



Medicaid Medical Advisory Committee

May 23, 2023 Meeting Slides

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Health & Human Services

Word Cloud

What are qualities of a successful Medicaid Advisory Committee?



CMS Ensuring Access to Medicaid Services proposed rule

- Full rule [here](#). Comments accepted until 7/3.

Highlights for both

States would need to have a Medicaid Advisory Committee (MAC) and a Beneficiary Advisory Group (BAG)	BAG meets separately from MAC
MAC & BAG would advise state Medicaid Agency Director on matters of policy development and program administration: <ul style="list-style-type: none"> • additions & changes to services, • coordination of care, • quality of services, • eligibility, enrollment, and renewal processes 	Bylaws/charter, list of members, meeting minutes and attendees must be published online <input checked="" type="checkbox"/> (Most of these are met, do not have membership list online)
<input checked="" type="checkbox"/> Published process for MAC and BAG recruitment, selection, and appointment	Members appointed by Director on rotating and continuous basis
Annual report posted to website	<input checked="" type="checkbox"/> Published meeting schedule, at least once per quarter
Variety of attendance options – virtual, telephone, times	Accessibility and participation requirements


CMS Ensuring Access to Medicaid Services proposed rule

Rule requirements effective 60 days after rule is finalized, states have 1 year to comply.

MAC	BAG
<input checked="" type="checkbox"/> MAC Meetings open to public – at least 2x/year	BAG meetings not open to public unless they decide to
MAC has minimum 25% members from BAG	Meets separately and regularly. Before MAC meetings.
<p>MAC membership (at least 1 from each category):</p> <ul style="list-style-type: none"> • State or local consumer advocacy groups or other community-based organizations that represent the interests of or provide direct service to Medicaid beneficiaries • Clinical providers or administrators who are familiar with the health and social needs of Medicaid beneficiaries and resources available & required for their care • Participating Medicaid managed care plans • Other state agencies serving Medicaid beneficiaries as ex officio members 	<p>BAG membership:</p> <ul style="list-style-type: none"> • current or former beneficiaries, • individuals with direct experience supporting beneficiaries (family members or caregivers of Medicaid beneficiaries)

Make sure you are signed up for quarterly **Medicaid Provider newsletters**. Signing up is easy.

Go to the Provider website

 <https://www.hhs.nd.gov/healthcare/medicaid/provider>



Enter your email address

Sign Up for our Medicaid Newsletter

To sign up for updates or to access your subscriber preferences, please enter your contact information below.

* Email Address

Submit

Click **Submit** and follow directions to set up and **choose** your subscription options.

- Medicaid
- Medicaid Newsletter
- News - Medicaid

Stay in the loop!



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Be Legendary.

Health & Human Services

Updated Policy Manuals – May 2023

Updated General Information
for Providers manual

and

Behavioral Health Services
Provider manual now online

Click the hashtag for the Provider webpage
<https://www.hhs.nd.gov/healthcare/medical/provider/manuals-and-guidelines>

Stay Covered ND Resources!

<https://www.hhs.nd.gov/human-services/medicaid/StayCoveredND>





What you need to know about ND Medicaid renewals

And how you can encourage members to take action!

Starting April 1, 2023, ND Medicaid may need to contact members to see if they still qualify for coverage.

What do ND Medicaid members need to know?

ND Medicaid is working to inform members about steps they need to take to stay covered, if they qualify. These include:

-  Ensure contact information is correct.
-  Check the mail.
-  Complete their renewal form (if they get one).

#StayCoveredND

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- Here's how you can help:**
- 1. Share where and how to update their information.**
 - Contact the Customer Support Center toll-free 866-614-6005, 711 (TTY) or email applyforhelp@nd.gov.
 - 2. Offer assistance.**
 - Help them update their contact information, read and understand the letter they may receive in the mail or submit the requested documentation online. (e.g. pay stubs, income tax returns, proof of disability, etc.).
 - 3. Share resources.**
 - Encourage conversations about renewals and/or share resources in your community.

If they no longer qualify for ND Medicaid and need help finding a plan on the federal Health Insurance Marketplace, have them contact ND Navigators at ndcpd.org/NDNavigator or 1-800-233-1737.



