



REQUEST FOR INFORMATION

Issue date: January 6, 2020

Closing date: February 6, 2020

Subject: Idaho Behavioral Health Plan

I. Introduction and Program Information

The Idaho Department of Health and Welfare's Divisions of Medicaid and Behavioral Health are partnering on development of a new and innovative Idaho Behavioral Health Plan (IBHP) program. The vision of this program is to create a comprehensive behavioral health system of care that Idahoans can access across the state to maintain health and wellness.

The current IBHP provides outpatient behavioral health services, including mental health and substance use disorder services to all Idaho Medicaid members provided they are medically necessary and covered under the Idaho Medicaid program. Today, the IBHP is contracted to a single pre-paid ambulatory health plan (PAHP) provider who is responsible for credentialing the provider network, service authorization, and oversight of Medicaid outpatient behavioral health services statewide. The Idaho Department of Health and Welfare (IDHW) operates the IBHP in accordance with federal regulations at 42 CFR 438 and Idaho Administrative rules published at IDAPA 16.03.09, subsections 707-711.

IDHW is requesting information related to behavioral health programs. Information obtained from responses to this RFI may be used to refine potential future behavioral health procurements, design program improvements, and to identify best practices in behavioral healthcare under a managed care model. This is a request for information only, not a solicitation. No award will be made based upon the information received from this RFI.

II. Information Requested from Respondents

Behavioral health services are a critical benefit provided to Idaho Medicaid members and key to IDHW's mission of promoting and protecting the health and safety of Idahoans. IDHW is planning to increase the continuum of care in the IBHP to include inpatient behavioral health services and to encourage coordination of care with primary care providers. IDHW's vision is to develop and maintain a behavioral health continuum of care that Idahoans can access to achieve and maintain health and wellness in their communities.

Stakeholder engagement is an essential component for building a high-quality system that best meets the medically necessary behavioral health needs of the diverse population of individuals who rely on Medicaid services. To achieve this, IDHW is seeking input from individuals who use IBHP services, their families, IBHP providers, other Medicaid medical providers, advocates, tribal partners, potential health plans, policy makers and other stakeholders regarding innovative, cooperative strategies for implementing and providing access to effective, reliable behavioral health services in Idaho. We are interested in developing a program focused on member needs, with accountability to taxpayers along with engagement and retention of high performing IBHP providers. We consider the following five goals as the cornerstone of this approach:

- 1) GOAL ONE - Integrate inpatient and outpatient behavioral health services into a single comprehensive behavioral health plan that meets the needs of Idaho Medicaid participants in a coordinated and person-centered way.
- 2) GOAL TWO - Provide comprehensive behavioral health services in all areas of Idaho, including rural and frontier communities across the state.
- 3) GOAL THREE – Reduce emergency room visits, out of home placements, hospitalizations and readmissions for preventable behavioral health crises through providing a comprehensive continuum of care and care coordination model.
- 4) GOAL FOUR - Improve the quality of behavioral health care services across the continuum of care.
- 5) GOAL FIVE - Develop a data driven quality improvement system focused on improving member outcomes.

IDHW requests your feedback regarding each of these goals, including:

- suggested strategies and methods for achieving the goal
- recommendations for performance and accountability measurements for each goal

Respondents may reply to any or all of the topics and questions below:

General Contracting Approach: The IBHP was previously procured through a request for proposal resulting in a single statewide outpatient behavioral health contract. Idaho has also used an open application approach to managed care services for its Medicare Medicaid Coordinated Plan and Idaho Medicaid Plus managed care program. Under this approach Idaho Medicaid sets an actuarially sound rate and defines readiness criteria for plans wishing to participate on an annual (or other periodic) basis.

- a. Please provide information on strategies for providing a behavioral health plan through multiple managed care contracts. Please describe the benefits and challenges of this approach. Please also include suggestions for addressing these challenges.
- b. If multiple managed care entities are contracted to administer behavioral health services, are there efficiencies that could be gained and/or information shared among the plans to effectively manage high-risk members and provider fidelity?

- c. What are pros and cons of setting Medicaid provider rates as a floor compared to allowing plans to set provider rates independently?

RFI Responses for Goal 1: Integrate inpatient and outpatient behavioral health services into a single comprehensive behavioral health plan that meets the needs of Idaho Medicaid participants in a coordinated and person-centered way.

- a. Describe in detail strategies to integrate inpatient and outpatient behavioral health services into one behavioral health plan under a managed care model. Please identify State, provider, member and family, and stakeholder challenges. Please also include suggestions for addressing these challenges.
- b. Describe value-based payment models that can be used in unified behavioral health plans. These models should encourage health and wellness and be focused on positive outcomes.
- c. Please provide any alternative strategies or recommendations to help achieve this goal.

RFI Response for Goal 2: Provide comprehensive behavioral health services in all areas of Idaho, including rural and frontier communities across the state.

