

JUNE 26, 2018



Agenda

Welcome and Opening Remarks

2018 Priorities and Initiatives
Compliance Presentation
Complaints and Grievance Presentation
Clinical Presentation
Quality Improvement Presentation
MyLife Presentation
Network Presentation
Website Presentation









Survey for Today's Town Hall



Feedback Survey: This survey is to be utilized to provide your feedback on this presentation and also future presentations. Topics for today's Town Hall were based on feedback we received from our previous Town Hall presentations.



Welcome and Opening Remarks



2018 Priorities and Initiatives



2018 Priorities and Initiatives

- Magellan of PA Leadership Structure
- Community HealthChoices (CHC)
- Value Based Purchasing: State Requirements
- Integrated Health Activities: Tobacco Cessation

Compliance

KARLI SCHILLING, COMPLIANCE MANAGER



Compliance - E-mail Blasts



Link to Compliance E-mail Alerts

2018 E-mail Blasts to Date:

- ☐ January: Narcotic Treatment Programs (Methadone) and Billing for Drug Screens
- ☐ February: Billing of Individual and Family Psychotherapy
- ☐ March: Provider Self-Reports of Fraud, Waste or Abuse and new mailbox
 - PAHCSelfreport@magellanhealth.com
- April: Certified Peer Specialist Certification
- May: Billing for Multiple Approved Service Locations

Compliance - 2018 Provider Trainings 🕨 🥍 🚤



Magellan provides annual Compliance Training opportunities for providers outside of monthly e-mail blasts and ongoing technical assistance.

- In-person Cambria Training will be scheduled in 2018
 - ✓ Trends identified since implementation
 - ✓ Compliance programs and compliance oversight
 - ✓ Review of key regulations
- 2018 Compliance Webinar for all providers Q4 of 2018
- Level of Care specific trainings may also be held



Compliance - Member Service Verification Process

- HealthChoices' Contractual Requirement
- Quarterly Surveys are sent
- ❖ 1,818 members surveyed across all six Magellan counties
- Members are asked to attest to receiving up to five paid services
- ❖ Magellan will follow-up on all "No" Responses
 - Member outreach
 - Provider outreach for supporting documentation





Appendix H Changes



- Program Standards & Requirements Appendix H: outlines the requirements for Complaints, Grievances & Fair Hearings for the HealthChoices' program.
- Significant Changes upcoming
 - Effective date is currently 7/1/18
 - Expected Compliance date is currently 9/1/18
- Proposed Changes include:
 - Complaints
 - Members may participate in all reviews
 - Shorter timeframe to complete investigation and notify member
 - Grievances
 - 3-level system is changing to 2 levels

Clinical

REBECCA MUTCHLER, CLINICAL DIRECTOR



Clinical Highlights

- Enrollment of Members into Magellan's Intensive Care Coordination Program
- Member Engagement Activities with Recovery Support Navigator
- Meet and Greets with BHRS Prescribers and Magellan's Medical Director
- Participation in initial CASSP meetings
- Level of Care Trainings for Stakeholders
- Implementation of MY LIFE Meetings and Events in Cambria County
- Collaboration and Coordination with Members who are Enrolled in CBIT
- Enrollment of Members who had Frequent Admissions to Substance Use
 Treatment Programs into Comprehensive Care Management Program



Tobacco Action Plan

- State Initiative focused on improved Tobacco Dependence education and supports
 - 450,000 people die annually in the USA from tobacco use 250,000 are diagnosed with SMI cdc.gov
 - 36% of the SMI population use tobacco compared to 21% of general population cdc.gov
 - 80% of people in addiction treatment use tobacco, in particular smoke cigarettes samhsa.gov
- Physical health and behavioral health MCOs developed action plans on how they can support the tobacco initiative
- Magellan's action plan targets:
 - Provider and member education
 - Member support
 - Improved collaboration with PHMCOs
 - Collaboration with community tobacco agencies
 - Supporting tobacco free campuses
 - Encouraging and supporting increased tobacco intervention at the provider level
- Tobacco resource guide located on <u>www.magellanofpa.com</u>
 - Community Tobacco Support
- For questions and support contact: <u>Tobaccosupport@magellanhealth.com</u>
 - Available to members and providers
- Tobacco training to be e-mailed, following provider town hall
 - Including tobacco education and information on becoming a tobacco treatment provider



