

Welcome to the Magellan Provider IBHS Workgroup

JANUARY 25, 2023

Magellan
HEALTHCARE®



Welcome and Opening Remarks

HAPPY NEW YEAR





738 days of IBHS



Agenda

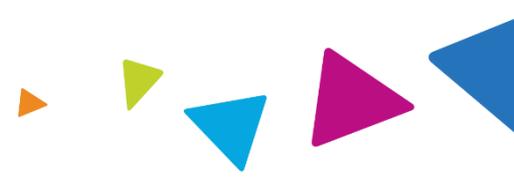


- Updates from OMHSAS
- Network Updates
- Clinical Tidbits
- Magellan's Data Driven Process 2023
- Upcoming Forums, Technical Assistance, and Resources
- Questions



Updates from OMHSAS

Dropping Primary Insurance



- OMHSAS reported hearing that some providers were instructing families to drop their primary (Commercial) insurance and just maintain MA only.

OCDEL Collaboration



- Magellan heard from providers in some areas that some childcare facilities were saying that OCDEL (Office of Child Development and Early Learning) was messaging the expectation for requiring full time Behavioral Health supports such as a BHT/BHT-ABA.
- Providers were concerned as their data did not support full time BHT/BHT-ABAs.
- Kristen took this concern to OMHSAS who had OCDEL representatives attend the 11/9/2022 meeting with all the BH-MCOs.
- OCDEL clarified that this is NOT their message. They also support the least intrusive, least restrictive support for a child.
- OCDEL encouraged providers to outreach your local OCDEL field office if you encounter a childcare facility who is requiring FT BHT/BHT-ABA or else the child cannot attend their program.

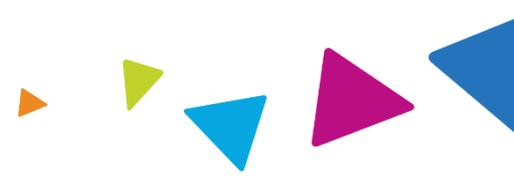
Written Order validity



OMHSAS again confirmed:

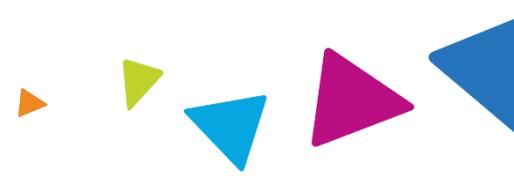
- An initial Written Order (WO) needs to be utilized to request services within 12 months of being written.
- Subsequent WOs will be tied to authorizations. A WO is valid for a concurrent authorization request if it was written within 12 months of when the authorization request was submitted to the BH-MCO. A WO which expires during an authorization period does not need a new one until the next authorization request. As a result, it is possible that there will be gaps of time when the WO is valid.
- This is NOT a change from how Magellan has been handling WO.

Medications for Members on site



- OMHSAS expects that medications are administered to members only by professionals whose role is administering medications.
- OMHSAS is ok with self-administration.
- Prescribed medications should be given before or after the therapy program. If needed while on site, their guardian would need to administer it to them.
- An emergency medication would require a clear plan and policy surrounding this.

Treatment Plans – Not Fully Implemented



Example – If a WO and assessment recommends BC and BHT but BHT cannot be staffed currently, should BHT be included in the treatment plan?

Yes. The treatment plan should include what the member needs. OMHSAS would want to see any service recommended included in the treatment plan and a note of why BHT is not in place.



Network Updates

Network Team



Mitch Fash – Network Manager – MFash@magellanhealth.com

Jess Pearce – Sr. Network Management Specialist – Cambria County- jpearce@magellanhealth.com

Michael Ditty – Network Management Specialist – Lehigh/Northampton Counties - msditty@magellanhealth.com

Crystal Devine – Network Management Specialist – Montgomery County - cedevine@magellanhealth.com

Jessica Torano – Network Management Specialist – Bucks County - toranoj@magellanhealth.com

Jeff Stumm – Network Management Specialist – Contracts/Credentialing - jrstumm@magellanhealth.com

Alyssa Gorzelsky – Claims Resolution Specialist – amgorzelsky@magellanhealth.com

Telehealth Code



On August 16, 2022, as a result of multiple requests for clarification regarding MA Bulletin OMHSAS-22-02, OMHSAS issued a [Telehealth Frequently Asked Questions](#) document.

