



# Medicaid Rehabilitation Option (MRO) Implementation Update

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# MRO Changes Update

- Implementation on July 1, 2010.
- Mental Health System Transformation framework based on recovery oriented care model.
- Person centered treatment planning and individualized care.



# DMHA Activities in Preparation for MRO Changes

- January and February shared process flow for service package assignments and information about required data elements with all CMHCs.
- Provided information to CMHCs regarding issues with Medicaid RID numbers (March - June).
- Invited CMHCs to send staff to DMHA to work on cleaning their data – 8 CMHCs did so.
- All CMHCs received monthly communications and specific data files that indicated potential issues with diagnoses and assessments (April-July).



# DMHA/OMPP Activities in Preparation for MRO Changes

- Tested the HP system process for service package assignment with four selected CMHCs (May-June).
- Amended MRO Rule after extensive collaboration with stakeholders to ensure changes were clinically and operationally sound.
- Developed public website which housed all master documents, presentations, training materials, and FAQs
- FAQs – 500+ questions collected and answered through [transformation@fssa.in.gov](mailto:transformation@fssa.in.gov).
- Completed 4 “Initial Loads” during July with HP – ensuring as many consumers as possible received packages based on assessments from January 2010 through June 2010.
- Developed and published new MRO Manual.



## DMHA/OMPP Activities in Preparation for MRO Changes - Provider Training and Technical Assistance (TTI Grant)

Activity	Dates
<p><b>MRO Train-the-Trainer</b> (4 regional trainings)</p> <p>Presenters: Sarah Jagger (OMPP) Debbie Herrmann (DMHA)</p>	<p>March 31 – April 1, 2010 April 5 – 6, 2010 April 12 – 13, 2010 April 26 – 27, 2010</p>
<p><b>Recovery-Based Care</b></p> <p>Presenter: Dr. Janis Tondora</p>	<p>July 26, 2010 July 27, 2010 July 28, 2010 July 29, 2010 9 am - 4 pm local time</p>
<p><b>Assessing and Treating Individuals with Co-occurring Disorders</b></p> <p>Presenter: Vicki Ley, MA, LMHC, MAC, ICAC II, CADACII</p>	<p><u>Webinar</u> June 10, 2010 10:00 – 12:00 (Eastern) Repeated from 1:00 – 3:00 (Eastern)</p>
<p><b>Recovery Outcomes</b></p> <p>Presenter: Maria O'Connell, Ph.D. Assistant Professor, Yale University, Department of Psychiatry Yale Program for Recovery and Community Health (PRCH)</p>	<p><u>Webinar</u> September 15, 2010 10:00am — 12:00pm (EST) or 2:00pm — 4:00pm (EST)</p>



# DMHA/OMPP Activities in Preparation for MRO Changes

## **MRO Service Package and PA Process**

Presenters: HP and Advantage

Webinar

May 18, 2010

10:00am – 3:00pm (Eastern)

## **Community, Consumer and Family focused Town Hall Meetings**

Facilitated by MHA

Presenter: Gina Eckart

May 18, 2010

May 24, 2010

May 27, 2010

June 2, 2010

June 14, 2010

June 17, 2010

July 14, 2010

## **Technical Assistance**

Multiple Presenters

Webinar

June 8, 2010

July 13, 2010

August 10, 2010

September 14, 2010

October 12, 2010

November 9, 2010

December 7, 2010

January 11, 2011

February 8, 2011

March 8, 2011



# MRO Service Package Assignments

## Preliminary System Wide Results

Total Consumers with an Open Episode in DARMHA*	104,873
Total Medicaid RID Numbers in DARMHA with necessary data*	57,246 (55%)
Total Service Packages Assigned as of 8/27/10**	44,994
Percentage of Medicaid Consumers with a Service Package**	79%

\*Data from DARMHA as of 7/31/2010.

\*\*This data does not include those consumers who have been prior authorized for MRO services.

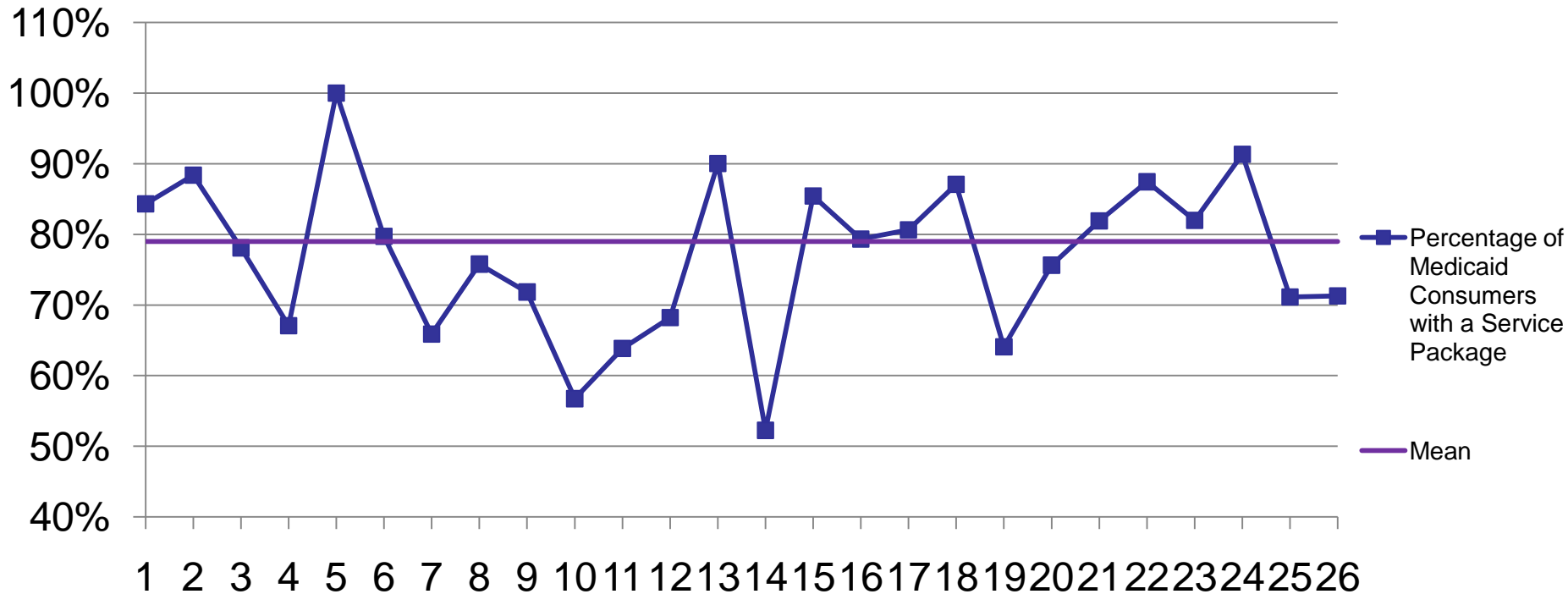
### ■ Provider data is approximate due to:

