

# Welcome to the Magellan Provider IBHS Workgroup

JANUARY 13, 2022

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# Welcome and Opening Remarks

# Agenda



- Updates from OMHSAS
- Network Updates
- Primary Insurance & MA Issues for IBHS
- Miscellaneous
- Upcoming Forums and Technical Assistance
- Care Management Oversight Changes
- Questions



# Updates from OMHSAS

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- BH-MCO IBHS first report for data from 2021 is due 2/15/2022. Magellan will be outreaching our MST/FFT providers requesting some information for reporting on those members served.
- OMHSAS is working on getting their own training platform so they can post trainings. Exploring topics like reviewing Written Order requirements which may be a tool for those writing Written Orders outside of an IBHS agency.
- OMHSAS has been meeting with the Office of Child Development and Early Learning (OCDEL) related to the dual needs for a provider who delivers IBHS in their center for young children for extended periods of time. They are considering a joint webinar.

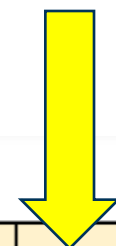


# Network Updates

# Maximum Units



<https://www.dhs.pa.gov/HealthChoices/HC-Providers/Documents/IBHS%20Bulletin%20MHSAS-20-01%20%E2%80%94%20Procedure%20Codes%20for%20IBHS%20Providers.pdf>



Intensive Behavioral Health Services Agency Procedure Codes

Codes	Pricing Modifier	Info Modifier	Description	Prov Type	Prov Spec	Place of Service	MA Fee	Prior Auth	MA Unit	Limits
<b>Assessment and Evaluation for Initiation of IBHS</b>										
90791			Psychiatric diagnostic evaluation ( <b>Psychological Evaluation</b> )	11	590	11, 12, 99	\$26.25	No	30 min	1 to 6 units per day
H0031	UB		Mental health assessment by non-physician ( <b>Other Licensed Practitioner</b> )	11	590	11, 12, 99	\$22.31	No	30 min	1 to 6 units per day
H0031	U9		Mental health assessment by non-physician ( <b>Licensed Practitioner</b> )	11	590	11, 12, 99	\$26.25	No	30 min	1 to 6 units per day
<b>Individual Services</b>										
H0032	UB		Mental health service plan development by non-physician ( <b>Behavior Consultation - Unlicensed Practitioner</b> )	11	590	12, 03, 99	\$14.87	No	15 min	1 to 32 units per day
H0032	U9		Mental health service plan development by non-physician ( <b>Behavior Consultation - Licensed Practitioner</b> )	11	590	12, 03, 99	\$19.56	No	15 min	1 to 32 units per day
H2014	UB		Skills Training & Development ( <b>Onsite Supervision</b> )	11	590	12, 03, 99	\$2.50	No	15 min	2 to 24 units per day
H2019			Therapeutic Behavioral Services ( <b>Mobile Therapy - Unlicensed Practitioner</b> )	11	590	12, 03, 99	\$14.87	No	15 min	2 to 32 units per day
H2019	U9		Therapeutic Behavioral Services ( <b>Mobile Therapy - Licensed Practitioner</b> )	11	590	12, 03, 99	\$19.56	No	15 min	2 to 32 units per day

# Network Team



Mitch Fash – Network Manager – [MFash@magellanhealth.com](mailto:MFash@magellanhealth.com)

Jess Pearce – Sr. Network Management Specialist – Cambria County- [jpearce@magellanhealth.com](mailto:jpearce@magellanhealth.com)

Michael Ditty – Network Management Specialist – Lehigh/Northampton Counties - [msditty@magellanhealth.com](mailto:msditty@magellanhealth.com)

Crystal Devine – Network Management Specialist – Delaware/Montgomery/**Bucks** Counties - [cedevine@magellanhealth.com](mailto:cedevine@magellanhealth.com)

~~Kelly Sroka – Network Management Specialist – Bucks County – [klsroka@magellanhealth.com](mailto:klsroka@magellanhealth.com)~~

Jeff Stumm – Network Management Specialist – Contracts/Credentialing - [jrstumm@magellanhealth.com](mailto:jrstumm@magellanhealth.com)

Alyssa Gorzelsky – Claims Resolution Specialist – [amgorzelsky@magellanhealth.com](mailto:amgorzelsky@magellanhealth.com)





# Primary Insurance & MA for IBHS

# Reminder



Medicaid is always the payer of last resort.

