

1115 SUD Demonstration: utilization management overview question & answer

The Behavioral Health Division (BHD) hosted an 1115 SUD Demonstration Utilization Management Overview webinar. BHD gathered questions during the webinar and compiled the answers below. If you have any additional questions email, 1115demonstration.dhs@state.mn.us.

Question	Answer
Does MA FFS = PMAP?	No, MA FFS stands for Medical Assistance (MA) fee-for-service (FFS). This is a client enrolled in Medical Assistance, but not enrolled in a Managed Care Organization, also called Prepaid Medical Assistance Program (PMAP). Most MA enrollees are enrolled in a MCO/PMAP.
Are we only required to submit BHF funded clients for utilization management and review and not PMAP?	<p>Only Behavioral Health Fund (BHF) and fee-for-service (FFS) MA funded clients should be submitted to Kepro for utilization management and review.</p> <p>PMAP funding clients should be submitted to their respective MCO's for utilization management. DHS is working to align the MCOs utilization management with Kepro.</p>
Do we just have to submit clients who are funded through the behavioral health fund or direct access through MA to Kepro?	<p>No, clients funded through FFS MA or BHF who enter treatment in 1115 Demonstration providers through Service Agreements/Rule 25 Placements must also be submitted to Kepro.</p> <p>In order to be American Society of Addiction Medicine (ASAM) compliant, 1115 Demonstration locations must be completing Comprehensive Assessments and submitting the documentation to Kepro.</p>

Question	Answer
<p>Do we submit a Treatment Plan Review weekly for the duration of a client's treatment?</p>	<p>Treatment Plan Review submissions to Kepro are based on the ASAM Levels of Care. Treatment plan reviews should be submitted as follows:</p> <ul style="list-style-type: none"> • Level 1.0 Outpatient – quarterly • Level 2.1 Intensive Outpatient – monthly • Levels 3.1, 3.3, 3.5 – weekly • Levels 3.2 WM 3.7 – per episode
<p>When would the actual treatment plan need to be submitted to Kepro? Is this 5 service-provided days or five calendar days? Is this 5 service days not inclusive of the initial service?</p>	<p>The first year of utilization management is focused on technical assistance. Submission timelines have not been finalized.</p> <p>Kepro recommends submitting documentation as soon as possible, so they can give feedback while clients are still receiving services. This helps assure all proper documentation and referrals can be followed up on with clients. In the future, Kepro recommends aligning treatment plan submissions with Minnesota Statute 245G.06.</p> <p>However, DHS and Kepro will be seeking provider feedback before finalizing submission timelines.</p>
<p>We have received approval letters after submitting the Comprehensive Assessment, Assessment & Placement Grid, Individual Treatment Plan, and questionnaire. The approval letter asks that we continue to submit Treatment Plan Reviews and Discharge summary once available. So once they are approved, do we continue to submit?</p>	<p>Yes, providers should continue to submit required documentation until the client is discharged.</p>
<p>Please clarify "client" and "provider" on this slide. thanks</p>	<p>In slide 12 “Utilization management process” of the Utilization Management Overview webinar, “clients” means a person enrolled in Medical Assistance or the Behavioral Health Fund receiving treatment at a 1115 Demonstration enrolled SUD location. “Provider” means the treatment location giving the client’s SUD treatment.</p>
<p>Can you send the link for the Kepro’s 1115 UM training?</p>	<p>Kepro’s 1115 Demonstration trainings are available on the DHS/Kepro website. They are offered the fourth Friday of every month.</p>

Question	Answer
<p>Being that the Kepro approval process may take some time...10 days to get documentation in for residential and potentially another 15 days if incomplete and needing to be resubmitted, do you recommend holding on billing until approval is received?</p>	<p>Kepro’s process is currently separate from billing. They are conducting post-payment reviews. Utilization management focuses on clinical documentation and medical necessity, not billing.</p>
<p>We currently have been submitting IMD notices to the county and recently have not been able to submit on Kepro because of this.</p>	<p>Please refer to Bulletin #21-21-11 and BHD e-memo #21-20 for 1115 Demonstration process updates. Providers enrolled in the 1115 Demonstration should be writing “1115 Provider” at the top of County Notice of IMD Status documents before submitted to the SUD County worker. Please email questions or concerns to 1115demonstration.dhs@state.mn.us.</p>
<p>Are clients not supposed to have IM status for their MA in the 1115 Demonstration?</p>	<p>Yes, Institutions for Mental Disease (IMD) locations enrolled the 1115 Demonstration should keep clients on major program MA for the duration of treatment.</p> <p>Please refer to Bulletin #21-21-11, BHD e-memo #21-20, and the 1115 Billing Overview webinar for more information.</p>