



August 10, 2012

Jay Easterling
ODJFS Office of Contracts and Acquisitions
30 East Broad Street
Columbus Ohio 43215

Re: ICDS RFA# JFSR1213-07-8038

Dear Mr. Easterling,

I am writing in response to your August 8th letter requesting further information on our ICDS RFA claim of behavioral health experience in Ohio Medicaid.

CareSource has operated in the Ohio Medicaid managed care program since 1989. Through our entire history we have contracted a private behavioral health network and provided a full range of behavioral health services for our members. This network provides access for the behavioral health benefits we directly manage and as an alternative to the services within the public community mental health system. Our current statewide network includes 1,733 behavioral health professionals (psychiatry, child psychiatry, psychology, child psychology, social work, licensed professional clinical counselor) and 67 psychiatric facilities. In addition, we are contracted with 364 physicians credentialed to prescribe and manage Suboxone for opioid maintenance therapy.

While the community mental health benefit is carved out of OH Medicaid managed care, the health plans are directly responsible for a broad range of behavioral health services including inpatient and outpatient hospital, inpatient detox, outpatient clinic, psychiatric, physician, psychologist, and pharmacy services. We also have the responsibility to ensure access to and coordinate with the community mental health system for services provided to our members. We have established relationships with the community mental health centers (CMHCs) for collaborative case management, care transitions, pharmacy management and provide CMHCs with access to a comprehensive member profile tool to support integrated care.

We are also contractually obligated to provide the full range of services per Appendix G (2)(b)(iii) of the ODJFS Provider Agreement for Managed Care Plans (MCPs). Specifically stated in the Provider Agreement, "MCPs must ensure that members have access to all medically-necessary behavioral health services covered by the FFS program and are responsible for coordinating those services with other medical and support services, including the publicly funded community behavioral health system.....MCPs must provide Medicaid-covered behavioral health services for members who are unable to timely access services or are unwilling to access services through the publicly funded community behavioral health system."

Therefore, we review all requested services for medical necessity and do cover all benefits traditionally also available in the public system within our contracted provider network. Attached is the behavioral health section of the covered services grid available on our web site which details our coverage and prior authorization requirements. The only service we do not cover is institution mental disease (IMD) or freestanding psychiatric residential treatment facilities as this is not a Medicaid covered benefit for ages 22-64 and is directly reimbursed by ODMH for ages 21 and under and 65 and older.

Given one of the RFA protests specifically referenced partial hospitalization, we pulled claims data for this service (CPT code 90899 and unbundled codes including 90801, 90804-07, 90816-19, 90846-7, 90853, 90857, 90862) and we covered 103 unique members for partial hospitalization and intensive outpatient in 2009, 141 in 2010 and 142 in 2011.

Please let me know if you have questions or need additional information about CareSource's comprehensive behavioral health experience in the Ohio Medicaid managed care program.

Sincerely,



Janet Grant

Executive Vice President, External Affairs

Corporate Compliance Officer

937.531.2021

Service/Procedure	Covered	Not Covered	Prior Auth Required	Comments
<p>Mental Health</p>	<p>✓</p>	<p>✓**</p>	<p>✓*</p>	<p>Covered</p> <p>General Hospital - Inpatient mental health Outpatient services requires self-referral to community mental health and psychologists, Licensed Independent Social Worker (LISW) and Licensed Professional Clinical Counselor (LPCC).</p> <p>*Partial Hospital Program (PHP)/Intensive Outpatient Program (IOP) requires prior authorization.</p> <p>PSYCHIATRY No benefit limit. Referral required from the PCP for psychiatrist visits unless being seen at a community mental health center.</p> <p>PSYCHOLOGY: Limit of 25 psychology (outpatient therapy) visits per calendar year. Providers include Licensed Independent Social Worker (LISW) and Licensed Professional Clinical Counselor (LPCC).</p> <p>PSYCHOLOGICAL TESTING (includes Development and Autism Testing) Covered Outpatient services is limited to 8 visits per calendar year. Inpatient services is limited to 1 visit per calendar year. ER services is limited to 1 visit per calendar year.</p> <p>**PSYCHIATRIC RESIDENTIAL TREATMENT CENTERS Not Covered</p> <p>This is funded through ODMH. Refer members to Ohio Department of Mental Health (ODMH), Institution for Mental Disease (IMD) or Freestanding Psychiatric Facilities - Inpatient* CareSource is responsible for reimbursement of professional fees only for members admitted to these facilities (per below guidelines). The confinement (inpatient) charges are billed to the state.</p> <p>*Belmont Pines *Ohio Hospital for Children and Adolescents *Windsor/Laurewood</p> <p>*Please note that this benefit is limited to members 21 years of age and under and/or 65 years of age and over. If the member is between 22 and 64 years of age, services are non-covered Medicaid services and the professional fees are not the responsibility of CareSource.</p>