

Health Home Proposed Payment Approach

Updated December 2011

Payment Type: Monthly Rate

Provider Type: Community Behavioral Health Center (CBHC)

Overview:

- Payment is contingent upon CBHC meeting core requirements set by the state.
- Payment for the health home will be terminated if requirements are not met.
- A monthly rate will be determined using a consistent, statewide methodology.
- The monthly rate will be developed based on historic claims costs for CPST as well as home health team composition and caseload.
 - Additional factors that could be added to the monthly rate may include: payment for innovative ideas on how the CBHC intends to meet the EHR requirements; shared savings; growing workforce capacity and serving as a training site; exceeding benchmarks & outcome requirements; start-up costs related to equipment, IT, and enrollment & outreach functions.
 - The CBHC must determine caseload size but will need to have the capacity to serve the demand in the specified region (county, board, zip code, etc.)
 - Team composition can vary by provider but must be within core team requirements.
 - The uniform cost report should serve as the basis for determining costs associated with health home services.
- Payment under the health home will be for: comprehensive care management; care coordination; health promotion, transition of care, individual & family supports, & referral to community & social support services.
 - The payment will be for coordination, NOT for direct care or other supportive services not associated with Health Home services.
 - Fee-for-service payments for community BH services treatment services (e.g., counseling, pharmacological management) will continue.
 - Separate payments will continue to occur for other treatment services (e.g., primary care & specialty services) through existing Medicaid payment mechanisms (through MCPs or FFS).
 - CPST reimbursement will not occur for those types of activities that are now reimbursable under the health home program. All CPST services, with the exception of those associated with the facilitation of further development of daily living skills and those associated with mental health interventions that address symptoms, behaviors and thought processes that assist the individual in eliminating barriers to seeking and maintaining education and employment, should be included under the health home reimbursement.
 - CPST reimbursement will continue for those activities not reimbursable under the health home program. See previous bullet point.
 - The Health Home will be responsible for providing care management & coordination for all persons being served by the health home team including those persons who are enrolled in Managed Care Plans