# Great Rivers Behavioral Health Administrative Services Organization

Policy Title: Non-Medicaid Services, General Fund Policy No. 6033.02

State and Federal Block Grant

Category: Service Area and Consumer Eligibility Date Adopted: 7/9/2021

Date Revised: 10/8/2021,

01/13/2023 Date Reviewed:

Reference: Washington Health Care Authority (HCA) Contract

## I. PURPOSE

1.1. To define how Great Rivers Behavioral Health Administrative Services Organization's (Great Rivers BH-ASO) services are administered and prioritized for Individuals in need of non-Medicaid services, based on Available Resources.

## II. POLICY

- 2.1. Great Rivers BH-ASO utilizes General Fund State (GFS), Substance Abuse Block Grant (SABG), and Mental Health Block Grant (MHBG), within Available Resources, to provide services to the Individuals who meet financial eligibility and priority.
- 2.2. Great Rivers BH-ASO prioritizes state funds for crisis services, Evaluation and Treatment services for Individual's ineligible for Medicaid, and services related to the administration of Chapters 71.05 and 71.34 RCW. Available Resources shall then be used for voluntary inpatient, crisis stabilization services, and services for the priority populations listed in this Policy.
- 2.3. Great Rivers BH-ASO may receive other funding, including time-limited grants, that has different eligibility criteria than other funding sources, such as, GFS, SABG, and MHBG. The eligibility criteria for this funding will be based on the requirements in the contract, grant, or other guidance received from the funder.

## III. DEFINITIONS

- 3.1. Available Resources: means funds appropriated for the purpose of providing behavioral health programs. This includes federal funds, except those provided according to Title XIX of the Social Security Act, and state funds appropriated by the Legislature.
- 3.2. <u>Dedicated Marijuana Account (DMA):</u> These Available Resources are expended for substance use disorder (SUD) treatment services for youth living at or below two hundred twenty percent (220%) of federal poverty level, without insurance coverage or who are seeking services independent of their parent/ guardian.
- 3.3. Mental Health Block Grant (MHBG): These Available Resources are expended for optional and required services as delineated in the HCA approved Great Rivers BH-ASO MHBG Project Plan. Great Rivers BH-ASO Network Providers shall comply with contract requirements for MHBG services.

3.4. <u>Substance Abuse Block Grant (SABG)</u>: These Available Resources are expended for optional and required services as delineated in the HCA approved Great Rivers BH-ASO SABG Project Plan. Great Rivers BH-ASO Network Providers shall comply with contract requirements for SABG priority populations and waiting lists to determine which Individuals are given prioritized access to SABG funded services.

## IV. PROCEDURES

- 4.1. <u>Eligibility:</u> The Network Providers are delegated the responsibility for determining whether the Individual is eligible for non-crisis behavioral health services (see Great Rivers BH-ASO Policy 6014 Availability and Sufficiency of Services).
- 4.2. <u>Authorizations</u>: Authorizations for non-crisis behavioral health services which medical necessity applies and does not apply (non-medically necessary) are provided for the level of care and criteria utilizing the Great Rivers BH-ASO Policy 6034 Level of Care Guidelines. There are two types of authorizations for non-Medicaid, medically necessary and non-medically necessary services:
  - 4.2.1. Pre-authorized services for when dedicated funds are in a Network Provider contract; and,
  - 4.2.2. Prior authorization required by Great Rivers BH-ASO for when dedicated funds are not in a Network Provider contract utilizing the GRBH-ASO Non-Medical Request Form and GRBH-ASO Non-Medically Necessary Request Form.
- 4.3. <u>Dedicated Marijuana Account:</u> These funds shall be used to fund SUD treatment services for youth living at or below two hundred twenty percent (220%) of the federal poverty level, without insurance coverage or who are seeking services independent of their parent/guardian. DMA funds may be used for development, implementation, maintenance, and evaluation of programs that support intervention, treatment, and recovery support services for middle school and high school aged students. All new programs and services must direct at least eighty-five percent (85%) of funding to evidence-based or research-based programs and practices that produce objectively measurable results and are expected to be cost beneficial. Up to fifteen percent (15%) of the funds appropriated for new programs and new services may be used to provide support to proven and tested practices, emerging best practices, or promising practices.
- 4.4. General Fund State: Great Rivers BH-ASO will prioritize state funds for crisis services, Evaluation and Treatment Services for Individuals ineligible for Medicaid, and services related to the administration of Chapter 71.05 and 71.34 RCW. Great Rivers BH-ASO Network Providers shall provide non-crisis behavioral health services funded by GFS, within Available Resources, to Individuals who meet financial eligibility standards (if they do not qualify for Medicaid and have income up to two hundred twenty percent (220%) of the federal poverty level, and meet the medical necessity or non-medically necessary criteria for all services provided to them) and meet one of the following:
  - 4.4.1. Are uninsured:

