Behavioral Health Services Administrator
Services & Care Coordination

Magellan Behavioral Health of Virginia | February 2014
Behavioral health and system of care solutions

• 4.2 million Medicaid lives nationally through direct state contracts and health plans.

• 15 direct contracts in seven states covering three million lives (not including Virginia).

• More than 18 years of experience in managing behavioral health for adults and children through Medicaid; we understand the unique challenges of working in a public health care system and offer quality-driven solutions.

• We have transformed systems from block granted and/or fee for service systems to managed models in Iowa, Pennsylvania, Florida, and, most recently, Louisiana statewide.

• Savings for the behavioral and medical care for Medicaid members occur as a result of our focus on assisting providers to provide more efficient care and empowering individuals to monitor and improve their own health through self-management tools and resources including peer support.
What does Magellan do?

• Magellan works with Department of Medical Assistance Services (DMAS) to improve access to quality behavioral health services and improve the value of behavioral health services purchased by the Commonwealth of Virginia.

• Magellan administers a comprehensive care coordination model which is expected to reduce unnecessary expenditures.
Magellan delivers on commitments through -

- Management of a centralized call center providing eligibility, benefits, referral and appeal information.
- Provider recruitment, issue resolution, network management and training.
- Utilization management of behavioral health services.
- Quality assurance, improvement and outcomes program.
- Service authorization.
Magellan delivers on commitments through -

- Member outreach, education and issue resolution.
- Claims processing and reimbursement of behavioral health services managed by Magellan.
- Comprehensive care coordination includes coordinating with DMAS managed care organizations (MCO).
- Promote more efficient utilization of services.
- Develop and monitor progress towards outcome-based quality measures.
Populations and services managed and coordinated

- Magellan manages the full spectrum of behavioral health services for:
  - Medicaid and Family Access to Medical Insurance Security (FAMIS) members, including members who participate in Medicaid home and community based waiver programs, such as the Intellectual Disabilities Waiver, Elderly and Disabled with Consumer Direction Waiver, and Individual and Family Developmental Disabilities Support Waiver.
  - Members who are not currently enrolled in one of the DMAS MCO contracts.
  - The subset of community mental health and rehabilitation services that are not covered by the MCO contracts with DMAS.
Populations and services managed and coordinated

• Magellan does not manage traditional behavioral health services such as acute hospitalization or outpatient psychotherapy services for members in MCOs contracted with DMAS.

• For the CCC plans, Magellan only manages mental health case management and substance abuse case management
What are the available behavioral health services?

- Day treatment/partial hospitalization. *
- Psychosocial rehabilitation. *
- Mental health skill-building. *
- Mental health case management.
- Intensive community treatment. *
- Crisis intervention.
- Crisis stabilization. *

* Not covered for FAMIS MCO members
What are the available behavioral health services?

- Substance abuse residential treatment for pregnant women. *
- Substance abuse day treatment for pregnant women. *
- Substance abuse case management. *
- Substance abuse crisis intervention.
- Substance abuse intensive outpatient. *
- Substance abuse day treatment. *
- Opioid treatment. *

* Not covered for FAMIS MCO members
What are the available behavioral health services?

- Intensive in-home services for children and adolescents.
- Therapeutic day treatment for children and adolescents.
- Treatment foster care - case management. *
- Community-based (residential) services for children and adolescents level A. *
- Therapeutic behavioral services for children and adolescents level B. *
- Residential treatment facility level C. *
- Behavioral Therapy *

* Not covered for FAMIS MCO members
Service descriptions
Services for adults and some adolescents

Day treatment/partial hospitalization:

- Interventions are more intensive than outpatient services and are in at least two consecutive hours.
- Multi-disciplinary team work to provide coordinated, comprehensive care to members to stabilize their psychiatric symptoms.
- Assist with learning activities of daily living.
- Help members change behaviors that are problematic in the community.
- May be used to prevent hospitalization for those at risk of hospitalization or as a bridge back to the community from hospitalization.
- Must be provided in group settings.
Services for adults and some adolescents

Psychosocial rehabilitation

• Provided in group setting.
• Educate members about their mental illness.
• Provide information on the appropriate use of their medications.
• Assist members to develop the skills needed to live independently.
• Help members increase their connections to their community.
• Usually for members who have had repeated or long term psychiatric hospitalizations.
Services for adults and some adolescents

