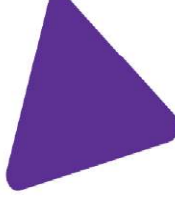


Louisiana CSoc Incentive Payments for LMHPs & Psychiatrists

Magellan of Louisiana & Louisiana Department of Health

June 6th & 7th, 2023



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Presenter Biography

Wendy Bowlin, LPC, MS, MBA. Ms. Bowlin has served as the Director of Quality and Outcomes for Magellan of Louisiana since 2015. She is responsible for implementing the CSoC quality program, which includes ensuring compliance with federal and state laws and contract requirements, monitoring quality of care, patient safety, and program outcomes, and overseeing quality improvement projects. Prior to this, Ms. Bowlin served as the Director of Quality for the Louisiana Behavioral Health Partnership (LBHP) for Magellan. Before joining Magellan, Ms. Bowlin worked with children and families in both the inpatient and outpatient setting. Ms. Bowlin is a Licensed Professional Counselor and holds a B.A. in Psychology from the University of Mississippi, a M.A. Counseling Psychology from Louisiana State University in Shreveport, and a M.B.A. from the University of Southeastern Louisiana.

Agenda

1 What is CSoC?

2 Magellan & CSoC

3 HCBS Incentive Payments

4 CSoC & You



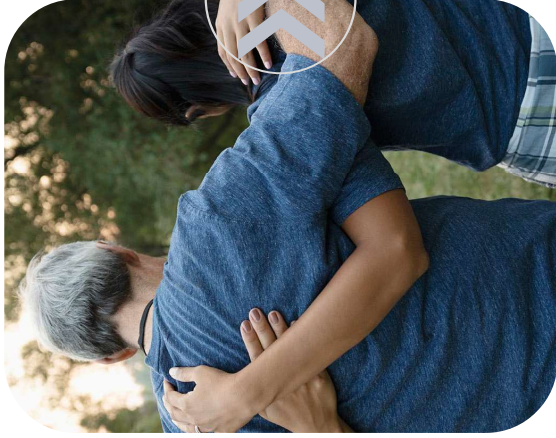
CSoC Program Overview

⌘SoC HCBS Incentive Payments – LMHPs and Psychiatrists

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What is CSoC?

- The Coordinated System of Care (CSoC) is an initiative to serve Louisiana's youth with significant behavioral health challenges who are in highest need and at greatest risk.
- CSoC is a *philosophy and approach* to service delivery that results in improved integration and coordination, enhanced service offerings and improved outcomes.



- Family Voice & Choice
- Home and Community-based
- Strength-based
- Individualized
- Culturally & Linguistically Competent
- Integrated across Systems
- Connected to Natural Helping Networks
- Data Driven and Outcomes Oriented

A photograph of a woman with curly hair hugging a child. The woman is smiling and looking towards the child. The child is also smiling and looking towards the camera. The background is a soft-focus outdoor setting with trees and sunlight. The image is oriented vertically on the page.

CSoc Program Goals

- To improve the overall outcomes for children with significant behavioral health challenges or co-occurring disorders
- To reduce the number of children and youth in detention and residential settings
- To reduce the State's cost of providing services by leveraging Medicaid and other funding sources

Criteria for Enrollment in CSoC

- Between 5 - 20 years old
- DSM Axis I diagnosis, or exhibiting behaviors indicating a diagnosis may exist
- Meets clinical eligibility on the Child & Adolescent Needs & Strengths (CANS) assessment & Independent Behavioral Health Assessment (IBHA)
- Identified family or adult resource that is or will be responsible for the care of the child/youth who is willing to engage in wraparound
- Currently in an out of home placement (OOH), or at imminent risk of OOH placement



Components of the CSoc Program

Wraparound Process

- Wraparound is a collaborative, team-based approach to service and support planning.
- 10 Principles of Wraparound → Provide the framework for Child and Family Team (CFT) Process
- Evidence-informed practice → Allows for flexibility/diversity in how an activity is accomplished
- Four-phases of Wraparound →
 - * Engagement
 - * Plan Development
 - * Plan Implementation & Refinement
 - * Transition

Wraparound in CSoc

- Independent comprehensive assessment to establish clinical eligibility and to guide care planning
- Individualized care planning process through the Child and Family Team (CFT)
- Linkage to services/supports
- Access to specialized services:
 - * Parent Support and Training
 - * Youth Support and Training
 - * Short Term Respite
 - * Independent Living Skills Building

Child and Family Team (CFT)

- The CFT's goal is to create an individualized plan for the child and family.
- The plan is built off their strengths and meets their underlying needs.
- The plan is supported by all members of the Child and Family Team.
- This plan should be proactive, future-oriented, and should produce outcomes consistent with the identified family goal and, ultimately, the family vision.

