

STATE OF MARYLAND DHMH

Maryland Department of Health and Mental Hygiene

Behavioral Health Administration • Spring Grove Hospital Center • Dix Building 55 Wade Avenue • Catonsville, Maryland 21228

Martin O'Malley, Governor – Anthony G. Brown, Lt. Governor – Joshua M. Sharfstein, M.D., Secretary Gayle Jordan-Randolph, M.D., Deputy Secretary - Brian M. Hepburn, M.D., Executive Director

MEMORANDUM

To: Behavioral Health Service Providers, ValueOptions, CSAs, LAAs, LHDs

From: Daryl Plevy, J.D. Deputy Director, Behavioral Health Administration

Date: December 10, 2014

Re: Changes in Uninsured Eligibility Effective January 1, 2015

This alert outlines the changes to uninsured eligibility workflow for mental health providers only effective January 1, 2015. For substance related disorders (SRD), providers will use a similar workflow for data entry purposes but will not be connected to claims payment through ValueOptions at this time.

The uninsured span will be reduced from six months to three months to proactively verify more frequently that consumers continue to meet the criteria for uninsured eligibility. Providers enter the information regarding an individual's uninsured eligibility through ValueOptions' system.

In order to request an uninsured eligibility span, the provider is required to document and verify the person meets all six uninsured eligibility criteria. The criteria are:

- 1) The individual requires treatment for behavioral health diagnosis covered by the Public Behavioral Health System (PBHS);
- 2) The individual is under 250% of the Federal Poverty Level (FPL), and not covered by Medicaid (MA) or other insurance;
- 3) The individual has a verifiable Social Security number;
- 4) The individual is a Maryland resident;
- 5) The individual has applied to: Medicaid; the Health Care Exchange; Social Security Income (SSI) or Social Security Disability Income (SSDI), if they have an illness/disability for a period of 12 months or more (or are expected to have an illness/disability for a period of 12 months or more); and
- 6) The individual meets the U.S. citizenship requirement.

Exceptions to the documentation requirement may be made by BHA under extenuating circumstances. The exceptions are related to the type of crisis and type of service. If a consumer is in immediate need for services (such as acutely suicidal) or the consumer's symptoms prevent that person from being able to provide information and they are being seen by an Assertive Community Treatment team, mobile crisis team, residential crisis program, or other outpatient setting, documentation criteria may be waived.

If an individual is in immediate need of services, the consumer will be given an uninsured span of one month. If, at the end of the first month, the consumer still is in crisis and documentation is still not available, the provider may request another month by completing the registration for the uninsured span again. If, at the end of the second month, the provider again requests an uninsured eligibility span without the documentation, the request will be denied and the provider must submit a written request to the Core Service Agency (CSA) to demonstrate the need for continued services in spite of the missing documentation. If the CSA approves, then an uninsured eligibility span is established. If at any point during this process, the provider updates the uninsured consumer's eligibility record with the missing documentation, the uninsured eligibility span is established for three months from the initial begin date of the uninsured span.

Additionally, there are other exceptions to documentation if the consumer meets other criteria. These criteria are:

- If the individual meets all of the above criteria except item 2 and one of the following:
 - o Under age 19
 - Released from prison, jail or Department of Corrections facility within the last three months
 - Is pregnant
 - o Is an injection drug user
 - o Has HIV/AIDS
 - Was discharged from a Maryland-based psychiatric hospital within the last three months
 - Was discharged from a Maryland-based medically monitored Residential Treatment Facility within the last 30 days (American Society of Addiction Medicine Level 3.7)
 - o Is requesting services required by HG 8-507 order or referred by drug or probate court
 - o Is receiving services as required by an order of Conditional Release
- If an individual meets all criteria except items 2 and 5 and is currently receiving SSDI for mental health reasons.
- If an individual meets all criteria except items 2 and 4 and is homeless within the state of Maryland
- If an individual meets all criteria except items 2, 3 and 5 and is a veteran
- If a Non-US citizen, the exception process will be used which requires approval from the CSAs

For mental health consumers this will result in an uninsured span which will determine payment by ValueOptions.

For SRD consumers, this will result in an uninsured span for data collection purposes only. No funding for uninsured consumers is available with ValueOptions at go-live. Providers may obtain funding for uninsured services from local grants.

BHA is requiring providers to maintain documentation in the medical record to validate the individual's uninsured eligibility. ValueOptions and BHA will be monitoring requests for uninsured eligibility spans and providers without documentation may be audited. Failure to maintain all supporting documentation may result in a retraction of funds. A list of the types of documentation that should be submitted is attached. Thank you.