Intensive community treatment (ICT)

- For members who need intensive support to live in the community.
- Includes medical psychotherapy, psychiatric assessment, medication management, and case management activities.
- Provided outside the clinic, hospital, or office setting.
- ICT utilizes a team of mental health professionals who are available either directly or on call 24 hours a day, seven days a week, 365 days a year.
Services for adults and some adolescents

Mental health skill building

• Assists member with maintaining community stability and gaining independence.
• Helps the member remain in the most appropriate, least restrictive environment.
• Works with member to improve functional skills.
• Coach on how to complete activities of daily living and use of community resources.
• Assists member with appropriate medication use.
• Educate and model healthy living habits to maintain optimum physical health.
• Provided on an individual basis.
Mental health case management

• The mental health case manager assists individuals who live with severe and persistent mental health disorders in gaining access to needed services including:
  – behavioral health
  – medical
  – social
  – educational
  – other services

• Case management does not include direct services to the member.
Crisis services

Crisis intervention services

• Immediate mental health assistance available 24 hours a day, seven days a week for members experiencing acute mental health dysfunction which require immediate clinical attention. This service may include pre-admission screening activities by a community services board (CSB) or behavioral health authority (BHA).

Crisis intervention is provided to:

– Prevent symptoms from worsening.
– Prevent injury to the member or someone else.
– Provide treatment in the least restrictive setting.
Crisis stabilization

- Direct mental health care to non-hospitalized individuals in an acute psychiatric crisis.
- Avoid psychiatric hospitalization or re-hospitalization.
- Provide a safe environment.
- Provide security for crisis intervention.
- Stabilize individuals in psychiatric crisis.
- Mobilize the community support system, family members, and others to assist the member with ongoing recovery.
- Crisis stabilization may be provided to members in their home or in a residential setting licensed by Department of Behavioral Health and Developmental Services (DBHDS) (Excluding institutions for mental disease).
Substance abuse services

Substance abuse residential treatment for pregnant women

• Comprehensive and intensive intervention services in residential facilities, other than inpatient facilities, for pregnant and postpartum women with serious substance abuse problems for the purposes of:
  – Improving the pregnancy outcome.
  – Treating the substance abuse disorder.
  – Strengthening the maternal relationship with existing children and the infant.
  – Achieving and maintaining a sober and drug-free lifestyle.
Substance abuse services

Substance abuse day treatment for pregnant women

• Comprehensive and intensive intervention services in a central location.

• Provided for two or more consecutive hours per day, which may be scheduled multiple times per week for pregnant and postpartum women with serious substance abuse problems.

• The purposes of this service are:
  – To improve the pregnancy outcome.
  – Treat the substance abuse disorder.
  – Strengthen the maternal relationship with existing children and the infant.
  – Achieve and maintain a sober and drug-free lifestyle.
Substance abuse services

Substance abuse case management

• Assists children, adults, and their families with accessing needed:
  – medical
  – psychiatric
  – substance abuse
  – social
  – educational
  – vocational
  – other services

• Member must have a substance abuse diagnosis and be receiving at least one substance abuse service.
Substance abuse services

Substance abuse crisis intervention.

• Immediately available 24 hours a day, seven days per week, to provide assistance to individuals experiencing acute dysfunction related to substance use which requires immediate clinical attention to:
  – Prevent exacerbation of a condition
  – Prevent injury to the member or others
  – Provide treatment in the least restrictive setting
Substance abuse intensive outpatient

- Two or more consecutive hours per day, which may be scheduled multiple times per week up to a maximum of 19 hours per week.
- Provided in a non-residential group setting.
- Members do not require the intensive level of care of inpatient, residential, or day treatment services, however do require more intensive services than outpatient services.
Substance abuse services

Substance abuse day treatment

• Two or more consecutive hours per day, which may be scheduled multiple times per week. The minimum number of hours per week is 20 and may be provided up to a maximum of 30 hours per week.

• Provided to groups in a non-residential setting.

• Substance abuse day treatment may not be provided concurrently with intensive outpatient or opioid treatment.
Substance abuse services

Opioid treatment

• Provided on a daily basis.