National Wraparound Initiative (NWI) Video



Video accessible at <https://youtu.be/aZthZxzxOol>.

Magellan & CSOC

Magellan's Role in CSoC

Magellan's Role

- Magellan has been the CSoC administrator since inception - March 2012
- CSoC is funded through Medicaid and HCB Waiver, which can serve 2,900 youth at a given time
- Magellan manages specialized behavioral health services, including inpatient psychiatric hospital, covered outpatient specialized BH services, and CSoC Waiver Services.

Magellan's Responsibilities

- Authorizes and pays claims for covered services.
- Credentials and contracts with agencies, facilities, practitioners, groups, etc. for covered services.
- Coordinates with MCO on pharmacy and physical health benefits.
- Monitors network providers for compliance and quality of care.
- Reviews assessments and Plans of Care at referral and every 180-days for clinical eligibility.
- Monitors fidelity, outcomes, and quality.

The Magellan Difference

» Prior Authorizations

52

The number of outpatient therapy visits per year before requiring a Prior Authorization (PA) for youth enrolled in CSoC.

» Reimbursement Rates

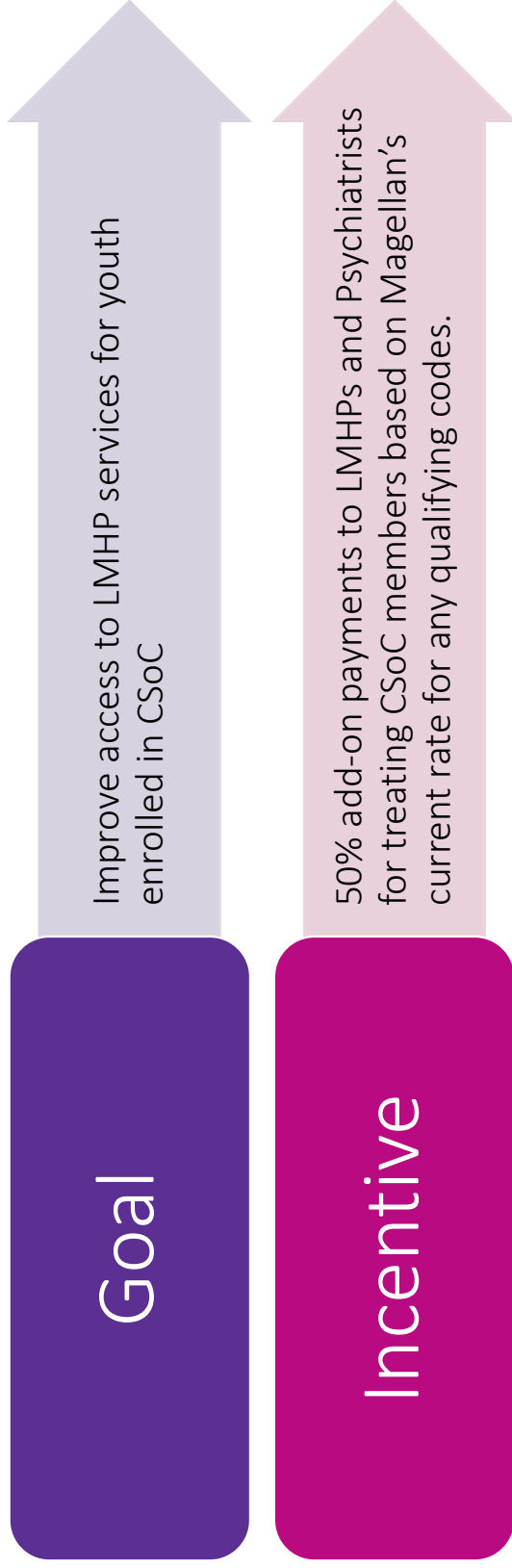
25%

Higher than the Medicaid Rate

HCBS Incentive Payments

HCBS Incentive Payments

OBH received approval from CMS to implement state-directed payments for eligible home and community-based providers who meet specific performance targets and state-established criteria for the calendar year 2023, using the American Rescue Plan Act (ARPA).