Discharge Summaries – Community Based Programs



- The 24 hour levels of care (Inpatient, Detox, Rehab, Halfway House and Residential Treatment Facilities) will continue to complete telephonic discharge reviews with the care management team.
- Community Based Providers will be transitioning to an electronic submission of the discharge summaries. The online form is located at:

https://www.magellanprovider.com/news-publications/state-plan-eap-specific-information/Pennsylvania-healthchoices/pa-healthchoices-discharge-form.aspx



Transition from PCPC to ASAM



- The implementation will occur on July 1, 2018; however, the Department of Drug and Alcohol Programs (DDAP) recently initiated some updates to their original position on this transition. They are as follows:
 - ❖ DDAP and the Department of Human Services (DHS) realize that some essential/key staff who utilize criteria for the determination of admission to a level of care may not have received the training as of July 1, 2018. While the expectation continues to be that staff should be trained by July 1 or soon thereafter, the following has been determined for those who have not been trained by July 1:
 - ✓ Supervisors are expected to review and sign off on any level of care determination for staff who have not had the appropriate training.
 - ✓ All key/essential staff should receive the two-day, in person training as soon as possible; but, by no later than December 31, 2018.



Transition from PCPC to ASAM Continued



- DDAP has issued an <u>ASAM Crosswalk</u> and the <u>Guidance for Application of ASAM in PA's Substance Use Disorder System of Care document to address the nuances of how to apply the ASAM criteria in concordance with Pennsylvania's regulations, contractual agreements, and service definition. The Train for Change trainers providing the ASAM Skill Building trainings are experts in the ASAM criteria and not on how it applies to these identified nuances. Assessors and clinicians should rely on this supplemental documentation when applying the ASAM criteria to Pennsylvania services.</u>
- Magellan will be accepting the PCPC and the ASAM criteria until December 31, 2018.
 Providers will need to identify the criteria that they are using at the beginning of their
 conversation with a Magellan Care Manager. As of January 1, 2019, Magellan will no longer
 accept the PCPC, when managing client care. Please continue to bill for services rendered as
 you have been; this process has not changes.
- Questions can be directed to Anita Kelly, Clinical Contract Advisor at <u>ALKelly@magellanhealth.com</u> or 610-814-8054

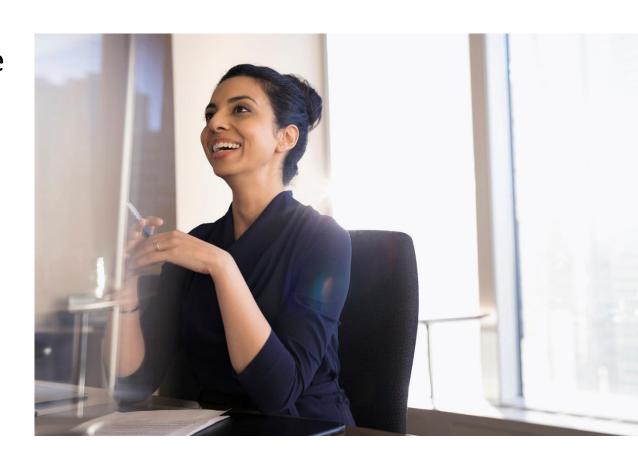


Quality Improvement



Cultural Competency

Cultural competence is the ability of systems to provide care to people with diverse values, beliefs and behaviors.





Cultural Competency

In our behavioral health system, this means tailoring delivery to meet members' social, cultural, and linguistic needs.





Benefits of Cultural Competence



Cultural competence in a hospital or care system produces numerous benefits for the organization, patients and community. Organizations that are culturally competent have improved health outcomes, increased respect and mutual understanding from patients and increased participation from the local community. Additionally, organizations that are culturally competent may have lower costs and few care disparities.

