



**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
- To review pilot information:
 - <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