Learn more or visit [hhs.nd.gov/StayCoveredND](https://www.hhs.nd.gov/StayCoveredND)



Downloadable Resources and Materials

Help us spread the word! More materials are still under development including several flyers, posters and other resources in Spanish and Somali languages. Check back often! To access the materials, click on the + sign.

Community Toolkit	+
Tribal Toolkit	+
Stakeholder Toolkit	+
School Toolkit	+

Frequently Asked Questions

Why are regular Medicaid renewals resuming?	+
What can members do now to prepare?	+
How should members update their contact information?	+
What is the renewal process?	+
What if I lose coverage?	+
What are the other health care coverage options?	+
What else is ND Medicaid doing to communicate with members?	+

Request Stay Covered ND materials

MMAC partners can request Stay Covered ND materials by emailing dhsmed@nd.gov with:

- What items they would like (posters or half-page flyers, etc)
- Quantity of items
- Shipping address

Items available

Posters

- English - <https://www.hhs.nd.gov/sites/www/files/documents/stay-covered-nd-member-poster.pdf>
- Somali - <https://www.hhs.nd.gov/sites/www/files/documents/stay-covered-nd-somali-member-poster.pdf>
- Spanish - <https://www.hhs.nd.gov/sites/www/files/documents/stay-covered-nd-spanish-member-poster.pdf>
- Tribal - <https://www.hhs.nd.gov/sites/www/files/documents/stay-covered-nd-ai-member-poster.pdf>

Flyers

- English – <https://www.hhs.nd.gov/sites/www/files/documents/stay-covered-nd-member-flyer.pdf>
- Tribal - <https://www.hhs.nd.gov/sites/www/files/documents/stay-covered-nd-ai-member-flyer.pdf>

Half-page flyers

- English - <https://www.hhs.nd.gov/sites/www/files/documents/stay-covered-nd-member-half-page-flyer.pdf>
- Somali - <https://www.hhs.nd.gov/sites/www/files/documents/stay-covered-nd-somali-half-page-flyer.pdf>
- Tribal - <https://www.hhs.nd.gov/sites/www/files/documents/stay-covered-nd-ai-member-half-page-flyer.pdf>

Telehealth Policy Resources

Online list of covered telehealth services

<https://www.hhs.nd.gov/sites/www/files/documents/Telehealth%20Approved%20Services.xlsx>

ND Medicaid telehealth policy (chapter in General Provider Manual)

<https://www.hhs.nd.gov/sites/www/files/documents/general-information-medicaid-provider-manual.pdf>

Behavioral Health Services Provider Manual (information about covered telehealth services, including 1915(i))

<https://www.hhs.nd.gov/sites/www/files/documents/DHS%20Legacy/behavioral-health-services-provider-manual.pdf>

Link to where webinar recording

<https://www.hhs.nd.gov/healthcare/medicaid/provider/education-and-training>

Power Point slides

<https://www.hhs.nd.gov/sites/www/files/documents/training-telehealth-webinar.pdf>

Telehealth FAQ

<https://www.hhs.nd.gov/sites/www/files/documents/training-telehealth-faq.pdf>





Behavioral Health Rehabilitative Services

ND Medicaid Coverage – May 2023

Behavioral Health Rehabilitative Services Benefit

Broad array of services

“any medical or remedial services recommended by a physician or other licensed practitioner of the healing arts, within the scope of his practice under State law, for maximum reduction of physical or mental disability and restoration of a beneficiary to his best possible functional level.”

Chapter in General Information for Behavioral Health Services Manual – last updated May 2023

GENERAL INFORMATION FOR BEHAVIORAL HEALTH SERVICES

NORTH DAKOTA MEDICAID



Published by: Medical Services Division
North Dakota Department of Human Services
600 E. Boulevard Avenue, Dept. 325
Bismarck, North Dakota 58505

ND Medicaid

May 2023

BEHAVIORAL HEALTH REHABILITATIVE SERVICES

Behavioral Health Rehabilitative Services is a range of services including assessments, intervention, counseling, and skill introduction/improvement. Services are recommended by a physician or other licensed practitioner of the healing arts within their scope of practice according to state law for maximum reduction of physical or mental disability and restoration of a member to their best possible functional level. Behavioral health rehabilitative services are designed to be provided on a short-term basis and in most cases, should not be considered a pattern of long-term care.