- a. Provide detailed information on innovative service delivery models to provide comprehensive behavioral health care in all areas of the state, including specific strategies for Idaho's rural and frontier areas.
- b. Please describe the challenges of delivering mental health and substance use disorder care in Idaho's rural and frontier environments. Please also include suggestions for addressing these challenges for adults, children, youth, and families.
- c. Provide information on effective strategies for incentivizing behavioral health professionals and primary care providers to integrate or co-locate practices. Please include strategies to address behavioral health integration in both urban and rural settings.
- d. Describe how to increase access to medication management across the state, for both mental health and substance use disorder. Please give details to best increase access to medication assisted treatment for opioid use disorder.
- e. Describe strategies to effectively communicate with and inform primary care providers in rural and frontier areas about resources to access psychiatric, addiction medicine, and other behavioral health resources.
- f. Please provide any alternative strategies or recommendations to help achieve this goal.

RFI Response for Goal 3: Reduce emergency room visits, out of home placements, hospitalizations and readmissions for preventable behavioral health crises through providing a comprehensive continuum of care and care coordination model.

- a. Describe what an effective continuum of care would include and how it could prevent or reduce emergency room visits, hospitalizations, out of home placements, and readmissions for behavioral health related conditions.

- b. Describe effective models for discharge coordination from hospitals and residential settings. Please include information about coordination of outpatient services, timing and processes for discharge planning, and communication strategies.
- c. Describe effective models for providing care coordination and/or case management. Please include challenges unique to Idaho for providing comprehensive care coordination and case management for all levels of care. Please also include suggestions for addressing these challenges.
- d. Describe ways to transition to conflict-free case management that supports person-centered service delivery. Please include suggestions on how Idaho can move toward a stronger behavioral health case management provider network.
- e. Describe examples of comprehensive care coordination or case management models that speak to the objectives in Goal 3.
- f. Please provide any alternative strategies or recommendations to help achieve this goal.

RFI Response for Goal 4: Improve the quality of behavioral health care services across the continuum of care.

- a. Describe current gaps in Idaho's behavioral health system of care. Please include levels of care and/or techniques of a service type.
- b. Describe ways to establish and maintain a strong telehealth network in Idaho. Please discuss ways to increase use of telehealth services in rural and frontier areas, including suggestions to encourage behavioral health specialists to offer telehealth.
- c. Describe ways to successfully add new services and improve existing services in detail. Please include ways to engage providers and educate stakeholders and users of the new services. Please also include details on both urban and rural areas.
- d. Please provide any alternative strategies or recommendations to help achieve this goal.

RFI Response for Goal 5: Develop a data driven quality improvement system focused on improving member outcomes.

- a. Describe creative ways to identify and engage high-risk individuals in detail. Please include details on both urban and rural areas.
- b. Describe ways to better measure health outcomes in a behavioral health system of care. Please identify key performance indicators and methods for capturing reliable data.
- c. Describe methodologies that may be used for continuous quality improvement
- d. Please provide any alternative strategies or recommendations to help achieve this goal.
- e. Please describe how behavioral health quality metrics could be used to develop value-based approaches for provider reimbursement under the IBHP.

RFI Response 6. Provide any other information for consideration that has not been

requested in RFI Responses 1-5 above.

III. Terms and Conditions

A. All material submitted in response to this RFI becomes the property of the IDHW and shall not be returned to the responding vendor.

B. At the sole discretion of the IDHW the information provided may be used for the following purposes:

1. Refine potential future behavioral health procurements,
2. Design program improvements.
3. Identify best practices in behavioral healthcare under a managed care model.

C. The Idaho Public Records Law, Idaho Code Section 74, allows the open inspection and copying of public records. Public records include any writing containing information relating to the conduct or administration of the public's business prepared, owned, used, or retained by a state or local agency regardless of the physical form or character. All, or most, of the information contained in your response will be a public record and as such will be subject to disclosure under the public records law. Certain exemptions from disclosure can apply, one of which may be for "trade secrets" as defined in the Idaho Public Records Act, Idaho Code Sections 74-101 through 74-126, a copy of which is available for viewing on-line at: <https://legislature.idaho.gov/statutesrules/idstat/Title74/T74CH1/>

1. Trade secrets include a formula, pattern, compilation, program, computer program, device, method, technique or process that derives economic value, actual or potential, from not being generally known to, and not being readily ascertainable by proper means by, other persons and is subject to the efforts that are reasonable under the circumstances to maintain its secrecy.

2. If you consider any element of your response to be a trade secret, or otherwise protected from disclosure, you must so indicate by marking each page of the pertinent document. Include the specific basis for your position that it be treated as exempt from disclosure.

3. Marking your entire response as exempt is not acceptable or in accordance with the Public Records Act and will not be honored. In addition, a legend or statement on one (1) page that all or substantially all of the response is exempt from disclosure is not acceptable or in accordance with the Public Records Act and will not be honored. Prices quoted in your response are not a trade secret.

The IDHW, to the extent allowed by law and in accordance with these terms and conditions will honor a designation of nondisclosure. You will be required to defend any claim of trade secret or other basis for nondisclosure in the event of an administrative or judicial challenge to the IDHW nondisclosure. Any questions

regarding the applicability of the Public Records Law should be addressed to the IDHW or should be presented to your own legal counsel - prior to submission.

D. THIS IS NOT A BID; NO AWARD WILL BE MADE.

V. Address for Responses

If you are interested in providing any of the information requested in this RFI, please submit your written response by close of business February 6, 2020.

to:

****Responses will be accepted via e-mail, or hard copy only. DO NOT SUBMIT YOUR RESPONSE THROUGH IPRO. ****

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