BHCC/BH IPA eFMAP Funding Initiative Overview

Agenda

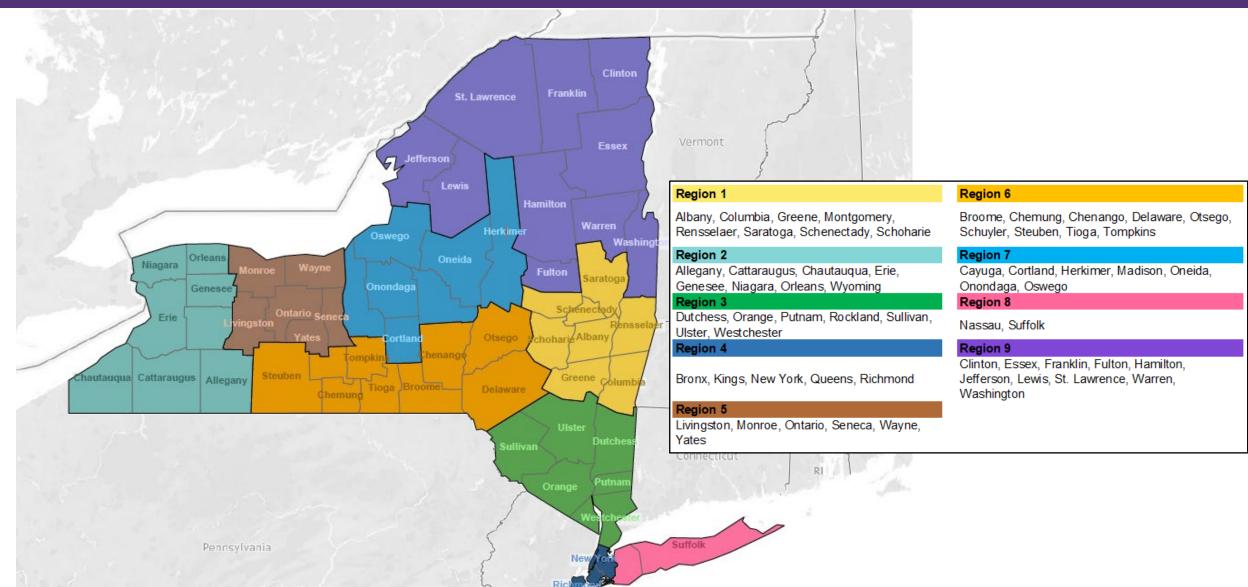
- Introduction
- Funding Allocation Methodology
- Performance Measurement
- Discussion

Background Introduction

NYS DOH 1115 Waiver Amendment Request

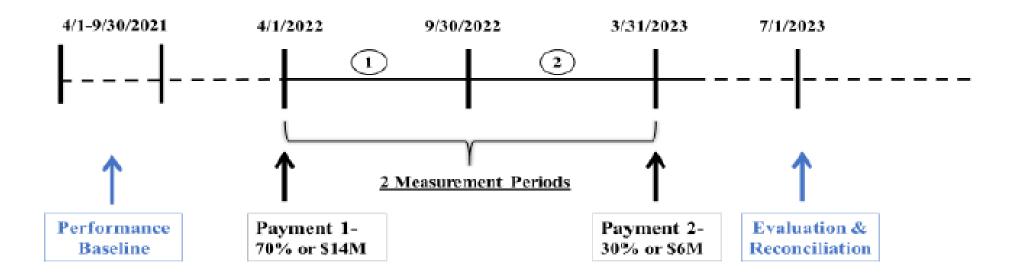
Bridge to Strategic Health Equity Reform Payment Arrangements: Making Targeted, Evidence-Based Investments to Address the Health Disparities Exacerbated by the COVID-19 Pandemic (SHERPA)

- SHERPA 1115 Waiver Request: <u>NYS MRT Strategic Health Equity Reform Payment Arrangements: Making Targeted, Evidenced-Based investments to Address Health Disparities Exacerbated by the COVID-19 Pandemic.</u>
- SHERPA Public Comment Period:
 - Final public comment session is Tuesday, May 10, 2022, 1:00 pm 4:00 pm
 - Registration Link: https://meetny.webex.com/meetny/onstage/g.php?MTID=ea1adaa34895f8678f8c5d b661a9ae2ab.
- Written comments will be accepted through May 20, 2022, by email at 1115waivers@health.ny.gov.



