



# **Children's Health Insurance Program (CHIP) Advisory Council Meeting**

**May 29, 2024**

# Agenda

- Welcome and Introductions
- Remarks from Sally Kozak, Deputy Secretary of OMAP
- CHIP by the Numbers
- Quality Assurance Updates
- Policy Update
- Marketing Updates
- Closing and Wrap-Up



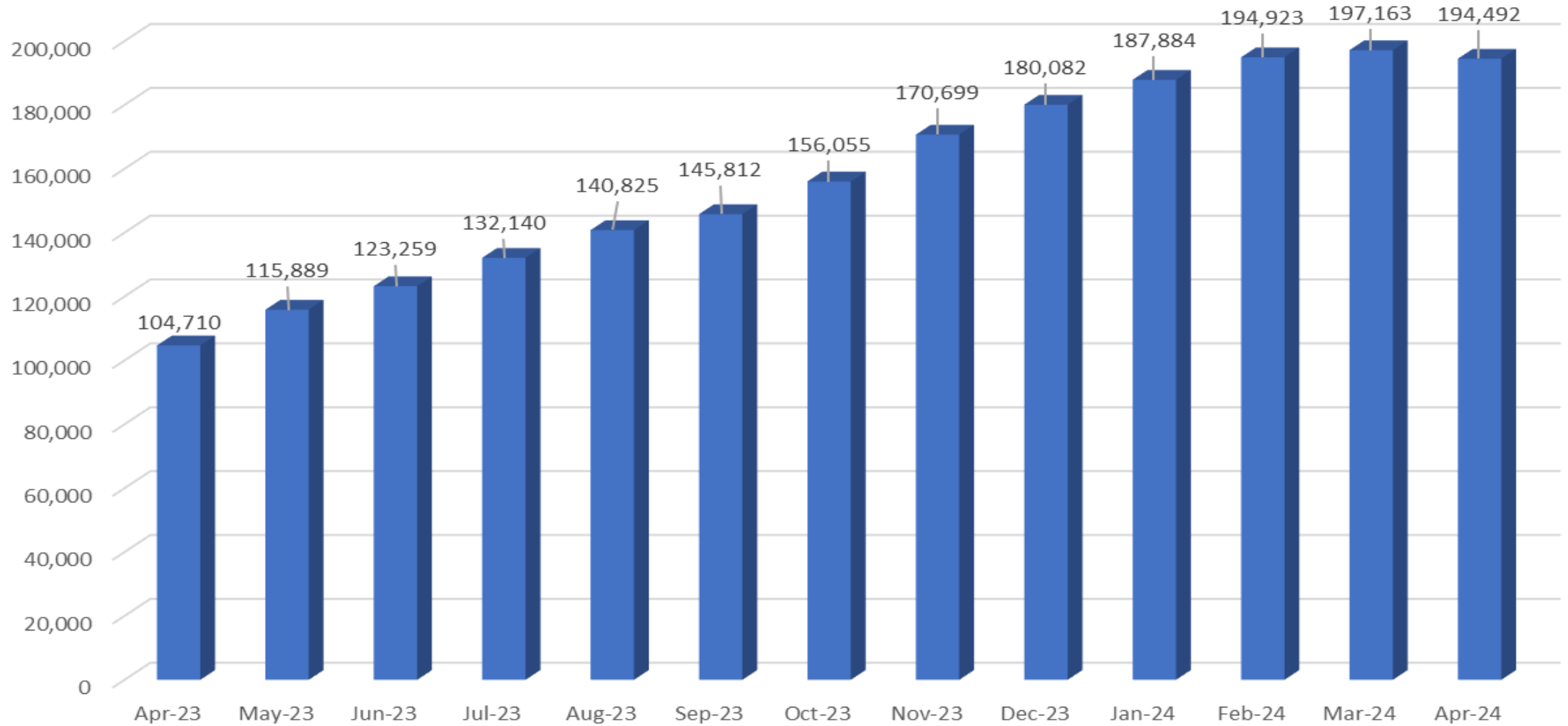
# Welcome and Introductions

# Sally A. Kozak MHA, RN

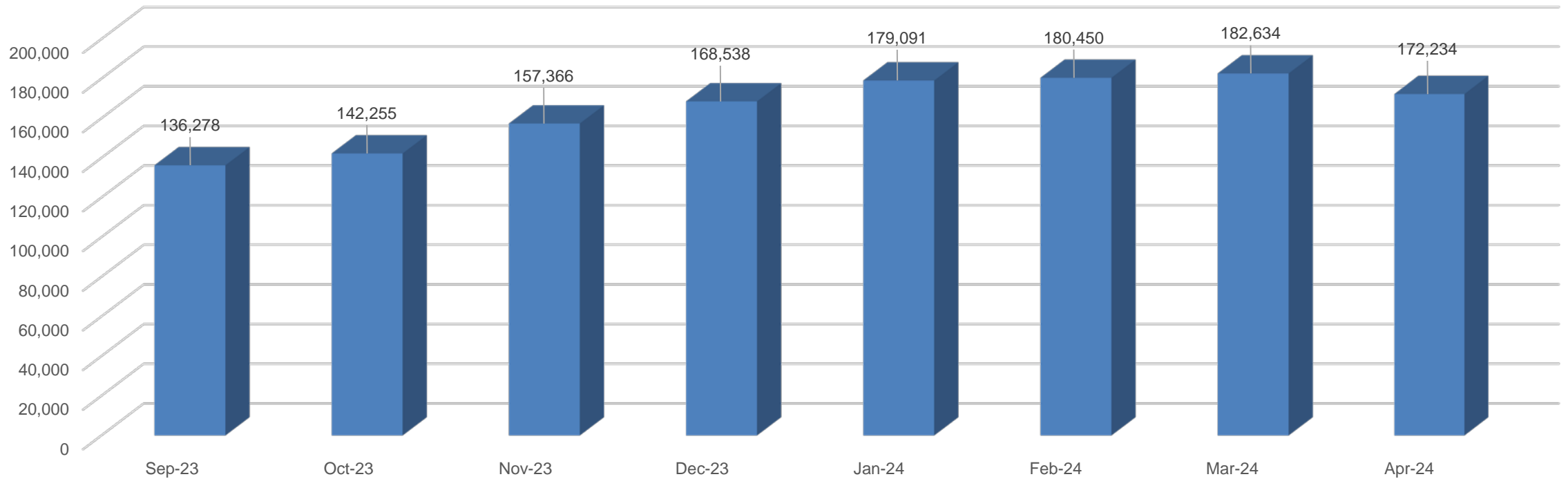
Deputy Secretary for the Pennsylvania  
Office of Medical Assistance Programs