- Inclusion of consumers that may be inactive.
- Issues with the Medicaid RID number or eligibility, missing diagnoses or missing assessments.



# Percentage of Consumers with Medicaid Receiving a Service Package, by Provider

Mean = 79%; Highest = 100%; Lowest = 52%



Updated with July 31, 2010 counts of eligible



# MRO Service Package Assignments by Level of Need

Total Children	Total Adults	TOTAL
20,379	24,615	<b>44,994</b>

Service Package	3	4	5	5A
# Adults	8,929	10,798	3,942	946

Service Package	2	3	4	5
# Children	3,974	9,439	4,838	2,128



# Historical Unduplicated Number of Individuals Served with MRO

July 1, 2009 – December 31, 2009

- 46,096 Medicaid members received at least one MRO service



# Prior Authorization (PA) Scenarios

- **Scenario 1:** A member depletes service units within his or her MRO service package and requires additional units of a medically necessary MRO service.
- **Scenario 2:** A member requires a medically necessary MRO service not authorized in his or her MRO service package.
- **Scenario 3:** A member does not have one or more qualifying MRO diagnoses and/or LON for the assignment of an MRO service package, and has a significant behavioral health need that requires a medically necessary MRO service.
- **Scenario 4:** A member is newly eligible to the Medicaid program, or had a lapse in his or her Medicaid eligibility, and was determined Medicaid eligible for a retroactive period. In this case, a retroactive request for prior authorization is appropriate for MRO services provided during the retroactive period.



# Prior Authorization (PA) Data

	July	August	Total
# of PAs requested	425	1,758	2,210
Average # of (business) days to process	8.49	7.7	8.26

Contract requires an average turnaround time of less than 10 days.

# Number of MRO PA Requests, by Provider

	Number of MRO PAs	% of Total MRO PAs
1	15	0.68%
2	0	0.00%
3	21	0.95%
4	69	3.12%
5	127	5.74%
6	83	3.75%
7	54	2.44%
8	82	3.71%
9	26	1.18%
10	9	0.41%
11	4	0.18%
12	54	2.44%
13	51	2.31%
14	141	6.38%
15	100	4.52%
16	27	1.22%
17	9	0.41%
18	58	2.62%
19	9	0.41%
20	24	1.09%
21	1	0.05%
22	224	10.13%
23	105	4.75%
24	145	6.56%
25	42	2.22%
26	730	33.02%
<b>Grand Total</b>	<b>2210</b>	<b>100.00%</b>



# Number of PA Lines, by Status

As of 8/20/2010

	<b>Evaluation</b>	<b>Approved</b>	<b>Denied</b>	<b>Modified</b>	<b>Suspended</b>	<b>Total</b>
<b>July</b>	0	283	646	24	351	1,306
<b>August</b>	1,102	139	115	19	288	1,661
<b>Total</b>	1,102	422	761	43	639	2,967



# Prior Authorization Status Definitions

- **Evaluation:** This is a prior authorization that has been received, but no decision has been rendered yet.
- **Approved:** Prior authorization request was approved as submitted.
- **Modified:** Prior authorization request was approved, but required an adjustment to the dates or units requested from the originally submitted request.
- **Suspended:** The prior authorization received did not contain enough information to render a decision, and we need additional information from the provider. Providers will be notified via prior authorization decision letter of specific information needed in order to process request.
  - Additional information must be received within 30 days of suspension or request will automatically be denied.
- **Denied:** This prior authorization request has been denied and cannot be remedied.
  - Specific reason for denial is provided to the member and provider on the prior authorization decision letter.



# Breakdown of Denial Reasons

Denial Reason	# Lines Denied
No assessment on file	297
Duplicate request	276
Auto denial	106
H0031 additional units not allowed	72
Other	10
Total	761

**No PA lines have been denied due to lack of medical necessity.**



# Advantage PA Assistance

- Conducted an onsite orientation session for the following CMHCs:

Bowen Center	Warsaw, IN	May 10, 2010
Four County	Logansport, IN	June 17, 2010
Grant Blackford	Marion, IN	July 12, 2010
Gallahue	Indianapolis, IN	August 5, 2010

- In addition, Advantage has conducted outreach to assist the following CMHCs:

Aspire	Cummins
Adult and Child	Centerstone
Park Center	Oaklawn
Southern Hills	Porter Starke
Regional	Howard Regional
Hamilton Center	Madison Center



# Next Steps

- Quality Management
  - Service Package Utilization
  - Service Package Assignments
  - Prior Authorization
- Provider and Stakeholder Education and Support