

**Behavioral Health Rehabilitation Services (BHRS)
and Intensive Behavioral Health Services (IBHS)
Incentive Program**

This Bulletin applies to all in-network providers delivering Behavioral Health Rehabilitation Services (BHRS) and Intensive Behavioral Health Services (IBHS). It provides updates to CBH Bulletin 19-13, which detailed the BHRS Incentive Program and additional administrative processes to support the monitoring of performance metrics. This update includes changes to the incentive program made with the initiation of IBHS.

With the promulgation of IBHS, CBH has made several changes to the authorization of BHRS, outlined in CBH Bulletins 19-23, 19-24, and 19-25. To maintain CBH's commitment to high-quality services for youth enrolled in our BHRS and IBHS programs and our partnership with providers, elements of the BHRS Incentive Program will be available to providers who deliver BHRS and IBHS in 2020.

Effective January 1, 2020, Performance Metric 2, Staffing/Paid to Authorization, will be discontinued for both BHRS and IBHS programs.

Providers will be eligible to continue to participate in Performance Metrics for Access and Clinical Conversation in 2020 during the delivery of BHRS and IBHS. Once a BHRS provider receives their IBHS License, the metrics will apply to their IBHS program. CBH will continue to evaluate provider performance at the end of every quarter and will issue additional payment to eligible providers.¹

PERFORMANCE METRIC #1: ACCESS

Operational Definition: The provider must take cases from the BHRS or IBHS Available Case List each quarter as dependent upon CBH need. Required access, as identified below, will be based on provider size according to the provider's overall BHRS census in Calendar Year (CY) 2019.

¹ Please note: quarterly payments will be for the previously completed quarter to allow for claims lag (i.e., Quarter 1 performance will be evaluated and paid at the completion of Quarter 2).

- 0 – 200 youth = Provider must take 9 cases per quarter
- 201 – 400 youth = Provider must take 15 cases per quarter
- 401+ youth = Provider must take 18 cases per quarter

Taking cases from the BHRS/IBHS Available Case List is further defined as:

- the provider accepting the case **and** requesting service authorization within 5 business days, *or*
- having the family report to both the provider **and** via a CBH confirmation call that they are no longer interested in receiving the authorized services

After requesting a case to review, the case will be removed temporarily from the BHRS or IBHS Available Case List so that other providers are not able to request the case to review; however, the provider reviewing the case must provide an outcome to CBH within 5 business days regarding case review and outreach to the family.

To be eligible, the provider will not be able to place cases onto the BHRS or IBHS Available Case List during the quarter (apart from family transfer requests and/or step-downs from higher levels of care [e.g. Family Based Services, Acute Partial Hospital Programs, etc.]). It is expected that youth evaluated by the provider’s outpatient, BHRS exception, and other IBHS programs will be staffed by the referring provider and will count as cases placed onto the BHRS/IBHS Available Case List if referred to CBH for staffing. Finally, the provider must remain open for intake and accommodate requests made by families and/or other outside referral sources.

Potential Rate Increase: 4%

Monitoring Plan: Quarterly analysis of cases taken from and placed onto the BHRS/IBHS Available Case List; Monthly confirmation that the provider remains open to intake.

Note: If a provider changes licensure status mid-quarter, the number of cases taken from both available case lists will be counted. For example, if a provider is required to take 9 cases from the list, and takes 5 cases from the BHRS Available case list before their IBHS license is approved, they will need to take 4 cases from the IBHS available case list prior to the close of the quarter to receive the incentive.

PERFORMANCE METRIC #2: STAFFING/PAID-TO-AUTHORIZATION

This metric is being discontinued effective January 1, 2020

PERFORMANCE METRIC #3: CLINICAL CONVERSATIONS

While ISPTs are no longer required in IBHS or in BHRS effective January 17, 2020, CBH will continue to incentivize their use for cases where a service is being requested that requires a

medical necessity review. Please see Bulletin 19-25 for a list of services that require medical necessity review.

Operational Definition: The provider must invite CBH Clinical Management to ISPT meetings for all youth being recommended for initial services that require medical necessity review. CBH Clinical Care Management (CCM) staff will attend as many as possible. In addition, the provider must participate in monthly Length-Of-Stay (LOS) reviews for all youth approaching a LOS of 18 months or longer in BHRS and IBHS.

In order to track invitations made to CBH CCMs for initial BHRS or IBHS ISPT meetings and ensure CBH can attend as many as possible, ISPT invitations must be submitted to CBH using the “Initial ISPT Meeting Invitation Form” (see attachment) through the secure website, labeled as **ProviderID#_MbrMA#_InitialISPT**. CBH must receive the invitation at least 3 business days prior to the date/time of the scheduled initial ISPT meeting for your organization to receive credit.

Each provider’s CBH CCM will provide the monthly LOS review list 3 months in advance of the authorization end date (e.g. January 2020 end-authorization lists will be sent to providers in early October 2019 for LOS reviews to be conducted in November 2019, etc.).

Potential Rate Increase: 3%

Monitoring Plan: Monthly analysis of initial BHRS ISPT meetings and initial BHRS authorizations; Monthly analysis of completed LOS reviews.

FINANCIAL INCENTIVE PROGRAM LEVELS OF CARE

LOC_BK	LEVELS OF CARE FOR BHRS WRAPAROUND	GROUP
400.003	Behavioral Specialist Consultant Master Level	BSC
400.076	Behavioral Specialist Consultant Master Level – Deaf/HoH Services	BSC
400.095	Behavioral Specialist Consultant Master Level – Autism Services	BSC
400.007	Mobile Therapy	MT
400.067	Mobile Therapy – Deaf/HoH Services	MT
400.094	Mobile Therapy – Autism Services	MT
400.031	Therapeutic Staff Support – School	TSS
400.032	Therapeutic Staff Support – Non-School	TSS
400.068	Therapeutic Staff Support – School – Autism Services	TSS
400.069	Therapeutic Staff Support – Non-School – Autism Services	TSS
400.077	Therapeutic Staff Support – School – Deaf/HoH Services	TSS
400.078	Therapeutic Staff Support – Non-School – Deaf/HoH Services	TSS

Levels of Care for IBHS Individual Services will be included once they have been developed.