# CHIP by the Numbers

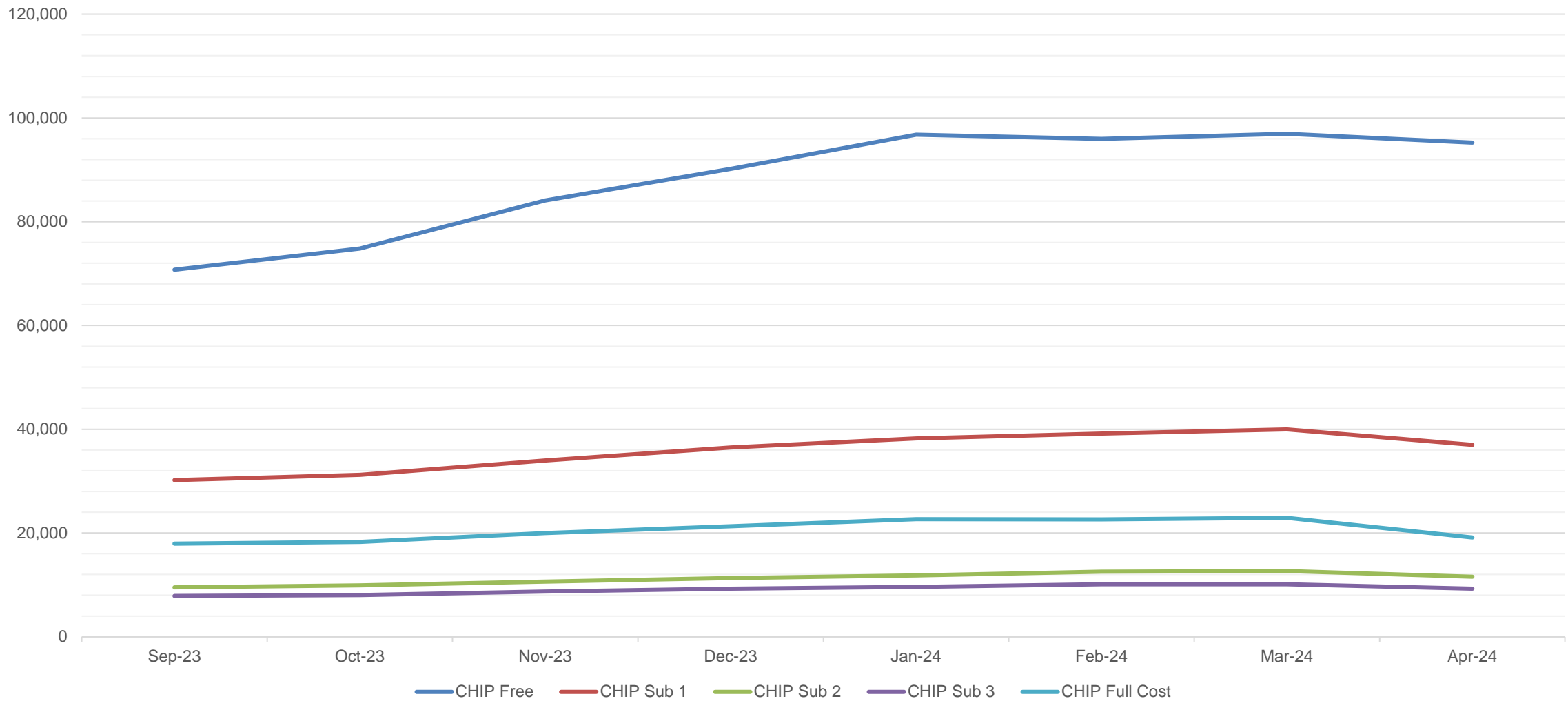
# CHIP Eligibility



# CHIP Enrollment

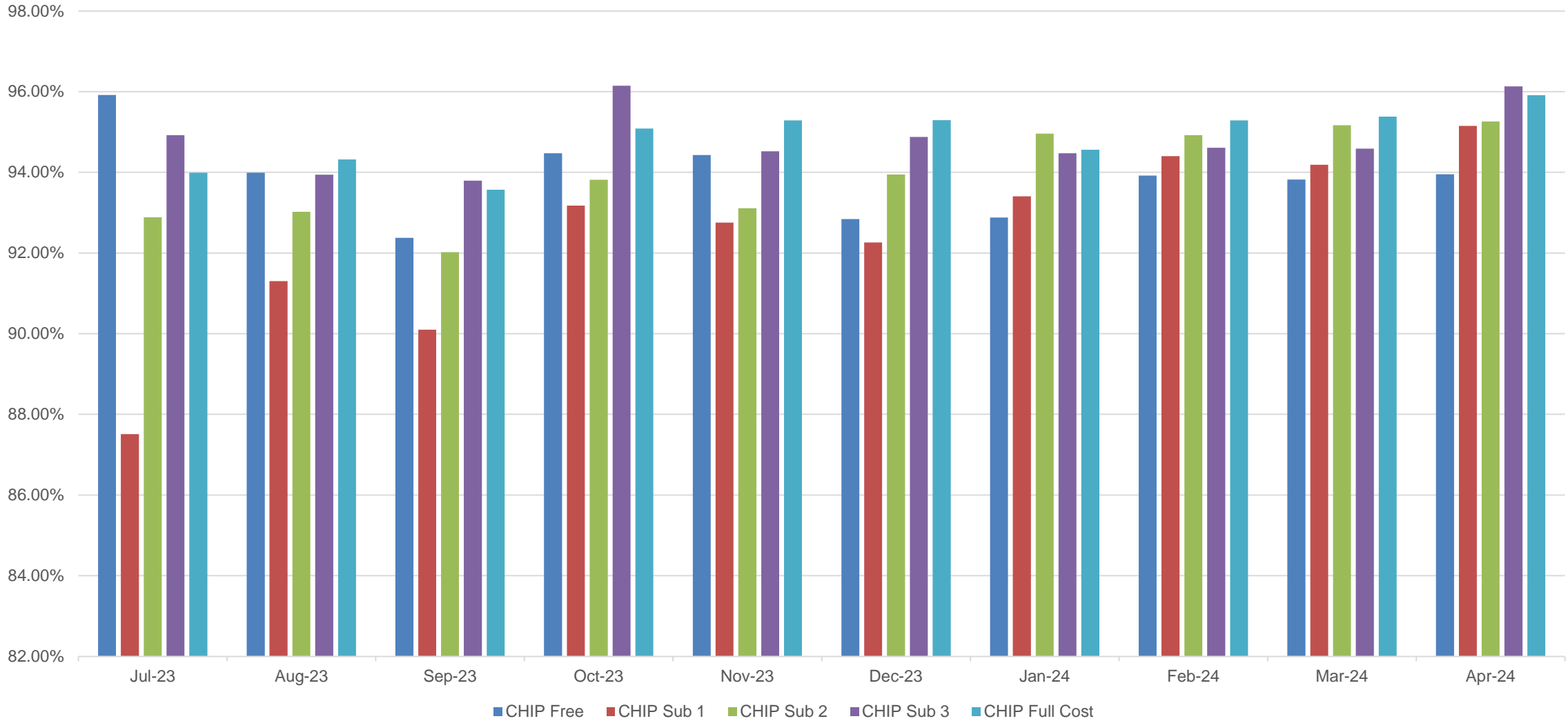


# Enrollment by Sub-Programs





# Renewals by