In accordance with MA Bulletin OMHSAS-22-02, Magellan would like to advise providers that it is now able to accept informational modifier **FQ** when providing audio-only telehealth services. Effective for dates of service July 1, 2022, and beyond, providers should add informational modifier FQ in the last available position along with your current contracted code and modifier combination every time a service is provided over the telephone. Providers who offer services that currently require the use of four modifiers should continue to use those modifiers in accordance with your contract (four modifiers are the maximum allowable, so in this case, providers would not be able to utilize informational modifier FQ).

Magellan Updated Telehealth FAQ – October 6, 2022

https://www.magellanofpa.com/documents/2022/10/100622_telehealthfaq.pdf/

Satellite Sites & Licensing



- IBHS licenses are issued regionally. There are 4 regional field offices: Western Field Office, Northeast Field Office, Southeast Field Office, and Central Field Office. A provider is only required to get multiple licenses if it provides services in multiple regions.
- If a provider has multiple locations in one region, they do not need each site licensed, unless the site provides on-site services. However, your service description must include all locations under the regional license.
- A provider is required to submit 1 service description for each IBHS license.
- If a provider's service changes, an updated service description must be submitted to the licensing field office for approval. If a provider's address changes, a provider must notify OMHSAS's licensing field office and, if the provider is enrolled in MA, it must also notify MA enrollment.
- ***Not all locations in the region require MA enrollment unless providing on-site services.***

New IBHS Group Process - Changes

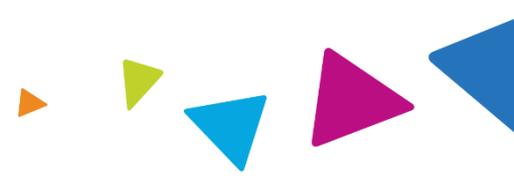


- If your agency is interested in expanding the IBHS Services currently being provided under your Magellan contract to include Groups & ABA Groups, please email MBHInterestedProviderApplication@magellanhealth.com.
- Please identify your agency and note whether your agency is seeking to add:
 - ✓ IBHS Group
 - ✓ IBHS ABA Group
 - ✓ Both

Network will respond by sending a link via DocuSign to be completed. This application will request submission of some documents for Magellan's review. Magellan will be asking your agency to submit a Group/ABA Group Service Description containing at minimum the following information: Address where group will occur, target population (including primary & MA secondary participants), clinical model of program, # of groups, size of each group, frequency of each group, length and frequency of sessions, open/closed enrollment, staff level of who will deliver the group service, family involvement in group service.

Once all the paperwork is received and reviewed, Magellan's clinical department will outreach to schedule a time to meet with your agency to verbally review and ask any outstanding questions. After, there is an internal, cross-department review process which will conclude with Magellan's decision and contracts as applicable.

Provider Expansion or Provider Changes



For Magellan, is your agency....?

- Moving locations
- Adding a new location
- Want to begin delivering 1:1 site-based services
- Want to begin delivering ABA Services or Individual Services

Please outreach Magellan's Network department identifying your expansion request or change to MBHInterestedProviderApplication@magellanhealth.com.



