

Division of Mental Health and Addiction

1915(i) Adult Home and Community Based Service (HCBS) Program

Behavioral and Primary Healthcare Coordination (BPHC)

1915(i) Adult State Evaluation Team

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January 10, 2019



Behavioral and Primary Healthcare Coordination (BPHC)

The Behavioral and Primary Healthcare Coordination (BPHC) program was designed to help individuals with a serious mental illness (SMI) and co-occurring physical healthcare need(s) to manage their care.

The goal of the program is to empower individuals to remain integrated in the community.



Behavioral and Primary Healthcare Coordination (BPHC) *(continued)*

The BPHC program is targeted to individuals who meet the BPHC eligibility criteria and who *would not otherwise qualify* for Medicaid or other third-party reimbursement for the intense level of services needed to function safely in the community.

The primary function of the program is to provide a gateway to Medicaid benefits for individuals who meet the BPHC eligibility criteria.



BPHC Eligibility Criteria

Targeting Criteria

- At least age 19
- BPHC eligible primary mental health diagnosis

Needs-Based Criteria

- Demonstrated health need which requires assistance and support in coordinating behavioral health and physical health treatment
- Demonstrated need related to management of behavioral and physical health
- Have recommendation for intensive community-based care on the Adult Needs and Strengths Assessment (ANSA) by scoring level of need of 3 or higher
- Meets an algorithm based on answers to health questions used to assess applicant's strengths and risk factors



BPHC Referrals

The 25 State-certified Community Mental Health Centers (CMHCs) are the exclusive providers for BPHC

- To be eligible for BPHC, all members must receive their mental health treatment from one of the 25 CMHCs
- Listing of all providers for the programs may be found at:
<http://www.in.gov/fssa/dmha/4446.htm>
- CMHCs are responsible for submission of the BPHC applications for eligibility review



Community Mental Health Centers (CMHC) Responsibilities

- Evaluations, assessments, and application completion for each individual
- Submission of completed application and Individual Integrated Care Plan with supporting documentation to the 1915(i) State Evaluation Team (SET) for clinical eligibility review
- Provision of services to approved members for the program



BPHC Eligibility Process

- **1915(i) Adult State Evaluation Team determines *clinical* eligibility**
 - If determined to be clinically eligible for BPHC, information is transmitted to Division of Family Resources (DFR)
- **DFR determines non-clinical/financial Medicaid eligibility**
 - Individuals determined to be *clinically* eligible for BPHC have a Special Income Level (SIL) consideration that is 300% or below the Federal Poverty Level (FPL) which may be applied during Medicaid eligibility review



BPHC Approval

- **Maximum 180 day BPHC per clinical eligibility period**
- **Must re-apply to renew BPHC eligibility**



BPHC Service Activities

Case management is the only service provided in the BPHC program and includes the following activities

- **Coordination of healthcare services**
 - Direct assistance in gaining access to services
 - Coordination of care within & across systems
 - Oversight of the entire case
 - Linkage to services
- **Assistance in utilizing the healthcare system**
 - Logistical support
 - Advocacy
 - Education



BPHC Service Activities *(continued)*

- **Referral & linkage to medical providers**
- **Coordination of services across systems**
 - Physician consults
 - Communication conduit
 - Notification of changes in medication regimens & health status
 - Coaching for more effective communication with providers



Certified Recovery Specialists and Community Health Workers

FSSA/DMHA Certified Recovery Specialists (CRS) and Community Health Workers (CHW) employed by CMHCs may provide some of the activities within the BPHC service.

However, CRSs and CHWs are not permitted to complete the following services for the BPHC program.

- Needs assessment
- Referral and linkage activities
- Physician consults



Certified Recovery Specialist (CRS)

A CRS must meet the following criteria

1. Is maintaining health recovery from mental illness
2. Has completed the CRS FSSA/DMHA State-approved training program
3. Has received a passing score on the certification exam
4. Is supervised by a licensed professional or QBHP



Community Health Workers (CHW)

A CHW must meet the following criteria

1. Has completed the CHW FSSA/DMHA and Indiana State Department of Health (ISDH) state-approved training program
2. Has received a passing score on the certification exam
3. Is supervised by a licensed professional or QBHP



1915(i) Adult Behavioral and Primary Healthcare Coordination

Contact Information

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THANK
YOU!