COVERED SERVICES

Behavioral health rehabilitative services include behavioral intervention services that consist of developing and implementing a regimen that will reduce, modify, or eliminate undesirable behaviors and/or introducing new methods to induce alternative positive behaviors and management including improving life skills. ND Medicaid members who receive behavioral health rehabilitative services should display measurable progress in these areas through the development, implementation, and evaluation of a plan of care (more information on the plan of care is below). Specific services are outlined in the table below.

Therapy and/or treatment that involves the participation of a family member/collateral and/or other non-Medicaid eligible individual(s) is for the direct benefit of the member, in accordance with the member's needs and treatment goals identified in the member's treatment plan and for assisting the member's recovery. The general expectation is that the member would be present for the service with the non-member; however, there may be some treatment session(s) where the practitioner's judgment is not to include the member.

← Starting at p. 25

Array of services



Assessments

Group/Individual Counseling

Skill Introduction/Improvement

Intensive In-Home for Children

Crisis intervention



**Members &
Eligibility**

Member eligibility

The following requirements must be met before behavioral health rehabilitative services can be provided through the Medicaid program:

Member must be Medicaid-eligible

Service must be recommended by a practitioner of the healing arts

- within the scope of their practice under state law, and applicable regulations

Member must need mental health or behavioral intervention services

- provided by qualified practitioners

Member eligibility, cont'd

Member must have **at least 1 of the following circumstances:**

Be at risk of entering or reentering a mental health facility or hospital and demonstrate a score of 25 or above based on the WHODAS 2.0; **and/or**

Need substance use disorder treatment services; **and/or**

Have a mental health disorder and be from a household that is in crisis and at risk of major dysfunction that could lead to disruption of the current family makeup; **and/or**

Have a mental health disorder and be in family that has experienced dysfunction that has resulted in disruption of the family.

Member eligibility, cont'd

These cover a broad array of circumstances indicating need for services.

Descriptions are intentionally broad. The provider must document the eligible individual's circumstances.



WHODAS 2.0

Resources are available through the 1915(i) State Plan Amendment pages on administering and scoring the WHODAS.

Go to <https://www.hhs.nd.gov/1915i/human-service-zones-resources> and click on the + to the right of Trainings.

WHODAS: Part 1 – 1915(i) Policy and Procedures

- [Download the PowerPoint](#) - revised 2.01.2023

WHODAS: Part 2 – Administration and Scoring

- [Download the PowerPoint](#) - revised 2.1.2023
- [Watch the Training](#) - revised 3.1.2021

WHODAS Resources

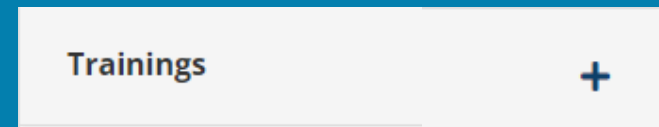
[WHODAS 2.0 Manual](#)

WHODAS 2.0 Assessments

- [Interview](#)
- [Proxy](#)

[WHODAS Complex Scoring Sheet](#)

- *This is the version of the WHODAS Complex Scoring Sheet that must be used. Do not use any other version of the WHODAS Complex Scoring Sheet.*



Plan of care

Each member has a primary contact and a plan of care.

Plans of care are started on the first date of service and reviewed as often as needed and appropriate.

Minimum contents:

- Name
- Age and date of birth
- Family composition
- Current residency
- Education level or current educational setting
- Work status/employment
- Placement history (including facility, admission, & discharge date)
- Narrative history or background of member
- Presenting concerns
- Diagnosis (if applicable-all Axes)
- Behavioral patterns
- Names of Practitioners providing care/services to the member
- Legal responsible party
- Treatment goals/primary plan of action
- Summary of progress/goals
- Medical needs (if available)
- Current health status (if available)
- Medication list (if available)
- Immunization record (if available)
- Recent medical appointments (if available)

A modern, illuminated sign for 'Providers' is mounted on a building facade. The sign is rectangular, white, and has a thin gold border. It is suspended from a black metal bracket that is attached to the wall. The bracket has a horizontal bar that supports the sign from above and a vertical post that is secured to the wall with screws. The building's exterior is a light-colored, textured material. To the left of the sign, there is a window with a dark frame and a small ledge. To the right, there is a doorway with a wooden frame. The overall scene is brightly lit, suggesting daytime.

