TRAINING FOR PARTICIPATION IN THE INTERIM MANAGING ENTITY
Introduction

• In January 2015, the Department of Human Services (DHS) announced that it would be contracting with University Behavioral HealthCare (UBHC) on the implementation of the Interim Managing Entity (IME) for addiction services.
Introduction

• The IME has been designed to provide:
  • 24/7 availability for callers
  • screening
  • referral using the UBHC Service Capacity Management System (SCMS)
  • care coordination to assist individuals to enter care and move through the continuum
  • utilization management activities which include authorizing and monitoring levels and duration of care
  • outlier management
  • some network management activities
Introduction

• UBHC will be screening for NJ FamilyCare/Medicaid and DMHAS consumer financial eligibility

• UBHC will be verifying NJFamilyCare consumer enrollment
Scope - Rates

• State Fiscal Year 2016 (July 2015) interim rate change for some services
  • Rates were published on June 3, 2015 through a communication to all providers
  • Rates can be found online at: http://www.state.nj.us/humanservices/dmhas/initiatives/managed/
• Other substance abuse treatment rates to remain the same
• Rate changes resulting from the Myers & Stauffer rate study are not included in this interim step
Phase I

• The IME will launch in Phases
  • In July 2015, DMHAS, NJ FamilyCare/Medicaid, and UBHC are launching Phase I, which will include:
    • 24/7 availability for callers
    • screening
    • referral including the use of the UBHC Service Capacity Management System (SCMS)
    • care coordination
    • limited utilization management activities
    • requirement for prior authorizations of consumer assessments for state and federal block grant funds
Phase I

- Phase I will introduce changes to NJSAMS
  - Changes in the DASIE
  - Addition of screening tools
  - Notes capability throughout the system
  - Mandatory DSM module
- NJSAMS changes were developed by DMHAS and tested by providers from the NJ PAC and UBHC staff
- This afternoon will include a demonstration of all NJSAMS changes that will be in effect on July 1, 2015
- This afternoon will include a demo of the Service Capacity Management System (SCMS)
Phase II

- Phase II will launch in January 2016
  - The IME will use ASAM and DSM criteria to approve addiction treatment placements and continuing care stays for individuals being served through IME managed state initiatives and Medicaid members and covered services
- The specifics of Phase II will be available for stakeholders in the fall of 2015
## Scope - Covered Initiatives

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<td>Medication Assisted Treatment Initiative (MATI)</td>
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<td>South Jersey Initiative (SJI)</td>
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<td>State Parole Board Mutual Agreement Program (SPB- MAP)</td>
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<td>Substance Abuse Initiative (SAI)/Division of Family Development</td>
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Assessment Process

Medicaid
• Does not require prior authorization for assessment

State Funded
• Does require IME prior authorization for assessment
Fact Sheets

- Screening by the Call Center (1-844-276-2777)
- Screening by Provider
- Prior Authorization for Assessment – State Funded Only
- Care Coordination
- Care Coordination – Follow Up on Detox Admissions
- Continuation of Stay/Extension Requests – Phase I (State Funded Only)
- Reconsideration of IME Denial of Extension Request – Phase I
- Outlier Case Management – Phase I
- How/When to Update the IME Service Capacity Management System (SCMS)
- Affiliation Agreements
Screening by the Call Center (1-844-276-2777)

• IME Call Center personnel answers calls from individuals, providers of care and others who are calling about access to substance use disorder services.
Screening by Provider

• Ensure all individuals are screened for risk and referred appropriately.
• This is the entry point to substance use disorders treatment services for adult individuals who do not require emergency services.
Prior Authorization for Assessment – State Funded Only

• The IME staff will issue prior authorizations, state funded assessments in Phase I beginning July 1, 2015.

• There are two pathways for issuing an authorization assessment:
  1. Individual is screened by IME
  2. Individual is screened by provider
Care Coordination

• IME, and when appropriate, in collaboration with providers of care, will provide supportive services to individuals who experience barriers to access to care.
Care Coordination – Follow Up on Detox Admissions

• Follow up on detox admissions to assist client to move to the next level of care.
Continuation of Stay/Extension Requests – Phase I (State Funded Only)

• When provider assesses a client currently in **state funded** treatment as in need of continuing treatment beyond the prior authorized length of stay (LOS), the provider may submit a Request for an Extension of Care (Continuing Care) with supporting documents (LOCI, DSM or ICD10 Diagnoses and statement of Impairment of Function) to establish clinical necessity for continuing care and appropriateness of the level of care (LOC) via NJSAMS to IME.
Reconsideration of IME Denial of Extension Request – Phase I

- When IME staff issues an initial Denial of Authorization, provider may elect to submit to the IME a Request for Review of Denial Form.
Outlier Case Management – Phase I

• Current data indicates that addiction services provided to individuals often result in length of stays (LOS) or courses of treatment that are outside of standard practice.

• These are identified as outliers.

• IME will identify and review outlier cases.
How/When to Update the IME Service Capacity Management System (SCMS)

• This system is designed to inform IME staff daily of the treatment openings and capacity available at each network provider location so that referral effectiveness is assured on a daily basis.
Affiliation Agreements

• The Affiliation Agreement memorializes the working relationship between DHS/DMHAS, UBHC and New Jersey addiction network providers.

• In order to comply with state and federal confidentiality regulations and to enable providers to interact with the IME for referrals and authorizations, every State funded addictions provider is required to execute an Affiliation Agreement.

• Three (3) signed originals of the Affiliation Agreement must be returned to DMHAS to the attention of Dona Sinton no later than June 30, 2015.

• They will then be fully executed and one (1) original will be returned to the agency.

• It is imperative that the Affiliation Agreement be returned by this date for the agency to receive a password for the SCMS and thus be able to receive any referrals from the IME.