Subprograms

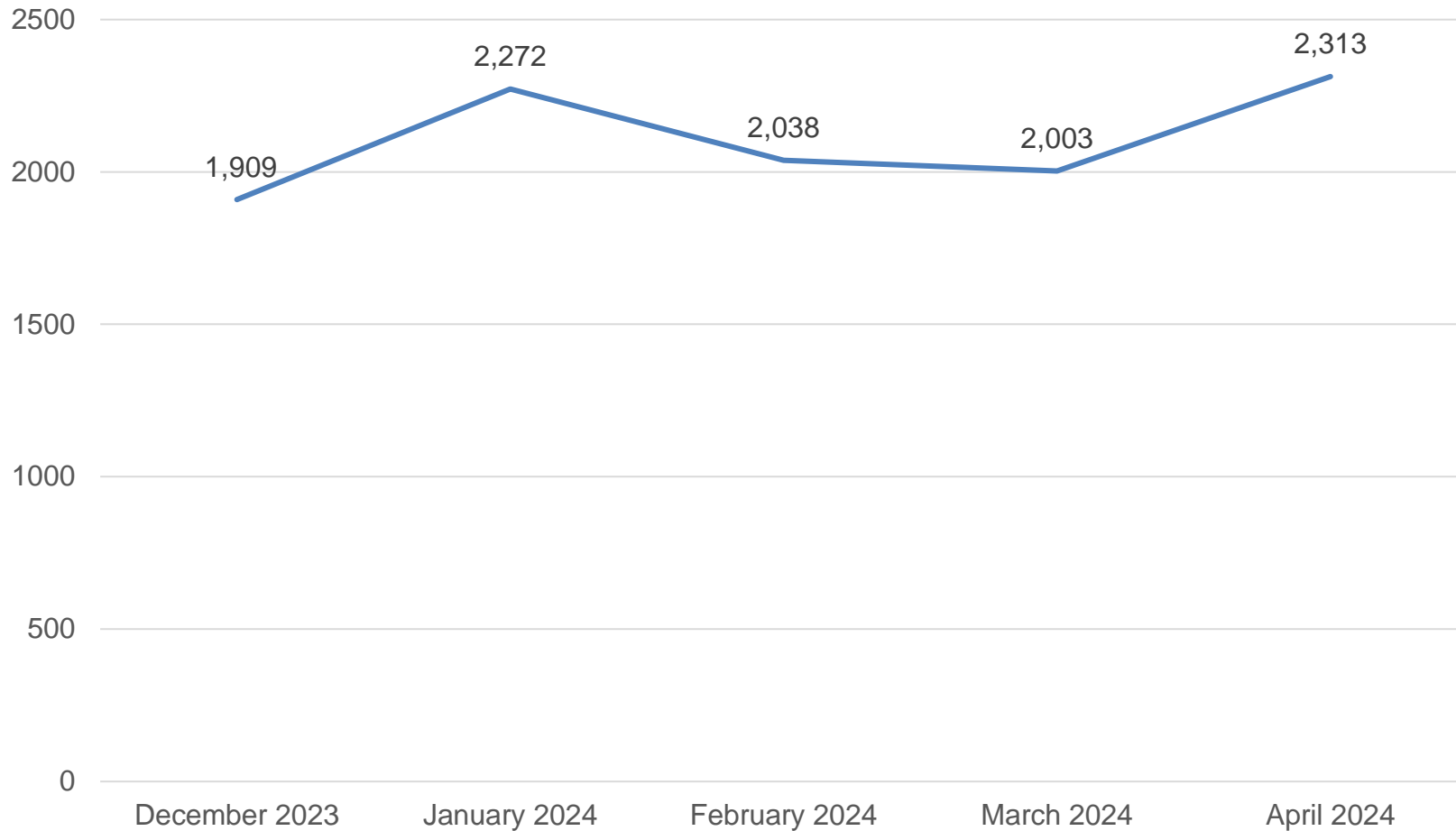


# Member Services Unit

- The Member Services Unit focuses on MCO enrollment corrections, MCO transfers, and phone calls.
