Major Developments on BBH Payment and System Reform Initiative
Don Hunter

As many of you are aware, the Bureau of Behavioral Health (BBH) has been working to develop and implement Behavioral Health Payment and System Reform, through a Prepaid Ambulatory Health Plan (PAHP). Regular updates have been provided in this newsletter and on our website.

In the meantime, the Department of Health and Human Services (DHHS) has been looking at placing the entire Medicaid population into managed care. This resulted in the passage of Chapter 125, New Hampshire Laws of 2011 (SB 147). This law requires that DHHS enter into contracts with managed care vendors that demonstrate “the greatest ability to satisfy the state’s need for value, quality, efficiency, innovation, and savings.” The target date for implementation of Care Management is July 1, 2012 and all Medicaid members are to be enrolled within 12 months.

Although these two projects were advancing separately, after much deliberation and consultation, it was decided in early October to stop work on the PAHP and instead bring all community mental health services under the Medicaid Care Management initiative.

DHHS has spent a great deal of time looking at how to successfully meet the requirements in SB 147 and implement a broad managed care plan for all New Hampshire Medicaid members. The stakeholder meetings held around the State in September were part of this effort. Details of this approach will become available when the Request for Proposals (RFP) is released (mid-October). More information will be released as the start-up date nears.

What does all this mean to community mental health consumers, families and providers? Rather than delivering behavioral health services under one form of managed care (PAHP), they will be delivered under a different care management delivery system. The approach being worked on will cover all New Hampshire Medicaid members and set up medical homes to help coordinate their care. Inclusion of community mental health consumers in this initiative will allow BBH to focus on the delivery of high-quality services, improving access to those services, and achieving desirable outcomes.

We believe that the Medicaid Care Management initiative will help BBH and the CMHCs provide consumers with improved access to better services. This is a goal that everyone shares, regardless of whether they are consumers, family members, CMHC providers, or people who work at BBH. We want you to stay in touch and let us know how successful we are at reaching these goals, so look for opportunities to give us feedback or get in touch with me directly to share your experiences. You can reach me at Donald.R.Hunter@dhhs.state.nh.us or (603) 271-5049.

I would like to acknowledge the work Greg Burdwood put into the Behavioral Health Payment and System Reform project. Greg moved on to another position in early October and was very helpful in my transition into this position. Over the last several years, I have worked in DHHS on health care reform, Medicaid managed care and the Medicare Part D prescription drug program. I look forward to meeting and working with you.