Magellan cannot reimburse as primary payer because your agency is out of network with the primary insurance.

Magellan can reimburse as primary payer if primary plan terms, benefit is exhausted, or service is not a covered benefit.

# Third Party Liability (TPL) Issues



OMHSAS continues their conversations with PID who are seeking as much specific information as we can pass along to help them address these issues since they are not receiving formal complaints directly. Sample info to submit:

*-MCOs to report as much detail as possible regarding known denials or refusals to pay for IBHS. This could be things such as refusing to pay for ABA in schools or refusing to pay for IBHS that is not ABA.*

*Examples:*

- -TriCare has updated their provider manual (<https://manuals.health.mil/pages/DisplayManualHtmlFile/2021-03-23/AsOf/TO15/C18S4.html>) to exclude identified ABA services in the school setting*
- 8.10.15 TRICARE ABA services are not authorized in the school setting as a shadow, aid, or support to the beneficiary. ABA services in the school setting are limited to the role of the BCBA who is targeting a specific behavior excess or deficit and is for a limited duration. Any ABA services requested for the school setting must be specifically preauthorized in the TP for use in the school setting.*
- 8.10.15.1 The contractor shall authorize and reimburse only CPT code 97153 rendered by the authorized ABA supervisor (not delegated to the assistant or BT) in the school setting.*

# TPL Issues continued



- 8.10.15.2 After May 1, 2021, authorizations with approved BT services in the school setting will run through the end of the current authorization. However, no new authorizations for BTs in school setting will be approved after May 1, 2021.
- 8.10.16 ABA services for a beneficiary that are written in a beneficiary's IEP and required to be provided without charge by the local public education facility in accordance with the Individuals with Disabilities Act or other applicable laws and regulations. In order for ABA services to be authorized within a school setting, the parent/caregiver must voluntarily provide the IEP (or equivalent for non-public school placement) in order for the contractor to make an appropriate determination.
- 8.11.6.2.4.6 CPT code 97156 may be used only in a home or clinic/office-based setting. School settings are prohibited.
  - -Parent, Sally Smith\*, provided a denial from Aetna Custom HMO (attached) to PerformCare on 8/28/21 for procedure code H2019 (mobile therapy) saying this was a noncovered service
  - -CCBHO representative, John Smith\*, was told by Horizon BCBS representative, Amy Smith\*, on 11/11/21 that ABA was not covered in the school setting and they were in the process of updating their member handbook

Please submit to Kristen Scalise by **COB Wed 1/19/22** who will pass along to OMHSAS.

\*None of these names reflect actual people or members.

## Packet Documents if MBH is secondary



The packet requirements are the same for Magellan members regardless if Magellan is primary or secondary payor.

Providers need to be able to follow the paperwork expectations of both funders.

# BC-ABA recommendations



BC-ABA Written Order recommendations should be made based on the maximum number of hours per month. Assessments should specify the exact amount of hours to be provided consistent with the Written Order.

- Ex. BC-ABA up to 12hrs/month

If a member has a primary insurance, the provider must meet the requirements of both funders.

Ex. BC-ABA up to 12hrs/month

97151 4hr/mon

97155 4hr/mon

97156 4hr/mon



# Miscellaneous



Thank you for your patience as we work through technical issues with the Access Survey.

We recognize this as a valuable tool and continue to work to find efficiencies in the process to gather timely staffing abilities.



# IBHS Provider Quality Report



Please note that in the IBHS regulation 5240.61, there is an expectation for providers to produce an annual quality report.

(b) An IBHS agency shall prepare an annual quality report that includes the following:

(1) Analysis of the findings of the annual quality review required under subsection (a)(1).

(2) Identification of the actions to address annual review findings.

(c) An IBHS agency shall make annual quality reports available to the public upon request.

(d) An IBHS agency shall provide written notification that a copy of the annual quality report may be requested by a youth, young adult or parent, legal guardian or caregiver of a child, youth or young adult upon admission to services.

Magellan has begun discussing our expectations related to this regulation requirement and will share at our Q2 2022 provider webinar.

# Adverse Incident Reports for restraints



Seclusion or Restraint – Providers are to report any use of seclusion or restraint (chemical, mechanical and manual) as defined in Mental Health Bulletin “OMHSAS -02-01 The Use of Seclusion and Restraint in Mental Health Facilities and Programs,” published by the Commonwealth of Pennsylvania, Department of Public Welfare, Office of Mental Health and Substance Abuse Services.