Outpatient Therapy Services – LCSWs and LPCs

Code	Service Description	Medicaid Rate	Magellan's 25% Rate Increase	Magellan Rate	HCBS Incentive Payment	HCBS Incentive Rate	Total Increase
90791	PSYCHIATRIC DIAGNOSTIC EVALUATION	\$75.87	\$18.97	\$94.84	\$47.42	\$142.26	\$66.39
90832	PSYCHOTHERAPY, 30 MINUTES WITH PATIENT PRESENT	\$33.36	\$8.34	\$41.70	\$20.85	\$62.55	\$29.19
90834	PSYCHOTHERAPY, 45 MINUTES WITH PATIENT PRESENT	\$46.96	\$11.74	\$58.70	\$29.35	\$88.04	\$41.09
90837	PSYCHOTHERAPY, 60 MINUTES WITH PATIENT PRESENT	\$69.15	\$17.29	\$86.43	\$43.22	\$129.65	\$60.51

Psychological Testing Rates

Code	Service Description	Medicaid Rate	Magellan's 25% Rate Increase	Magellan Rate	HCBS Incentive Payment	HCBS Incentive Rate	Total Increase
96130	PSYCHOLOGICAL TESTING EVALUATION SERVICES BY PHYSICIAN/QHP, FIRST HOUR	\$48.67	\$12.17	\$60.84	\$30.42	\$91.26	\$42.59
96132	NEUROPSYCHOLOGICAL TESTING EVALUATION SERVICES BY PHYSICIAN/QHP, FIRST HOUR	\$61.06	\$15.27	\$76.33	\$38.16	\$114.49	\$53.43
96136	PSYCHOLOGICAL OR NEUROPSYCH TEST ADMIN/SCORING BY PHYSICIAN/QHP, 2 OR MORE TESTS, FIRST 30 MINUTES	\$24.34	\$6.09	\$30.43	\$15.21	\$45.64	\$21.30
96138	PSYCHOLOGICAL OR NEUROPSYCH TEST ADMIN AND SCORING BY TECHNICIAN, FIRST 30 MINUTES	\$17.40	\$4.35	\$21.75	\$10.88	\$32.63	\$15.23



The Basic Requirements

- Services must be rendered by a qualified LMHP or psychiatrist for inclusion in this initiative.
- Rendering providers are responsible for ensuring compliance with requirements outlined by LDH and Medicaid as detailed in the [Behavioral Health Services Provider Manual](#) and any [Informational Bulletins](#) active on the date of service (DOS).
- Telehealth is allowed for certain outpatient procedure codes. When submitting claims for telehealth services, providers should include the modifier 95 and either Place of Service (POS) 02 or 10.
 - POS 02 should be used when a member is at a location other than home.
 - POS 10 should be used when a member is at home.

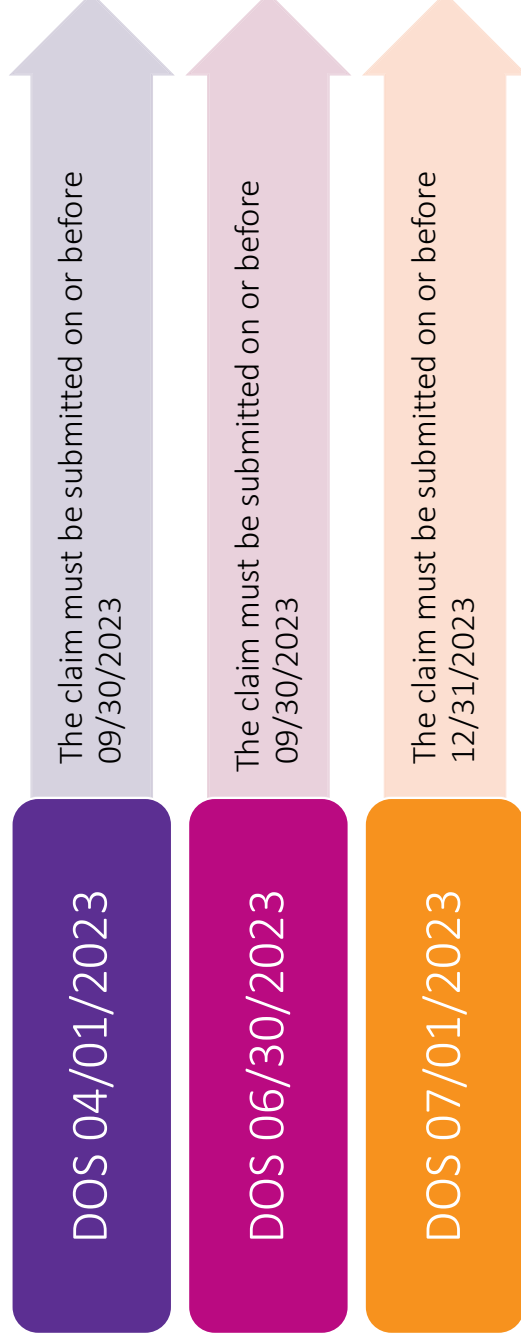
Provider Qualifications

- A licensed mental health professional (LMHP) is an individual who is licensed in the State of Louisiana to diagnose and treat mental illness or substance use, acting within the scope of all applicable State laws and their professional license.
- Includes the following individuals who are licensed to practice independently:
 - Medical psychologists
 - Licensed psychologists
 - Licensed clinical social workers (LCSWs)
 - Licensed professional counselors (LPCs)
 - Licensed marriage and family therapists (LMFTs)
 - Licensed addiction counselors (LACs)
 - Advanced practice registered nurses (APRNs).
- See Section 2.3 of the [Behavioral Health Services Provider Manual](#) for complete list of qualifications.