Payment Structure: Two Payments

BHCC / BHIPA Payment and Reconciliation Timeline



Payment Structure, continued

- NYS will review each BHCC/BH IPA's performance measurement achievement approximately three months following Performance Period 2.
- Any improvement on one performance measure during Performance Period 1 ensures retention of 70% of the award amount.
- Any improvement on two performance measures during Performance Period 2 ensures retention of 30% of the award amount.

Administrative Requirements

- 1. Award Letter
- 2. Attestation
- 3. Medicaid Managed Care Plan contract

Funding Allocation Methodology

Funding Allocation Methodology

- BHCC/BH IPA eFMAP awards were determined using historical service utilization, including unique recipients, service volume, and service revenue from April 1 – September 30, 2021.
- In November 2021, BHCC/BH IPAs were asked to confirm provider networks. Award calculations were made based on these confirmations.

Funding Allocation Methodology

 Calculated using Medicaid Managed Care (MMC) and FFS claims for services rendered to MMC enrollees (Mainstream, HARP & HIVSNP) between 4/1/2021-9/30/2021 by OASAS/OMH providers, excluding hospitals.

Service Type Included	
Adult BH HCBS and Children's HCBS	OASAS Part 820 Residential Stabilization
Certified Community Behavioral Health Clinics (CCBHC)	OASAS Part 820 Residential Rehabilitation
Children's CFTSS	OASAS Part 820 Residential Rehab Services for Youth (RRSY)
OMH Personalized Recovery Oriented Services (PROS)	OASAS Part 822 Medical Services (Clinic/Opioid)
OMH Partial Hospitalization (PH)	OASAS Part 822 Outpatient Rehabilitation
OMH Licensed Clinic	OASAS Part 822 Opioid Treatment Program
OMH Integrated Clinic	OASAS Part 816 Medically Supervised Detox - Outpatient Withdrawal
OMH Continuing Day Treatment (CDT)	OASAS Part 816 Medically Supervised Detox - Inpatient Withdrawal
OMH Assertive Community Treatment (ACT)	OASAS Part 822 Outpatient Clinic
OMH 1115 Waiver Crisis	OASAS Part 818 Inpatient Rehabilitation

Performance Measurement

Performance Measures

The five performance measures are:

- 1. Increase in Opioid Use Disorder (OUD) Medication Initiation
- 2. Increase in Opioid Use Disorder (OUD) Medication Adherence
- 3. Decrease in Emergency Room (ER) Utilization
- 4. Increase in Behavioral Health Rehabilitation Services Utilization
- 5. Increase in 30-day Follow-Up After Hospitalization for Mental Illness

BH Rehabilitation Services

- OMH Rehabilitation Services (ACT and PROS)
- OASAS Rehabilitation Services (Part 822 Outpatient Clinic, Part 822 Opioid Treatment Program, Part 822 Outpatient Rehabilitation, Part 822 Medical Services (Clinic/Opioid), Part 820 Residential Rehabilitation, and Part 820 Residential Stabilization)
- Adult BH HCBS and CORE Services
- Children's CFTSS (except OLP)
- Children's HCBS

Performance Measurement Timeframes

- Baseline Period: April 1, 2021-September 30, 2021
- Performance Period 1: April 1, 2022- September 30, 2022
- Performance Period 2: October 1, 2022- March 31, 2023
- Reconciliation: Three-six months after Performance Period 2

Required Performance Achievement

- Performance Period 1 achievement (meet one goal) will be measured against the baseline.
- Performance Period 2 achievement (meet two goals) will be measured as either:
 - Improvement from Performance Period 1 measurement and one new goal against the baseline; OR
 - Two new goals attained against the baseline.

Technical Components of Performance Measurement

- The performance baseline and measures will use paid Medicaid claims for Medicaid Managed Care members.
- More information on baseline and performance measure calculations will be provided.
- Measures are tracked in aggregate across network, not by individual cohort.

Discussion