



The PsychU Guide To The Montana Mental Health System

This resource is provided for informational purposes only and is not intended as reimbursement or legal advice.

You should seek independent, qualified professional advice to ensure that your organization is in compliance with the complex legal and regulatory requirements governing health care services, and that treatment decisions are made consistent with the applicable standards of care.

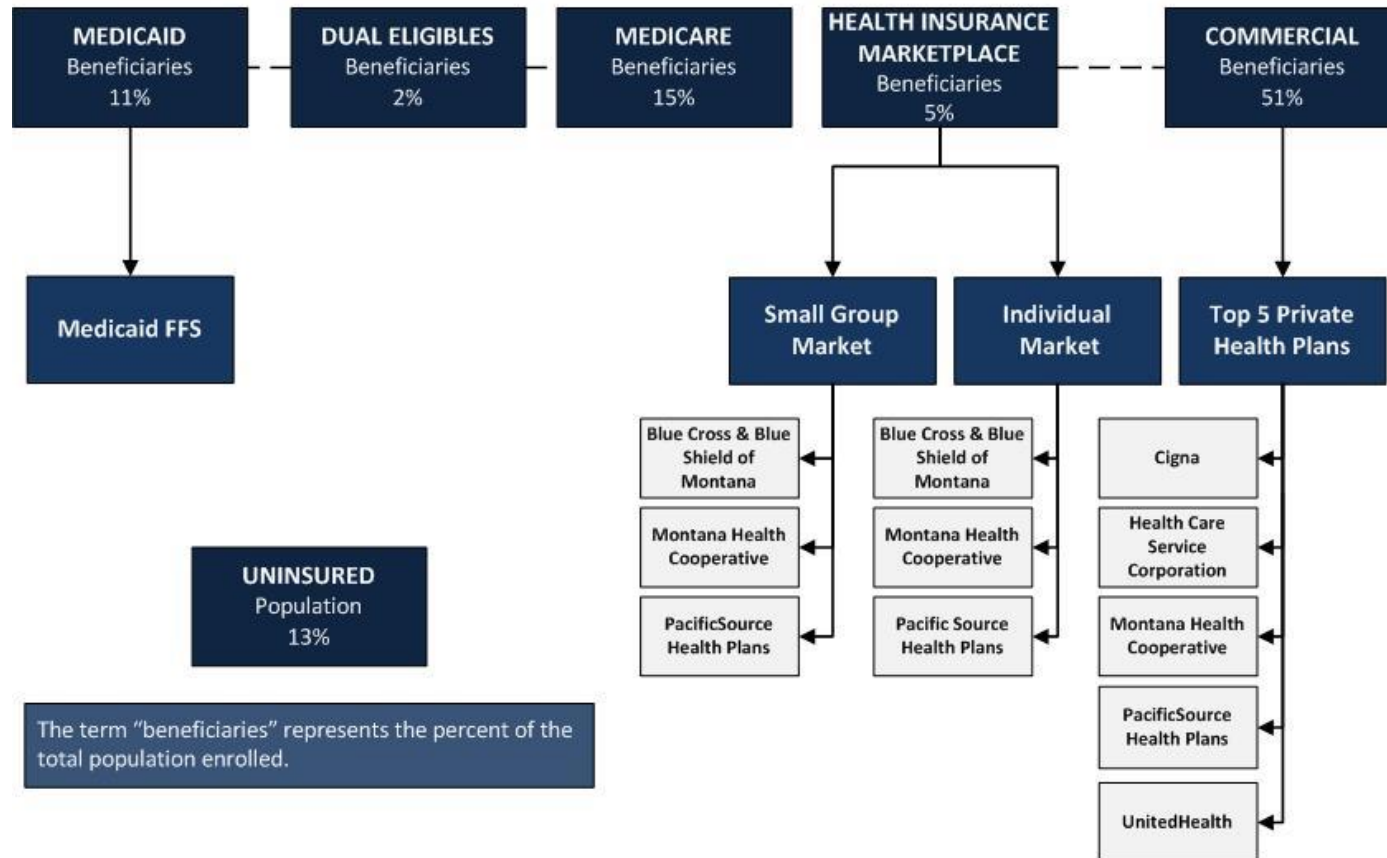
Except as otherwise indicated, the information provided is accurate to the best of Otsuka's knowledge as of March 2016.

