

APPENDIX

STATE EXAMPLES
AND
RESOURCES



ADVANCE PREVENTION BY PROMOTING MENTAL HEALTH AND WELLBEING

STATE EXAMPLES

Support mental health promotion and primary prevention.

[North Carolina](#) released a toolkit that provides information about resources about how to manage mental health needs during the pandemic.

Increase awareness of and linkages to other social services and supports.

[California](#) plans to require its health plans to conduct individual risk assessments that identify social risk factors, like lack of transportation and food insecurity.

[Massachusetts](#) requires its plans to screen all members for their social support needs.

[Rhode Island](#) requires its plans to refer individuals to social services and supports and monitor the outcome of those referrals.

RESOURCES

[Addressing Social Determinants of Health via Managed Care Contracts and Section 1115 Demonstrations](#). Center for Health Care Strategies & Association of Community Affiliated Plans. December 2018.

[Leading Edge Practices in Medicaid for Addressing Social Factors that Affect Health](#). State Health and Value Strategies. April 2019.

[Opportunities in Medicaid and CHIP to Address the Social Determinants of Health](#). Centers for Medicaid and CHIP Services. January 2021.

[Preventing Adverse Childhood Experiences](#). Centers for Disease Control and Prevention. 2019.

[Social Determinants of Mental Health: Where We Are and Where We Need to Go](#). Current Psychiatry Reports. September 2018.

[Social Risk Factor Screening in Medicaid Managed Care](#). State Health and Value Strategies. October 2020.

STREAMLINE ELIGIBILITY FOR SERVICES

STATE EXAMPLES

Simplify or relax requirements for assessments.

[Arizona](#) formed a task force to address behavioral health concerns arising due to the pandemic.

Move away from diagnostic and utilization criteria for service eligibility.

[Colorado](#) implemented a policy allowing six visits with a licensed behavioral health provider in a primary care setting without a diagnosis of a covered behavioral health condition.

[Illinois](#) is assessing its behavioral health screening tools for racial and ethnic bias.

[Illinois](#) has a longstanding, robust structure to support behavioral health screenings. The state is reviewing this and identifying opportunities to ensure treatment is incentivized.



APPENDIX | ALL MEDICAID MEMBERS

CONTINUE TO PROMOTE INTEGRATION OF PHYSICAL AND BEHAVIORAL HEALTH SERVICES

STATE EXAMPLES

Incentivize screening and referrals between primary care and behavioral health providers.

[Louisiana](#) requires MCOs to employ a full-time behavioral health medical director who is charged with developing training for primary care providers on specific behavioral health screening tools and collaborative care models, as well as provide all primary care providers with a current list of referral providers, including behavioral health providers, on a quarterly basis.

[Minnesota](#) requires that managed care plans provide Screening, Brief Intervention, and Referral to Treatment (SBIRT) in primary care clinics.

[Pennsylvania's](#) Telephonic Psychiatric Consultation Service Program increases the availability of peer-to-peer child psychiatry consultation teams to primary care providers and other prescribers of psychotropic medications for children.

[Virginia](#) requires its health plans to demonstrate the ability to cover specialty consultant services (e.g., telepsychiatry) to interested primary care providers and contract with network behavioral health providers that can provide assessments and other services via telehealth, as needed.

[Washington](#) requires its plans to submit a quarterly report on bi-directional behavioral and physical health integration to the Medicaid agency.

Advance integrated care delivery models.

CCOs bidding for contracts with [Oregon's](#) Medicaid program must identify and address billing and policy barriers that prevent behavioral health providers from billing for services from a physical health setting.

[Vermont](#) implemented a hub and spoke system for supporting people with opioid use disorder.

RESOURCES

[Costs of Using Evidence-Based Implementation Strategies for Behavioral Health Integration in a Large Primary Care System](#). Health Services Research. November 2020.

[Early Mortality in SMI: Federal and State Policy Initiatives](#). Psychiatric Times. May 2020.

[How Arizona Medicaid Accelerated the Integration of Physical and Behavioral Health Services](#). The Commonwealth Fund. May 2017.

[Integrated Systems and Services for People with Co-Occurring Mental Health and Substance Use Conditions: What's Known, What's New, and What's Now?](#) National Association of State Mental Health Program Directors. August 2019.

[Integration of Behavioral and Physical Health Services in Medicaid](#). Medicaid and CHIP Payment and Access Commission. March 2016.

[Interventions to Increase Access to or Uptake of Physical Health Screening in People with Severe Mental Illness: a Realist Review](#). British Medical Journal. February 2018.

