



**MENTAL HEALTH AND SUBSTANCE ABUSE SERVICES BULLETIN**

**COMMONWEALTH OF PENNSYLVANIA  
DEPARTMENT OF PUBLIC WELFARE**

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OMHSAS-06-07

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**EFFECTIVE DATE:**

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**SUBJECT:**

Behavioral Health Fee For Service (BH-FFS) Transfer from Office of Medical Assistance Programs (OMAP) to Office of Mental Health and Substance Abuse Services (OMHSAS)

**BY:**

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**SCOPE:**

County Mental Health/Mental Retardation Administrators  
County Human Services Administrators  
County Drug and Alcohol Administrators  
Behavioral Health Providers  
Behavioral Health Managed Care Organizations

**PURPOSE:**

To inform behavioral health providers and stakeholder groups of the transfer of functions of the Behavioral Health Fee-For-Service (BH-FFS) delivery system from the Office of Medical Assistance Programs (OMAP) to the Office of Mental Health and Substance Abuse Services (OMHSAS).

**BACKGROUND:**

Previously, the Office of Medical Assistance Programs (OMAP) held the responsibility for the funding of, as well as functions related to, the provision of behavioral health services in the Medical Assistance (MA) fee for service system.

In order to ensure a more comprehensive and coordinated approach to the delivery of behavioral health services across HealthChoices and BH-FFS, the OMAP and OMHSAS have mutually agreed to the transfer of BH-FFS functions and authority from OMAP to OMHSAS.

## **DISCUSSION:**

In order to improve the care provided to Medical Assistance (MA) consumers, improve the efficiency of internal operations, enhance cost containment activities, and assure coordination of BH-FFS, HealthChoices, and county programs, OMAP and OMHSAS have agreed to the transfer of the BH-FFS functions to OMHSAS. The following are highlights related to the transfer:

- There is no additional or increased responsibility to county agencies, BH providers, or consumers with the transfer of BH-FFS functions from OMAP to OMHSAS. The transfer of functions is an internal seamless process between the two program offices that will not create any changes in the role of the counties regarding authorization of services. Where appropriate, staff have been reassigned with the transferred function.
- Pharmacy services will remain with the physical health plans and with OMAP.
- No changes have been made to the fair hearing process for consumers in the BH-FFS service delivery system.
- The Deputy for OMAP will serve as the signatory of all Physical Health Bulletins and the Deputy for OMHSAS will serve as the signatory of all Behavioral Health Bulletins. On occasion, there may be bulletins which will require the signature of both deputies as needed and appropriate.

The information below outlines the program office responsibilities. While some functions will continue to be the responsibility of the specified program office, other functions are newly acquired responsibilities.

## **PROVIDER ENROLLMENT:**

### **Current OMHSAS responsibilities:**

- Establish and review provider or service qualifications and determine provider or service eligibility for community support services, HC supplemental and HC out-of-network services.
- Assist OMAP with enrollment backlogs.

### **Current OMAP Responsibilities:**

- Perform data entry for outpatient clinic, partial hospitalization, and behavioral health rehabilitation services providers, as well as psychologists, psychiatrists and other individual practitioners.
- Perform expedited enrollments.

### **New OMAP Responsibilities:**

- Complete data entry for enrollment of HC supplemental and HC out of network providers and community support services providers, including BH Intensive Case Management, Resource Coordination, Crisis Intervention and Family Based Mental Health Services.

## **BILLING and PAYMENT:**

### Current OMHSAS Responsibilities:

- Maintain decision-making authority relating to payment rules and other policies that impact on payment to BH-FFS providers.
- Conduct manual review of suspended claims that cannot be resolved by EDS.,

### Current OMAP Responsibilities:

- Process and pay invoices through PROMISe.

### New OMAP Responsibilities:

- Process 180-day claims for Community Support Services.

## **RATE SETTING:**

### Current OMHSAS Responsibilities:

- Participate in the negotiation process and approve rates for private psychiatric and acute care units, drug and alcohol (D&A) units and hospitals.

### New OMHSAS Responsibilities:

- Research and analyze BH Rehabilitation Services (BHRS) and Residential Treatment Facilities (RTF) fees; review existing fees to assure appropriateness; and consistency with State Plan rate setting methodology, recommend fees for new services or changes.
- Update claim reference file.
- Publish necessary bulletins, notices, etc.
- Establish fees for all BH providers enrolled in the MA Program. Set fees for RTF, BHRS, and Non-Fee-Schedule services.

### Current OMAP Responsibilities:

- Perform fee setting tasks for private psychiatric and acute care units and D&A units of hospitals.
- Prepare rate analysis reports evaluating the proposed budget impact of requests where private psychiatric and D&A free-standing hospitals and units of hospitals request individual rate increases outside of the context of rate agreement discussions.
- Establish interim and final rates for private psychiatric and D&A units of hospitals.
- Calculate Disproportionate Share Hospital Payments and Tobacco payments.

