1115 Waiver Pilot: Intensive In-Home Services – Billing and Payment

Webinar Presentation

September 24 and 25, 2018
Intensive In-Home Services Defined

- Focus on individuals with high needs who need intervention to stabilize behaviors to reduce risk of crisis and/or hospitalization
- Two components of Intensive In-Home:
  - Intensive In-Home – Clinical
  - Intensive In-Home – Support
Intensive In-Home - Clinical

- Strength-based, individualized, therapeutic face-to-face, time-limited, focused intervention
- Driven by a Clinical Intervention Plan
- Delivered in the individual’s home or home-like setting
- Provided by a Qualified Mental Health Professional (QMHP), as defined in 89 Ill. Adm. Code 140.453; and
- Supported by skills development and stabilization services provided through Intensive In-Home – Support services.
Intensive In-Home - Support

- Develop skills and stabilize an individual in his or her home or home-like setting;
- Support the individual and family in implementing therapeutic interventions, skills development, and behavioral techniques;
- Provided as a direct adjunct to individual receiving Intensive In-Home Clinical;
- As included in the Clinical Intervention Plan; and
- Provided by a Mental Health Professional (MHP), as defined in 89 Ill. Adm. Code 140.453.
Eligible Providers

- Enrolled as a Behavioral Health Clinic, or
- A Community Mental Health Center; and
- Actively utilizing the Illinois Medicaid + Comprehensive Assessment of Needs and Strengths (IM+CANS) as the approved Integrated Assessment and Treatment Plan (IATP) tool.
Eligible Individuals

- Individual three (3) to twenty-one (21) years of age
- Enrolled in Tier A or Tier B of an Integrated Health Home, and
- Completed IM+CANS signed by an LPHA
- Indicates needs in required domains
- History of crisis events, hospitalizations or thought disorder / psychotic symptoms
Enrollment of Eligible Individuals

- Providers or Integrated Health Home will submit a Service Request Form to HFS
- HFS will review, determine if eligibility criteria are met, will notify provider of approval and will add identifier to individual as a waiver participant
- Initial 60 days will be authorized
- Two additional 30 day periods may be approved upon submission of request to HFS
Billing and Payment

- Designed to support community stabilization
- Clinical and support bundled to encourage flexibility and individualization
- Allows opportunities to further develop service continuum in support of individuals and families
- Designed to incentivize quality and outcomes not to incentivize volume of services
Billing and Payment

- Payment divided into two categories
  - Base payment
    - $160 per week if base requirements are met
  - Adjusted payment
    - Additional $75 per week if outcome measures are met
Billing and Payment

Requirements for “base” payment

- A minimum of two interventions per week must be submitted to receive payment for that week
- Either clinical or support or both depending on the needs of the individual / family that week
- Must be face-to-face in the family’s home or with the individual/family in the community
- Only one or no intervention for the week = no payment
Billing and Payment

- Weekly intervention codes / modifier combos
  - Clinical Only: H2020 TG TG
  - Support Only: H2020 SC SC
  - Mixed (Clinical and Support): H2020 TG SC
Billing and Payment

- Requirements for “adjusted” payment for initial 60 day authorization
  - Individual remains enrolled with Integrated Health Home
  - Individual remains in the community without hospitalization or other institutionalization
Billing and Payment

- Requirements for “adjusted” payment for 30 day extension(s)
  - Individual remains enrolled with Integrated Health Home
  - Individual remains in the community without hospitalization or other institutionalization
  - Individual does not experience crisis event that requires call to CARES
Billing and Payment

- Payment Adjustment = additional $75 per week
- Paid after 180 day run out for claims to ensure that any institutional claims are processed
- Base payment will be adjusted to include additional $75
Billing and Payment

- Additional services allowed:
  - Crisis Intervention
  - Crisis Stabilization
  - 1115 Waiver Pilot: Crisis “Beds”
  - Community Support – Team (after Intensive In-home is complete)

- Services excluded:
  - Therapy/Counseling
  - Community Support – Individual / Group
Billing and Payment

- Measures of Pilot Effectiveness / Sustainability
  - IM+CANS needs decrease and strengths increase
  - School attendance / performance improves
  - Contact with law enforcement declines, if applicable
  - Individual and Family reported Quality of Life improves (information gathered via survey)
General Information

- Approved Special Terms and Conditions: 
  - [1115 Waiver Pilots - Special Terms and Conditions](#)
- To submit questions about the pilot: 
  - [HFS.Intensive.InHome.Pilot@illinois.gov](mailto:HFS.Intensive.InHome.Pilot@illinois.gov)
- To review pilot information: 
  - [https://www.illinois.gov/hfs/MedicalProviders/behavioral/Pages/default.aspx](https://www.illinois.gov/hfs/MedicalProviders/behavioral/Pages/default.aspx)
- To submit Service Request Form via secure fax: 
  - 217-524-1221
  - Subject line: Intensive In-Home Pilot Request