Providers

Provider qualifications

Service must be recommended by a practitioner of the healing arts

This requirement is unique in that it allows for the leverage of a broader workforce to deliver the services.

Behavioral health rehabilitative services can be delivered by unlicensed practitioners so long as they are qualified to furnish services and their qualifications include a brief summary of

- Certification,
- Registration,
- Education,
- Training, or
- Experience; and
- Applicable supervisory requirements for unlicensed practitioners.

Qualified Providers

Other Licensed Providers (OLPs)	Non-OLP Providers
Licensed Clinical Social Workers (LCSWs)	Licensed Baccalaureate Social Workers (LBSWs)
Licensed Professional Clinical Counselors (LPCCs)	Licensed Master Social Workers (LMSWs)
Licensed Professional Counselors (LPCs)	Licensed Exempt Psychologist
Licensed Marriage and Family Therapists (LMFTs)	Licensed Associate Professional Counselor (LAPC)
Licensed Addiction Counselors (LACs)	Registered Nurses (RN)
Psychologists (excluding school psychologists)	Behavioral Modification Specialists
	Mental Health Technicians

Provider limitations

OLP Providers

- May only bill for covered services allowed within their scope of practice
- Are not required to enroll as behavioral health rehabilitative service providers

Non-OLP Providers*

- Must enroll to provide behavioral health rehabilitative services and be affiliated with a rehab provider
- May only bill Medicaid for services indicated for their practitioner type on the behavioral health rehabilitative services table. (cannot bill under supervising practitioner's NPI)
- Practitioners who are governed by a state licensing board must follow the board's requirements for supervision.

Non-OLP Provider Table



Provider Types	Licensure/ Certification Authority	Education/ Degree Required
Licensed Exempt Psychologist	Eligibility for licensure exemptions as determined by the ND Board of Psychologist Examiners	
Behavior Modification Specialist (BMS)		Master's degree in psychology, social work, counseling, education, child development and family science, human services, or communication disorders. Or a bachelors' degree in one of the above fields and two years of work experience in the respective discipline. The work experience must be in a professional setting and supervised by a licensed practitioner in a related field.
Licensed Baccalaureate Social Worker (LBSW)	Licensure as a LBSW by the ND Board of Social Work Examiners.	
Licensed Master Social Worker (LMSW)	Licensure as a LMSW by the ND Board of Social Work Examiners.	
Registered Nurse (RN)	Licensure as a RN by the ND Board of Nursing.	
Licensed Associate Professional Counselor (LAPC)	Licensure as a LAPC by the ND Board of Counselor Examiners.	
Mental Health Technician (MHT)	Certification as a Mental Health Technician and supervised by a licensed practitioner within their scope of practice.	

A photograph of a building's exterior featuring a prominent sign. The sign is a white, rectangular panel with a thin gold border, suspended from a black metal bracket. The word "Services" is printed on the sign in a bold, blue, sans-serif font. The building's facade is a light, textured beige color. To the left, a window with a dark frame is visible. To the right, a doorway or window opening is partially seen, showing a glimpse of the interior. The overall scene is brightly lit, suggesting daytime.

Services

Behavioral Health Rehabilitative Services

Screening, Triage, and Referral Leading to Assessment

Behavioral Assessment

Crisis Intervention

Nursing Assessment and Evaluation

Behavioral Health Counseling and Therapy

Individual or Group Counseling

Intensive In-home for Children

Skills Restoration

Skills Integration

Behavioral Intervention

Assessment for Alleged Abuse and/or Neglect and Recommended Plan of Care (formerly known as Forensic Interview)

