe for the study.

## **Subcommittee**

★ The priority work group will meet before the next meeting to review issues worked on.

★ More adults are enrolling in HUSKY A. The subcommittee participants agreed it is important to identify quality care related to adults and transitional youth in the program.

- DSS and Labor (DOL) have worked together to develop a non-clinical assessment of welfare to work barriers that impede success related to behavioral health issues and refer clients to HUSKY services.

- Multisystem family treatment (MST), court ordered services, would benefit from maximizing Medicaid and supplemental funds

★ Terry Nowakowski of PHS/Valueoptions introduced the new BH vendor, stating:

- The Valueoptions network has enrolled 500 additional providers and all facilities (currently working with the Hospital of St. Raphael)

- No program changes at this time: there are 10 pass through visits with 20 visits for Medicaid without prior authorization.

- Implementing a successful claims system that is used in DMHAS.

- Responsible for claims beginning 4/1/01.

**The Behavioral Health subcommittee will meet Wednesday May 16, 2 PM in IOB RM 1A. The Priority work group/Outcomes study group will meet at 1 PM in LOB RM 2600.**