Availity Essentials

Nation's largest real time health information network

20 years of streamlining and simplifying providers administrative tasks

“One Stop Shopping”
Providers benefit from having one place to complete key task for multiple health plan payors

Availity Essentials is free so that providers can enjoy real-time information exchange with many payers they work with every day

Availity Summary



- **Who and Why Availity:**

- Magellan Leadership made a strategic decision to enhance our provider on-line self-service capabilities.
- Availity is a nationwide, multi-payer Provider Engagement Portal helps providers and health plans collaborate and share information easily and efficiently.
- Availity is the nation's largest real time health information network and meets the current digital standards being evaluated in the industry through the Council for Affordable Quality Healthcare (CAHQ).
- Over 2 million providers currently active on the Availity platform.
- Availity makes it easy to work with Magellan, from the first check of a patient's eligibility through final resolution of the provider's reimbursement.

- **Benefits to Magellan Providers:**

- Providers benefit by having one place to go to accomplish key tasks for multiple plans, and health plans benefit as providers opt for self-service.
- Increase in provider satisfaction
- Increase provider engagement and utilization to handle provider transactions via the web.
- Free registration, Availity provider support and online access 24/7.

*Check Provider Announcements page for an updated provider notice.

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

Availity Highlights



Get claims remittance and EOBs/EOPs via the Claims Status tile In addition to checking eligibility, benefits and accumulated amounts on Availity's portal – Availity Essentials – you now have access to see claims remittance and EOBs/EOPs using the Claims Status tile. This goes live 11/1/22.

Specific communication will be sent to all providers with additional information and pre-recorded training opportunities.

MagellanProvider.com (MP.COM) is not going away at this time. Some tools will transition to Availity (Eligibility – 10/1/22 and Claims look up 11/1/22).

Submission of claims is not changing at this time only claims look up 11/1/22.

Authorizations are still the same for now but will transition to a new platform in the future. No date for this set but communications and trainings will occur prior to any changes.

CANS and POMS are still on MP.COM.

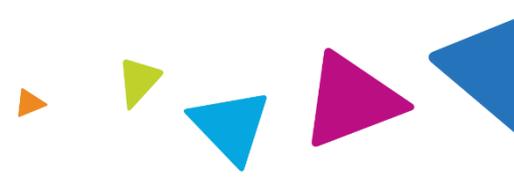
Availity Contact Information



- Availity provider support is available via Availity Client Services (ACS):
- E-ticketing—Available 24/7 on <https://www.availity.com>.
- Chat —Available throughout the day via Community Support on <https://www.availity.com>.
- Phone—1.800.AVAILITY(282.4548) Monday-Friday 8a.m.-8p.m.ET



Clinical Tidbits



Andre Hewitt



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.

