Managed Care
101
Topic Areas...

• Brief Introductions
• Benefit Coverage
• Panel Requirements
• Credentialing & Contracting
• Quality
• Care Coordination
• General MCO Responsibilities
• BH System Priorities
• How to Contact Us
A Few Other Items...

- There are 5 Managed Care Plans serving Ohioans eligible for Medicaid (Buckeye, CareSource, Molina, Paramount and UnitedHealthcare)

- Services for Ohio Medicaid Members who have managed care is designed by the Ohio Department of Medicaid and the MCOs must follow the design per contract
Benefit Coverage
General Benefit Package

- Inpatient services
- Outpatient office visits
- Specialty services (DME, Home Health, Diagnostic Imaging)
- Pharmacy Benefit
- Value Added Benefits (transportation, optical/dental, etc.)
General Benefit Package

• Inpatient psychiatric & detox services
• Outpatient psychotherapy services
• Outpatient psychiatry services
• Outpatient psychological services
• Pharmacy benefit (psychotropic, MAT medications)
Panel Requirements
Panel Requirements

• General requirements:
  • Access to Care
  • Network Adequacy
  • Other Standards
    • Cultural Competency
    • Physical Accessibility
    • Proximity to Public Transportation
    • Environmental Standards
• MyCare BH Panel Requirements
  • Number of Agencies by County
  • Intended to provide choice
Credentialing & Contracting
Credentialing & Contracting

- NCQA Standards for Credentialing (ind vs group)
- Credentialing Process
  - Information needed on providers
  - Paper forms vs CAQH
- Contracting Process
  - Request to Contract, timeline
  - Standard Contract Language
  - Single Case Agreement
Quality Care
Quality Care

- HEDIS Quality measures
- Care Coordination measures
- Quality of Care investigations
Care Coordination
Care Coordination

- Enrollment Requirements
- Multidisciplinary Model of Care
- Role of MCO on treatment team
- ODM vision for Care Coordination
MCO Responsibilities
MCO Responsibilities

• Appeals/Grievances
• Consumer Education
• Health & Wellness
• Meeting the Triple Aim
• Provider Management
Priorities for Behavioral Health
BH Priorities

• Immediate Access to Care
• Improved coordination of care
• Availability of SUD services
• Quality Care (EBPs)
• Workforce Development
• Efficient use of resources
# How To Contact Us

<table>
<thead>
<tr>
<th>Plan</th>
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