Dr. Pamela Riley, Medical Director, Department of Health Care Finance (DHCF)
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Dr. Barbara Bazron, Director, Department of Behavioral Health (DBH)
Trina Dutta, Director of Strategic Management & Policy Division, DBH
October 20, 2020
Overview

- DHCF & DBH Background
- Behavioral Health Transformation Demonstration Background
  - IMD Waiver Opportunity
  - Implementation Experience
- Early Experience
- Next Steps
- Stakeholder Outreach Efforts
- Stakeholder Feedback
DHCF Vision, Mission and Strategic Priorities Over the Next 5 Years

- **Vision**
  - All residents in the District of Columbia have the supports and services they need to be actively engaged in their health and to thrive.

- **Mission**
  - The Department of Health Care Finance works to improve health outcomes by providing access to comprehensive, cost-effective and quality healthcare services for residents of the District of Columbia.

- **Strategic Priorities**
  - Building a health system that provides whole person care
  - Ensuring value and accountability
  - Strengthening internal operating infrastructure
Federal Medicaid policy changes in 2017 and 2018 created new opportunities to expand behavioral health services through Medicaid.

- Increasing Medicaid’s service array to improve coverage of a broader continuum of behavioral health treatment for individuals with SMI/SED/SUD.
- Advancing the District’s goals for reducing opioid use, misuse, and deaths outlined in the District’s Opioid Strategic Plan, Live.Long.DC.
- Supporting the District Medicaid program’s movement toward a more integrated health care experience that facilitates coordinated treatment of behavioral and physical health needs.
DBH Vision, Mission, and Values

- **Our Vision**
  The District of Columbia is a thriving community where prevention is possible and recovery from mental health and substance use disorders is the expectation.

- **Our Mission**
  The Department of Behavioral Health's mission is to develop, manage and oversee a public behavioral health system for adults, children and youth and their families that is consumer driven, community based, culturally competent and supports prevention, resiliency, recovery and the overall well being of the District of Columbia.

- **Our Values**
  Respect; Accountability; Recovery; Quality; Education; Caring
DBH FY21 Strategic Priorities

1. Continue System Redesign Process
2. Address the emotional and mental dimensions during and post COVID-19 pandemic
3. Enhance clinical guidance for treatment services
4. Lead the implementation of the District’s strategic plan to reduce opioid misuse, use and opioid related deaths
5. Strengthen the oversight and support for court ordered outpatient consumers
6. Address behavioral health disparities and social determinants of health to improve service delivery outcomes
DBH FY21 Budget Highlights....

- Total budget: $307,652,000
- Total Number of Staff: 1,390
- With our resource allocation we will:
  - Add 47 new schools to the School-based Behavioral Health Program
  - Expand Healthy Futures to 75 additional child development centers
  - Expand oversight and services for court-ordered individuals in outpatient settings
  - Use additional funding to support treatment and the environment of care at Saint Elizabeths Hospital
  - Conduct a feasibility study for a Sobering Center in the District
  - Continue implementation of the 1115 waiver services
  - Partner with DHCF to evaluate and monitor these services
Medicaid’s Historic Adult IMD Exclusion Limited Access

- Medicaid historically limited coverage of adult inpatient and residential services in Institutions for Mental Disease (IMD) under the “IMD Exclusion”
  - Non-elderly adults were barred from Medicaid-covered IMD treatment
  - Children and elderly adults over age 65 were only populations permitted

- In 2016, CMS began to allow limited coverage for MCO-enrolled beneficiaries
  - Allowed coverage of adult Medicaid MCO-enrolled beneficiary stays of up to 15 days per calendar month

- Other adult IMD stays not reimbursable by Medicaid
  - Fee-for-service beneficiaries and MCO members with stays longer than 15 days not covered – had to be reimbursed locally if needed
CMS 1115 IMD Waiver Guidance Created New Opportunities for the District’s Medicaid Program

- CMS released guidance allowing states to apply for 1115 Waivers to cover IMD treatment for beneficiaries with substance use disorders (SUD) or serious mental illness/serious emotional disturbance (SMI/SED)
  - District was first Medicaid program to receive combined waiver under new guidance
  - Authority started on January 1, 2020 and extends to December 31, 2024