- OIM continues to process applications and renewals.
- The MCOs have become community partners to add applications and renewals to myCOMPASS

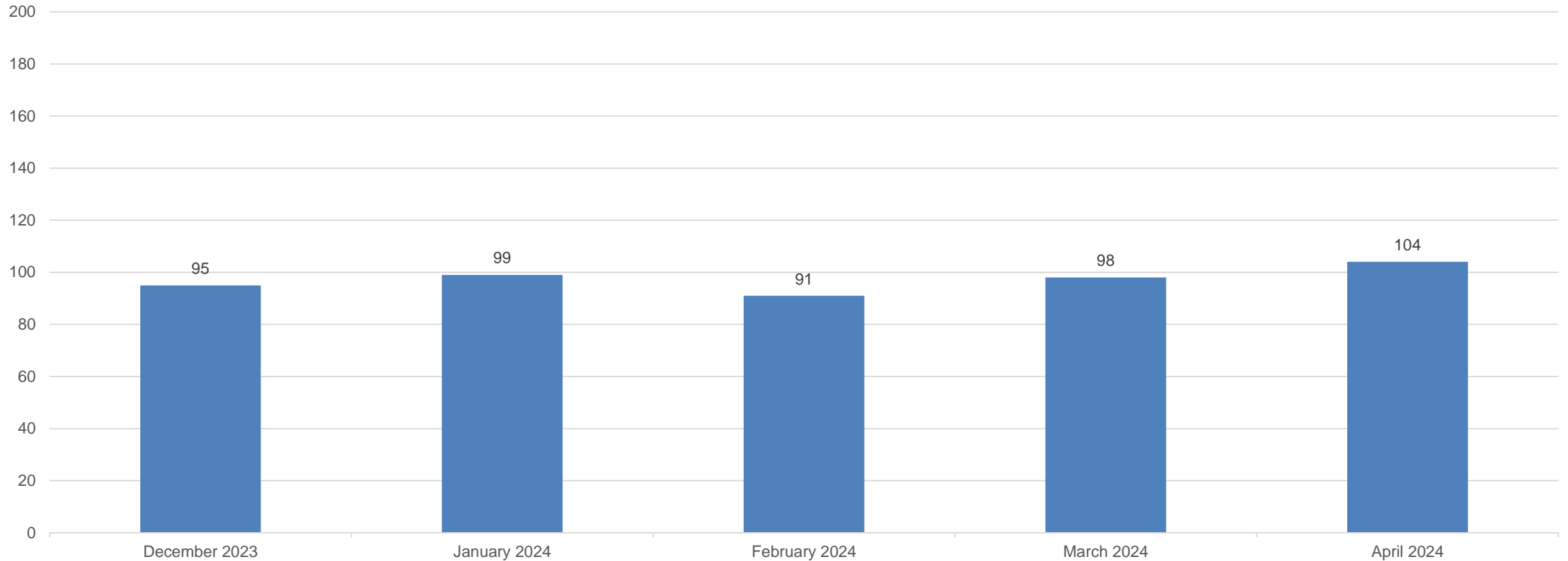
# Customer Calls to the CHIP Call Center