BUILD A COMPREHENSIVE APPROACH TO ADDICTION TREATMENT

STATE EXAMPLES

Prevent addiction by addressing the root causes.	<p>California is conducting a statewide effort to screen members for Adverse Childhood Experiences (ACEs). The state is reimbursing Medicaid providers for conducting the trauma screening.</p> <p>Colorado provides home visiting services through its targeted case management benefit.</p> <p>South Carolina has a “pay-for-success” initiative to support Nurse Family Partnership services in the state.</p>
Increase access to community-based care.	<p>Massachusetts' Consultation Service for Treatment of Addiction and Pain (MCSTAP) provides support for primary care providers treating addiction.</p> <p>Michigan removed prior authorization requirements for MAT.</p> <p>New York continues to leverage telehealth for substance use disorder treatment (the state was using telehealth for addiction treatment prior to the pandemic).</p> <p>Virginia's Office-based Opioid Treatment Program permits mid-level practitioners to deliver MAT.</p> <p>Washington State's Partnership Access Line (PALs) allows pediatric providers to consult with a psychiatrist on demand, and it is jointly financed by Medicaid and commercial insurers.</p>
Increase access to specialized inpatient services as one component of comprehensive addiction treatment.	<p>Idaho expanded access to inpatient services through a state plan amendment.</p> <p>Louisiana and Ohio have an approved 1115 waiver to provide specialized inpatient services.</p>
Provide recovery supports.	<p>Georgia provides skills training for individuals with mental illness through its coverage of psychosocial rehabilitation.</p> <p>New York provides supported employment for members with significant behavioral health needs.</p> <p>Oklahoma and Arizona are two states that provide peer support for beneficiaries with an addiction. Arizona also supports a training academy for peers.</p>

RESOURCES

[Access to Substance Use Disorder Treatment in Medicaid](#). MACPAC. June 2018.

[Federal Legislation to Address the Opioid Crisis: Medicaid Provisions in the SUPPORT Act](#). Kaiser Family Foundation. October 2018.

[Key Substance Use and Mental Health Indicators in the United States: Results from the National Survey on Drug Use and Health, 2019](#). SAMHSA. September 2020.

[Mandatory Medicaid State Plan Coverage of Medication Assisted Treatment](#). CMS. December 2020.

[Medicaid and Home Visiting: The State of States' Approaches](#). Johnson Group Consulting. January 2019.

[Medicaid and the Opioid Epidemic](#). MACPAC. June 2017.

[Medicaid Innovation Accelerator Program: Reducing Substance Use Disorders: Exploring Telehealth Delivery Methods for Substance Use Disorder Treatment](#). CMS. September 2019.

[Peer and Family Career Academy](#). Arizona.

[Recovery Support Services for Medicaid Beneficiaries with a Substance Use Disorder](#). MACPAC. July 2019.

[Review of State Strategies to Expand Medication-Assisted Treatment](#). Technical Assistance Collaborative. May 2019.

[Section 1115 Waivers for Substance Use Disorder Treatment](#). MACPAC.



STRENGTHEN AND BROADEN CRISIS RESPONSE SYSTEMS

STATE EXAMPLES

Connect individuals in crisis with appropriate care.

[Arizona](#)'s Medicaid agency operates regional 24-hour crisis telephone lines to respond to individuals in need and dispatch mobile response teams if necessary.

[Kentucky](#) requires its plans to have an emergency and crisis Behavioral Health Services Hotline staffed by trained personnel 24-hours per day.

Ensure the right responders are dispatched to a crisis.

The [Colorado](#) Co-Responder Program, which is jointly funded by Medicaid and state and local dollars, pairs officers and behavioral health professionals who respond to 911 calls with a suspected behavioral health component.

[Colorado, Delaware, and Minnesota](#) are three states where paramedics or other first responders can connect with tele-behavioral providers remotely in order to assess patient needs and make referrals.

[Tennessee](#)'s crisis services program has 13 mobile crisis teams throughout the state funded through a combination of state general fund and Medicaid dollars.

Develop specialized settings to support individuals in crisis.

[Arizona](#) directs plans to cover services provided by 24-hour crisis stabilization/observation and detox facilities, 24-hour outpatient clinics, and crisis respite.

[Rhode Island](#) developed a special Medicaid rate for "BH Link," the state's crisis diversion facility.

[Tennessee](#)'s crisis stabilization and walk-in units are funded with a combination of state general fund dollars and Medicaid dollars.

RESOURCES

[A Community Guide for Development of a Crisis Diversion Facility](#). Arnold Ventures. February 2020.

[A Guidebook to Reimagining America's Crisis Response System](#). Abt Associates. September 2020.