The PsychU Guide To Mental Health Payers In Montana - Contents

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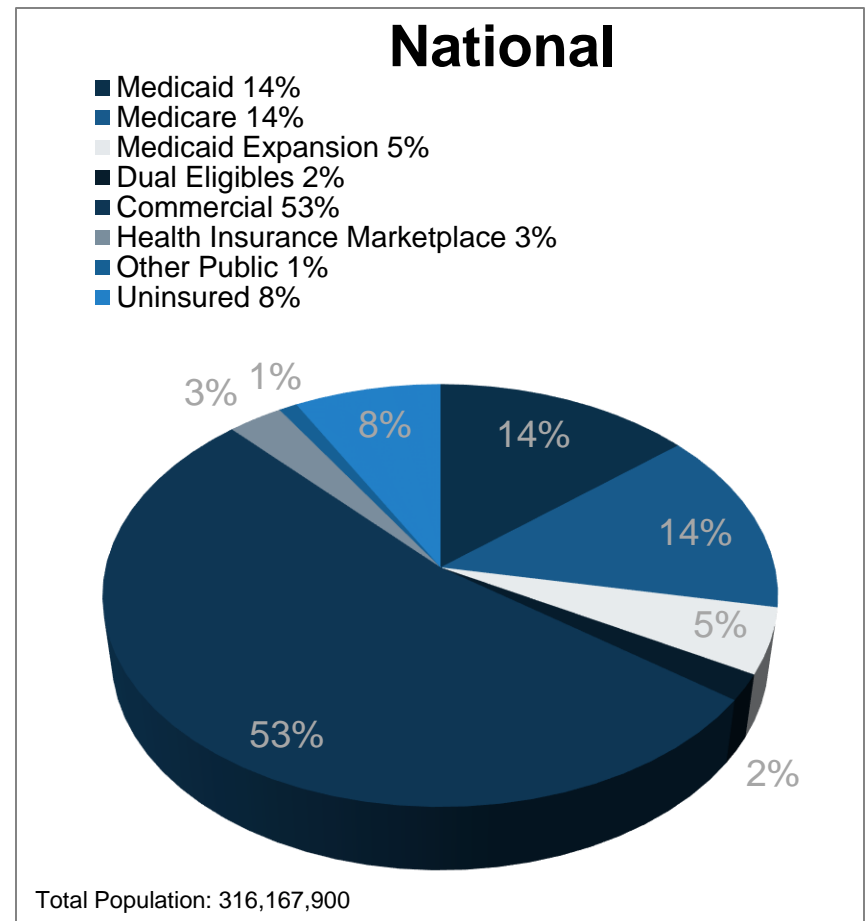
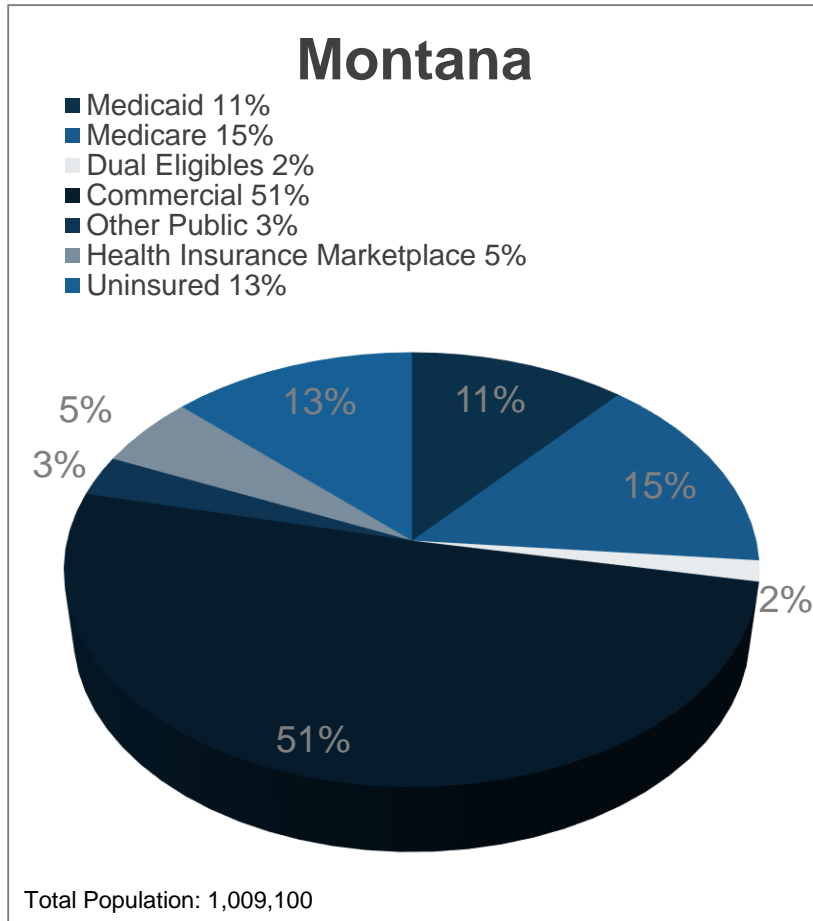
1. Health Care Coverage Map Of Montana

