BH Redesign Next Steps: Providers and Managed Care Plans

Medicaid Advanced Payment Agreements and the Initiation of Repayment

Background

The Ohio Department of Medicaid (ODM) and the Ohio Department of Mental Health and Addiction Services (OhioMHAS) continue to evaluate the early effects of Behavioral Health (BH) Redesign and BH Integration into managed care on the comprehensive behavioral health system. As part of these efforts, a contingency plan was developed in June 2018 with the Medicaid managed care plans (MCPs) to assist with cash flow to community behavioral health centers (PT84s/PT95s) in the transition to managed care billing through BH Integration. Eligible BH providers that chose to participate received advanced payments from those Medicaid MCPs with whom they entered an advanced payment agreement. More information on this process is available in the June 21, 2018 MITS Bits.

During the following months, ODM and OhioMHAS communicated that the Medicaid MCPs would be delaying repayment of these advanced payments. ODM worked with the MCPs and conducted data analysis to determine a point at which greater confidence and stabilization in claims payments to BH providers was met. Examples of this communication to delay repayment can be found in the April 19, 2019 MITS Bits, the February 15, 2019 MITS Bits, and the January 4, 2019 MITS Bits. BH providers could elect to repay advanced payments to the Medicaid MCPs at any time at their discretion.

Update and Immediate Next Steps

Over the last several months, ODM has worked with the Medicaid MCPs regarding the progress and stability of the BH system and claims payments. The interventions have been discussed and metrics to track the progress have been shared with the MCPs and BH stakeholders through regular BH Integration Taskforce meetings. There have been two major tracks of work. At the system level, ODM continues to work with MCPs regarding IT system and data claims processing. At the provider level, ODM is working with provider agencies identified by OhioMHAS, through ODM data analysis and those who self-refer, to provide technical assistance and act as a liaison with the MCPs to resolve issues.

As a result of these efforts, monthly claims payment volume has increased to expected levels and payment of aged accounts receivable is occurring. System work for provider rostering, duplicate claims denials and third-party liability is also progressing. This work will continue with the same urgency and priority as has occurred in recent months.
To further stabilize the system, ODM will begin work with providers and MCPs to start repayment of remaining advanced payments. ODM will be contacting each provider and MCP to discuss a workable plan for repayment. Each provider will have a designated ODM staff contact who will be available throughout the process. This will be done in phases and will be provider specific. Not all providers will be contacted at the same time and not all repayment plans will look the same. ODM staff will begin contacting providers within the next two weeks.

ODM has designed the approach to repayment by analyzing the cashflow of BH providers in relation to their outstanding advanced payments with each MCP, considering the provider discussions that are underway with ODM. The repayment process is designed to recognize the variability of the fiscal impact among BH providers by ensuring that:

- Repayments to MCPs will be staggered and spread over several months,
- Repayments will make up a reasonable percentage of each BH provider’s monthly cash flow,
- Each provider’s outstanding accounts receivable with the MCPs is considered, and
- Providers will have the opportunity to work individually with ODM and each MCP to finalize repayment agreements.

While ODM will begin working with providers to develop individualized repayment plans in the coming weeks, repayment will not begin prior to July 1, 2019. Repayment will begin when agreement is reached with ODM and a date to begin repayment is established. It is important to understand that this repayment process will only address the advanced payment agreements executed between providers and MCPs in the summer of 2018. The repayment plans will not include payments providers may have received as part of the accounts receivable project ODM initiated in February of 2019.

Both OhioMHAS and ODM appreciate the hard work and patience of providers, MCPs, BH stakeholders, and ODM and OhioMHAS staff as the departments have begun each component of this work. The work on claims payment and other associated system and policy work will continue with the same urgency and priority as has occurred in recent months. If you have questions at any time, please feel free to contact your ODM contact or email BH-Enroll@medicaid.ohio.gov. You should also feel free to contact Directors Criss or Corcoran, Patrick Beatty, or Angie Bergefurd.