Behavior Consultant vs Mobile Therapist

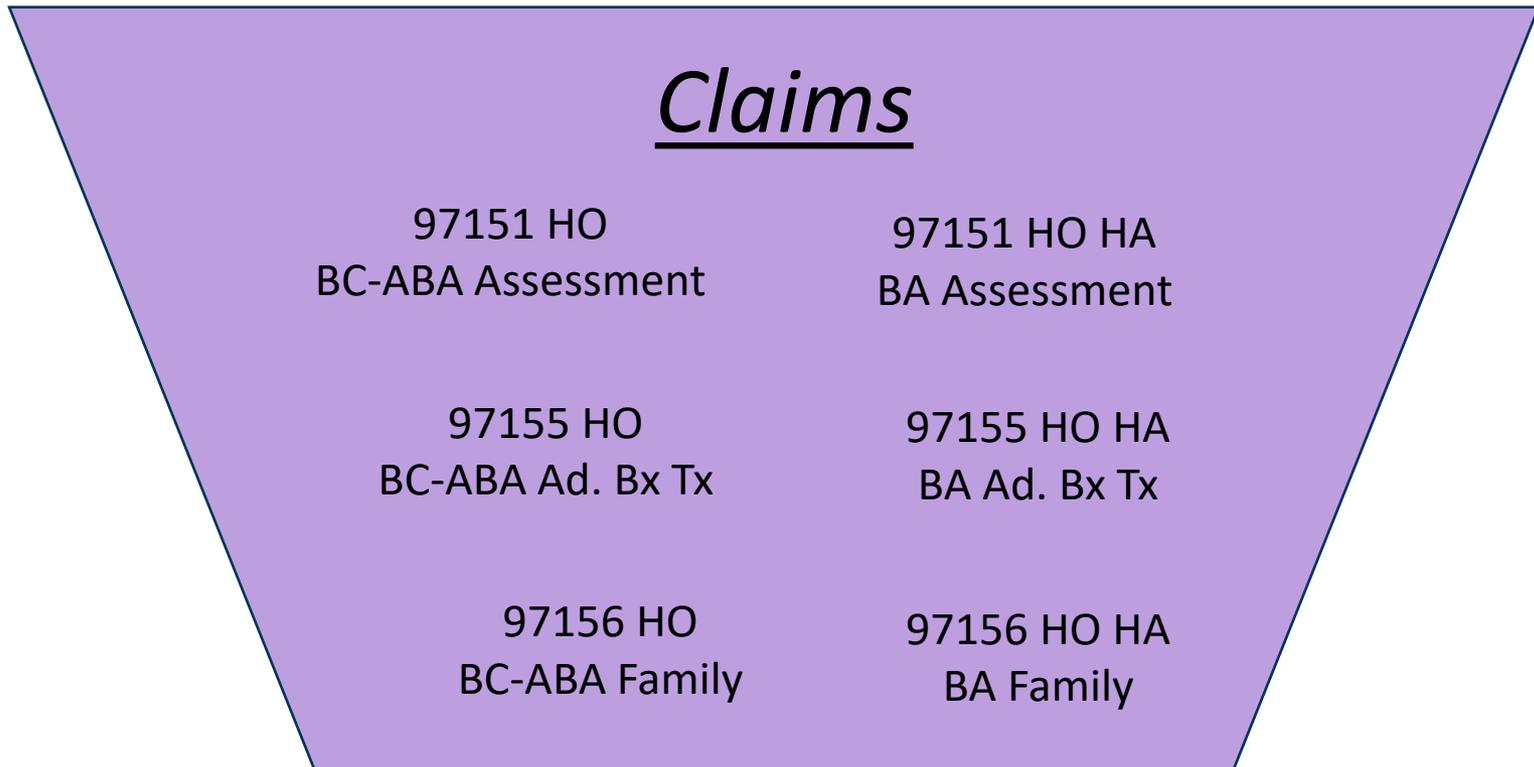


- Behavior consultation (BC) services consist of clinical direction of services to a child, youth or young adult; development and revision of the ITP; oversight of the implementation of the ITP and consultation with a child's, youth's or young adult's treatment team regarding the ITP.
- Mobile therapy (MT) services consist of individual therapy, family therapy, development and revision of the ITP, assistance with crisis stabilization and assistance with addressing problems the child, youth or young adult has encountered.

*Source – IBHS Regulations 5240.71



BC-ABA Authorization: 97151 HO



BC-ABA Tasks & Codes



- **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
- **97155.** Adaptive behavior treatment with protocol modification administered by physician or other qualified health care professional, which may include simultaneous direction of technician, face-to-face with one patient, each 15 minutes
- **97156.** Family adaptive behavior treatment guidance, administered by physician or other qualified health care professional (with or without the patient present), face-to-face with guardian(s)/caregiver(s), each 15 minutes

Source: <https://abacodes.org/codes/>

Breakdown of BC-ABA tasks over past 6 months



COUNTY	Average 97151 UNITS	Average 97155 UNITS	Average 97156 UNITS
BUCKS	56	131	24
CAMBRIA	49	125	25
LEHIGH	33	160	19
MONTGOMERY	62	143	27
NORTHAMPTON	27	135	25

COUNTY	97151 - Av hours/6months	97155 - Av hours/6months	97156 - Av hours/6months
BUCKS	14 hrs	33 hrs	6 hrs
CAMBRIA	12 hrs	31 hrs	6 hrs
LEHIGH	8 hrs	40 hrs	5 hrs
MONTGOMERY	16 hrs	36 hrs	7 hrs
NORTHAMPTON	7 hrs	34 hrs	6 hrs



Remember to check your contract for the ABA codes & modifiers available. This resource can offer some additional information about what is entailed for each code.

