Guide to Edits included in the Transition of School-Based Health Center Benefit and Population into Medicaid Managed Care Version 2.0: <u>Transition of School Based Health Center Benefit and Population into Medicaid Managed Care</u>

Note: New text added to version 2.0 has been underlined.

Update Made	Updated Text	Location
Added clarification that a single provider in the SBHC can be a PCP, not the SBHC as a whole.	5) The MMCP and SBHC will develop a process to share information relating to the provision of services to children. The MMCP will work with the SBHC, and the child's PCP (if not the a provider located in the SBHC), to assist in promoting wellness and ensuring that all children receive recommended well child visits and other needed services.	Pg. 4
Added clarification that retrospective payment will apply from the date the application is received by the MMCP and not the date of FFS enrollment.	a) the MMCP will reimburse the SBHC/SBHC-D retrospectively for covered services provided from the date the application is received by the MMCP provider's Medicaid fee for service (FFS) enrollment begin date as approved by OHIP to until the date network participation is established, without regard to timely requirements; or	Pg.5
Added clarification that a single provider in the SBHC can be a PCP, not the SBHC as a whole.	2) Providers located in SBHCs will be listed as approved sites for care in the MMCP provider directory and promotional materials using model language provided by the Department. 6) The designation of individual providers within SBHCs as PCPs is permitted and will be determined on a case-by-case basis between the MMCPs and the SBHC operating facilities. No provider in an SBHC will be required, however, to be a PCP as a condition of participation. The MMCP designating an SBHC provider as PCP must ensure the SBHC provider maintains the responsibilities similar to those of other network PCPs. Those responsibilities include, but are not limited to, disease management, referrals, hours of availability, and access to care on a full-year basis.	Pg. 7