Source: American Hospital Association, 2013.

ocial Benefits

Increases mutual respect and understanding between patient and organization.

Increases trust

Promotes inclusion of all community members

Assists patients and families in their care.

Promotes patient and family responsibilities for health

Health Benefits

Improves patient data collection

Increases preventative care by patients

Reduces care disparities in the patient population

Increases cost savings from a reduction in medical errors, number of treatments and legal costs usiness Benefits

Incorporates different perspectives, ideas and strategies into the decision-making process

Decreases barriers that slow progress

Moves toward meeting legal and regulatory guidelines

Improves the efficiency of care services

Increases the market share of the organization.



Cultural Competency Continued...





Magellan's Annual Population Assessment includes:

- Demographics
- Diagnostic prevalence
- Cultural, ethnic, racial and linguistic preferences
- Complex health needs, including needs of children/adolescents, members with disabilities and members with serious and persistent mental illness



Cultural Competency Continued...



Magellan needs your help to:

- Identify the population we serve by encouraging individuals to complete the demographic section of their HealthChoices' enrollment and renewal application.
- Build a culturally competent network.
- Continue to develop policies to improve cultural competence through staff recruitment, retention, and training.
- Ensure staff cultural representation (language, gender, age).
- Update your Magellan provider profile annually.

Cultural Competency Continued...



Available Resources:

Additional information on cultural diversity and access to a variety of free assessment tools and resources can be found at:

https://www.magellanprovider.com/education/cultural-competency.aspx





MY LIFE changed my life

Youth engagement and empowerment



Challenges that needed addressing



- There is a lack of youth voice to develop and inform systems, programs, and services for youth and young adults.
- Youth lack opportunities to develop leadership skills, social skills and positive social supports.
- There is stigma for youth who have experience with mental health, substance use and/or foster care issues. Youth are needed to share their experiences, to help reduce the stigma and provide inspiration to other youth, family members, professionals and stakeholders.

Why youth involvement?



Involving youth in the systems that serve them can improve outcomes, helping them:

- Develop relationships
- Acquire new skills
- Build self-confidence
- Instill positive social supports
- Cultivate leadership skills

The value of youth involvement in mental health systems has been acknowledged and promoted by the Substance Abuse and Mental Health Services Administration (SAMHSA)

In 2002, SAMHSA began requiring the systems of care grant communities to hire youth coordinators and develop opportunities for youth involvement throughout their systems (Gyamfi, Keens-Douglas, & Medin, 2007).



What is MY LIFE?

