



**Department
of Health**

**Medicaid
Redesign Team**

MAPP Health Home Bi-weekly Webinar

May 5, 2015

Agenda

- MAPP Health Home Implementation Update
- MAPP File Submission
- MAPP Health Home Dashboard Demo



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MAPP Health Home Implementation Update

Managing Multiple Changes in the Transition to Managed Care and New Billing Structures

- In response to concerns raised by the Health Home community regarding the timing of the implementation of Medicaid Analytics Performance Portal (MAPP); High, Medium and Low rates; the elimination of direct billing; the prioritization of the enrollment of HARP identified members in Health Home; InterRAI Community Mental Health assessment training; and conducting assessments for HCBS services; the State has revised the schedule to:
 - Provide distance between the implementation of MAPP and the High, Medium and Low Rates
 - Provide time to pre-populate in MAPP the clinical and functional indicators of High, Medium and Low rates (see Appendix for rates and indicators)
 - Provide more time to ensure payment methods are in place to pay downstream care managers when direct billing is eliminated
 - Extend, again the legacy rates
 - Provide more time to train and perform InterRAI Community Mental Health Assessment on HARP members

Date	New Schedule for Behavioral Health Transition to Managed Care for Adults, MAPP, HML Rates and Billing Procedures
Mid-May	InterRAI Community Mental Health Training begins
July 2015	First phase of HARP enrollment letters distributed in NYC
Mid-July	MAPP Training Begins
August 15, 2015	MAPP Released: <ul style="list-style-type: none"> • Current Health Home Rates and Legacy Rates remain in effect • Care management agencies can pre-populate/report High, Medium and Low functional and clinical indicators in MAPP
October 1, 2015	<ul style="list-style-type: none"> • NYC Mainstream Plans and HARPs implement non-HCBS behavioral health services for enrolled members • Begin to enroll children in Health Homes (see April 29, 2015 Webinar – DOH Website) • Care management agencies required to report High, Medium and Low functional and clinical indicators to MAPP
October 2015 through December 2015	Phase-in schedule for Enrolling NYC HARP members <ul style="list-style-type: none"> • Approximately 20,000 enrollment letters distributed July/August for October enrollment • Approximately 20,000 enrollment letters distributed August/September for November enrollment • Approximately 20,000 enrollment letters distributed September/October for December enrollment
January 1, 2016	<ul style="list-style-type: none"> • HCBS Behavioral Health Services begin for HARP Population in NYC • Direct Billing is Eliminated (except for ACT providers) • Health Homes and Managed Care Plans start billing High, Medium and Low Rate Codes
April 1, 2016	First Phase of HARP enrollment letters distributed in Rest of State
July 1, 2016	Rest of State Mainstream Plan and HARPs implement non-HCBS behavioral health services and phase-in schedule for HARP enrollment begins

Other Billing Rules Effective January 1, 2016

- **Referrals for members not already on assignment list**
 - ✓ **Policy:** Referrals made to Health Home or Plan must be approved or assigned by the Plan
- **Plan members who are enrolled in a Health Home that their Plan does not contract with:**
 - ✓ **Policy:** Preserve continuity of care by requiring Plan to pay out of network to Health Home – Plan must approve the plan of care developed by out of network Health Home
 - ✓ **Example:** FFS member enrolled in HH B with legacy downstream care manager that direct bills. The FFS member is enrolled in Plan A. Plan A does not contract with HH B, Plan A must pay HH B out of network for HH services provided by legacy downstream care manager. HH B makes payment to legacy downstream care manager.
- **Plan members who are in hiatus and assigned to Health Home that their Plan does not contract with:**
 - ✓ **Policy:** When hiatus period is complete, member will return to Plan's assignment list for assignment by the Plan to Health Home it contracts with (HH w/o contract will not start outreach)
 - ✓ **Example:** Member enrolled in Plan A but in outreach with HH B, which does not have a contract with Plan A. Upon end of hiatus period, member's assignment to HH B will end, member will be added to Plan A assignment list, and Plan A will reassign member to contracted HH C.
- **Plan is Responsible for verifying that member is Health Home eligible and appropriate for program (this may be delegated by the Plan to Health Home)**