[Behavioral Health Crisis Alternatives](#). Vera Institute of Justice. November 2020.

[Building State Capacity to Address Behavioral Health Needs Through Crisis Services and Early Intervention](#). Milbank Memorial Fund. November 2020.

[Cops, Clinicians, or Both? Collaborative Approaches to Responding to Behavioral Health Emergencies](#). National Association of State Mental Health Program Directors. August 2020.

[Crisis Services FAQ](#). Arizona Health Care Cost Containment System. October 2020.

[Crisis Services: Meeting Needs, Saving Lives](#). SAMHSA. December 2020.

[Effectiveness of Police Crisis Intervention Training Programs](#). Journal of the American Academy of Psychiatry and the Law. December 2020.

[Innovative Solutions to Address the Mental Health Crisis: Shifting Away from Police as First Responders](#). Brookings. November 2020.

[National Guidelines for Behavioral Health Crisis Care: Best Practice Toolkit](#). SAMHSA. 2020.

[The Sequential Intercept Model](#). SAMHSA. June 2020.

INDIVIDUALS INVOLVED IN CRIMINAL JUSTICE

STATE EXAMPLES

Use crisis services to prevent incarceration.

In [Utah](#), Salt Lake County leverages its crisis system to prevent incarceration by immediately connecting individuals to treatment.

Eliminate gaps in care that occur during the transition out of the criminal justice system.

[Kentucky](#) leverages its community mental health centers to do in-reach.

[Massachusetts](#) created three affidavits as a way to verify zero income, state residency, and incarceration status for applicants who have no other way to verify these eligibility factors.

[Massachusetts](#) is piloting an initiative where two behavioral health providers conduct in-person visits with inmates to develop individualized treatment plans and provide case management.

[New Mexico](#) was an early adopter of efforts to suspend, rather than terminate, eligibility for individuals entering the criminal justice system.

[Ohio](#) requires its plans to engage with people identified as high risk and participate in a video conference with their managed care plan prior to release.

[Utah](#), [New York](#), and [Kentucky](#) have proposed 1115 waivers to allow Medicaid to cover treatment in the 30 days prior to release. Kentucky’s proposal would provide family therapy in its bundle of pre-release services.

[Washington State](#) and [Arizona](#) support information exchange between Medicaid and the corrections department.

RESOURCES

[COVID-19, Decarceration, and the Role of Clinicians, Health Systems, and Payers](#). JAMA. November 2020.

[Guidelines for Successful Transition of People with Mental or Substance Use Disorders from Jail and Prison](#). SAMHSA. 2017.

[How States and Counties Can Help Individuals with Opioid Use Disorder Re-Enter Communities](#). The Pew Charitable Trusts. April 2020.

[Implementation of At-Risk Youth Medicaid Protections for Inmates of Public Institutions \(Section 1001 of the SUPPORT Act\)](#). CMS. January 2021.

[Medicaid’s Evolving Role in Advancing the Health of People Involved in the Justice System](#). The Commonwealth Fund. November 2020.

[Substance Abuse and America’s Prison Population](#). The National Center on Addiction and Substance Abuse at Columbia University. February 2010.

[Support for Individuals Transitioning out of the Criminal Justice System](#). Arizona Health Care Cost Containment System.

[The SUPPORT Act: New Tools in Medicaid to Address the Opioid Epidemic](#). State Health and Value Strategies. November 2018.

[Understanding Health Reforms as Justice Reform: Medicaid, Care Coordination, and Community Supervision](#). The Square One Project. October 2020.

[1115 SUD Demonstration Proposed Amendment: Continuity of Care for Incarcerated Members](#). Kentucky Department of Medicaid Services. November 2020.



CHILDREN

STATE EXAMPLES

Remove barriers to behavioral health services for children and their caregivers.

[California](#) recently released a new policy to create access to family therapy benefits before a diagnosis of a behavioral health condition is required.

[Colorado](#) implemented a policy allowing six visits with a licensed behavioral health provider in a primary care setting without a diagnosis of covered behavioral health conditions.

[Florida](#), [North Carolina](#), and many other states used the 1135 waiver authority to change policy for prior authorization of services.

Develop a comprehensive strategy to support family emotional health and stability.

[North Carolina](#) developed an Early Childhood Action Plan that outlines a cohesive vision and plan so that North Carolina's young children are healthy, grow up safe and nurtured, and are well-supported to be learning and ready to succeed.

Raise Up [Oregon](#) is the state's Early Learning System Plan that aims to improve school readiness and ensure "children are raised in healthy, stable and attached families."