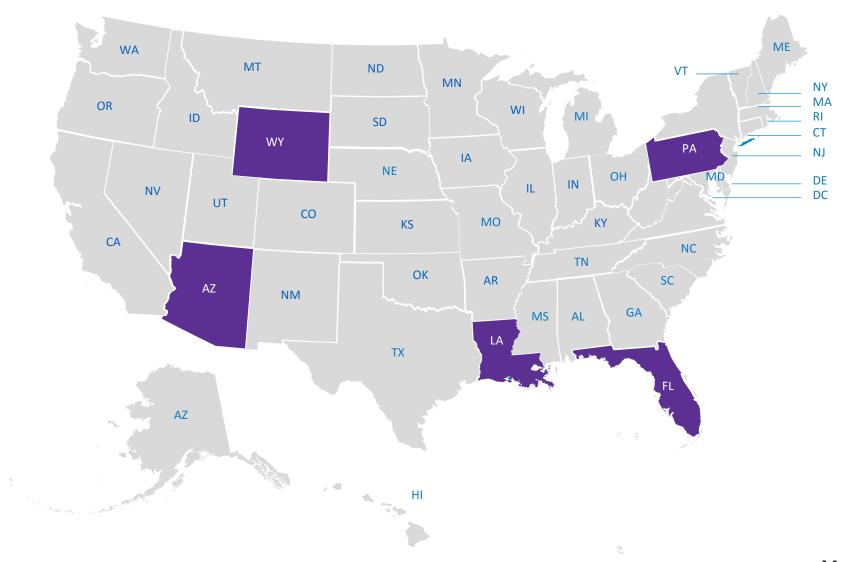




• MY LIFE consists of youth between the ages of 13 and 23 who have experience with mental health, substance abuse, juvenile justice and foster carerelated issues. Youth who have a family member or friend experiencing these challenges are also encouraged to participate. MY LIFE began in Arizona in 2008. Since then, MY LIFE youth have helped establish nine groups in Louisiana, four groups in southeastern Pennsylvania, one group in western Pennsylvania, two groups in Wyoming and three in Florida.



What is MY LIFE?





MY LIFE Meetings



Regular MY LIFE youth meetings are the foundation of MY LIFE. These meetings provide
an opportunity for youth to come together and create a community of support, plan
activities and initiatives, practice social skills, and learn about a variety of topics from
guest presenters.





Bucks County

Cambria County

The first MY LIFE meeting was held March 27, 2008 in Phoenix, Arizona.

^{*} All photos in this presentation are from events that were open to the public. Anyone could attend/participate.



MY LIFE Meetings







Delaware County



Montgomery County

Lehigh Valley

^{*} All photos in this presentation are from events that were open to the public. Anyone could attend/participate.



MY LIFE Mission and Objectives



- ▼ The MY LIFE model is designed to give youth a voice and an active role in planning and implementing youth and young adult system of care transformations, including behavioral health, child welfare and juvenile justice, to accomplish the following objectives:
- ▼ To help MY LIFE members develop leadership skills, social skills and positive social supports
- ▼ To help MY LIFE members learn, utilize and teach advocacy skills to help facilitate positive change and become leaders in the community
- ▼ To provide opportunities for MY LIFE members to share their experience to provide hope and inspiration to other youth and families in similar circumstances

- To inspire creativity and provide opportunities for members to practice and share current talents and develop new ones
- ✓ To reduce stigma associated with mental health, substance use and/or foster care issues by producing youth-led community events
- ▼ To outreach to youth in the community who are in similar circumstance by doing workshops and presentations in treatment centers, detention facilities, schools etc.
- ▼ To effect positive change in the systems that serve youth
- ✓ Conduct workshops and presentations for professionals to educate them about the importance of youth involvement and how they can start similar youth programs



Youth Engagement Activities





MY Fest (Magellan Youth Festival)

MY LIFE youth and community partners have planned and produced 20 MY Fest events that have entertained and educated over 50,000 attendees.

MY Fest is a FREE community event planned and held to raise awareness about mental health, substance use and foster care-related issues facing youth and young adults.

MY Fest features live music, performances, art, games and a variety of youth and family-based organizations offering inspiration, resources and services for youth and families.









MY Fest Pennsylvania









MY LIFE in the Media

MY LIFE utilizes all forms of media to create awareness and reduce stigma. MY LIFE activities have received TV news coverage on Fox, ABC, CBS and NBC affiliates and have been featured on numerous major radio stations. In addition, the "This is MY LIFE" video has been viewed nationally by thousands, and the group has a very active Facebook page that reaches a wide audience.







What Can You Do?



- Encourage the youth you support to attend a MY LIFE event or other events in their community
- Encourage the youth to give back to the community and systems that have supported them
- Encourage the youth to share their stories, so others may benefit from their experiences
- Let the youth know that they have the power to change the system

Contacts



- National MY LIFE Coordinator Greg Dicharry, <u>GDDicharry@magellanhealth.com</u>
- Pennsylvania MY LIFE Coordinator Tara Karbiner, TAKarbiner@magellanhealth.com
- Bucks County contact Marissa Gates, MLGates@magellanhealth.com
- Cambria County contact Janna Burkett, JBurkett@magellanhealth.com
- Delaware County contact Tammi Gabriel-Berrong, Gabrielberrongt@magellanhealth.com
- Montgomery County, contact Collette D'Angelo, colletted@centralbh.org
- Lehigh and Northampton County, contact Michele Davis, MLDavis@magellanhealth.com.

