

Federal Medicaid Waivers and Other ways states can access more federal funds for behavioral health

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Proposition 63 – the mental health services act of 2004

CMS- Waivers and audits

- Medicaid/MediCal controls most \$\$
- State Plans and amendments
- State Waiver allows county system
 - must be renewed every 2-5 years
 - Revenue neutrality and terms and conditions
- Audits for compliance
- Payment model reform pressures
- Every new President brings change

Section 1115 Waiver- 2016-2020

- Medicaid Medicare Coordinated Care
- SUDs Organized Delivery System
- Integration of Physical and Behavioral Health
- Whole Person Care Pilots
- Health Home Option
- Counties and plans have to opt in to each
- Future based upon generating cost savings
- Part of Physical health waiver

Whole Person Care Pilots

- \$300 m per year through 2020
- County or other local gov't match
- Can pay for anything not currently MediCal reimbursable except housing direct subsidy
- Can cover access to housing (including deposits and furniture) or any linkages to services such as outreach and engagement
- Establishment costs for crisis care
- Care coordination

Timing and Participation

- 18 County plans submitted July 1
- State will post plans in November
- Counties could share with you now
- projected physical health cost savings
- **Target top 5% of users- 70% have MI**
- Includes Health Home Option until that starts

BH Integration Concepts

- County by county implementation
- Based on Coordinated Care Initiative for Medicaid/Medicare Dual eligibles
- Screen everyone in primary care and ER
- Ensure that positive screens lead to care
- Warm hand off to BH professional
- Bi Directional- bring physical health to people with severe mental illness
- Should significantly reduce hospitalizations

CCBHC- could be the future

- Certified Community Behavioral Health Centers for outpatient BH
- Increases federal share for Medicaid by 15%
- In California that means 50-50 to 2/3 -1/3
- Prospective Payment system of bundled payment for all services daily or monthly
- Covers more than current system
- Performance bonuses

CCBHC- Status and Prospects

- 24 states competing for selection of 8 pilots
- Plans due in October – selection December
- Congressional efforts to expand
- Clinton proposal to take to 50 states
- CMS can expand by waiver- but not FFP
- Congressional expansion likely if pilots demonstrate savings which are expected in reduced physical health hospitalizations

1915 (b) Mental Health Waiver

- Freedom of choice waiver for county system
- New Conditions suggest changes by 2020
 - Performance Measures
 - Payment Reform
- CCBHC could supercede for outpatient
- Medicaid Managed Care regulations supercede for network adequacy and timely access for all medically necessary levels of care in October 2017

Themes and Ideas

- People with Mental illness have high costs
- Better behavioral health care = \$\$ saved
- BH historically underfunded and over represented in emergency rooms
- Bi-Directional Integration with warm hand off
- CMS waiver rules are flexible except housing
- More risk = more rewards
- Performance measures and payment reform

Questions and Comments

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