- 4.4.2. Have insurance but are unable to pay the co-pay or the deductible for services;
- 4.4.3. Are using excessive crisis services due to inability to access non-crisis behavioral health services;
- 4.4.4. Have more than five (5) visits over six months to the emergency department, detax facility, or sobering center due to a substance use disorder (SUD).
- 4.5. Federal Block Grants-SABG and MHBG Great Rivers BH-ASO will:
  - 4.5.1. Collect information from key stakeholders and community partners, including Tribal partners and other IHCPs, to develop the regional SABG and MHBG Project Plans.
  - 4.5.2. Request the approval of the project plans from Great Rivers BH-ASO Advisory Board.
  - 4.5.3. Provide documentation of board-approved project plans to HCA annually by July 15 for approval. Plans will be on the most recent HCA templates. Any changes to the project plans will be submitted to HCA for review and approval prior to implementation.
  - 4.5.4. Provide, or subcontract for services, according to the approved regional MHBG and SABG project plans.
  - 4.5.5. Provide MHBG services to promote recovery for an adult with a Serious Mental Illness (SMI) and resiliency for Seriously Emotionally Disturbed (SED) children in accordance with federal and state requirements. SABG funds shall be used to provide services to priority populations as outlined below.
  - 4.5.6. Grant funds may not be used, directly or indirectly, to purchase, prescribe, or provide marijuana or treatment using marijuana. Treatment in this context includes the treatment of opioid use disorder. Grant funds also cannot be provided to any Individual who or organization that provides or permits marijuana use for the purposes of treating substance use or mental disorders. See, e.a., 45 C.F.R. § 75.300(a) (requiring HHS to "ensure that Federal funding is expended . . .. in full accordance with U.S. statutory . . . requirements."); 21 U.S.C. §§ 812(c)(10) and 841 (prohibiting the possession, manufacture, sale, purchase, or distribution of marijuana). This prohibition does not apply to those providing such treatment in the context of clinical research permitted by the DEA and under the Federal Drug Administration (FDA)-approved investigational new drug application where the article being evaluated is marijuana or a constituent thereof that is otherwise a banned substance under federal law.
  - 4.5.7. In collaboration with Network Providers, ensure that FBG funds are used only for services to Individuals who are not enrolled in Medicaid or for services that are not covered by Medicaid as

#### described below:

Benefits	Services	Use MHBG or SABG Funds	
Individual is not a Medicaid recipient	Any allowable type	Yes	No
Individual is a Medicaid recipient	Allowed under Medicaid	No	Yes
Individual is a Medicaid recipient	Not allowed under Medicaid	Yes	No

- 4.5.8. Upon request from HCA, attend or send a representative to the Washington State Behavioral Health Advisory Committee meetings to discuss priorities for future FBG supported services.
- 4.5.9. In conjunction with Network Providers, participate in FBG required annual peer reviews when requested by HCA (42 U.S.C. 300x-53(a) and 45 C.F.R. § 96.136, MHBG Service Provisions). Reviews are conducted by Individuals with expertise in the field of mental health treatment (for MHBG) and by Individuals with expertise in the field of substance abuse treatment (for SABG) consisting of at least five percent (5%) of treatment providers.
- 4.5.10. Will submit regional MHBG and SABG final reports using HCA provided templates, annually, by August 1 of each year, for services provided in the prior state fiscal year.
- 4.6. <u>SABG:</u> Great Rivers BH-ASO Network Providers shall provide non-crisis behavioral health services funded by SABG, within Available Resources, to Individuals who are not enrolled in Medicaid, or for services that are not covered by Medicaid. Additionally, providers shall prioritize funding to Individuals on the following priority population list.
  - 4.6.1. SABG services will be provided in the following priority order to those who are:
    - 4.6.1.1. Pregnant Individuals injecting drugs;
    - 4.6.1.2. Pregnant Individuals with SUD;
    - 4.6.1.3. Women with dependent children; and
    - 4.6.1.4. Individuals who are injecting drugs or substances.
    - 4.6.1.5. The continuing priority listing of additional populations is in no particular order:
      - 4.6.1.5.1. Postpartum women for up to one (1) year regardless of pregnancy outcome;
      - 4.6.1.5.2. Individuals transitioning from residential care to outpatient care;