Network

JESSICA PEARCE – SR. NETWORK SPECIALIST
SCOTT DONALD – REGIONAL NETWORK DIRECTOR



PROMISe - Medicaid Enrollment



All contracted providers must have current valid Promise enrollments for all active services.

- ✓ Provider should review current contracted services and verify all enrollments are active and current.
- ✓ Without current MA enrollment, providers are not able to be reimbursed for Medicaid services.
- ✓ Base Application Link:
 http://www.dhs.pa.gov/provider/promise/enrollmentinformation/index.htm#.VjjP2U1OU
 W4
- ✓ Supplemental services must complete application through BH-MCO within the county the services are rendered.



Medical Assistance Revalidation



- Process was initiated in 2016.
- All services that were enrolled prior to March 25, 2011 must Revalidate.
- Supplemental services must complete application through BH-MCO within the county the services are rendered. You will not need to complete multiple applications for each BH-MCO. The Revalidation is good for all counties.
- Revalidation process will be every five years. Allow time for any issues that may come up with application submission process.
- https://promise.dpw.state.pa.us/portal/Default.aspx?alias=promise.dpw.state.pa.us/portal/provider

Your Provider ID	Status	Active	
NPI	ePEAP Access	Full Access	
Service Location Provider Type	Revalidation Date	03/24/2013	



Provider Data Changes in Real Time



- ✓ Make changes to your practice data, such as e-mail address,
 office locations, telephone numbers, business hours and staff rosters
- ✓ Updating specialties offered within your contracted services
- ✓ Online on our secure and efficient website
- ✓ Immediately upload your practice information to Magellan's systems.
- ✓ Ensure that accurate information is loaded in Magellan's systems and available to Magellan members.
- REMINDER: Current practice data is vital to facilitating effective member referrals, claims processing and correspondence.



Ordering Referring Prescribing (ORP)



ORP – What is it?

Ordering, referring and prescribing is being done to comply with program integrity provisions of the Affordable Care Act (ACA), which states that the State Medicaid agency must require all ordering or referring physicians or other professionals providing services under the State plan to enroll as participating providers effective January 1, 2018.

• <u>42 CFR 455.410</u> - Enrollment and screening of providers requires providers, including those who order, refer and prescribe services to Medicaid recipients, to enroll in the Medicaid program. This requirement is also found in the definition of "Provider" in 42 CFR <u>§438.2 Definitions</u> as amended in the Medicaid Managed Care Final Rule published May 6, 2016 (Federal Register Vol. 81, No. 88).





Physical Health Plan Impact

 Health plans and the State Fee for Service programs have or will be turning on claims edits that will not just restrict payment for prescriptions, but restrict prescriptions filled by prescribers that are not enrolled in the PA Medicaid program. DHS has published the enclosed "Quick Tips" guide for providers. If you are providing services to a HealthChoices' member who has experienced prescription issues, please contact the appropriate health plan or Magellan member services in Cambria County to assist in coordinating care.





What Practitioner Levels/Levels of Care does this impact?

- All psychiatrists, psychologists, Certified Registered Nurse Practitioners (CRNP), and physician assistants practicing independently or within a licensed facility, who order, refer, or prescribe services for HealthChoices' eligible recipients in the PA Medical Assistance programs. This also includes psychiatrists who may be rendering services via telehealth.
- Medical Assistance programs. This also includes psychiatrists who may be rendering services via telehealth.
- In addition to the above referenced practitioner levels, HealthChoices' levels of care that currently require a "prescription" from a psychologist and or a psychiatrist, such as BHRS, RTF, and CRR Host home, also fall under this requirement.





What you need to do:

- To ensure that the services that you render are eligible for reimbursement since
 January 1, 2018, you need to actively work with all applicable practitioner levels to:
 - Secure enrollment for their appropriate Provider Type/Specialty.
- Information regarding the DHS enrollment process and electronic applications can be found at:

http://www.dhs.pa.gov/p`rovider/promise/enrollmentinformation/S 001994

 DHS has committed to a "rapid enrollment" process to accommodate these requirements.