[Vermont](#) has a Trauma Informed System of Care Policy that guides state agencies to recognize and respond to trauma and toxic stress that can impact family health and child development and to respond in all policies, procedures, and practices, and to actively resist re-traumatizing the people they serve.

RESOURCES

[Child Poverty, Toxic Stress and Social Determinants of Health: Screening and Care Coordination](#). The Online Journal of Nursing Learning, September 2018.

[Customizing Health Homes for Children with Serious Behavioral Health Challenges](#). Center for Health Care Strategies, March 2013.

[PAX Tools Available to Support Parents as They Teach Children at Home](#). Arizona Health Care Cost Containment System, May 2020.

[Return on Investment in Systems of Care for Children with Behavioral Health Challenges](#). National Technical Assistance Center for Children's Mental Health, April 2014.

[Fostering Social and Emotional Health Through Pediatric Primary Care: A Blueprint to Leveraging Medicaid and CHIP to Finance Change](#). Center for the Study of Social Policy, June 2019.



OLDER ADULTS

STATE EXAMPLES

Respond to the immediate health needs of older adults.

[Colorado](#) acted to ensure that home health and hospice services were available through telehealth.

[Ohio](#) Medicaid developed the “friendly caller” program to provide social supports to isolated seniors.

Transform behavioral health care for older adults.

[Washington State](#)’s Medicaid Transformation Demonstration supports unpaid caregivers of older adults who are enrolled in Medicaid but not currently accessing Medicaid-funded LTSS. It also helps individuals avoid or delay impoverishment by providing certain services for individuals who are “at risk” of needing Medicaid LTSS but do not meet Medicaid financial eligibility criteria.

RESOURCES

[AARP Framework for Isolation in Adults Over 50](#). AARP. May 2012.

[Age-Friendly Health Systems](#). Institute for Healthcare Improvement and The John A. Hartford Foundation. December 2020.

[Age-Friendly Health Systems: Guide to Using the 4Ms in the Care of Older Adults](#). Institute for Healthcare Improvement and the John A. Hartford Foundation. July 2020.

[Age-Friendly Public Health Systems Recognition Program](#). Trust for America’s Health.

[Behavioral Health in the Medicaid Program—People Use and Expenditures](#). MACPAC. June 2015.

[Behavioral Health Programs for Older Adults](#). National Council on Aging.

[Experiences of Nursing Home Residents During the Pandemic](#). Altarum. October 2020.

[Older Adults and the Mental Health Effects of COVID-19](#). JAMA. November 2020.

[Social Isolation and Loneliness: Imperatives for Health Care in a Post-COVID World](#). JAMA. December 2020.



INDIVIDUALS WITH INTELLECTUAL & DEVELOPMENTAL DISABILITIES

STATE EXAMPLES

Understand the needs of the population.	<p>New Hampshire used all-payer claims data from 2010 to 2014 to better understand the needs of people with ID/DD in the state.</p> <p>North Carolina's ID/DD State Stakeholder Group, which consists of representatives from the ID/DD community, including members, family, providers, and advocacy organizations, provides feedback and recommendations to the state on proposed changes to their HCBS waivers.</p> <p>In 2018, Texas adopted a statewide stakeholder input process for the ID/DD managed care carve-in.</p>
Ensure primary supports for stability.	<p>Hawaii is implementing a comprehensive, multi-agency ID/DD/Behavioral Health Case Management System.</p> <p>North Carolina will launch a new tailored health plan in 2022 focused on providing care management services for individuals with significant behavioral health needs and ID/DD.</p> <p>Ohio pays family caregivers, including parents/guardians of minor children to provide waiver services under its Home Care waiver.</p> <p>Tennessee introduced a coordinated care model for the full range of health care services for a portion of the ID/DD population, which includes a nurse case manager, who manages an integrated plan of health care for the individual's physical and behavioral health care needs across services and delivery settings.</p> <p>Washington temporarily allows out of state respite for more than 30 days on a case by case basis and expanded settings where respite services may be provided (e.g. hotels, shelters, schools, churches) through its Appendix K waiver.</p>
Enhance behavioral health treatment for individuals with ID/DD.	<p>The Massachusetts Child Psychiatry Access Program (MCPAP) offers support and consultation to Emergency Services Program/Mobile Crisis Intervention (ESP/MCI) providers working with youth and young adults with autism spectrum disorder or intellectual disabilities who are having a behavioral health crisis.</p> <p>New York's Crisis Services for Individuals with Intellectual and/or Developmental Disabilities (CSIDD) offers crisis prevention and response services to people who have both developmental disabilities and complex behavioral needs, as well as to their families and those who provide supports.</p> <p>Texas contracted with University of Texas Health Science Center at San Antonio (UTHSCSA) to develop web-based training modules to educate providers on best practices in treating individuals with ID/DD and behavioral health needs.</p>