Total Population: 1,009,100
 SMI Population: 35,740



The term "beneficiaries" represents the percent of the total population enrolled.

2. Population Distribution By Payer: National vs. State



Based on 2014 data

3. Largest Health Plans In Montana By Enrollment

Plan Name	Plan Type	Enrollment*
Health Care Service Corporation	Commercial	226,203
Medicare FFS	Medicare	153,150
Medicaid FFS	Medicaid	138,254
UnitedHealth	Commercial Administrative Services Only (ASO)	34,274
PacificSource Health Plans	Commercial	24,447
New West Health Services	Medicare	22,998
Cigna	Commercial ASO	17,135
Montana Health Cooperative	Commercial	13,160
New West Health Services	Commercial	10,733
Aetna	Commercial ASO	9,317

*Based on enrollment as of fourth quarter 2014

4. Largest Health Plans In Montana By SMI Enrollment

Plan Name	Plan Type	Enrollment*	Estimated SMI Enrollment
Medicare FFS	Medicare	153,150	13,324
Medicaid FFS	Medicaid	138,254	6,913
New West Health Services	Medicare	22,998	2,001
Health Care Service Corporation	Commercial	226,203	1,583
Humana Insurance Co.	Medicare	7,305	636
UnitedHealth	Commercial ASO	34,274	240
PacificSource Health Plans	Commercial	24,447	171
UnitedHealthcare	Medicare	1,589	138
Cigna	Commercial ASO	17,135	120
Montana Health Cooperative	Commercial	13,160	92

*Based on enrollment as of fourth quarter 2014

5. Montana Medicaid System Overview

Medicaid System Governance

State Medicaid Director	Mary Dalton
State Medicaid Director reports to	Richard Opper, Director, Department of Public Health and Human Services