Service Name	Definition of Services	Billing Code
Skills Restoration	<p>Skills restoration is a time-limited service that assists an individual with restoring needed and desired skills such as daily living/independent living skills to improve the functional impairments affected by the individual's behavioral health diagnoses and symptoms to meet rehabilitation goals. Skills restoration is a systematic series of instructional activities, which include a mixture of education, confirmation, and demonstration of learned skills and capacity for observed learning over time to ensure lasting results that translate to the living environment.</p> <p>Skills restoration interventions used should be based on evidence-based practice.</p> <p>Skills restoration is considered an individual service and if provided in a group setting, must be billed with the appropriate modifiers.</p> <p>Services are limited to four hours per day and must be within each practitioner's scope of practice in accordance with licensure and certification. If additional services are medically necessary, the provider may request service authorization from the North Dakota Medicaid Program.</p>	H2014*
Skills Integration	<p>A service designed to support an individual in the community in their efforts to apply and integrate those life skills that have been learned in their therapy programs. The individual typically requires support for cueing/modeling of appropriate behavioral and life skills to maximize their skills and prevent need for higher levels of care.</p> <p>The service reduces disability and restores an individual to previous functional levels by assisting the individual in ongoing utilization and application of learned skills in normalized living situations. This strengthens the skill development that has occurred and promotes skill integration in various life roles.</p> <p>Services are limited to four hours per day and must be within each practitioner's scope of practice in accordance with licensure and certification. If additional services are medically necessary, the provider may request service authorization from the North Dakota Medicaid Program.</p> <p>Skills integration is considered an individual service and if provided in a group setting, must be billed with the appropriate modifiers.</p>	H2017*

Service Table

- Service name
- Description
- Code & Indicators
 - If service may be provided in an individual or group setting
 - If service can be delivered via telehealth

Provider Table

- Service name
- Providers eligible to deliver the service indicated by

x

- Code & Indicators
 - If service may be provided in an individual or group setting
 - If service can be delivered via telehealth

Code	Service Name	OLPs - include LCSWs, LPCCs, LPCs, LMFTs, LACs, and psychologists	LBSW	LMSW	Licensed Exempt Psychologist	LAPC	RN	BMS	MHT
H2014 *	Skills Restoration	OLPs may bill for covered Rehabilitative Services within their scope of practice.	x	x		x	x	x	
H2017	Skills Integration	OLPs may bill for covered Rehabilitative Services within their scope of practice.	x	x		x		x	x
H2019	Behavioral Intervention	OLPs may bill for covered Rehabilitative Services within their scope of practice.			x			x	
99499 (must append modifier 32)	Assessment for Alleged Abuse and/or Neglect and Recommended Plan of Care (formerly known as Forensic Interview)	OLPs may bill for covered Rehabilitative Services within their scope of practice.	x	x		x			
<p>* Service may be provided in individual or group setting. If group setting is provided, modifier UA must be appended to the line and the reimbursement will be 25% of the allowed amount.</p> <p>^ Service may be delivered via telehealth. See the Telehealth chapter in the ND Medicaid General Information for Providers Manual for more info.</p>		<p>ABBREVIATIONS: BMS - Behavior Modification Specialist LAC - Licensed Addiction Counselor LAPC - Licensed Association Professional Counselor LBSW - Licensed Baccalaureate Social Worker LCSW - Licensed Clinical Social Worker LMFT - Licensed Marriage and Family Therapist LMSW - Licensed Master Social Worker LPC - Licensed Professional Counselor LPCC - Licensed Professional Clinical Counselor RN - Registered Nurse MHT - Mental Health Technician OLP - Other Licensed Practitioner</p>							

EPSDT/Health Tracks



Medicaid-eligible children under EPSDT/Health Tracks can receive these and all other **medically necessary** services.

[Click here](#) for more info on EPSDT/Health Tracks in ND

Medical Necessity

Medically necessary/medical necessity means

- medical or remedial services or supplies required for treatment of illness, injury, diseased condition, or impairment;
- consistent with the recipient's diagnosis or symptoms;
- appropriate according to generally accepted standards of medical practice;
- not provided only as a convenience to the recipient or provider;
- not investigational, experimental, or unproven; clinically appropriate in terms of scope, duration, intensity, and site; and
- provided at the most appropriate level of service that is safe and effective.

RESOURCE: [ND Admin. Code section 75-02-02-03.2\(10\)](#)

Medical necessity must be explained and documented.

Not included:

- Room and board;
- Services provided to residents of institutions for mental disease (IMDs);
- Services that are covered elsewhere in the State Medicaid Plan;
- Educational, vocational and job training services;
- Recreational and social activities;
- Habilitation services; or
- Services provided to inmates of public institutions.



Contact

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Coverage Policy Director – Medical Services

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