Claims Submission

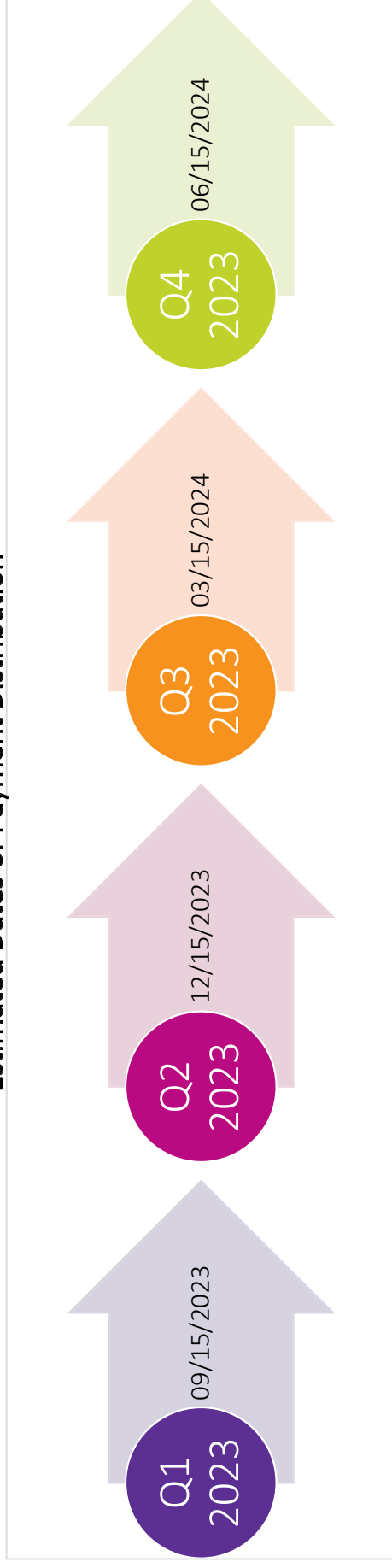
- Outpatient claims must be submitted within 90 days of the last day of the quarter associated with the service date to be counted.
- Claims submitted outside of timeframes will be paid at regular rate.



Processing and Paying Incentives

- Clean claims are reprocessed for denial reasons other than duplicate claims and unqualified providers for any qualifying claims submitted within the timeframes outlined above quarterly.
- A clean claim is defined as a claim with no defect or impropriety (including any lack of required substantiating documentation) or circumstance requiring special treatment that prevents timely payment of the claim.

