

Behavioral Health Transition Workgroup Meeting 7-17-13

Attendees

Neil Pessin	CCMP/VNSNY
Peggy Leonard	Hudson Health Plan
Lynda Hohmann	DOH
Linda Kelly	DOH
Rosemary Cabrera	Community Health Care Network
Karen Smith Hagman	Emblem Health
Laura Eannace	Central New York Health Home Network
Charles King	Housing Works
Stephen Rosenthal	BAHN
Michelle McElroy	Southern Tier AIDS Program
Kevin Muir	CAMBA
Jim Spink	Beacon Health Strategies
Bernadette Kingham-Bez	St. Vincent's Hospital Westchester

Linda Kelly presented *Behavioral Health Transition to Medicaid Managed Care*. The .ppt has been sent to attendees.

Q & A and Discussion

- Regarding the HARP's RFQ process, plans will be able to apply to become a HARP or to cover carved out behavioral health services without HARP designation.
- DOH will continue to pay the older rates for these carved out services and will phase in the new rates over a roughly 2 year period, similar to the converting TCM / HH phase-in.
- If a plan applies to offer behavioral health benefits rather than HARP designation, will their HARP eligible patients be transferred to a HARP?
 - An individual can choose to opt out of a HARP, but the state will passively enroll eligible individuals and the patient will have to opt out.
- Concern was expressed that the HARP model has been more or less solidified, without the input of key stakeholders. Where might this group be helpful or directive?
 - There have been many state workgroups, including the MRT BH workgroup, and DOH is now in the process of gathering input from other stakeholders. There is a monthly workgroup meeting with managed care plans, and invitations to this will be sent out.
- Will this be a competitive process for plans?

- DOH does not have a set limit of HARP's and hopes that many plans apply.
- Hope was expressed that DOH take an active role in developing some rules of the road for how plans will contract with health homes; currently there are no guiding principles on how plans should direct patients to health homes.
- Concern was also expressed about the phasing out of the legacy rate and the eventual negotiation of rates with plans. Will HARP continue the legacy rate? Is there a timeline of when it will be phased out?
 - At this point Linda does not know and will consider and bring back to colleagues.
- There was some confusion as to whether FIDA patients will be HARP eligible. Linda will get back to us on this.
- Group will schedule another meeting soon. In the meantime, it would be helpful if DOH could provide the group with a schedule of when they will be speaking about HARP with other parties.