- 4.6.1.5.3. Youth; and
- 4.6.1.5.4. Offenders as defined in RCW 70.96A.350, Criminal Justice Treatment Account.
- 4.6.2. Services shall not be denied to eligible Individuals regardless of the:
  - 4.6.2.1. Individual's drugs of choice;
  - 4.6.2.2. The fact the Individual is taking FDA approved medically prescribed medications; and
  - 4.6.2.3. The fact that a person is using over the counter nicotine cessation medications or actively participating in a nicotine replacement therapy regimen.
- 4.6.3. The following requirements apply to provision of Interim Services:
  - 4.6.3.1. Great Rivers BH-ASO Network Providers shall implement and maintain SABG waiting lists and provide Interim Services for members of SABG priority population in priority order, who are eligible, but for whom SUD treatment services are not available due to limitations in provider capacity or Available Resources. Interim Services are requested by Network Providers utilizing the Great Rivers BH-ASO Non-Medicaid Request Form (following instructions listed).
  - 4.6.3.2. Interim Services shall be made available by Network Providers to pregnant and postpartum women, including parenting women with dependent children (PPW) and Individuals using intravenous drugs (IUID), who are currently waiting to enter a treatment program due to a lack of capacity, and shall be provided within 48 hours of the Individual requesting treatment. Interim Services are provided to reduce the adverse health effects of substance abuse, promote the health of the Individual, and reduce the risk of disease transmission; such services are provided until the Individual is admitted to a treatment program. Services include:
    - 4.6.3.2.1. Referral for prenatal care for a pregnant woman and counseling on the effects of alcohol and drug use on the fetus, brief screening activities, the development of a service plan, individual or group contacts to assist the Individual directly or by way of referral in meeting their basic needs, updates to advise them of treatment availability,

- and information to prepare them for treatment.
- 4.6.3.2.2. Counseling, education, and referral regarding Human immunodeficiency virus (HIV) and tuberculosis (TB) education, if necessary, a referral to treatment for HIV and TB.
- 4.6.3.3. Admission to treatment services for IUID shall be provided within fourteen (14) calendar days after the Individual makes the request, regardless of funding source.
- 4.6.3.4. If there is no treatment capacity within fourteen (14) calendar days of the initial request, offer or refer the Individual to Interim Services within forty-eight (48) hours of the initial request for treatment services.
- 4.6.3.5. A pregnant woman who is unable to access treatment due to lack of capacity and needs withdrawal management, may be referred to a Chemical Using Pregnant (CUP) program for admission, typically within 24 hours.
- 4.6.4. Capacity Management per 42 U.S.C. 300-23 and 42 U.S.C. 300X 27
  - 4.6.4.1. Great Rivers BH-ASO will notify HCA, in writing, when our network of SABG providers is at ninety percent (90%) capacity.
  - 4.6.4.2. On a quarterly basis, Great Rivers BH-ASO will submit the SABG Capacity Management Form on the last day of the month following the close of the quarter. It must identify PPW and IUID Network Providers receiving SABG funds, who are at ninety percent (90%) capacity, and what action was taken to address capacity.
- 4.6.5. Tuberculosis Screening, Testing, and Referral per 42 U.S.C. 300x-24(a) and 45 CFR 96.127
  - 4.6.5.1. The Network Provider must ensure TB services (counseling, testing, medical evaluation, and treatment) are either directly available or referred to another provider for each Individual receiving SABG funded SUD treatment. If the Individual is denied admission to a TB program because of the lack of capacity, the Network Provider, through case management activities, will refer the Individual to another provider offering the same service needed.
- 4.6.6. Outreach to IUID per 45 C.F.R. 96.126(e)

