

Establish consumer choice by increasing the availability of services for individuals enrolled in the MHSP.

Agency/Program #: 69010-33-I3
Division: Addictive & Mental Disorders
Program: Community Mental Health Se

Agency Name:	Department of Public Health and Human Services	
Agency Contact:	Lou Thompson	444-3969
LFC Contact:	Senator Cobb; Senator Williams	
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Program or Project Description:

The Mental Health Services Plan (MHSP) provides limited services to individuals who are not eligible for Medicaid, have a severe mental illness, and a family income under 150 percent of the federal poverty level.

Fund Name:	Appropriation, Expenditure and Source				Approp & Expenditure numbers are as of August 29, 2008
	2008		2009		
	Approp.	Expended	Approp.	Expended	
General Fund	6,312,014	6,291,546	6,312,014	381,252	
State Special	2,768,810	2,768,810	3,536,400	364,377	
Federal Funds	1,228,490	1,201,776	1,228,490	0	
Total:	\$10,309,314	\$10,262,132	\$11,076,904	\$745,629	

Goal(s):

Establish consumer choice by increasing the availability of services for individuals enrolled in the Mental Health Services Plan.

Performance Measures :

- Increase the number of providers with prescriptive authority who accept MHSP clients
- Increase the number of other outpatient providers, including mental health centers, who accept MHSP clients
- Establish baseline data for MHSP clients who receive services from expanded provider network

2009 Biennium Significant Milestones:

		Completion Dates	
		Target	Actual
1	Expand provider network for prescriptions and medication management - fee-for-service	1/01/08	2/01/08
2	Amend Administrative Rules to transition to expanded provider network	7/01/08	in progress
3			
4			
5			

Performance Report:

February 1, 2008 provider network was expanded to include all physicians, psychiatrists, mid-level practitioners (APRN, PAC), Rural Health Centers, Federally Qualified Health Centers, and labs to improve access to prescribers of medications. For these six provider types, claims are paid as fee-for-service. AMDD has drafted Administrative Rules to transition program to fee-for-service for all providers listed above as well as licensed mental health centers.

Effective 7-1-2008, MHSP is a fee-for-service program for providers identified in the expansion of February 2008 (physicians, psychiatrists, mid-level practitioners, Rural Health Centers, Federally Qualified Health Centers and labs) as well as any licensed mental health center. The plan of benefits has been developed that includes outpatient services with limits on units of service. AMDD is closely monitoring costs.

Legislative Performance Measures

Increase the number of providers with prescriptive authority who accept MHSP clients - Since beginning open access to medication prescribers in February 2008, as many as 8 physicians (June), 8 mid-level practitioners (April) and 7 psychiatrists (February, April, June) have provided services to MHSP recipients. Overall, a total of 12 non-Mental Health Center providers provided medication management services in February 2008 and 17 non-Mental Health Center providers provided services in June 2008.

Increase the number of other outpatient providers, including mental health centers, who accept MHSP clients - In July 2008, there were a total (YTD) of 31 various providers serving MHSP recipients. 18 of the 31 were non-medication management providers. Of the 18 non-medication providers, 1 provider was a non-mental health center provider.

Establish baseline data for MHSP clients who receive services from expanded provider network - AMDD lacks confidence in encounter claim reporting for the SFY 2008 and previous time periods which makes comparisons difficult. Beginning with July 2008, 2,189 individuals received MHSP services (YTD). So far this fiscal year, only a handful of individuals have sought services from the expanded provider network. AMDD expects the actual experience to increase as consumers become more aware of the expanded network of providers.

LFD Narrative:

LFD ASSESSMENT - On Track

DATA RELEVANCE - The data received is relevant to the milestones. However, there is limited data, including baseline data, to determine whether the measures are being met and therefore the goal is being achieved.

APPROPRIATION STATUS - No appropriation/expenditure data was provided.

OPTIONS - The workgroup could request an update at the November LFC meeting to determine whether the provider network is expanding further and whether MHSP enrollees are using the expanded network. It could also request updated expenditure and enrollment data.



Version	Date	Author
6901-33-13 BO - 1	12/05/97	Steinbeck
6901-33-13 BW -2	5/20/08	Steinbeck

Change Description
LFD narrative added
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