MAPP HHTS
Weekly Webinar

July 26, 2016

MAPP HHTS Updates

MAPP HHTS Updates Effective Dec. 1, 2016

- Health Home **HML** rates will go into effect on **December 1, 2016** (instead of previous September 1, 2016 effective date). Prior to submitting HH PMPM claim to Medicaid for dates of service on or after 4/1/16, **HML information MUST BE SUBMITTED** to MAPP HHTS.

- Direct billing by converted CMAs **will end as of December 1, 2016 dates of service** (instead of previous September 1, 2016 effective date)

- **MCO Capitation Payments**

  - In December, MCO capitation rates (Mainstream, HARP and HIV/SNP) will include estimated HH PMPM for Dec. 2016 - March 2017 service dates, plus up to one additional month of payments

  - MCOs will no longer submit HH PMPM to Medicaid. Once member billing instance added to MAPP HHTS, MCO will pay HH using pre-payment included on Dec 2016 capitation payment.

  - MORE details to follow in subsequent webinar

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HARP Definitions

MAPP HHTS HARP Definitions (as of July 2016)*

- A member that is enrolled in a HARP/SNP **AND** has an RE code of H1-H6 is considered HARP Enrolled in MAPP HHTS.

- A member that **does not** have an RE code of H1-H6 **BUT** has an RE code of **H9** is considered HARP Eligible in MAPP HHTS.

- A member that **does not** have an RE code of H1-H9 is neither HARP eligible nor HARP enrolled

- HARP flags within the system contain different values. Some spell out eligible/enrolled/blank and others use the logic below:
  - **HARP Y/N/E** fields – Y: HARP eligible; E: HARP Enrolled; N: neither eligible nor enrolled.
  - **HARP El/En/Blank** fields - El: HARP eligible; En: HARP Enrolled; Blank: neither HARP eligible nor HARP enrolled.

As of service date for billing. Otherwise, as of transaction date.

Upstate HARP Rollout

Upstate: The HARP process for eligible members

- If a member that is currently enrolled in a non-HARP MCP is HARP eligible:
  - When non-HARP MCP logs into MAPP HHTS the HARP flag will be set to 'Y' for eligible
  - During passive enrollment, DOH will send member a letter identifying the member as HARP eligible and allowing the member time to opt out of HARP.
  - If the member doesn't opt out and letter is successfully delivered Medicaid will transfer member to the HARP MCP MMIS ID. Member will be displayed as enrolled in HARP and will be listed as 'E' indicating that the member is HARP enrolled **(either July 1, 2016 or August 1, 2016)**
  - If the member does opt out or the letter is return undeliverable the member will stay with the non-HARP plan as HARP eligible

- If HARP eligible member is fee for service (FFS):
  - During the passive enrollment process described above, FFS member will have HARP flag 'Y' indicating that the member is HARP eligible.
  - Once member is passively enrolled, the member will be displayed as enrolled in HARP and will be listed as 'E' indicating that the member is HARP enrolled. If member opts out, member will remain HARP eligible as FFS member.

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HARP Enrolled – MCP Perspective

- If a member who was previously active under your non-HARP MMIS ID becomes HARP enrolled:
  - If a member has an active assignment and no segments:
    - Member will change MCP enrollment status from your non-HARP MMIS ID to your HARP MMIS ID. This will end any HH/CMA assignments, regardless of the assignment status.
    - The member will be removed from your non-HARP MMIS ID assignment file (will be included on your non-HARP Past Assignment Download file) and added to your HARP MMIS ID assignment file.
    - Member will need to be assigned back downstream
  - If the member has an active outreach or enrollment segment:
    - Member's MCP enrollment will change to the HARP MMIS ID
    - Both the non-HARP and HARP MMIS ID will see the same segment spanning from the time the member entered the segment (prior to HARP enrollment) to when the member is end- dated (after HARP enrollment)

HARP Enrolled Members – HH/CMA Perspective

- If a member has an active assignment with you sent from a non-HARP MCP:
  - The member's assignment will be ended when the member is enrolled into the new HARP MCP. The member will be included on your Past Assignment Download file.
  - The HARP MCP must reassign the member downstream

- If a member has an outreach or enrollment segment that is currently open and was sent from a non-HARP MCP:
  - Your segment with the member won't change
  - Member is now associated with new HARP ID and is listed as HARP enrolled instead of HARP eligible.

Upstate HARPs

- New HARP IDs set up with corresponding non-HARP gatekeepers. Gatekeepers for new upstate HARP ID should add/remove users under new ID as necessary

- DOH is in the process today of setting up new upstate HARP IDs with appropriate HH relationships

- DOH has requested contact information from new upstate HARP IDs. This contact information will be used to reach out to upstate HARPs to discuss Community Mental Health Assessment feed, among other related topics.

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