## 1-800-986-KIDS Calls Received



# CHIP Inspiritec Application

## Applications Completed Over the Phone



# Questions?





# Quality Assurance Updates

# Quality Assurance (QA) Updates

- **New Quality Team Member**
- **CMS External Quality Review Reports**
- **Quality Strategy Updates**
  - [Managed Care Quality Strategy \(pa.gov\)](#).
  - **Goals:**
    - Increase annual child & adult dental visits
    - Increase well-care visits
    - Increase lead screening
    - Decrease ED utilization & inpatient admissions/readmissions

# QA Updates

- **CMS Managed Care Final Rule**
- **CHIP Performance Improvement Projects Updates**
  - Improving Lead Screening Rate in Children
  - Improving Access to Pediatric Preventive Dental Care

<b>Proposal report due:</b>	<b>3/31/2022</b>
<b>Baseline measurement period:</b>	<b>1/1/2021 – 12/31/2021</b>
<b>Date interventions initiated (after the baseline measurement period):</b>	<b>7/1/2022</b>
<b>Interim measurement period:</b>	<b>1/1/2022 – 12/31/2022</b>
<b>Interim report due:</b>	<b>8/15/2023</b>
<b>Final measurement period:</b>	<b>1/1/2023 – 12/31/2023</b>
<b>Final report due:</b>	<b>8/15/2024</b>



# Questions?





# Office of Mental Health and Substance Abuse Services Presentation

# Crisis Intervention Services Update

May 29, 2024

## Background

The Mental Health and Mental Retardation Act of 1966 states that counties “shall establish a county mental health program...for the prevention of mental disability, and for the diagnosis, care, treatment, rehabilitation and detention of the mentally disabled and shall have power to make appropriations for such purposes.”

Included in the above is the provision for Crisis Intervention services.

# Why Modernize the Crisis System?

- To address the increased need for services and supports and lower the wait time to obtain clinical mental health care.
- To get individuals connected to the right type of help – not the emergency room or criminal justice involvement.
- To align Pennsylvania's system with SAMHSA's best practice guidance.
- To develop crisis intervention services regulations because it is currently an unregulated service.



- In 2020 SAMHSA released the **National Guidelines for Behavioral Health Crisis Care – A Best Practice Toolkit**
- The toolkit can be found at the following link- [National Guidelines for Behavioral Health Crisis Care \(samhsa.gov\)](https://www.samhsa.gov/national-guidelines-behavioral-health-crisis-care)
- Designed to be an Integrated Crisis System able to address people experiencing either a Mental Health or Substance Use Disorder Crisis

- Comprehensive and Integrated Crisis Network aimed at assisting with:
  - Emergency Room boarding issues
  - Overdependence on restrictive longer-term Inpatient placements
  - Overuse of Law Enforcement
  - Diversion to Incarceration

- Based on Three Essential Core Services - **Someone to Call, Someone to Respond, Somewhere to Go**
- Someone to Call - Regional Crisis Call Center (988)
- Someone to Respond - Crisis Mobile Team Response
- Somewhere to Go – Crisis Receiving and Stabilization Facilities



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- The first step in a crisis continuum are crisis hotlines. Call centers function to provide support to individuals experiencing a crisis.
- According to Vibrant, the entity that oversees the Suicide Prevention Lifeline, only 10% of callers require additional services beyond telephone support.
- There are currently 12 Lifeline Call Centers answering 988 for callers from the Commonwealth, with 2 more Call Centers in the process of onboarding.

### **SAMHSA General Call Center Benchmark:**

90% of calls to the Lifeline will be answered by an instate call center by



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- Individuals experiencing a mental health crisis are often directed to emergency rooms or receive a law enforcement response in the community.
- Mobile crisis teams are staffed by behavioral health professionals, including certified peer professionals (CPS & CRS) who respond to individuals in the community to provide support, de-escalate individuals, and identify appropriate resources.
- Teams (2 or more professionals) respond to individuals in crisis in the community 24 hours a day, 7 days a week.