### Collaboration between OMHSAS and OMAP:

- Collaborate jointly on rate setting process for psychiatric hospitals and psychiatric units, as well as revisions to the MA Program fee schedule.

## **UTILIZATION REVIEW/AUTHORIZATION:**

### New OMHSAS Responsibilities:

- Review and handle prior authorization of services.
- Authorize targeted social work and case management services.
- Interpret and apply program regulations and utilization review criteria.
- Review overall program utilization to determine appropriateness of service utilization.
- Develop or contract out for clinical review criteria for utilization review/prior authorization.
- Process Appeals and Reviews for benefit limit exceptions.
- Track and report children's services data.\

## **CERTIFICATION REVIEWS OF RESIDENTIAL TREATMENT FACILITIES:**

### Current OMHSAS Responsibilities:

- Conduct reviews (along with the Office of Children, Youth and Families) of all Residential Treatment Facilities (RTFs) on an annual basis to evaluate program descriptions for compliance with Departmental requirements.

### Current OMAP Responsibilities:

- Certify Residential Treatment Facilities.
- Ensure compliance with specific regulations governing participation in the MA Program (55 Pa. Code Section 1101).

## **SERVICE DESCRIPTION REVIEWS**

### New OMHSAS Responsibilities:

- Review and approve Service Descriptions in accordance with State and Federal regulations.

## **POLICY AND REGULATORY DEVELOPMENT**

### Current OMHSAS Responsibilities:

- Prepare, finalize and maintain State Medicaid Plan for BH and develop and maintain program requirements for the HealthChoices Behavioral Health program.
- Maintain regulatory responsibilities for drug and alcohol non-hospital rehabilitation services.

### New OMHSAS Responsibilities:

- Research; analyze, evaluate, and recommend program changes.
- Submit public notices for publication in PA Bulletin.
- Develop regulations and bulletins.
- Review, analyze, and interpret Federal and State legislation; policy clarification and program bulletins.
- Coordinate BH services with other programs and for persons with dual diagnosis.
- Respond to inquiries currently submitted to OMAP website.
- Perform administrative functions, such as implementing new program provisions, rules or quality of care changes; defining service/program requirements; determining the amount, duration and scope of services; submitting reports to the Centers for Medicare and Medicaid Services (CMS) and working with CMS regional staff.
- Assume sole responsibility for interpretation and continual development of the following regulations:
  - Chapter 1151, Inpatient Psychiatric Services
  - Chapter 1153, Outpatient Psychiatric Services
  - Chapter 1223, Outpatient Drug and Alcohol Clinic Services
  - Residential Treatment Facility (RTF) services currently governed by Class IV Bulletins
  - Behavioral Health Rehabilitation Services (BHRS) currently governed by Class IV Bulletins

Current OMAP Responsibilities:

- Submit changes to State Medicaid Plans to CMS; track State Medicaid Plan through the internal approval process.
- Coordinate input from OMHSAS and prepare and promulgate regulations and policies relating to provision of pharmaceuticals in the MA program.
- Review, revise and process the inpatient rehabilitation hospital regulations (55 PA Code Section 1163) which govern the provision of medical rehabilitation and D&A rehabilitation services within these facilities.
- Maintain the general regulations governing the MA Program found at 55 PA Code Section 1101 and 1150. Future changes to these regulations will be coordinated with OMAP, OMHSAS and other relevant program offices.

**QUALITY ASSURANCE:**

Current OMHSAS Responsibilities:

- Develop outcome measures.
- Establish/review quality assurance standards and ensure programs meet standards.
- Manage the IPRO quality assurance contract and continue to exercise independent operational control and manage the work within the external quality review contract (IPRO) as it relates to behavioral health (BH) activities in the BH-MCO program.

Current OMAP Responsibilities:

- Manage the IPRO quality assurance contract and continue to exercise independent operational control and manage the work within the external quality review contract (IPRO) as it relates to physical health (PH) activities in the PH-MCO program.

**PROVIDER TRAINING AND INQUIRY**

Current OMAP Responsibilities:

- Respond to provider billing inquiries through the provider hotline and develop/conduct provider training.

Current OMHSAS Responsibilities

- Develop training curriculum as appropriate for contracted staff to deliver to providers.

**PROGRAM INTEGRITY**

Current OMAP Responsibilities:

- Prevent and detect fraud and abuse.
- Identify and investigate cases of suspected fraud and abuse.
- Review provider self-audits.
- Maintain/operate the fraud and abuse hotline.

**COMMENTS AND QUESTIONS REGARDING THIS BULLETIN SHOULD BE DIRECTED TO:**

Office of Mental Health and Substance Abuse Services, Bureau of Policy and Program Development, P.O. Box 2675, Harrisburg, PA 17105. General Office Number 717-772-7993.