

Medicaid Handbook: Interface with Behavioral Health Services

Module 10

Basic Information and Tools

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Acknowledgments

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Module 10: Basic Information and Tools

The tone of this module is decidedly different from the tone used throughout the rest of the handbook. By now, you have saturated your brain with all things Medicaid and are ready to use your knowledge. So, at the risk of sounding like the author of *All I Really Need to Know I Learned in Kindergarten*,¹ the following is food for thought.

Behavioral Health Staff Working With Medicaid Staff

Here are some basic principles that govern the relationship between Medicaid staff and behavioral health agency staff—

- You have no choice; you must work together...because people's lives depend on it
- It is always about the relationships
- It is a cross-cultural relationship, by definition
- You may not share the same language and culture, even if you think you do
- Even though both of your agencies/divisions share the individual or consumer as the priority, you need to sort out competing and complementary interests

When behavioral health agency staff is preparing to meet with Medicaid staff, it is helpful for them to keep the following information in mind and to prepare accordingly.

- What is the nature of your working relationship? A good, ongoing relationship that seeks to maximize the interests of both parties is essential to long-term success. Recognizing that governors and cabinet officers change with the state's election cycles, developing relationships of understanding and trust with agency staff is essential. Differences of organizational, political, or policy priorities are a part of the environment. Relationships that function on considerations other than power and control will be most successful.
- Consider that if you have a relationship with someone whose native language differs from your own, you must be aware of both language and cultural issues associated with your different backgrounds. Each agency's language and style of communication may be different from yours.
 - Does your agency/division have a designated contact person with the other? Some state Medicaid programs have designated policy staff whose primary responsibility is to serve as a liaison with the behavioral health agencies that assist with the administration of the Medicaid specialty programs. This person's most important role is to be familiar with the larger context and policy goals operating in the specialty system and to be able to translate between Medicaid and behavioral health issues. These policy staff members often have worked in that system.
 - Is there a staff person who has worked in the other agency or division? Can this person assist you regarding who you should contact or how the other agency will view the issues or provide other perspective that may be helpful?
 - Do not assume that you are speaking the same language. Ever.
- What history and experience do you and your agencies/divisions share?

- Any well-developed Medicaid-related policy requires good clinical judgment, financial consideration, understanding of the system-level implications for consumers and how they will help or hinder the consumer’s experience, and knowledge of associated regulatory and implementation considerations. Who are the best people to bring these various kinds of expertise to your shared work? This is more important than having an equal number or “rank” of individuals from each “side.”
- Highly skilled professionals—plentiful in every Medicaid, mental health, and substance use disorder (SUD) department or division across the country—desire little else than to be able to see their work successfully implemented. Harnessing those varied skills can be a challenge. For any project of significant size or scale, project management and a consistent, dedicated team are essential.

As consultants and administrators who have worked in various states on a variety of Medicaid and behavioral health issues, you would be surprised by how many of these principles are forgotten “in the heat of the moment”!

Behavioral Health Staff Working With Regional and Central Office Staff from the Centers for Medicare & Medicaid Services

All of the principles discussed above also apply to relationships with Centers for Medicare & Medicaid Services (CMS) staff.

In addition to the obvious, do your homework, know your audience, and have a clear agenda. To this end, here are two observations—

- If you are a behavioral health agency staff member, central office (CO) and regional office (RO) staff are very open to and interested in your issues. Our experience, as staff of a behavioral health agency, is that you will probably find them very responsive to your calls or questions. However, keep in mind that their primary relationship is with the designated single state Medicaid entity. Therefore, although they will probably listen, they may not give you a definitive answer and they likely will communicate with and through the Medicaid entity. On significant or ongoing projects, CMS will come to know the behavioral health leadership staff, directly or indirectly.
- If you are the Medicaid staff member, it is in everyone’s best interest to include the staff from the behavioral health agency or division in discussions and negotiations with CMS related to behavioral health issues. Together, you will want to review the “ground rules” ahead of time and debrief afterward; know that you may need to “translate.” Our experience (as Medicaid staff) is that, in the long run, it does not help if Medicaid officials are viewed as an impenetrable wall between behavioral health leadership goals and CMS.

How to Find What You Need to Know About Medicaid in Your State

The websites for the sources discussed below are provided at the end of this module in the *List of Web Resources*.

State Medicaid Agency and Human Service Agency Websites

Although it may seem obvious, frequently the best way to begin a search for information on your state's Medicaid program is to enter "Medicaid" and your state's name into a search engine, such as Google. This process should provide you with some basic information about your state's Medicaid program, such as whether the Medicaid agency in your state is a free-standing, cabinet-level department or part of another department, such as a health or human services department.

A basic internet search will lead you to your state's Medicaid agency website, where you should be able to access information by topic. Possible topics may include consumer resources (enrollment in Medicaid and the services Medicaid covers), provider resources (billing and enrollment practices), important forms and contact information, and other resources.

When seeking to understand your state's Medicaid program and policies, it is important to know the basic structure of the health and human services agencies in your state. As indicated in Module 2, although there is a federal requirement for a state to maintain a single state Medicaid agency that is responsible for administering or overseeing the administration of the Medicaid program, states are allowed to share certain program functions with other state agencies. Many states maintain an agency that is distinct from the Medicaid agency and is responsible for mental health programs and policies and/or substance abuse programs and policies. Note that the terms *mental health* and *substance abuse* are often used to refer to state programs that provide services to *people with mental or substance use disorders* (M/SUDs); the term *behavioral health* is often used in agencies that manage both types of services and conditions under one organization. Therefore, states may have one agency—with a combined focus on M/SUDs—or two separate agencies, each focused on either mental or substance use disorders. Other states include Medicaid, mental health, and SUD programs and policies under one umbrella agency, such as a human services agency. Noticing how these agencies apportion programs and policies will allow for a fuller understanding of how your state organizes its human services and policies.

