



Behavioral Health Partnership Oversight Council

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Co-Chairs: *Rep. Christopher Lyddy, Jeffrey Walter & Hal Gibber*
Meeting Summary: September 12, 2012

Next meeting: **October 10, 2012 @ 2 PM in LOB Room 1E**

***Attendees:** Jeffrey Walter (Co-Chair), Paul Acker, Dr. Karen Andersson (DCF), Rick Calvert, Terri DiPietro, Dr. Ronald Fleming, Catherine Foley-Geib, Heather Gates, Dr. Steven Girelli, William Halsey (DSS), Jennifer Hutchinson (DMHAS), Thomas King, Mickey Kramer, Dr. Stephen Larcen, Sabina Lim, Judith Meyers, Lois Nesci, Kimberly Nystrom, Kelly Phenix, Maureen Smith, Janine Sullivan-Wiley, Lori Szczygiel (CTBHP/VO), Susan Walkama, Jesse White-Fresse, Bereford Wilson, and Leslie Woods*

BHP OC Administration

Co-Chair, Jeff Walter convened the meeting at 2:05 PM and asked members to introduce themselves and state who appointed them to the Council. Jeff welcomed two new members to the Council, Lois Nesci, CEO of Catholic Charities of the Archdiocese of Hartford and Leslie Woods, Governor Malloy's appointee. He then asked the Council to approve the August BHP OC meeting summary. All members accepted the summary as written without additions, deletions or corrections.

Action Items

No action items for this month.

Connecticut Behavioral Health Partnership Agency Reports

Department of Social Services

Bill Halsey of DSS gave an update on impending items that the Council is waiting for. The Behavioral Health Clinic report has been sent to the AG's Office for review. Currently, there are policies and procedures that are posted on the BHP Website: CTDSSmap.com- Publications than scroll down to Regulations and Policies, but note, these are not regulations. The Clinic Rate Meld is the number one priority and should be ready for presentation in the coming weeks.

Discussion

Co-Chair Jeff Walter brought up his concern that what Bill has discussed have been issues on the agenda for many months, at least nine to twelve and there is a concern that as time goes on, these issues may never get resolved. It seems that the delay stems from the Department is waiting on CMS approval, its work flow prioritization and regulations approval from the Attorney General's office then implementation. Bill said the Department is moving forward with the Clinic Rate

Meld and the Clinic Regulations. What the Department is waiting for from CMS approval is Supplemental Payment.

Department of Children and Families

Karen Andersson of DCF said the Department worked this summer with CT BHP/Value Options on to reconfigure the Residential Care Team to reduce the number of children out of congregate care and into the residential system. There has been deployment to regional offices to assist in this transition with an emphasis on regionalism instead on a centralized basis. It is seen as a more hands on approach that will be more highly effective in case specific issues.

Discussion

The topic of Re-bidding has come up again. The whole process is a great disruption at the community level for who the system was designed to help. Karen said that DCF is currently not engaged in any re-negotiation talks or in any re-bidding contacts. Rick Calvert reminded the Council that the issue on rebidding was recommended to be sent to the Child/Adolescent Quality, Access & Policy Committee for action and to be brought back to the Council for discussion at a later date. The Department is currently working on a Trauma Initiative. Training on various levels is being conducted but Karen was not prepared at this time to converse about it but will commit to a discussion at a later meeting date. The topic of **Residential Initiatives** was raised in regards to how are the children who were brought back to Connecticut are fairing. Are there any gaps in services and disturbances in their communities? Karen said the Court Monitor, Ray Mancuso has offered to come to address the Council on regarding the children returned to the State. At this time, it is looking good and there are no alarming issues to be concerned about. *It was recommended that if there are some *preliminary reports* on the impact on these children and they are available, this information *should be presented* to the Council by the Department.

Bereford Wilson brought up the topic of the delivery of Therapeutic Services for children in foster care services and wanted to know if the philosophy and model of DCF and CCSD was compatible in this area. He asked how DCF and CCSD could coordinate to be more effective in the delivery of therapeutic services to children in foster care.

Departments of Mental Health and Addictive Services

Jennifer Hutchinson of DMHAS reported that the Department is working with a sub-group of the Adult, Quality, Access & Policy Committee on the Behavioral Health Home design. The Health Neighborhood model, a demonstration project for individuals with dually eligible for Medicare and Medicaid was submitted to CMS in May for approval. DMHAS and DSS recently had a meeting this summer to see how the models of Health Homes and Health Neighborhoods would intersect. CMS would like to know how Health Homes would work if at all under the recently submitted demonstration model. With input from the observation of Rhode Islands' model, more work needs to be done by the sub-work group to make recommendations on the final model for Connecticut.