• In addition to the administration of the opioid medication, members are also provided with a full spectrum of substance abuse services including:
  – Individual and group counseling
  – Family therapy
  – Substance abuse education
  – Relapse prevention
  – Occupational and recreational therapy or other therapies
Intensive in-home services for children and adolescents

- Focused, time-limited behavioral health treatment related interventions.
- More intensive than outpatient clinic services.
- Take place primarily in the youth’s home.
- Address family dynamics and communication patterns.
- Intervene in problematic behaviors of the youth.
- Provide case management for the youth.
- Access to 24-hour emergency response resource for the family.
- At least one adult family member needs to be able to participate with the goal of keeping the child with the family.
Services for youth and their families

**Therapeutic day treatment**

- Includes psychotherapeutic interventions, medication education and mental health treatment.
- Development and implementation of individual behavior plans.
- Response to any on-site behavioral crisis.
- Operates a minimum of two hours per day either before, during, or after the normal school day.
- Provision of two or more therapeutic activities per day are required.
Services for youth and their families

Treatment foster care case management

• Coordination and facilitation of access to medical, social, educational, and other services.

• Provide treatment planning and monitoring of the treatment plan.

• Direct services to the youth are delivered primarily by treatment foster parents who are trained, supervised, and supported by professional child-placing agency staff.
Community-based residential services for children and adolescents (level A and B)

- Provide a stable environment.
- Assist with learning and practicing age-appropriate daily activities.
- Supervise youth on a 24 hour basis.
- Offer psycho-education, therapeutic supervision, and recreational activities.
- Assist youth with behaviors that prevent them from successfully living in the community.

- Level A and B also includes weekly individual psychotherapy services.
- Level B includes weekly group therapy.
Services for youth and their families

Residential treatment program (level C)

• Provision integrated comprehensive services for youth who would otherwise require acute inpatient treatment.

• Individual, family and group counseling as well as medical treatment are part of the treatment.

• This service is for the provision of intensive and planned therapeutic interventions.

• Interventions are active in nature and are related to the youth’s principle DSM diagnosis.

• There is clear need for 24 hour supervision and treatment due to the youth’s behaviors.
Services for youth and their families

Behavioral therapy

• A behavioral modification strategy (such as applied behavior analysis) that employs systematic interventions typically provided in the individual’s home.

• Services should increase communication skills and decrease maladaptive patterns of behavior.

• The family is trained to manage the individual’s behavior in the home using behavioral modification strategies.
Who may benefit from community mental health services?
Pete is a 63 year old member who has been living with schizophrenia for the last 40 years. He has had one long term hospitalization at Western State Hospital and has been living in an adult home for seven years. Pete had been doing well until his sister passed away. She had always checked in on him, made sure he had the care he needed and took him to the movies and out to dinner at least once a month. Since her passing, Pete has had two acute hospitalizations. Each time he was temporarily detained after being taken into custody for creating a disturbance at the local convenience store. Pete states that he wasn’t doing anything wrong that the store owner just had it in for him. The store owner says that Pete was harassing a customer asking them for change or cigarettes as they entered or left the store.

Currently, Pete is on a temporary detention order (TDO) with very similar circumstances. As part of discharge planning for Pete, what non-traditional service might be appropriate for him?
Kashi is a 15 year old who is currently hospitalized due to a suicide attempt. She has a history of cutting on her arms. Prior to this hospitalization, she had started cutting on the insides of her thighs. She has been in foster care since age nine when she was removed from her home due to founded sexual abuse by her mother’s live in boyfriend. Kashi’s mother refused to believe the sexual abuse and refused to give up the boyfriend. Parental rights were terminated three years ago and Kashi has been having a very hard time with the intimacy of living in a foster family. She has a maternal grandmother who keeps in touch, but is medically frail and cannot be a placement for Kashi.

What non-traditional service might be appropriate for Kashi?
What happens when you contact Magellan?

- Your call is answered by a customer service agent. When you identify yourself as being with one of the MCOs and that you have a member who is in need of or interested in the community-based behavioral health services, they will connect you with a care manager.
- The care manager will discuss the case and determine what service or services would best meet the needs of the member.
- By working together as a team, we can provide a more complete system of care to our mutual members.
Contact information

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