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Health Home Billing Readiness Requirements

- By **October 1, 2015**, each Health Home must submit to DOH either:
 - a) **Attestation**
 - i. That the Health Home has procedures in place that will allow it to pay CMAs within X days of receiving payments from the Plans
 - ii. The Health Home has tested their ability to bill Managed Care Organizations for Health Home services and pass Health Home payments down to Care Management Agencies, including a description of such testing procedures;
Or
 - b) **Letter of Deficiency**
 - i. Identify issues Health Home encountered when billing Managed Care Organizations for Health Home services and passing Health Home payments down to Care Management Agencies.
 - ii. Include possible solutions and timeframes for resolving deficiency prior to January 1, 2016
 - iii. DOH will work with these Health Homes to overcome billing issues
- Inability to successfully pass Health Home payments to CMA by **October 1, 2015** will negatively affect a Health Home's re-designation review and may impact the ability to enroll new members.

Two Health Homes have already provided attestation!!!



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MAPP File Submission

Most File Specifications Are Now Available

- An excel document containing most of the MAPP Health Home file specifications was posted today to the MAPP section of the HH website today.
- This file includes all of the file specifications, except for the three billing files (upload, download, and error), which should be released soon.
- http://www.health.ny.gov/health_care/medicaid/program/medicaid_health_homes/hh_mapp.htm

MAPP Files

- HH Member Specifications Document, which explains how the files inform tracking, will soon be updated to reflect how the new files will interact with the MAPP Health Home Tracking System.
- All files will be available in fixed length text and .csv formats
- New fields added to existed files were added to the end of the file

MAPP Upload/Download Files

Files listed in red are new to MAPP

Underlined files are posted

Files Uploaded into MAPP

1. MCP Final Health Home Assignment File
2. Tracking File Segment Records (formerly Add/Change file)
3. Tracking File Assignment Records
4. Tracking File Delete Record
5. Billing Support Upload File
6. Partner Network File Upload

Files Downloaded from MAPP

7. Managed Care Plan Assignment File
8. MCP Final HH Assignment File Error Report

9. Health Home Assignment File
10. Tracking File Error Report
11. Enrollment Download File
12. Acuity File Download
13. Billing Support Download File
14. Billing Support Error File
15. Partner Network File Error Report
16. Partner Network File Download
17. CIN Search Download File
18. My Member Download File
19. Past Assignments Download File
20. Manage Assignments Download File

File Submission Frequency

- Providers submitting information to MAPP using files must submit tracking files **daily OR when a member's assignment, outreach or enrollment status changes.**
- Providers must pull down assignment files **at least weekly**
- Billing support submission frequency up to providers
 - Provider can submit information once a billable service is provided during the month, wait until the beginning of the following month to submit claims, or figure out a different submission schedule that works best for MCP/HH/CMA partners
 - Once billing support is submitted, MCP/HH/CMA connected to the member can access billing information. Responsible billing entity must pull down billing information at least once a month.
 - Up to MCP/HH/CMA to determine billing support submission schedule.



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MAPP Health Home Dashboard Demo

Questions?

- Please submit questions regarding MAPP to the Health Home email web form (link below) under the subject: **Medicaid Analytics Performance Portal (MAPP)**

- https://apps.health.ny.gov/pubdoh/health_care/medicaid/program/medicaid_health_homes/emailHealthHome.action

- Call Health Home policy line: (518) 473-5569

- Check MAPP section of Health Home website for upcoming information regarding MAPP access and MAPP implementation.

- http://www.health.ny.gov/health_care/medicaid/program/medicaid_health_homes/hh_mapp.htm