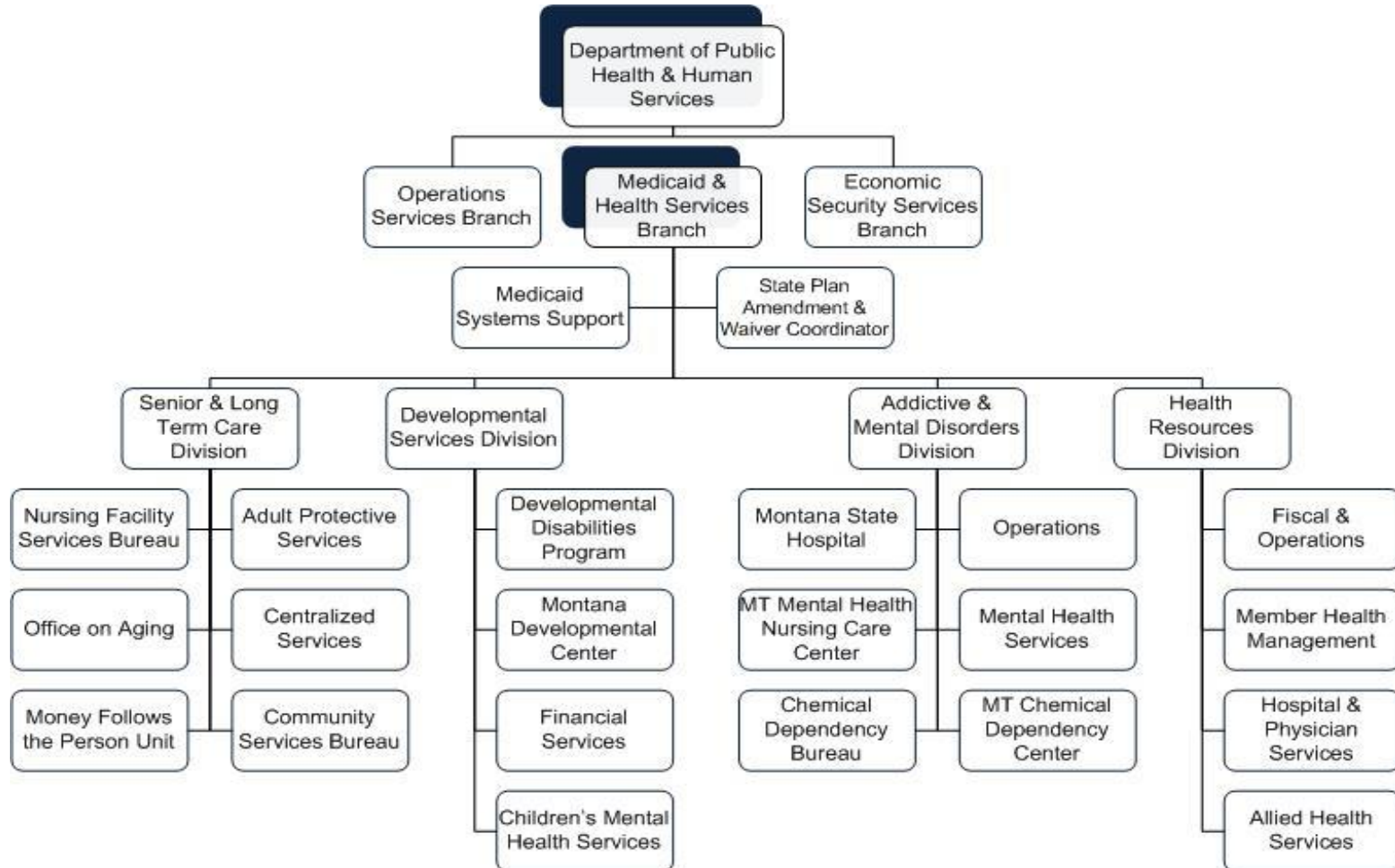
Medicaid Financial Delivery System

State participating in Medicaid expansion?	Yes
Is managed care mandatory for populations with SMI?	No
Is managed care mandatory for dual eligibles?	No
Total Medicaid population distribution	100% in FFS (Montana considers its PCCM program FFS): <ul style="list-style-type: none"> • 79% PCCM FFS • 21% non-PCCM FFS
Medicaid beneficiaries with SMI: Primary service system	Because the state does not have a managed care program, the SMI population is served by the FFS delivery system.

Medicaid Financing & Risk Arrangements: Behavioral Health

Traditional Behavioral Health Services	Passport to Health, the state's primary care case management (PCCM) program, covers services fee-for-service, including all behavioral health services and pharmaceuticals.
Specialty Behavioral Health Services	
Pharmaceuticals	

6. Montana Medicaid Governance



6. Montana Medicaid Governance

Name	Position	Department
Richard Opper	Director	Department of Public Health and Human Services
Mary Dalton	Branch Manager/Medicaid Director	Medicaid and Health Services Branch
Duane Preshinger	Administrator	Health Resources Division

7. Montana Medicaid System Benefits

Federally Mandated Services

1. Inpatient hospital services other than services in an institution for mental disease
2. Outpatient hospital services
3. Rural Health Clinic services
4. Federally Qualified Health Center services
5. Laboratory and X-ray services
6. Nursing facilities for individuals 21 and over
7. Early and Periodic Screening and Diagnosis and Treatment (EPSDT)
8. Family planning services and supplies for individuals of child-bearing age
9. Physician services
10. Medical and surgical services of a dentist
11. Home health services
12. Nurse midwife services
13. Nurse practitioner services
14. Pregnancy services, including tobacco cessation programs
15. Free standing birth centers
16. Non-emergency transportation to medical care

Montana's Optional Services

1. Private duty nursing
2. Dental services
3. Clinical social worker services
4. Prescribed drugs
5. Dentures, prosthetic devices, eyeglasses
6. Inpatient psychiatric hospital for persons under 21
7. Professional counselors
8. Hospice care
9. Case management
10. Services of psychologists
11. Inpatient psychiatric services for persons under 21 in a residential treatment facility
12. Preventive, diagnostic, and screening services
13. Rehabilitative services
14. Chiropractic services