Medicaid Managed Care Plan Websites

If your state operates a Medicaid managed care program, the managed care plans' websites should also provide information on their covered services, consumer enrollment processes, provider networks (including how a consumer can find a provider), provider enrollment processes, and provider billing practices.

Medicaid State Plan and Waiver Documents

As discussed in Module 9, Medicaid State Plan and waiver documents are a very good source of state-specific Medicaid information. State Plans and waivers are a state's contracts with the federal government for provision of Medicaid services. As approved by CMS, these documents serve as the framework for each state's Medicaid program. A description of how and where to access these documents is included below.

State Laws and Regulations

Another excellent source of Medicaid program information for each state is its laws and administrative rules or regulations. If you are not familiar with where to find your state's laws

and rules, enter into a search engine your state’s name and “laws” or “administrative rules.” Once you are able to access the body of laws and regulations, look in the table of contents or index for titles and sections that logically could hold Medicaid program information. Additionally, most (if not all) state statutes and rules have a search function that allows the reader to search by keyword, such as “Medicaid” or “medical assistance.” You also can search using more specific search terms, such as “Medicaid providers” or “Medicaid eligibility.”

Centers for Medicare & Medicaid Services and Substance Abuse and Mental Health Services Administration Websites

The official websites of CMS and the Substance Abuse and Mental Health Services Administration (SAMHSA) contain a wealth of general Medicaid information. The CMS website allows readers to search by state for data and statistics; it also contains waivers that are current, pending, or expired for each state. The SAMHSA website contains many surveys, reports, and data sets that include state-specific information.

Health Policy Expert Websites

Health policy experts—like the Henry J. Kaiser Family Foundation, the Commonwealth Fund, the Center for Health Care Strategies, and Mathematica Policy Research—have extensive resources for data and substantive reviews of Medicaid-related topics. These websites provide the capability to search for well-developed, pertinent, state-specific data, as well as for reports that include overviews of policies and how they are being utilized or implemented in the states.

Technical Assistance Websites

The Integrated Care Resource Center provides technical assistance to states that wish to engage in strategies to improve their Medicaid service delivery system and improve cost efficiencies. The resource center is assisting the CMS Medicare-Medicaid Coordination Office and the Center for Medicaid and Children’s Health Insurance Program (CHIP) Services in working with states to design and implement new programs that better serve beneficiaries, improve quality, and reduce costs. Its website allows you to search policy initiatives by state.

How to Find Relevant Federal Laws and Regulations

Links to the Social Security Act, Affordable Care Act, Mental Health Parity and Addiction Equity Act (MHPAEA), and Code of Federal Regulations (CFR) are provided below. With the information provided in this handbook, you should be able to select the appropriate title and (in many cases) section of the Social Security Act to search. For example, Title XIX houses all fundamental laws pertaining to Medicaid; §1905 specifically addresses services covered by Medicaid. Once you select the appropriate title and section, you can use the search function to enter a search term and narrow your results.

To search the Affordable Care Act and MHPAEA, you should simply use the website’s search function and enter keywords or phrases such as “health home” or “accountable care organization.”

To search the CFRs, you must know the title, chapter, and subchapter in which the information you are seeking is located. Most regulations pertaining to Medicaid are located in Title 42.

How to Find Examples of State Plan Amendments and Waivers

Many states make their State Plans and waivers available online. See Module 9 for a complete list. The CMS website also maintains a list of current, pending, and expired waivers by type and by state. CMS does not yet maintain an online catalog of state Medicaid State Plans, although it may in the future.

Although not all states make their State Plans and waivers accessible online, all states should maintain a hard copy of their State Plans and waivers at the state Medicaid agency's office. These documents are available to the public.

List of Web Resources

Centers for Medicare & Medicaid Services

<http://www.cms.gov/>

Center for Medicare & Medicaid Innovation

<http://innovations.cms.gov/>

Substance Abuse and Mental Health Services Administration

<http://www.samhsa.gov/index.aspx>

The Henry J. Kaiser Family Foundation

<http://www.kff.org/>

The Commonwealth Fund

<http://www.commonwealthfund.org/>

Integrated Care Resource Center

<http://www.integratedcareresourcecenter.net/Default.aspx>

Center for Health Care Strategies

<http://www.chcs.org/>

Mathematica Policy Research

<http://mathematica-mpr.com/>

Social Security Act

http://www.ssa.gov/OP_Home/ssact/ssact-toc.htm

Code of Federal Regulations

<http://www.gpo.gov/fdsys/browse/collectionCfr.action?collectionCode=CFR>

Affordable Care Act

<http://www.healthcare.gov/law/index.html>

Mental Health Parity and Addiction Equity Act

<http://www.govtrack.us/congress/bills/110/hr6983>

¹ Fulghum R. *All I Really Need To Know I Learned in Kindergarten*. New York: Villard Books; 1988.

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SAMHSA's mission is to reduce the impact of substance abuse and mental illness on America's communities

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