

Bulletin Number: MMP 24-24

Distribution: All Providers in Michigan's Prepaid Inpatient Health Plan (PIHP)
Regions 1, 2, 3, 4, 5, 6, 7, 8, and 9

Issued: July 1, 2024

Subject: Behavioral Health Home (BHH) Expansion and Addition of Codes to
Increase Eligibility for Youth with Serious Emotional Disturbance (SED)

Effective: October 1, 2024

Programs Affected: Medicaid, Healthy Michigan Plan, MIChild

Note: Implementation of this policy is contingent upon approval of a State Plan Amendment (SPA) by the Centers for Medicare & Medicaid Services (CMS).

Pursuant to the requirements of Section 2703 of the Patient Protection and Affordable Care Act/Section 1945 of the Social Security Act, the purpose of this policy is to provide coverage and reimbursement for BHH services. This policy is effective for dates of service on and after October 1, 2024. The policy applies to Fee-for-Service and managed care beneficiaries enrolled in Medicaid, the Healthy Michigan Plan, MIChild, Freedom to Work, or full Fee-for-Service Healthy Kids - Expansion who meet BHH eligibility criteria. The Michigan Department of Health and Human Services (MDHHS) has a companion operational guide for BHH providers called the [Behavioral Health Home Handbook](#).

General Information

MDHHS is seeking approval from CMS to revise the current BHH SPA to expand BHH services in select Michigan counties. The BHH provides comprehensive care management and coordination services to Medicaid beneficiaries with select Serious Mental Illness/Serious Emotional Disturbance (SMI/SED) diagnoses. (Refer to the Behavioral Health and Intellectual and Developmental Disability Supports and Services chapter of the [MDHHS Medicaid Provider Manual](#) for a detailed description of the BHH structure.)

This policy expands coverage to 16 Michigan counties in Prepaid Inpatient Health Plan (PIHP) regions 3, 4, and 9, (see Geographic Criteria section below) and adds F91 and F98 International Classification of Diseases (ICD-10) codes to increase eligibility for SED youth (see Diagnosis Criteria section below). This policy also changes the required FTE for Health Home Directors from .50 to .25 per 100 beneficiaries and adds Youth Peer Support Specialist to the Health Home staffing structure (see Provider Staffing section below).

Eligibility

Section 1945 of the Social Security Act requires states to define beneficiary eligibility for health home services by geographic region and diagnosis. The sections below delineate these criteria for the BHH.

Geographic Criteria

BHH services will be expanded to include Medicaid beneficiaries who reside in the following counties and meet all other eligibility criteria:

- Allegan
- Barry
- Berrien
- Branch
- Calhoun
- Cass
- Kalamazoo
- Kent
- Lake
- Macomb
- Mason
- Muskegon
- Oceana
- Ottawa
- St. Joseph
- Van Buren

Diagnosis Criteria

The ICD-10 diagnostic codes below will be added to increase eligibility for BHH services for SED youth:

- F91 Conduct Disorders
- F98 Other behavioral and emotional disorders with onset usually occurring in childhood and adolescence

Provider Staffing

This policy updates provider staffing to the following ratios per 100 beneficiaries and adds Youth Peer Support Specialist to the staffing structure:

Title	FTE
Health Home Director	0.25
Behavioral Health Specialist	0.25
Nurse Care Manager	1.00
Peer Support Specialist, Peer Recovery Coach, Youth Peer Support Specialist, Community Health Worker, Medical Assistant	3.00-4.00
Medical Consultant	0.10
Psychiatric Consultant	0.10
Total FTE	4.7-5.7

Payment Methodology

MDHHS will provide a monthly case rate to the lead entity (LE) based on the number of BHH beneficiaries with at least one BHH service in a month. The LE will reimburse the health home partner for delivering health home services. Additionally, MDHHS will employ a pay-for-performance (P4P) incentive that will reward providers based on outcomes. MDHHS will only claim federal match for P4P incentive payments after P4P qualifications have been met and providers have been paid.

Metrics, Assessment, and Distribution

The methodology for metrics, specifications, and distribution will be effective October 1, 2024, and will be maintained on the [MDHHS BHH website](#) and in the Behavioral Health Home Handbook.

Manual Maintenance

Retain this bulletin until the information is incorporated into the MDHHS Medicaid Provider Manual.

Questions

Any questions regarding this bulletin should be directed to Provider Inquiry, Department of Health and Human Services, P.O. Box 30731, Lansing, Michigan 48909-8231, or e-mailed to ProviderSupport@michigan.gov. When you submit an e-mail, be sure to include your name, affiliation, NPI number, and phone number so you may be contacted if necessary. Typical Providers may phone toll-free 800-292-2550. Atypical Providers may phone toll-free 800-979-4662.

An electronic copy of this document is available at www.michigan.gov/medicaidproviders >> Policy, Letters & Forms.

Approved



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