<https://abacodes.org/codes/>



Billing Codes

The CPT® codes below have been approved by the American Medical Association (AMA) for applied behavior analysis assessment and treatment – described as “adaptive behavior services” in the **CPT® code book**. Adaptive behavior services address deficient adaptive behaviors (e.g., instruction following, verbal and nonverbal communication, imitation, play and leisure, social interactions, self-care, daily living, personal safety skills) or maladaptive behaviors (e.g., repetitive and stereotypic behaviors; behaviors that risk physical harm to the patient, others, and/or property). Guidance on the use of these codes is available in the November 2018 **CPT® Assistant newsletter** published by the AMA. The codes and their descriptors are below.

Adaptive Behavior Assessment

Category I

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

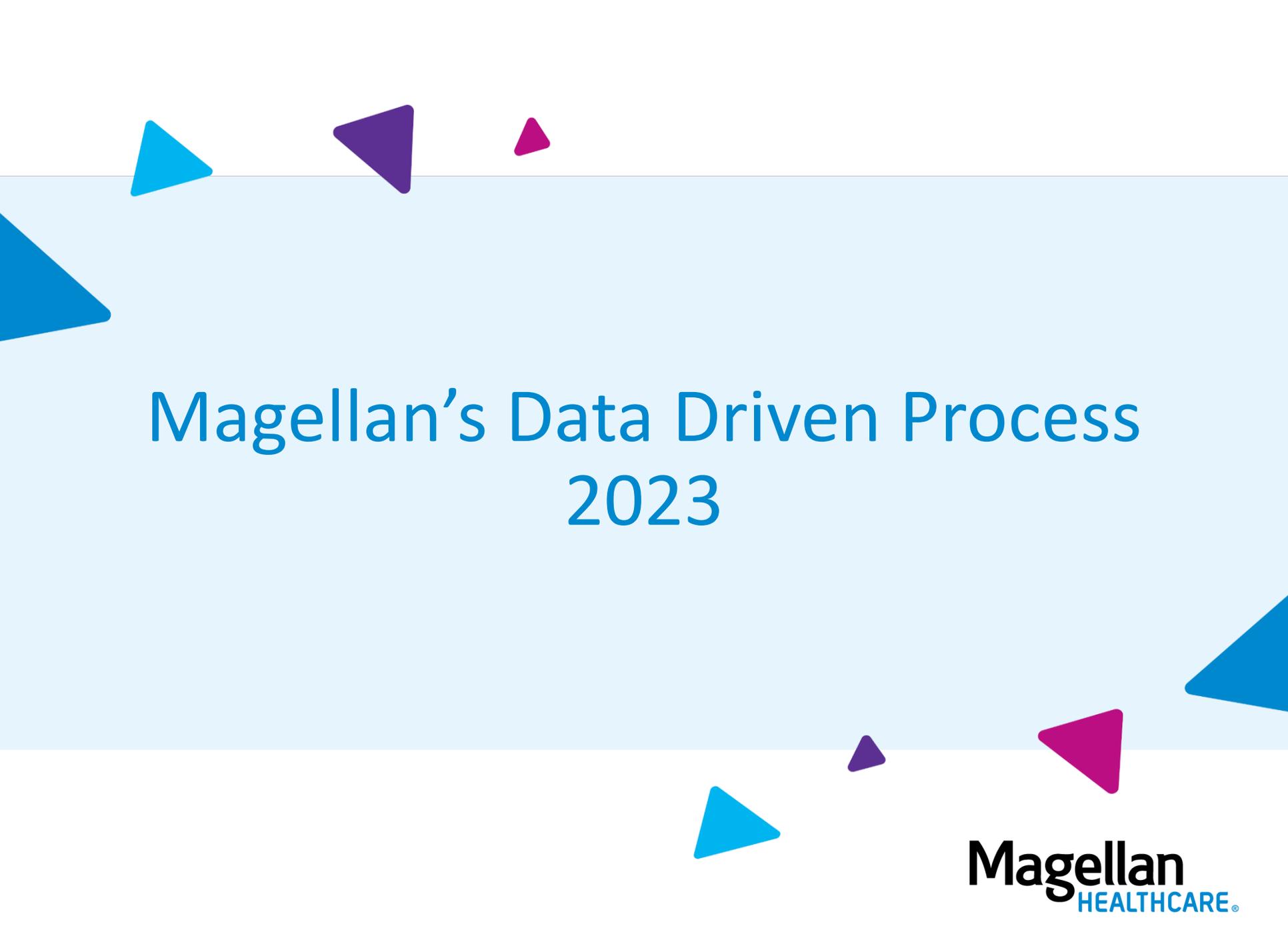
97152. Behavior identification supporting assessment, administered by one technician under the direction of a physician or other qualified health care professional, face-to-face with the patient, each 15 minutes