8. Montana Medicaid Financing & Service Delivery

Medicaid System Characteristics		
Characteristics	Medicaid Fee-For-Service (FFS)	Primary Care Case Management (PCCM)
Enrollment	30,224	110,819
SMI Enrollment	Because the state does not have a managed care program, the SMI population is served by the FFS delivery system. The SMI population is not exempt from mandatory PCCM enrollment unless they meet one of the exclusion criteria.	
Management	Montana Department of Public Health and Human Services	Montana Department of Public Health and Human Services
Payment Model	FFS	FFS and PMPM case management fee
Geographic Service Area	Statewide	Statewide

Total Medicaid 141,043 | Total Medicaid With SMI 7,052

9. Montana Medicaid Fee-For-Service

- Fee-for-service (FFS) enrollment as of November 2015 was 141,043.
- Montana does not consider its primary care case management program (PCCM) managed care and includes all enrollees in FFS.
- *OPEN MINDS* estimates that PCCM enrollment in November 2015 was 110,819.

FFS Beneficiaries Excluded From PCCM

1. Foster care children
2. Beneficiaries in the subsidized adoption program
3. Persons dually eligible for Medicare and Medicaid
4. Beneficiaries with other insurance
5. Beneficiaries who reside in a nursing facility or intermediate care facility
6. Beneficiaries with less than three months eligibility remaining
7. Beneficiaries participating in a HCBS waiver

Optional Enrollment In PCCM

None

9. Montana Medicaid FFS Program: Primary Case Management

- Montana calls its primary care case management (PCCM) program Passport to Health.
- *OPEN MINDS* estimates that PCCM enrollment in November 2015 was 110,819.
- Most PCCM members may choose their primary care provider. Primary care providers receive a \$3.00 per member per month case management fee.
- Within the PCCM program, Montana operates two additional programs, the Team Care Program and the Health Improvement Program:
 - Team Care: PCCM members identified as having inappropriately high use of medical services are locked into one pharmacy and one provider who receives a \$6.00 per member per month enhanced case management fee. Enrollees are also given education on appropriate use of emergency services.
 - Health Improvement Program: PCCM members identified by claims, drug utilization review, and demographic algorithm as having chronic illness or being at risk of serious illness are provided case management services.

9. Montana Medicaid FFS Program: Medicaid Expansion

1. Montana implemented a non-traditional Medicaid expansion program for childless adults ages 19 to 64 with incomes up to 138% FPL in January 2016.
 - The program is called the Montana Health and Economic Livelihood Partnership (HELP) plan.
 - There are an estimated 70,000 Montanans eligible. As of March 2016, enrollment was 36,320.
2. HELP participants with incomes above 50% FPL are charged premiums and copayments for some services, not to exceed 5% of the total yearly household income.
 - Monthly premiums equal 2% of household income and are applied to copayments.
3. Participants with incomes above 100% FPL face disenrollment for failure to make premium payments after a 90-day grace period.
 - Unpaid premiums are considered debts to the state and may be collected against future income tax returns.
 - Participants may be reenrolled after the debt is recovered.
 - Certain participants may be exempt from disenrollment if they engage in a wellness program.
4. Blue Cross and Blue Shield of Montana is the third party administrator (TPA) of the HELP plan. The TPA receives a per member per month fee for services including:
 - Establishing provider networks
 - Determining the benefit plan within Montana Medicaid guidelines
 - Paying medical claims
 - Collecting premiums and monitoring copayments
5. The Medicaid expansion population, if medically frail, must be offered the full array of State Plan benefits. Medically frail individuals include adults with serious mental illness and chronic substance abuse disorders.

9. Montana Medicaid FFS Program: Behavioral Health Overview

FFS Behavioral Health Benefits:

- Inpatient treatment
- Outpatient treatment
- Psychiatric diagnostic evaluation
- Individual, group, and family psychotherapy
- Psychological testing
- Group home
- Adult foster care
- Day treatment
- Community-based rehabilitation
- Illness management and recovery
- Crisis intervention
- Program of assertive community treatment (ACT)
- Targeted case management
- Acute partial hospitalization
- Intensive outpatient therapy
- Dialectical behavior therapy
- Inpatient residential detoxification
- Inpatient residential substance abuse treatment
- Individual, group, and family substance abuse therapy
- Screening, brief intervention, and referral
- Assessment and placement

9. Montana Medicaid FFS Program: SMI Population

- The majority of the SMI population is enrolled in the FFS PCCM program, unless they also meet one of the PCCM exclusion criteria.
- Medicaid expansion population, if medically frail, must be offered the full array of State Plan benefits. Medically frail individuals include adults with serious mental illness and chronic substance abuse disorders.