Next Steps:

- Survey was sent to every contracted provider for them to list all employees who meet the ORP criteria and list their PROMISe number, if they already have one secured.
- For providers' staff who are not currently enrolled, they need to start the process of completing the applications IMMEDIATELY, by accessing the above DHS link.
- When OMHSAS releases its guidance around ORP, additional communications, and trainings will be available.

For questions related to this information, please e-mail us at:

PAHCPQuestions@magellanhealth.com



Website

AUBREY PROUD – COMMUNITY RELATIONS DIRECTOR



January, 2018 Updates



In January, 2018, Magellan made significant updates to our website. However, our address (www.MagellanofPA.com) did not change. The updates included:

- ✓ Consistent branding with Magellan Health, Inc. (<u>www.MagellanHealth.com</u>)
- ✓ Offering two homepages, one for members and one for providers/stakeholders
- ✓ Mobile responsive features for phones, tablets, etc...
- ✓ Improved navigation
- ✓ Accessibility that is fully compliant with Act 508 regulations



Website reporting



Each month we receive a website report that shows the page views across the entire website. Listed below is a comparison from 2018 vs. 2017.

	2018	2017
January	21,727	17,578
February	18,065	14,695
March	17,402	18,027
April	18,959	15,642
May	17,868	16,581



Our SEO focus



Search Engine Optimization (SEO) is the process by which a website is configured to be discovered by a search engine. Good or bad, SEO determines where a site will display on the results pages that appear after a search query is made. The goal of any website should be to appear at the top of the first page of search results.

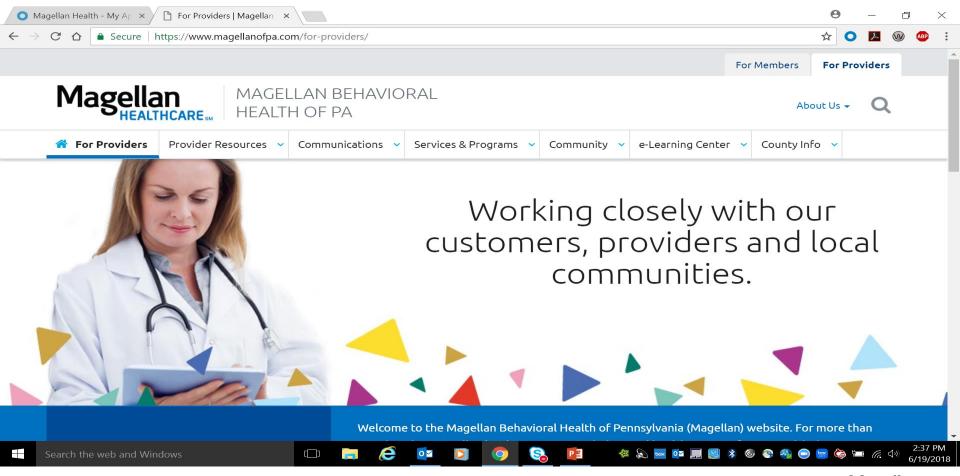
Keywords are the most important metric that search engines use to determine page ranking in search results. Recently, we have made updates to our keyword choices and we anticipate that this increased focus on our SEO will improve the accessibility of our website.

- How do search engines work?
 - All search engines work by indexing the internet. Using programs known as 'crawlers' search engines scan all websites and then make determinations about the content of the page, how authoritative of a source the site is, how well-liked the site is, how well-built the site is and how likely the user is going to find the answer they are looking for quickly.
 - Once a search query is made, the search engine uses this index data to make a determination about which pages to display as a result and in what order those pages are displayed.
- How does SEO help?
 - SEO is largely focused on making your site as visible and appealing to the crawlers as possible. This is largely done out of sight of the human user.

Let's take a tour!



Let's spend the next 10-15 minutes navigating around our website (www.MagellanofPA.com) to demonstrate the many resources available.



Questions?



Thank you!



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