New Provider Training - Resource



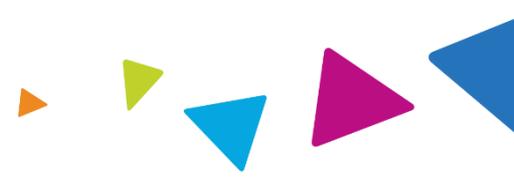
Resources are distributed following every New IBHS Provider training.

- ✓ Review for answers to questions as they come up.
- ✓ Use to assist in training new staff



Magellan's Data Driven Process 2023

Our baseline year of data is complete.



THANK YOU FOR YOUR COLLABORATION

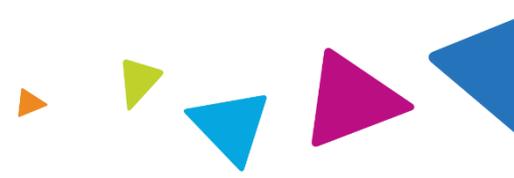




What will continue in 2023?



Higher Level of Care Collaborative Phone Call



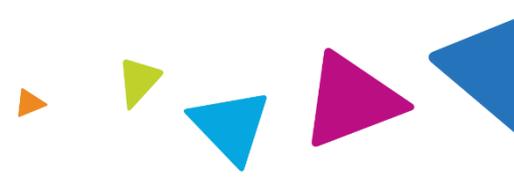
- Magellan Care Manager will outreach provider for any IBHS member who is discharged from Acute Inpatient Program or Residential Treatment Facility within prior 30 days.
- Goal: To ensure supportive transition from 24-hour level provider to community-based provider

Provider Initiated Phone Calls for FBS Recommendations



Telephone call with Magellan Care Manager when considering a FBS referral.

Medical Necessity Reviews



Care Managers will review some packets for Medical Necessity as they come in. However, this will be dramatically less than usual. Therefore, providers can anticipate a significant decline in Requests for Additional Information (RAIs) and Peer to Peer reviews.



Small Changes based on Feedback



Clinical Measurement Tools & Collaborative Case Reviews



These 2 tasks will continue but in a more fluid and allow for more planful collaboration with providers. This is an overview of how these tasks were implemented in 2022.

	2022
Clinical Measurement Tool	Q1 & Q3
Collaborative Case Reviews based on Outlier data	Q2 & Q4
Collaborative Case Reviews based Clinical Measurement Tool	Q1 & Q3

Clinical Measurement Tools & Collaborative Case Reviews 2023



Q1 & Q2 2023	Providers A-I	Providers J-Z
Clinical Measurement Tool	Q1	Q2
Collaborative Case Reviews based on Outlier data	Q2	Q1
Collaborative Case Reviews based Clinical Measurement Tool	Q2	Q3
Q3 & Q4 2023	Providers A-I	Providers J-Z
Clinical Measurement Tool	Q3	Q4
Collaborative Case Reviews based on Outlier data	Q4	Q3
Collaborative Case Reviews based Clinical Measurement Tool	Q4	Q1 2024



Upcoming Forums, Technical Assistance & Resources

WHAT IS ON MY WAY?