10. Montana Medicaid Managed Care

Montana does not operate a managed care program.

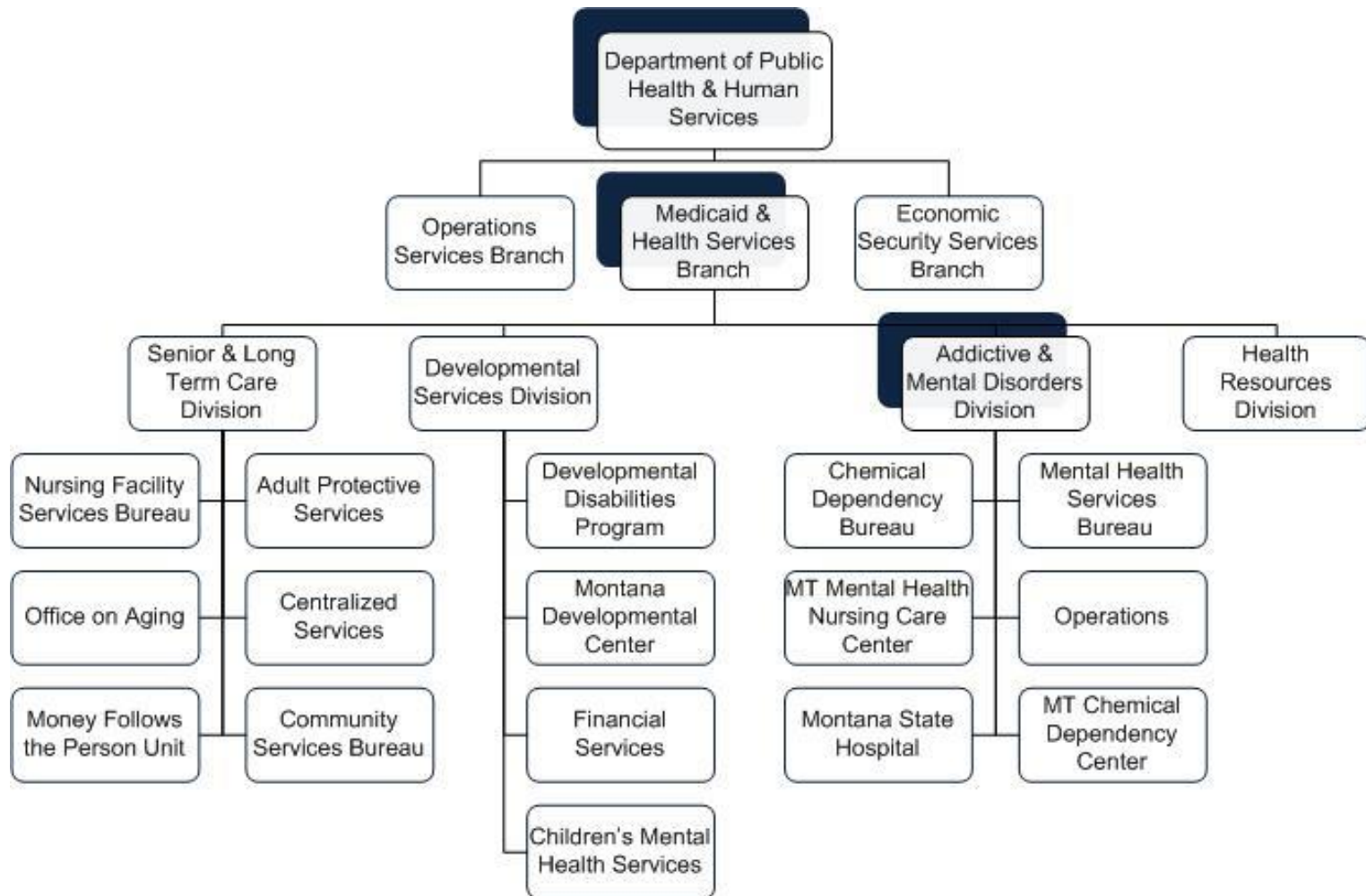


11. Montana Medicaid Medical & Health Home Initiatives

- Montana implemented a multi-payer patient-centered medical home (PCMH) program in December 2014.
- The program is administered by the Commissioner of Securities and Insurance (CSI) in the State Auditor's office.
- Montana Medicaid and three commercial plans are participating in the program.
- Montana Medicaid selected five provider organizations for its pilot PCMH implementation, based on PCMH accreditation, provider network adequacy, and qualification by the CSI:
 1. RiverStone Health (Billings)
 2. Partnership Health (Missoula)
 3. St Peter's Hospital (Helena)
 4. Glacier Community Health Center (Cut Bank)
 5. Bullhook Community Health Center (Havre)



12. Montana State Mental Health & Addiction Treatment Department Governance



12. Montana State Mental Health & Addiction Treatment Department Governance

Name	Position	Department
Richard Opper	Director	Department of Public Health and Human Services
Mary Dalton	Branch Manager/Medicaid Director	Medicaid and Health Services Branch
Glenda Oldenburg	Director	Addictive and Mental Disorders Division
Julie Prigmore	Bureau Chief	Mental Health Services Bureau
Bobbi Perkins	Bureau Chief	Chemical Dependency Bureau

13. Montana State Psychiatric Institutions

Institution Name	Location	Beds	2014 Admissions	2014 Average Daily Census
Montana State Hospital	Warm Springs	208	800	187

In addition to the Montana State Hospital, the Montana Department of Public Health and Human Services operates the Montana Chemical Dependency Center. Located in Butte, the 48-bed facility provides inpatient treatment for substance abuse disorders and comorbid mental health conditions.

14. Montana Accountable Care Organizations (ACOs)

Medicare Shared Savings Program

1. Billings Clinic
2. Health Connect Partners, LLC
3. National Rural ACO 23, LLC
4. Saint Vincent Accountable Health Network

15. Montana Health Care Reform Initiatives

Medicaid Expansion	
Choose to participate in expansion?	Yes
Medicaid Eligibility Income Limit for Childless Adults	133% of FPL Note: The PPACA requires that 5% of income be disregarded with determining eligibility
Specific Legislation Enacted	Senate Bill 405

Health Insurance Marketplace	
