Targeted Case Management

Medica Behavioral Health
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- Medica Behavioral Health oversees the behavioral health services for Medica members.
- This includes benefits purchased by the state for Minnesota Health Care Programs recipients.
- Medica Behavioral Health is operated by United Behavioral Health (UBH), a national company with offices in many states, whose parent company is Optum.
- UBH MN Care Advocacy Center is dedicated to serving Medica members.
Medica Behavioral Health – MH Targeted Case Management

Key Principles:
- Increase Access to MH-TCM for eligible clients
- Support and enhance clinical quality service delivery of TCM
- Support delivery of integrated mental health and medical services
- Keep administrative overhead low
Role of Medica Behavioral Health in TCM

- Act as Health Plan resource to case managers to access medical and behavioral health plan services
- Collaborate with TCM providers to address high risk member needs
- Provide support and training to provider agencies/counties
- Audit contracted TCM providers per DHS requirements. MBH uses these audits as an educational and partnership opportunity.
Determining MH-TCM Eligibility

- MBH is contracting with counties and agencies to conduct TCM eligibility screening and refer clients to network MH-TCM providers.

- Medica Behavioral Health will also determine eligibility based on recommendations from clinicians and counties.

- To obtain an authorization for eligibility screening, please call MBH at 1-800-848-8327 or fax in the eligibility screening form found on www.providerexpress.com
Authorization procedures

- Contracted providers do not need authorization for MH-TCM services.
- Medica Behavioral Health contracts will distinguish Low, Intermediate and Complex intensity levels of services.
- Providers bill the month based on hours of TCM eligible services provided.
  - Up to 4 hrs/month = Low Intensity
  - 5-10 hrs/month = Intermediate Intensity
  - 11+ hrs/month = Complex Intensity

- Non-Contracted Providers:
  - Medica Behavioral Health has a MH-TCM request form available on www.providerexpress.com
  - Fax requests to MBH at 1/855-455-8155. Generally authorizations will be given for one year intervals.
New TCM referrals

- MBH staff will contact MH-TCM provider organizations with new referrals for eligibility screening and service provision.

- Contracted MH-TCM provider organizations may also receive direct referrals, conduct eligibility screenings, and contact MBH for service authorizations and to support the delivery of mental health and medical services.
Dispute resolution process

- Member may contact Medica Behavioral Health regarding second opinion.
- Members have the right to appeal health plan decisions
- Members may appoint a provider as their representative to appeal
- Providers may also dispute adverse determinations
Billing Procedures

- Submit claims electronically with AUC coding, add modifiers TF and TG for intermediate and complex intensity.

- Use any clearinghouse to bill Medica electronically. Medica’s payer ID is 94265. Providers without a current electronic data interface (EDI) vendor may use the EDI vendor IGI-USA to submit claims electronically at no cost. Registration for this service can be found at www.mneconnect.com.

- Call the clearinghouse if claim submission was rejected or MBH indicates no claim received.
Billing Procedures

- Clean claims are to be paid within 30 days. Contact MBH after 40 days if no response received.

- Sendbacks and payment denials will be accompanied by correspondence with an explanation for the sendback or denial. Contact MBH Claims Customer Service at 1-866-214-6829 if questions remain.

- Contact MBH Care Advocacy staff at 1-800-848-8327 if authorizations are needed.
Contracting Process

- UBH is establishing a network by contracting with existing TCM providers including counties and agencies.
- MBH will be authorizing to out of network providers, using the published county contracted rates, unless UBH contracted rates have already been agreed upon.
- If a TCM provider is interested in contracting for MH-TCM services they can contact the UBH contracting contacts listed in the contacts section of this document.
Credentialing requirements

- Organizations providing targeted case management must meet DHS/CMS standards.
- UBH is contracting with organizations that are currently MH-TCM providers.
- Organizations not accredited will receive a site audit as part of the contracting process.
- UBH will not require credentialing of case managers or case management supervisors of TCM services.
- Licensed clinicians who are billing clinical services such as diagnostic assessment, psychological testing, and psychotherapy need to be credentialed.
Websites

- www.providerexpress.com (resources for providers)
- www.liveandworkwell.com (resources for members)
- www.medica.com
Medica Behavioral Health – Key Contacts

■ Contracting:
  • Jay Jordan at 952-205-3007

■ Problem Solving:
  • Jane Welter-Nolan, Clinical Liaison, Government Programs. 952-205-2796 Jane.welter-nolan@optum.com

■ Authorization Questions
  • Medica Behavioral Health 1-800-848-8327
  • MBH Fax: 1/855-454-8155
  • Clinical Support and Access to Health Plan Resources:
    • Call MBH at 1-800-848-8327 and ask for Outpatient MH Team