- District received authority for 10 services, but authority limited to 2 years for non-IMD community-based services
## Waiver Services Beginning January 1, 2020

<table>
<thead>
<tr>
<th>Service</th>
<th>Proposed Go-Live Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>IMD Services for individuals aged 21-64</td>
<td>January 2020</td>
</tr>
<tr>
<td>Clubhouse</td>
<td>January 2020</td>
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<tr>
<td>Recovery Support Services (RSS)</td>
<td>January 2020</td>
</tr>
<tr>
<td>Psychologists/Other Licensed BH Practitioners</td>
<td>January 2020</td>
</tr>
<tr>
<td>Eliminate $1 Co-Pay for MAT</td>
<td>January 2020</td>
</tr>
</tbody>
</table>
## Waiver Services Phased In February-October 2020

<table>
<thead>
<tr>
<th>Service</th>
<th>Proposed Go-Live Date</th>
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</thead>
<tbody>
<tr>
<td>Supported Employment - SMI</td>
<td>February 2020</td>
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<tr>
<td>Supported Employment - SUD</td>
<td>March 2020</td>
</tr>
<tr>
<td>Trauma-Targeted Care (TREM, TST)</td>
<td>March 2020</td>
</tr>
<tr>
<td>Crisis Stabilization (CPEP, Psych Crisis Stabilization Beds, Mobile Crisis and Outreach Services)</td>
<td>June 2020</td>
</tr>
<tr>
<td>Transition Planning Services</td>
<td>October 2020</td>
</tr>
</tbody>
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Impact of COVID-19 Public Health Emergency and Medicaid Transition to Managed Care

COVID-19 Public Health Emergency

- DHCF authorized expanded telehealth including using home as originating site in early March
  - District seeing substantial increases in telehealth utilization – mostly for behavioral health services
- Provider concerns due to reductions in utilization – DC has approved increase for non-waiver SUD providers for services during PHE
- Requesting additional time for submission of State Plan Amendment changes – until July 1, 2021

Medicaid Transition to Managed Care

- No substantial changes expected for access to Waiver services:
  - Most services were already carved out of MCO contracts
  - Working with new MCOs on care coordination, IMDs, etc.
Upcoming Reporting to CMS – Public Documents

- Waiver Monitoring
  - Quarterly reporting
  - Annual reporting

- Waiver Evaluation
  - Evaluation Plan
  - Mid-Point Evaluation
  - Summative Evaluation (after waiver is complete)
What’s Next for the District’s Behavioral Health Transformation Demonstration?

- **Non-IMD Services Transitioning to Medicaid State Plan**
  - Creates a more permanent set of community-based services to support behavioral health needs along the continuum
  - Additional rules will set and clarify policy on many Demonstration services

- **Focus on Ensuring Access and Utilization of Services**
  - Will be monitoring waiver implementation for needs and challenges
  - Federally funded evaluation

- **Transition to Integrated Behavioral Health Services in Managed Care**
  - District Medicaid program will “carve in” some behavioral health services in FY22
Stakeholder Outreach To Date

- Public Forums: Four public forums March-May 2019
- Public Website: Published on April 12, 2019
- Stakeholder Implementation Calls: Convened six weekly stakeholder calls in January and February to receive feedback on implementation
- Stakeholder Meetings: Participated in 24 formal stakeholder meetings, both requested and targeted
- Inclusion in Structural Outreach: Included waiver discussion in regular calls with MCOs, behavioral health providers, MCAC, Behavioral Health Council, etc.
- Ongoing: Yearly Post-Award Forums on Demonstration implementation
How to Learn More

- Behavioral Health Waiver website includes frequently asked questions, guidance, other information:
  https://dhcf.dc.gov/1115-waiver-initiative
- Email dhcf.waiverinitiative@dc.gov to learn more and join the email list
- Points of Contact:
  Alice Weiss, alice.weiss@dc.gov, Department of Health Care Finance
  Trina Dutta, trina.dutta@dc.gov, Department of Behavioral Health
Questions and Comments

- Speakers invited to share their experiences with waiver services
  - Only available to those who signed up to deliver comments
  - Limited to 3 minutes each
- Q&A through the Chat function
- Reach out to host during webinar if you’d like to speak and didn’t pre-register
  - Request that questions and comments be limited to 3 minutes each