Medicaid Model Contract 16.13.a

Behavioral Health Clinical and Medical Directors Requirements

a) The requirement for Contractor’s employment of Clinical and Medical Directors are contained in this section and in the State-issued Behavioral Health Guidance.

Transition of Behavioral Health Benefit into Medicaid Managed Care and Health and Recovery Program Implementation released October 2015: Section VII.5

For all MCOs product lines: The MCO shall provide written notice to the State within seven calendar days after the effective date of termination or resignation of any of the key staff listed in Section 3.B above, including the name of the interim contact person performing the key staff person’s duties, if a replacement is not found within that time. In addition to the notice of termination or resignation, the MCO shall submit a written proposal for replacing the key staff person, including expected timelines for recruitment activities. The MCO shall also notify the State at the earliest practicable time, but in no event later than seven days if a key staff member who is required to be full-time drops below full-time status. The State reserves the right to review the qualifications of key staff replacements at any time and require the MCO to identify a different key staff person if their replacement does not meet the requirements set forth in this guidance.

Finding:

Based on interview, review of the required biannual Exhibit 1: Staffing Plan for Adult and Children report submitted on October 1, 2020 and April 1, 2021, and additional review of subsequent documentation, Affinity failed to provide written notification to the State within seven calendar days after the date of termination or resignation of Behavioral Health (BH) Key Staff positions in accordance with the requirements. The Office of Mental Health (OMH) and Office of Addiction Services and Support (OASAS) issued a memo on May 6, 2020, entitled Notification of MCO Key Staff Vacancies, to Medicaid Managed Care Organizations (MCOs), to stress the importance of timely written notification to the State and to remind the Plans of the requirements.

- Specifically, review of the October 1, 2020 submission of the Exhibit 1: Staffing Plan for Adult and Children report, and subsequent requested documentation revealed Affinity failed to provide written notification to the State for the resignation or termination of the HARP BH Clinical Director for adults within the required seven calendar days. Written notification was first received on October 1, 2020 with the Exhibit 1: Staffing Plan for Adult and Children. Review of additional documentation submitted on March 4, 2021 revealed the behavioral health delegate notified Affinity, the HARP BH Clinical Director for adults vacated the position on December 20, 2019. Affinity failed to follow the
directive within the memo distributed to MCOs by OMH and OASAS on May 6, 2020 which stated written notice must be separate and distinct from the Exhibit 1 submission.

- Specifically, review of additional documentation submitted by Affinity in response to State feedback regarding April 1, 2021 Exhibit 1 Staffing report, revealed Affinity failed to provide written notification to the State for the resignation or termination of the HARP BH Clinical Director and BH Clinical Director for adults within the required seven calendar days. Written notification was first received on May 26, 2021, which reported these positions were vacated on May 1, 2021 and the Plan received late notification from the BH delegate.
Finding:

Based on interview, review of the required biannual Exhibit 1: Staffing Plan for Adult and Children report submitted on October 1, 2020 and April 1, 2021, and subsequent requested documentation, Affinity failed to provide written notification to the State within seven calendar days after the effective date of termination or resignation of any of the key staff listed in this section and must provide the name of the interim contact person performing the key staff person’s duties, if a replacement is not found within that time. In addition, the MMCP must submit a written proposal describing plans for replacing key staff person, including expected timelines for recruitment activities.

- Specifically, review of the October 1, 2020 submission of the Exhibit 1: Staffing Plan for Adult and Children report revealed Affinity failed to provide written notification to the State for the BH Medical Director for Children’s position. The State conducted an interview on February 25, 2021 with the Plan and specifically discussed the BH Medical Director for Children’s position regarding the discrepancy. Additional documentation submitted on March 4, 2021 by Affinity confirmed the individual previously noted as filling the BH Medical Director for Children’s Services position vacated/never started in the role as of the October 1, 2020 Exhibit 1 report submission and disclosed the BH Delegate anticipated that to be a notification to the State. Affinity failed to follow the directive within the memo distributed to MCOs by OMH and OASAS on May 6, 2020 which stated written notice must be separate and distinct from the Exhibit 1 submission.