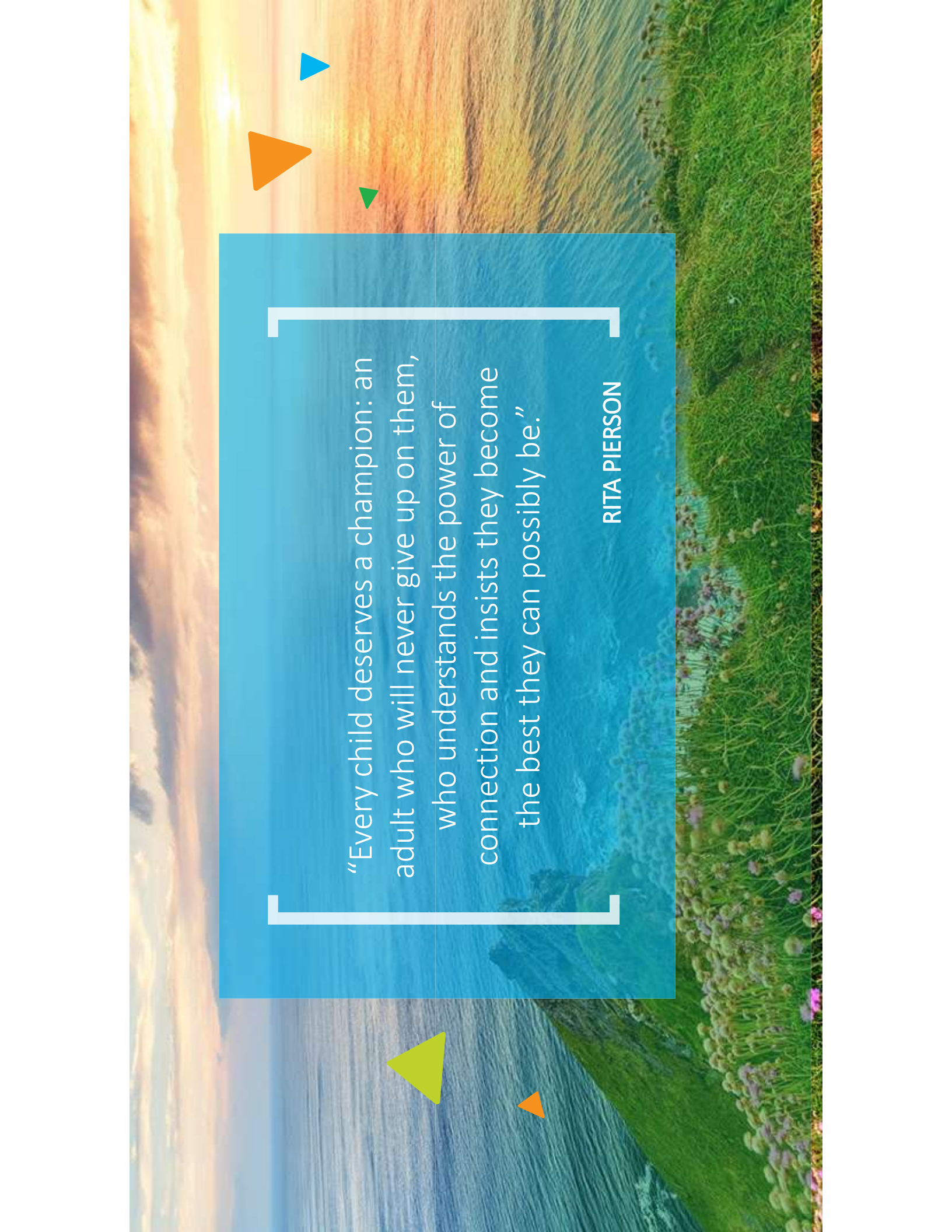
Estimated Dates of Payment Distribution



CSoC and You

QSoC HCBS Incentive Payments – LMHPs and Psychiatrists

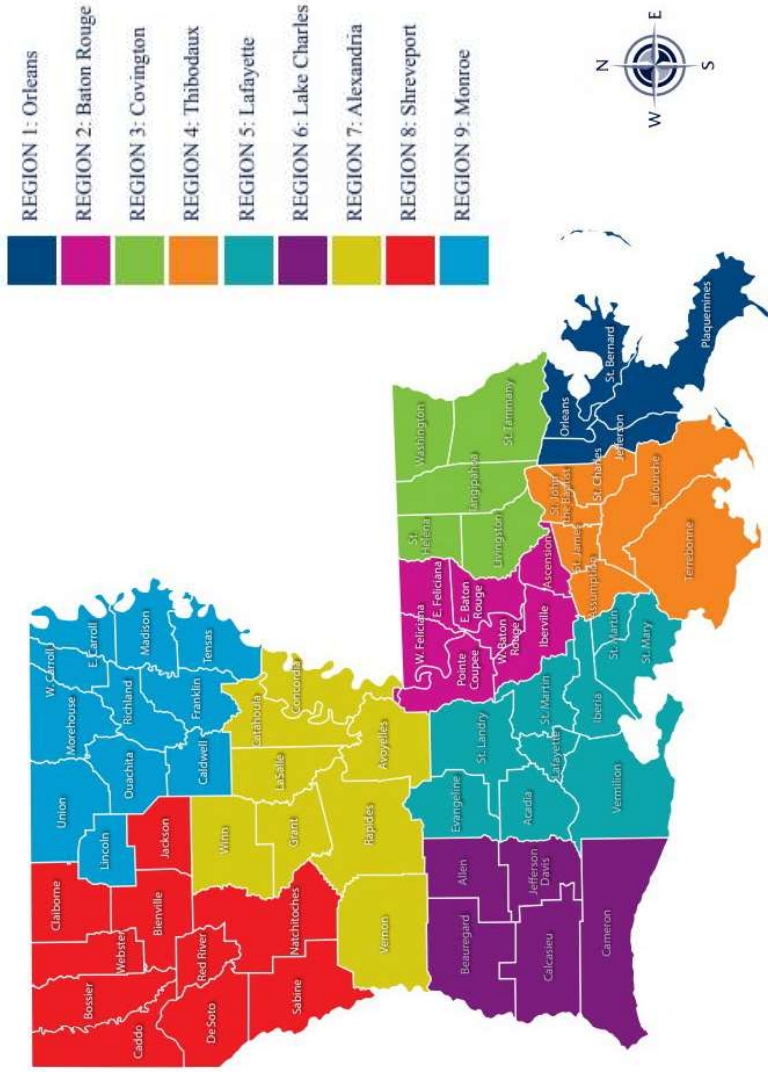
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“Every child deserves a champion: an adult who will never give up on them, who understands the power of connection and insists they become the best they can possibly be.”