OMW is an evidence-based Coordinated Specialty Care model that provides services to young people (ages 15-30) who have experienced their first psychotic episode in the past 18 months and have a diagnosis on the Schizophrenia Spectrum or Bipolar with psychotic features. OMW provides the following services:

- **PSYCHIATRY** provides medication management and engages the young person in a shared decision-making process regarding the use of low-dose antipsychotic medications.
- **INDIVIDUAL THERAPY** guided by the Recovery Oriented Cognitive Therapy approach from the Beck Institute. The therapist will work with the young person to identify their aspirations and the obstacles that stand in their way of success.
- **FAMILY THERAPY & PSYCHOEDUCATION** is offered to each young person's family members to help them understand the symptoms of psychosis.
- **CASE MANAGEMENT**, which focuses on identifying and connecting the young person to supportive community of resources and services, ensuring continuity of care across involved systems, and helping the young person identify their natural supports.
- **SUPPORTED EDUCATION & EMPLOYMENT** is provided to aid the young person reach their school and work goals.
- **CERTIFIED PEER SPECIALIST** looks to engage the young person in the OMW program and to share their story of recovery from psychosis.
- **EMERGENCY ON-CALL SERVICE**, which offers a 24/7 hotline to assist the young person and their family members in supporting one another through difficult experiences and in managing crisis situations

Available in Lehigh, Northampton, and Bucks Counties by Child & Family Focus (CFF)

<https://www.childandfamilyfocus.org/services/on-my-way/>



Coffee Hour

with the

Psychologist Advisor

An opportunity for psychologists and other service prescribers to
dialogue with John Siegler PsyD
Psychologist Advisor, Magellan Behavioral Health of Pennsylvania

The Coffee Hour will focus on questions and concerns specific to testing/assessment, the level of care (LOC) decision process, and specific elements to address in the assessment/written order for each LOC.

There will be registration. Keep your eyes out for upcoming flyer.



Dr. Siegler will be offering a 2-part training on Suicide Risk Reduction.

Part 1 – Assessment & Crisis Planning – March 23, 2023

Part 2 – Suicide Risk Reduction Focused Treatment – June 15, 2023

*CEs pending approval.





Thursday, April 27, 2023, 9:00 to 11:00 A.M. Via Zoom

Register in advance for this meeting:

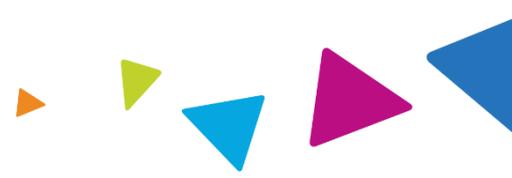
https://magellanhealth.zoom.us/meeting/register/tJYqd-6qqjwsEtGujCyK4r_ADjwwGfi1v1jV

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

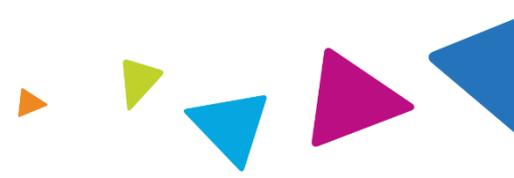
No invites are sent. This info can always be found at the bottom of our

IBHS provider webpage:

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



Questions?



Thank you!

Confidentiality statement



The information presented in this presentation is confidential and expected to be used solely in support of the delivery of services to Magellan members. By receipt of this presentation, each recipient agrees that the information contained herein will be kept confidential and that the information will not be photocopied, reproduced, or distributed to or disclosed to others at any time without the prior written consent of Magellan Health, Inc.

The information contained in this presentation is intended for educational purposes only and should not be considered legal advice. Recipients are encouraged to obtain legal guidance from their own legal advisors.