- Specifically, based on review of the April 1, 2021 Exhibit 1: Staffing Plan for Adult and Children report and subsequent requested documentation, revealed Affinity failed to provide written notification to the State for the resignation or termination of the BH Clinical Director for Children’s position within the required seven calendar days. Written notification was first received on April 1, 2021 with the Exhibit 1: Staffing Plan for Adult and Children. Additional documentation received on May 26, 2021 confirmed the BH Clinical Director for Children vacated this role on March 26, 2021 and disclosed the Plan relies on receiving notification from the BH delegate and did not receive this prior to the required April 1, 2021 Exhibit 1 report submission. Affinity failed to follow the directive within the memo distributed to MCOs by OMH and OASAS on May 6, 2020 which stated written notice must be separate and distinct from the Exhibit 1 submission.
Plan of Correction:

Affinity Health Plan (Affinity) was acquired by Molina Healthcare of New York, Inc. (Molina) in an asset purchase effective 11/1/2021 therefore Molina takes full ownership of the findings, citations, and remediation efforts. Molina is in the process of terminating the Affinity legacy contract with Beacon effective 12/31/2021. In working through the de-implementation process the noted deficiencies for Affinity will be covered by Molina’s plan of correction, which was simultaneously submitted to the Department and is outlined below, inclusive of responsible parties and date certain.

Root Cause Analysis

Legacy Affinity Health Plan (Affinity) acknowledges that the health plan did not give proper notice of the termination to NYS OMH/OASAS when the HARP BH Clinical Director for Adults resigned. At the time, Beacon provided behavioral health services on behalf of Affinity. Beacon’s notification to Affinity of their staff terminations was not timely and as a result Affinity was not timely in reporting these changes to NYS. As of January 1, 2022, legacy Affinity will no longer use Beacon as a behavioral health vendor, the services will be sourced in house with Molina. Going forward, Molina will ensure proper notification to OMH and OASAS of key staff changes as required (within 7 days).

Training

To ensure Exhibit 1 reporting requirements are available to all Molina employees, a policy and procedure outlining specific requirements and expectations has been developed. Molina employees will be trained on this policy upon its roll out and as changes are made per regulatory guidance. The policy and training will be in effect no later than February 1, 2022. In addition, applicable employees (whose Departments are reported on Exhibit 1) will also be trained on the development/ updating and submission of Exhibit 1. As outlined in our policy, Key Staff is defined as employees in the following positions:

Behavioral Health Key Staff for Adult Services
- MCO Behavioral Health Medical Director
- MCO Behavioral Heath Clinical Director
- HARP Behavioral Health Medical Director
- HARP Behavioral Health Clinical Director
- HARP Medical Director for General Medicine

Key Staff for Children’s Services
- MMCP BH Medical Director for Children’s Services
- BH Clinical Director for Children’s Services
Monitoring and Auditing

All the Clinical Directors report up to the Director of Behavioral Health, therefore the Director of Behavioral Health will have direct knowledge of any termination. The Medical Directors report directly to the Chief Medical Officer. To timely capture any changes to the Medical Director staff, the Chief Medical Officer and the Director of Behavioral Health will communicate weekly. Additionally, monthly the Director of Behavioral Health will request a list of staff changes (new hires, terminations, resignations) from Molina’s Human Resources Department to ensure any changes in Key Staff positions were captured in a timely manner.

Twice a year, for accuracy, Compliance will review Exhibit 1 submissions with respect to the list of staff changes (new hires, terminations, resignations) from Molina’s Human Resources Department.

Completion Date and Responsible Party

Date certain for finalization of our policy and employee training is slated for February 1, 2022. The responsible party is Larry Klein, Director of Behavioral Health.

Compliance Officer

Molina Healthcare of New York, Inc.