RITA PIERSON

CSoc Regions



Louisiana is divided into 9 CSoc Regions.

Each regions' members are served by a regional Wraparound Agency.

Connecting youth to services provider.

Referring Youth and Families to CSoc



Referral Process

- Contact Magellan directly at **1-800-424-4489** or the Healthy Louisiana Plan (HLP) with the parent/guardian present or on the phone.
- HLPs will “warm transfer” you to Magellan.
- A Magellan care manager will conduct a CANS brief assessment to establish preliminary eligibility.



Screening

- Brief CANS is a clinical conversation with four domains: Youth’s Risk Behaviors, Life Functioning, & BH Functioning and Caregiver Functioning
- If screened positive, the child/youth will be referred to a Wraparound Agency (WAA).
- If not, Medicaid eligible youth will be warm transferred their HLP for connection to other services.



Presumptive Eligibility

- WAA makes initial contact within 48 hours, first F2F within 7 calendar days.
- Receives comprehensive Assessment (i.e., CANS & IBHA) within 30-days of referral to determine clinical eligibility
- Youth’s Wraparound Facilitator (WAF) explains program, obtains Freedom of Choice, and develops a provisional Plan of Care (POC) and crisis plan.
- Begins building a multidisciplinary Child and Family Team (CFT)



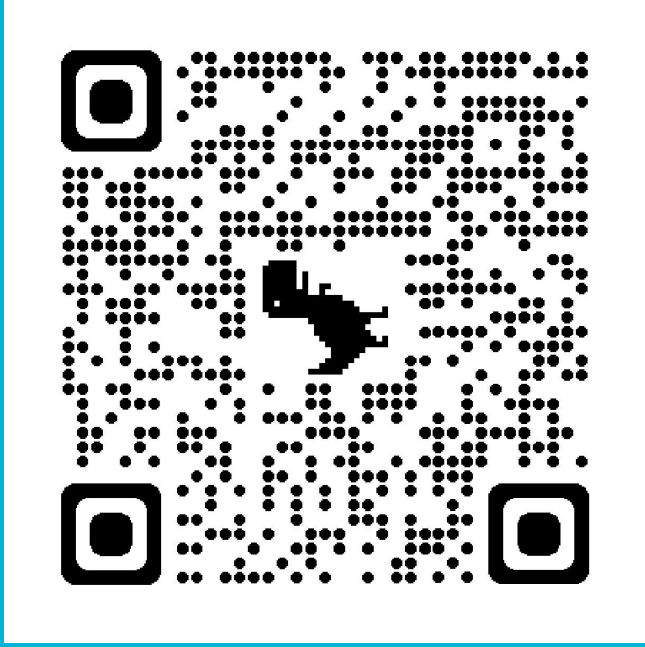
Tips when making Referrals

1. Calling Magellan directly at 1-800-424-4489 to reduce call handle time.
 - Ensure the parent/guardian is present or on the phone.
 - Tell the representative that you are calling to make a CSoc referral.
2. Be prepared to answer questions about what is going on in the child's/youth's life that makes you think CSoc is needed. You will be asked about the child's/youth's:
 - Identifying & demographic information
 - Insurance/Medicaid
 - Mental health history
 - Substance abuse history
 - Medication
 - Medical history
 - History with child welfare, juvenile justice and trouble in school



Join CSoC and be a part of something bigger than yourself!

Please see [Become a Provider | Magellan of Louisiana](#) for more information on contracting and credentialing or use QR Code for direct access.





Interested in Joining Magellan

Contracting, Credentialing and Re-credentialing Assistance and Inquiries

Sharonda L. Gray
Network Management Specialist
Email: SGray@magellanhealth.com
Phone: 318-524-8829

Contract Support Supervisor

Gail Fowler
Network Management Director
Email: IGFowler@magellanhealth.com
Phone: 314-387-5827