<https://www.magellanofpa.com/for-providers/provider-resources/forms/>

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## Forms

**Program-specific Forms (Appendix A)**

- [Adverse Incident Report](#) ←
- [Alternatives to Residential Mental Health Form, Attachment 8](#)
- [ASAM Crosswalk with PA's System of Care](#)
- [Children in Substitute Care \(CISC\) Referral Form](#)
- [Consent to Release Protected Health Information \(PHI\) - All Counties \(Online Submission\)](#)
- [Consent to Release Protected Health Information \(PHI\) - English](#)
- [Consent to Release Protected Health Information \(PHI\) - Spanish](#)

# Unassigned Cases – Provider Responsibility



Your agency completed the initial assessment; prepared and submitted the initial packet for MNC review to Magellan. If approved, an authorization for an “unassigned provider” will be entered.

Does my agency need to update the Written Order?

- If necessary, we would request assistance with getting a new Written Order if it will be expiring soon.

Does my agency have to do a new assessment in 6 months if no provider is found?

- No. We would request the new provider once identified seek to complete an updated assessment to ensure the treatment plan needs are still appropriate.

# Use of 97151 – BC-ABA Assessment



All BH-MCOs have discussed aligning with the ABA national coding standards in the use of these codes although not all are offered under Health Choices.

Helpful resource: <https://abacodes.org/frequently-asked-questions/>

- **97151.** Behavior identification assessment, administered by a physician or other qualified health care professional, each 15 minutes of the physician's or other qualified health care professional's time face-to-face with patient and/or guardian(s)/caregiver(s) administering assessments and discussing findings and recommendations, and non-face-to-face analyzing past data, scoring/interpreting the assessment, and preparing the report/treatment plan

Magellan is developing more clarity and more specific guidelines for BC-ABA activities billed under 97151 versus 97155 but for the time being please refer to the CPT guidance at the link included above.

# Covid-19 Provider Protocol



Reporting requirements are the same of all providers.

The reports can be made easily through the link here:

<https://www.magellanofpa.com/for-providers/adverse-incidents/>.

That link includes the Incident Type Definitions that are required to be reported to Magellan's Quality Improvement Department, also shared here:

<https://www.magellanofpa.com/media/5894/incident-reporting-incident-types-definitions-06302020.pdf>.

There is a training resource we've shared online for providers:

<https://www.magellanofpa.com/media/6195/provider-training-for-incident-reporting.pdf>.

COVID-19 was added in 2020 to Pennsylvania's [list of communicable diseases](#). Any illness that appears on the Department of Health's (DOH) List of Reportable Diseases (pursuant to PA Code, Title 28, Chapter 27), including those appearing on the DOH list as the subject of voluntary reporting by the Centers for Disease Control (CDC) communicable disease and as such required in the state of Pennsylvania are to be reported under the category of Injury/Illness.



# Upcoming Forums & Technical Assistance

# We need your input...



Dr. Siegler has completed 3 trainings in 2021:

- Best Practices for IBHS Assessment
- Best Practices in Treatment Planning for IBHS Agencies
- Best Practices in Generalization and Skill of Transfer for IBHS Agencies

All 3 can be found posted on Magellan's IBHS Provider webpage:

<https://www.magellanofpa.com/for-providers/services-programs/ibhs/>.

Please comment in the chat or send an email to [IBHS@magellanhealth.com](mailto:IBHS@magellanhealth.com) with any topic suggestions for clinical trainings to offer in 2022.

## Technical Assistance Calls - Change



- Magellan will offer IBHS technical assistance calls to any provider interested.
- We will no longer be offering a sign up of available dates. We will schedule as needed when requested.
- Please email [IBHS@magellanhealth.com](mailto:IBHS@magellanhealth.com) with a request for a TA call.





**Friday, April 8, 2022 9:00 to 10:30 A.M. Via Zoom**

**Register in advance for this meeting:**

<https://magellanhealth.zoom.us/j/95618956162?pwd=dEtsNDBERnV2RnZURFNob1VPQ1hmZz09>

Password: 370445

After registering, you will receive a confirmation email containing information about joining the meeting.

**This info can always be found at the bottom of our IBHS provider webpage:**

<https://www.magellanofpa.com/for-providers/services-programs/ibhs/>



**Questions?**



**Thank you!**

# Confidentiality Statement for Providers



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