- 4.6.6.1. The Network Provider shall ensure that opioid dependency outreach is provided to IUID (45 C.F.R. § 96.126)(e)).
- 4.7. <u>FBG Restrictions</u>: Great Rivers BH-ASO will comply with the utilization funding agreement guidelines within the State's most recent FBG plan. The Contractor agrees to comply with Title V, Section 1913 of the Public Health Services Act [42 U.S.C. 300x-1 et seq.]. Great Rivers BH-ASO shall not use MHBG funds for the following:
  - 4.7.1. Great Rivers BH-ASO's administrative costs associated with salaries and benefits at Great Rivers BH-ASO's organization level;
    - 4.7.1.1. Inpatient mental health services;
    - 4.7.1.2. Construction and/or renovation;
    - 4.7.1.3. Capital assets or the accumulation of operating reserve accounts;
    - 4.7.1.4. Equipment costs over \$5,000;
    - 4.7.1.5. Cash payments to Individuals.
- 4.8. Other Funding Sources: Great Rivers BH-ASO will comply with the eligibility guidelines associated to specific funding sources as found in the contracts for those funds or based on guidance provided by the funder.
  - 4.8.1. Great Rivers BH-ASO network providers may use this funding, within available resources, for individuals who meet the medical necessity and non-medically necessary criteria for all services provided to them and one of the follow criteria:
    - 4.8.1.1. Are uninsured or underinsured;
    - 4.8.1.2. Have insurance but are unable to pay the co-pay or the deductible for the services;
    - 4.8.1.3. Have not met their Medicaid spenddown; or
    - 4.8.1.4. Lost access to or were previously unable to receive treatment services.
  - 4.8.2. The use of other funding must be authorized by Great Rivers BH-ASO prior to making any payments for services provided.
- 4.9. <u>Spenddown:</u> Individuals who are on a spend-down are considered non-Medicaid. The priority population criteria (listed above) are used when determining their eligibility for services. Both GFS and FBG funds may be used to spenddown qualifying medical expenses incurred such as but not limited to, voluntary and involuntary inpatient, crisis stabilization, and crisis residential stays. HCA designates and approves Great Rivers BH-ASO as a Public Program as described in WAC 182-509-0110(9). Qualified expenses paid by Great Rivers BH-ASO shall be used to reduce an Individual's spenddown liability as outlined in Exhibit C, RSA Spenddown Liability. See Great Rivers BH-ASO Policy 1592 Medicaid Spenddown Payment for procedures.

- 4.10. <u>Cost Sharing Assistance:</u> Great Rivers BH-ASO may use block grant funds to help Individuals satisfy cost-sharing requirements for SABG-authorized SUD services or MHBG-authorized mental health services. Funds may be used to cover health insurance deductibles, coinsurance, and copayments to assist Individuals in meeting their cost sharing responsibilities. Great Rivers BH-ASO must ensure that:
  - 4.10.1. The Network Provider is a recipient of block grant funds and payments are made directly to the provider of service;
    - 4.10.1.1. Cost sharing is for a block grant authorized service;
    - 4.10.1.2. Payments are in accordance with SABG or MHBG laws and regulations;
    - 4.10.1.3. Cost sharing payments are made directly to the Network Provider of the service; and,
    - 4.10.1.4. A report is provided to HCA upon request that identifies:
      - 4.10.1.4.1. The number of Individuals provided cost sharing assistance;
      - 4.10.1.4.2. The total dollars paid out for cost sharing; and
      - 4.10.1.4.3. Network Providers who received cost sharing funds.

#### V. MONITORING

- 5.1. Contracted providers are required to check client eligibility at each service visit or at least monthly to use non-Medicaid funds for non-crisis services.
  - 5.1.1. Great Rivers BH-ASO monitors this by checking clients who are not on the MCO-provided 834 file of Medicaid eligible clients.
- 5.2. Once the service provider reaches ninety percent (90%) of capacity to admit and provide treatment to individuals (not including Interim Services), the provider shall immediately notify Great Rivers BH-ASO.
- 5.3. Great Rivers BH-ASO will monitor proper utilization of MHBG/SABG funds through an annual fiscal review(s) and as part of monthly invoice review.
- 5.4. Great Rivers BH-ASO Advisory Board also monitors the utilization of MHBG/SABG funds monthly.
- 5.5. Great Rivers BH-ASO will complete, at least annually, a focused review of the use of FBG, including a review of the clinical records for individuals utilizing these funds.
- 5.6. For all other funding, Great Rivers BH-ASO will follow the monitoring requirements in the contract related to the administration of those funds.

## VI. REPORTING

- 6.1. Great Rivers BH-ASO will notify HCA, in writing, when its network of SABG providers' capacity is at ninety percent (90%).
- 6.2. Great Rivers BH-ASO will submit HCA Contract Exhibit D, SABG Capacity Management Form, quarterly, on the last day of the month following the close of the quarter.
- 6.3. The Capacity Management Form must identify PPW and IUID providers receiving SABG funds, who are at ninety percent (90%) capacity, and what action was taken to address the capacity issues.
- 6.4. Great Rivers BH-ASO will submit all reports required for each funding source according to the requirements of the contract.

## **ATTACHMENTS**

**POLICY SIGNATURE** 

GRBH-ASO Non-Medicald Request Form
GRBH-ASO Non-Medically Necessary Request Form

DocuSigned by:	
Vickie L. Raines	2/3/2023
Vickie L. Raines, Chair	Date
Great Rivers Governing Board	