Appendix 1: Qualifying LMHP/Psychiatrist Procedure Codes

Qualifying Procedure Codes – 1 of 3

Service Code	Description	Telehealth – Allowed Mode of Delivery
90785	Interactive Complexity, Add On	Y
90791	Psychiatric Diagnostic Evaluation	Y
90792	Psychiatric Diagnostic Evaluation With Medical Services	Y
90832	Psychotherapy, 30 Minutes With Patient Present	Y
90833	Psychotherapy, 30 Minutes With Patient Present, Add On***	Y
90834	Psychotherapy, 45 Minutes With Patient Present	Y
90836	Psychotherapy, 45 Minutes With Patient Present, Add On***	Y
90837	Psychotherapy, 60 Minutes With Patient Present	Y
90838	Psychotherapy, 60 Minutes With Patient Present, Add On***	Y
90839	Psychotherapy For Crisis; First 60 Minutes	Y
90840	Psychotherapy For Crisis; Each Additional 30 Minute Add On	Y
90845	Medical Psychoanalysis	Y
90846	Family Psychotherapy Without Patient Present	Y
90847	Family Psychotherapy With Patient Present	Y
90849	Multiple Family Group Psychotherapy	Y
90853	Group Psychotherapy	N*
90863	Pharmacologic Management Add On	Y
90870	Electroconvulsive Therapy	Y
90875	Psychophysiological Therapy With Biofeedback 20–30 Minutes	Y
90876	Psychophysiological Therapy With Biofeedback 45–50 Minutes	Y
90880	Medical Hypnotherapy	Y
96105	Assessment Of Aphasia	Y
96116	Neurobehavioral Status Examination, First Hour	N*
96121	Neurobehavioral Status Examination, Each Additional Hour	N*
96130	Psychological Testing Evaluation Services By Physician/QHP, First Hour	N*
96131	Psychological Testing Evaluation Services By Physician/QHP, Each Additional Hour	N*
96132	Neuropsychological Testing Evaluation Services By Physician/QHP, First Hour	N*
96133	Neuropsychological Testing Evaluation Services By Physician/QHP, Each Additional Hour	N*

The N* denotes procedure codes that will not be allowed to be rendered via telehealth following the Public Health Emergency (PHE) expiration, effective on or after 05/12/2023, under guidance in place as of the manual's effective date.

Qualifying Procedure Codes – 2 of 3

Service Code	Description	Telehealth – Allowed Mode of Delivery
96136	Psychological Or Neuropsych Test Admin/Scoring By Physician/QHP, 2 Or More Tests, First 30 Minutes	N*
96137	Psychological Or Neuropsych Test Admin/Scoring By Physician/QHP, 2 Or More Tests, Each Additional 30 Minutes	N*
96138	Psychological Or Neuropsych Test Admin And Scoring By Technician, First 30 Minutes	N*
96139	Psychological Or Neuropsych Test Admin And Scoring By Technician, Each Additional 30 Minutes	N*
96146	Neuropsychological Or Neuropsychological Test Admin With Single Automated Instrument, Auto Results Only	Y
96156	Health Behavior Assessment/Reassessment	Y
96158	Health Behavior Intervention, Individual, Face-To-Face; First 30 Minutes	N*
96159	Health Behavior Intervention, Individual, Face-To-Face; Each Additional 15 Minutes	N*
96164	Health Behavior Intervention, Group, Face-To-Face; First 30 Minutes	N*
96165	Health Behavior Intervention, Group, Face-To-Face; Each Additional 15 Minutes	N*
96167	Health Behavior Intervention, Family With Patient Present, Face-To-Face; First 30 Minutes	N*
96168	Health Behavior Intervention, Family With Patient Present, Face-To-Face; Each Additional 15 Minutes	N*
96170	Health Behavior Intervention, Family Without Patient Present, Face-To-Face; First 30 Minutes	N*
96171	Health Behavior Intervention, Family Without Patient Present, Face-To-Face; Each Additional 15 Minutes	N*
99202	New Patient Office Outpatient – Expanded Problem Focused (15–29 Min)	Y
99203	New Patient Office Outpatient – Detailed (30–44 Min)	Y
99204	New Patient Office Outpatient – Comprehensive Moderate Complexity (45–59 Min)	Y
99205	New Patient Office Outpatient – Comprehensive High Complexity (60–74 Min)**	Y

The N* denotes procedure codes that will not be allowed to be rendered via telehealth following the Public Health Emergency (PHE) expiration, effective on or after 05/12/2023, under guidance in place as of the manual's effective date.

Qualifying Procedure Codes – 3 of 3

Service Code	Description	Telehealth – Allowed Mode of Delivery
99211	Established Patient Office Outpatient – Minimal Problems	Y
99212	Established Patient Office Outpatient – Problem Focused (10 –19 Min)	Y
99213	Established Patient Office Outpatient – Expanded Problem Focused (20–29 Min)	Y
99214	Established Patient Office Outpatient – Detailed (30–39 Min)	Y
99215	Established Patient Office Outpatient – Comprehensive High Complexity (40 –54 Min)**	Y
96136	Psychological Or Neuropsych Test Admin/Scoring By Physician/QHP, 2 Or More Tests, First 30 Minutes (Neuropsych)	Y
96137	Psychological Or Neuropsych Test Admin/Scoring By Physician/QHP, 2 Or More Tests, Each Addtl 30 Minutes (Neuropsych)	Y
96138	Psychological Or Neuropsych Test Admin And Scoring By Technician, First 30 Minutes (Neuropsych)	Y
96139	Psychological Or Neuropsych Test Admin And Scoring By Technician, Each Addtl 30 Minutes (Neuropsych)	Y
96146	Psychological Or Neuropsych Test Admin With Single Automated Instrument, Automated Results Only (Neuropsych)	Y
H0049	Alcohol And/Or Drug Screening	Y
H0050	Alcohol And/Or Drug Services, Brief (Per 15 Min)	Y
H0001	Alcohol And/Or Drug Assessment	Y
H0004	Alcohol And/Or Drug Services – Individual	Y
H0005	Alcohol And/Or Drug Services – Group (Per Person)	Y
H0005	Alcohol And/Or Drug Services – Family (Per Family Member)	Y
H0015	Alcohol And/Or Drug Services – Intensive Outpatient 2.1 Group	N*