Type of Marketplace	Federal
Individual Enrollment Contact	www.healthcare.gov
	1-800-318-2596
Small Business Enrollment Contact	www.healthcare.gov/small-businesses
	1-800-706-7893

16. Montana Health Insurance Marketplace Plans

Individual Market

- Blue Cross and Blue Shield of Montana
- Montana Health Cooperative
- PacificSource Health Plans

Small Group Market

- Blue Cross and Blue Shield of Montana
- Montana Health Cooperative
- PacificSource Health Plans

17. Montana Essential Health Benefit Benchmark Plan

Plan Type	Plan from largest small group product, Preferred Provider Organization
Issuer Name	Blue Cross and Blue Shield of Montana
Plan Name	Blue Dimensions
Supplemented Categories (Supplementary Plan Type)	<ul style="list-style-type: none"> • Pediatric Oral (FEDVIP) • Pediatric Vision (FEDVIP)
Habilitative Services Defined by Plan	No; when the benchmark plan and state do not define habilitative services the benefit is covered using the federal definition: provides parity in services that are similar in scope, amount, and duration to benefits covered for rehabilitative services.
Biologically Based Mental Illness	Covered the same as any other medical benefit as described in the 2008 Mental Health Parity and Addiction Equity Act

17. Montana Essential Health Benefit Benchmark Plan: Behavioral Health Benefits

Benefit	Limit on Service	Exclusions
Non-Biologically Based Mental Illness	No	Marriage counseling, hypnotherapy, and services given by a staff member of a school or halfway house
	No	
	No	Marriage counseling, hypnotherapy, and services given by a staff member of a school or halfway house
	No	

Sources

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3. The Kaiser Foundation definition for Medicaid includes dual eligible individuals. To avoid double counting, the number of dual eligibles was subtracted from the total number of Medicaid enrollees.
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- Compiled from information found throughout the profile.

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3. PCCM enrollment was estimated by subtracting the number of beneficiaries in the excluded populations from the total Medicaid enrollment.

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Montana Essential Health Benefit Benchmark Plan: Behavioral Health Benefits

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