RESOURCES

- [Impact of COVID-19 on Organizations Serving Individuals with Intellectual and Developmental Disabilities](#), Avalere, April 2020.
- [Policy Recommendations: Addressing the Mental Health and Wellness of Individuals with Intellectual Disabilities](#), Hogg Foundation for Mental Health, August 2014.
- [Resources for Members with Autism Spectrum Disorder \(ASD\)](#), Arizona Health Care Cost Containment System.
- [Understanding and Improving Care for Individuals with Intellectual and Developmental Disabilities in the Emergency Department](#), International Review of Research in Developmental Disabilities, September 2014.

INDIVIDUALS EXPERIENCING HOMELESSNESS OR HOUSING INSTABILITY

STATE EXAMPLES

Connect individuals experiencing homelessness or housing instability to Medicaid coverage.

[Kentucky](#) has condensed its 20-page application into a one-page online form to streamline the enrollment process throughout the pandemic.

Identify members who may be experiencing homelessness or housing instability.

[Connecticut](#) matched Medicaid claims data to HMIS data provided by the Connecticut Coalition to End Homelessness to identify single adult Medicaid beneficiaries identified as homeless in 2012.

[Massachusetts](#) matched data from the City of Boston's Continuum of Care on individuals experiencing chronic homelessness with Medicaid data on coverage status, service use, costs, and expenditures. This analysis helped advance state and local conversations about potential housing and service partnerships to better serve individuals experiencing chronic homelessness.

[Massachusetts](#) requires its plans to screen members for risk of homelessness and health-related social needs, including housing stabilization and support services.

[Washington](#) has created an integrated client database with longitudinal data from more than 30 data systems.

Help members achieve and maintain housing through supportive housing.

[Florida's](#) Behavioral Health and Supportive Housing Assistance pilot provides necessary services for individuals ages 21 and older with an SMI and/or substance use disorder who are homeless or at risk of homelessness due to their behavioral health diagnosis.

Through an 1115 waiver, [Illinois](#) provides pre-tenancy and tenancy support services for individuals with behavioral health needs at risk of homelessness or inappropriate institutionalization.

Through their 1915(c) waiver, [Louisiana](#) provides housing transition and stabilization services for individuals with ID/DD transitioning from an intermediate care facility back to the community.

Through a state plan amendment, [Minnesota](#) provides housing stabilization services to several at-risk populations, including individuals with a mental health condition, substance use disorder, or physical injury that required a residential level of care and are now in the process of transitioning to the community.

Tailor services to the unique health care needs of this population.

Through their 1115 waiver, [Maryland](#) provides tenancy-based case management services to high-risk, high-utilizing Medicaid enrollees who are at risk of institutional placement or homelessness.

[Massachusetts'](#) managed care model contract requires plans to develop protocols for providing care management activities at adult and family shelters and for members experiencing homelessness.

[Massachusetts](#) offers resources, information and a support line to assist hospital staff in placing individuals who are experiencing homelessness or housing instability.

RESOURCES

[Homelessness Was on the Rise, Even before the Pandemic.](#) Joint Center for Housing Studies of Harvard University, December 2020.

[Improving Care for Medicaid Beneficiaries Experiencing Homelessness.](#) State Health and Value Strategies Program, September 2015.

[Linking Medicaid and Supportive Housing: Opportunities and On-the-Ground Examples - Issue Brief.](#) Kaiser Family Foundation, January 2017.

[Medicaid and Permanent Supportive Housing.](#) Health Affairs, October 2016.

[Supportive Housing for Chronically Homeless Medicaid Enrollees: State Strategies.](#) Center for Health Care Strategies, January 2016.



ESSENTIALS FOR SUCCESS

RESOURCES

[Differential Adjusted Payment \(DAP\) Activity CYE 2021 Final Public Notice](#), Arizona Health Care Cost Containment System, May 2020.

[Doctor Peer-to-peer Support Lounge](#), Arizona Medical Association.

[Engaging Consumers in Medicaid Program Design: Strategies from the States](#), Milbank Quarterly, December 2020.

[Framework for Public Sector Leadership](#), National Association of Medicaid Directors, Center for Health Care Strategies, Milbank Memorial Fund, September 2020.

[Healthcare Resiliency Framework](#), Health Care Payment Learning and Action Network, 2020.

[Performance Measures & Trends Contract Years Ending 2016-2018](#), Arizona Health Care Cost Containment System, October 2020.