The N* denotes procedure codes that will not be allowed to be rendered via telehealth following the Public Health Emergency (PHE) expiration, effective on or after 05/12/2023, under guidance in place as of the manual's effective date.



Appendix 2: CSOC Wraparound Agencies (WAAs) by Regions

Region	Area	Wraparound Agency	Address	Main Phone Number	Direct Contact for Interested Providers
Region 1	Greater New Orleans	National Child and Family Services	824 Elmwood Park Blvd., Ste 135 Harahan, LA 70123	(504) 266-2576	
Region 2	Baton Rouge / Capital Area	National Child and Family Services	9150 Bereford Avenue Baton Rouge, LA 70809	(225) 456-2006	
Region 3	Covington / Florida Parishes	Louisiana Choices	116 Robin Hood, Ste. B Hammond, LA 70403	(985) 318-3250	
Region 4	Houma / Southcentral LA	Ascent Health, Inc.	1198 Barrow St. Houma, LA 70360	(985) 232-3930	<ul style="list-style-type: none"> Kasha Clay at kclay@ascentlife.org
Region 5	Lafayette / Acadiana	Eckerd Wraparound Agency	1414 Eraste Landry Rd. Lafayette, LA 70506	(337) 456-6669	<ul style="list-style-type: none"> Amie Touchet, Community Resource Specialist at atouchet@eckerd.org; Cell 337-296-4008 Jodie Roberts, Operations Director at jroberts@eckerd.org; Cell 318-464-6520
Region 6	Lake Charles / Imperial Calcasieu	Louisiana Choices	1800 Ryan Street Lake Charles, LA 70601	(337) 310-3737	
Region 7	Alexandria / CenLa	Eckerd Wraparound Agency	6501 Coliseum Blvd., Ste. 700 Alexandria, LA 71303	(318) 443-7900	<ul style="list-style-type: none"> Sandra Dyer, Community Resource Specialist at SDyer@eckerd.eckerd.org or Cell 318-451-0152 Jodie Roberts, Operations Director at jroberts@eckerd.org Cell: 318-464-6520
Region 8	Shreveport / Northwest LA	Louisiana Choices	2620 Centenary Blvd. Shreveport, LA 71104	(318) 221-1807	
Region 9	Monroe / Northeast LA	Ascent Health, Inc.	502 N. 2nd Street Monroe, LA 71201	(318) 654-4245	<ul style="list-style-type: none"> Amy Clark at aclark@ascentlife.org

Appendix 3: Process for Joining the Magellan CSoc Provider Network




How to Become a Provider

1. Interested Providers are directed to the [Medicaid Behavioral Health Services Provider Manual](#) to review information about provider qualifications, requirements, and the types of licenses necessary to provide services.
 - If you are not already licensed, you may apply for an LDH license through the [LDH Health Standards Section](#) (HSS) via license programs available on the HSS website. For information about obtaining a DCFS license, please review information available on the [DCFS Licensing](#) website.
 - ****Please do not accept any referrals or treat any members until you have been fully credentialed and contracted with Magellan.****
2. Complete and Return an [Interested Provider Form](#)
 - Please review and complete in its entirety.
 - Complete a [W-9](#) and return it with the [Interested Provider Form](#) (IPF) by email to LACSoCproviderquestions@magellanhealth.com or fax all documents to 1-888-656-4229.
3. Become a **Credentialed** provider with Magellan Health
 - Once you complete steps one and two, we will send you a **Credentialing Application** by email.
 - Once you receive the application, please return it along with all supplemental documentation to Magellan’s Contract Support.
4. Become a **Contracted** provider with Magellan Health
 - Once you complete steps one, two and three, we will send a contract/agreement.
 - Once you receive the contract/agreement, please sign and return to the appropriate address. (documented in the contract materials)

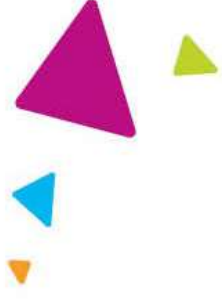
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humanity to
healthy, vibrant
lives

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