

Transitioning BHMCO Oversight to DHS – BH Provider FAQ

1. Why do this now, after all these years?

- While AHCI has performed excellent work over the years, the issue for DHS is structural.
 - As the primary contractor, ultimate responsibility for the performance of the program lies with the county. Specifically, the county is responsible for making decisions having major operational, provider- and member-level impacts – including on medical underspend, Reinvestment planning, rate-setting negotiations with PA-DHS, state and BHMCO contract revisions, and more.
 - And yet, because oversight responsibilities have been delegated to a separate organization, DHS lacks the visibility into the program that it needs to make the best decisions on critical issues.
- This arrangement is not tenable for DHS's current leadership. By installing oversight in-house, we are solving for that issue.
- Additionally, and since AHCI's founding 20 years ago, ACDHS has evolved as an organization and made significant gains in capacity and skill - DHS can do now what it couldn't do back then.
- We wouldn't make this change if we didn't believe this to be true: installing BH-MCO oversight functions at ACDHS will result in more effective and efficient coordination with Community Care that in turn, will permit quality improvements in services and members' experience.

2. Who is AHCI and what does AHCI do?

- The county created AHCI over 23 years ago as a 501c3 non-profit organization as it planned to accept the first right of opportunity for the county's Medicaid managed behavioral health care program, known as HealthChoices. Community Care was selected as the BHMCO for this program.
- AHCI was developed to perform state mandated oversight of the HealthChoices Program and Community Care's performance.
- Per its contract with the county, AHCI ensures that the requirements of the HealthChoices program are met:
 - tracks the county's HealthChoices revenue and spending;
 - processes monthly reimbursement to Community Care for medical and administrative costs;
 - maintains management information systems to track and analyze Community Care's program performance; and
 - prepares and coordinates the county's submissions to meet state quality oversight reporting requirements.

3. Does this mean the county will make more funding available for services?

- We do expect some additional funding for services to result from this change but not a windfall.
- DHS must make investments to build its own capacity to assume and perform oversight responsibilities in 2023 and beyond.

4. What does the future of DHS' BH-MCO function look like?

- Beginning now through 2022 - **we are hiring** to expand capacity at DHS in these domains:
 - HealthChoices Finance
 - HealthChoices data and analytics
 - HealthChoices quality oversight and Medicaid policy
- We intend to engage **third party expertise** for technical assistance and transition support
 - Medicaid expertise
 - Process mapping
 - Actuarial services
- We are making investments in IT systems to support the business processes that are required to satisfy state and BHMCO obligations.
- Once capacity is added, we expect that the DHS BH-MCO oversight team will be in position to drive more efficient and effective oversight and monitoring processes over time.

5. What is the timeframe, and how does the transition plan ensure continuity of operations through the transition?

- AHCI's current role and responsibilities will continue throughout 2022
- In parallel, DHS is moving assertively to make hires onto the DHS BH Oversight team
 - We'll onboard new staff on a rolling basis beginning immediately
- DHS is expected to "go live" in executing oversight processes in the first quarter of 2023.
- This timeframe gives the new DHS BH oversight team several months of overlap with the current state to test and refine systems before performing oversight and monitoring responsibilities directly.

6. What does the State say about this?

- We have initiated engagement with PA-DHS and OMHSAS on these planned changes.
- PA-DHS is supportive of DHS' transition plan and vision; the planned changes are intended to consolidate and streamline the county's oversight authority and simplify the county's primary contractor relationship with the state.

7. AHCI has provided me/my team with important T/A and support for our program. Will that go away because of this transition?

- AHCI performs terrific work supporting our newer delivery models, including Community Treatment Teams, Supportive Employment, and Mental Health First Aid.
- Our highest priority is to ensure continuity of support services for providers, and we are planning now for how to transition these supports so that providers do not experience adverse impacts from this change.
- As of now, our plan is to build capacity within DHS' Office of Behavioral Health to continue this work in 2023 and beyond. This will mean hiring within our OBH organization for at least 3 roles to deliver provider training, EBP monitoring, and T/A for providers.
- Our work to fully assess the impact of this change on the provider community is happening now and will continue through 2022.

January 2022

- Please reach out to DHS if you'd like to set up additional discussions regarding specific issues or concerns.
- Please participate in this anonymous survey to let us know what you want us to be aware of as we make this transition.

https://allegHENYcounty.az1.qualtrics.com/jfe/form/SV_20IJrdSTLaqlnYW

Thank you for your time.