



# Behavioral Health System Improvements - Apple Health Reprocurement & Network Adequacy

## What is behavioral health network adequacy?

“Network Adequacy” refers to a federal requirement on Medicaid Managed Care Organizations (MCOs) that is intended to ensure an MCO has a network of providers that is sufficient in numbers and types, to ensure that ALL services are accessible to Medicaid clients without unreasonable delay. Each state is allowed to set its own “network adequacy” standards in Medicaid if they are not less stringent than current federal requirements and are formally approved by the Federal government. Standards must be data-driven and use quantitative information to assess how many providers should be available to meet the need. Meeting network adequacy is a key requirement for any new health insurance carrier to enter the Medicaid market, and the most rigorous review and test of meeting this standard happens during a procurement process.

### OUR REQUEST:



**The State/HCA shall establish, measure, and enforce behavioral health network adequacy standards.**

## What is our request?

The State/HCA shall establish, measure, and enforce behavioral health network adequacy standards, using several different mechanisms. All contracted Apple Health MCOs are required to adhere to these standards to ensure adequate behavioral health providers are available to meet the needs of clients in every region. Updated behavioral health network adequacy standards shall be in place prior to the completion of any new Medicaid managed care procurement.

## Why are we asking for this change?

- 1 Current network adequacy standards for behavioral health services are lacking in Washington. In fact, there are relatively no standards at all outside of behavioral health outpatient care.
- 2 Because the current standards are so relaxed, MCOs are “passing” network adequacy every quarter, without necessarily providing access to critical services (such as PACT, E&T, crisis stabilization, withdrawal management, intensive outpatient treatment, residential care, etc.) in the regions they serve, all while Medicaid clients struggle to get into treatment, experience long wait times, or cannot get the care they need.
- 3 Lack of information about network adequacy directly impacts how rates are set, and lack of adequate rates directly impacts hiring/workforce and, therefore, client access.
- 4 HCA, at its sole discretion, may waive network adequacy altogether to allow an MCO to operate in a region or specific county. This practice cannot continue.
- 5 HCA will undertake a new procurement soon, with the intent to select new Medicaid MCOs effective 2025.
- 6 It’s critical that robust network adequacy standards are in place before HCA’s procurement process is finalized.

## Who will benefit from increased behavioral health network adequacy standards?

The entire community behavioral health continuum of care will benefit from these improvements. Primary benefits include:

- Youth and adults receive timely and accessible behavioral health services
- Better linkage between schools and behavioral health services and resources
- Improved state behavioral health access and utilization data
- Increased provider rates
- Workforce hiring and retention



## What core services do BHASOs provide?

- Coordinate the 988 Statewide Crisis Line for their region as well as provide 24/7/365 regional crisis hotlines for mental health and SUD crises.
- Mental health crisis services, including the dispatch of mobile crisis outreach teams, staffed by mental health professionals and certified peer counselors.
- Short-term SUD crisis services for people intoxicated or incapacitated in public.
- Application of mental health and SUD involuntary commitment statutes, available 24/7/365, to conduct Involuntary Treatment Act (ITA) assessments and file detention petition.

### BH-ASO REGIONS & APPLE HEALTH MCOS



## What is Integrated Managed Care?

In January 2020, all regions of the state transitioned to an integrated system for physical health, mental health, and substance use disorder (SUD) services in the Washington Apple Health (Medicaid) program. This is called integrated managed care (IMC). Under the IMC program, most services for Apple Health clients are provided through managed care organizations (MCOs). However, some services in the community, such as services for individuals experiencing a mental health crisis, must be available to all individuals, regardless of their insurance status or income level. For this reason, Behavioral Health Administrative Services Organizations (BHASOs) exist in each region to provide these critical crisis services.



## What is the cost to the state?

Additional FTEs may be required at HCA to develop, evaluate, and enforce behavioral health network adequacy standards.