Committee Reports

Coordination of Care: - Sharon Langer, Maureen Smith, Co-Chairs

Maureen Smith reported that there is a proposal for the Coordination of Care Committee and the MAPOC Consumer Access Committee to merge together. The two committees have many of the same members and issues in common. The next committee meeting will be on September 19, 2012 at 1:30 PM in Room 1E LOB with the following agenda to date:

- Proposal to have Coordination of Care Committee and the Consumer Access Subcommittee of the Council on Medical Assistance Program Oversight (i.e., MAPOC) meet together on an ongoing basis
- A Discussion on Behavioral Health Neighborhoods
- An Introduction and Discussion with new member: Dr. Barbara Ward-Zimmerman
- An Update on Pharmacy Utilization
- An Organizational Flow Chart of the DSS, Medicaid, the four ASOs and their breakdown sections
- Update on Non-Emergency Medical Transportation – Logisticare

*Regarding issues with non-emergency medical transportation, it is particularly important that Medicaid recipients who do have a problem with transportation that when reporting an issue, they must give the date and their member ID Number so that Logisticare can track it down to a particular day and particular driver. Members should not fear reprisals that giving this information will result in future retribution.

Adult Quality, Access & Policy: - Howard Drescher, Heather Gates and Alicia Woodsby, Co-Chairs

Heather Gates reported that the Committee is working with DMHAS on the design of the Behavioral Health Home initiative and coordinating with the MAPOC Complex Care Committee that has been doing work on the Health Neighborhood Initiative. As previously explained by Jennifer Hutchinson, a workgroup has been put together to work on the design, definitions, and other issues through October. Next week DMHAS should be previewing to the sub-group a first draft incorporating all the comments and proposals from previous meetings. DSS will also have a presentation on care coordination and research on Behavioral Home models from around the country.

Child/Adolescent Quality, Access & Policy: – Sherry Perlstein, Hal Gibber and Robert Franks, Co-Chairs

In the absence of the Committee Co-chairs, Jeff Walter reported that the August meeting was cancelled and that the committee will give a report to the Council in October.

Operations: – Susan Walkama and Terri DiPietro, Co-Chairs

Susan Walkama reported that the committee had a special sub-group meeting to focus on child rehab services, specifically intensive home based and EDT related to families that have commercial insurance and Medicaid is secondary. There is a potential of problems related to this when providers bill privately and then get denied and then have to bill secondary to get payment. They met with DSS to put forward a policy to make the payment system more streamline and expedient and less of an administrative burden for providers to get the Medicaid payment.

(Related from last month's Council meeting;) *Susan Walkama reported on Secondary Billing issues- home based treatment and extended day treatment. The Committee is looking to find a simpler process of billing and it continues to explore different options for resolve. Co-Chair*

Jeff Walter explained that is why there is no Action Items for discussion because these issues are recognized by both sides and together, they are determined to come to a satisfactory agreement for everyone. Co-Chair Hal Gibber asked if there is anything the Partnership can do to prompt commercial insurers to make it less difficult for providers to serve clients with private insurance. Susan Walkama said that a few years ago, she testified before a Legislative Committee to that fact but a bill to address cost shifting died and has not been brought up again. Jeff Walter stated that the Legislative Program Review and Investigations Committee is currently undertaking a study of cost shifting in the provision of adolescent addiction treatment services. Karen Andersson noted that an internal workgroup has been convened to explore the cost shifting from commercial insurance to the State those results when private insurance does not cover services. Bill Halsey replied that, following the last Operation Committee meeting, he discussed with the co-chairs a possible solution to the secondary billing problem. While there is not yet a definitive answer, the Department is actively considering it. Sherry Perlstein said that she would like providers help DCF to look further into this issue.

The another piece of business for the committee is the Level of Care Review for Intermediate Care Services guidelines for both adults and children need to be updated and modified for changes that have taken place. These new guidelines will be written up and placed before the Council for adoption at the next Council meeting.

Terri DiPietro discussed the timely filing issue. The Medical regulations for filing will be 120 days and the new Behavioral regulations have not been posted yet. At present, HUSKY A & B for Behavioral Health gets 120 days while HUSKY C & D on the Medical side gets 365 days to file and HUSKY C & D for both Behavioral Health and Medical gets 365 days to file. The Committee would like provider to have 365 days to file claims for all HUSKY Groups. The Department has not made a decision, but discussions with the Committee are ongoing. Bill Halsey said the Department is trying to come up with a uniform time filing procedure for both Medical and Behavioral Health reimbursement claims. In addition, the committee discussed the Rate Meld for Hospital Child Inpatient Services. There is hospital specific data by hospital and DSS has offered a month by month recoupment by hospital as opposed to nine months as it is now. Steve Larcen wanted to know if the settlement approach was ruled out and Bill Halsey said the Department was not able to do it. Bill will get more details on this for a conference call for the eight hospitals. Also, Lois Berkowitz presented an update on ECCs and a review of the On Sight Audit Process.

In closing the meeting, Co-Chair Jeff Walter said that the Council owes a debt of gratitude to all the people who go to committee meetings and dive into these issues that tend to be complicated. The set up of the committees are geared to the people that have the same interests of the committees and are best ones to represent their clients in the work of the Oversight Council. He thanked the Council Members for their participation in trying to help the Department Agencies in resolving these important problems and he looks forward to seeing everyone at the next Council meeting on October 10, 2012. Janine Sullivan-Wiley commended and thanked Value Options for sending some of their members to community board meetings regarding emergency mobile psychiatric services. Hearing neither questions nor comments, he adjourned the Council meeting at 3:16 PM.

Next Meeting: Wednesday, October 10, 2012 @ 2:00 PM 1E LOB