### **SAMHSA Mobile Crisis Team Benchmark:**

80% of individuals have access to a rapid community crisis response by



## Somewhere to Go: Emergency BH Crisis Walk-In Centers

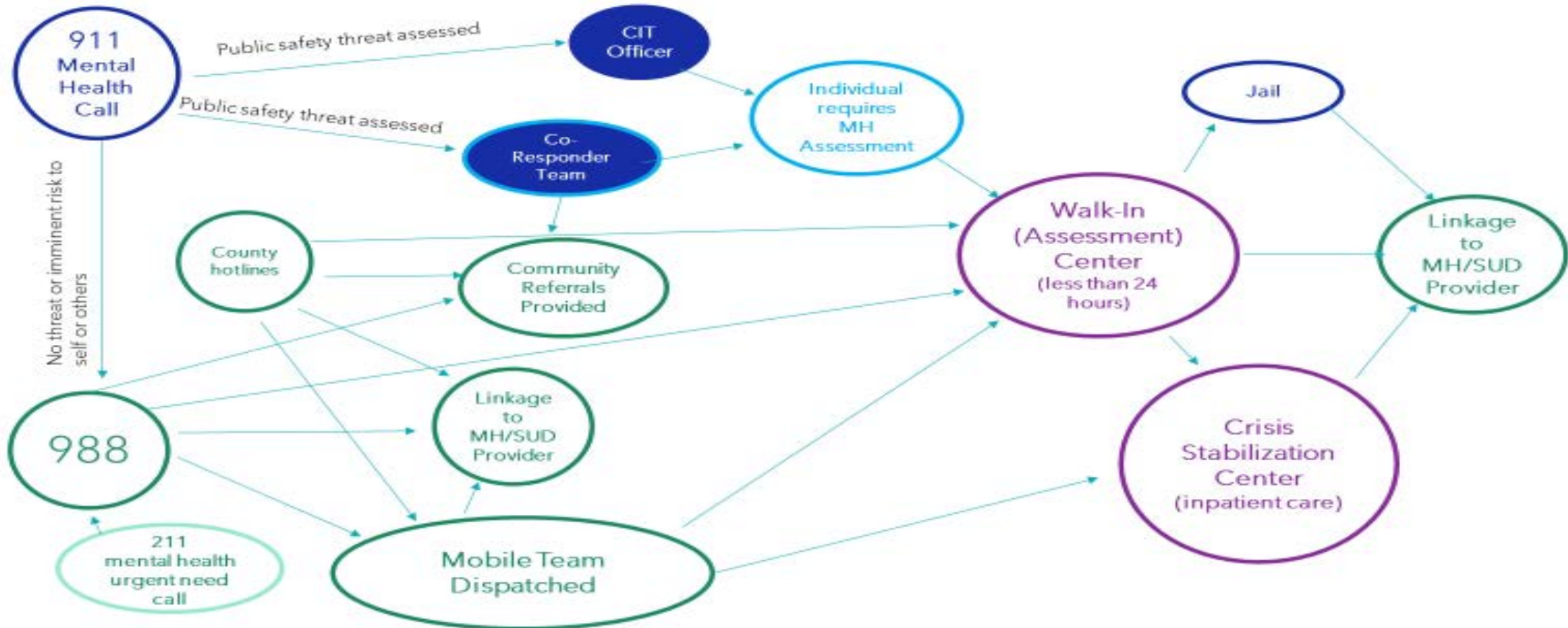
- Walk-In Centers can serve as an alternative to Emergency Departments and accept all patients without requiring medical clearance (voluntary and involuntary).
- Walk-In Centers have medical providers capable of diagnosing and prescribing medication and are heavily staffed with peer support specialists.
- Serve as a diversion from justice system engagement.
- Walk-In Centers serve as a mental health urgent care center where assessments are conducted, medications can be utilized to stabilize, and a plan of care is developed in less than 24 hours.

### **SAMHSA Walk-In Centers Benchmark:**

80% of individuals have access to community-based 24/7 crisis care by 2027.

# Building a Crisis System

## PA BEHAVIORAL HEALTH CRISIS SYSTEM ROADMAP



Steven Ross, OMHSAS

[c-stross@pa.gov](mailto:c-stross@pa.gov)

<https://www.dhs.pa.gov/Services/Mental-Health-In-PA/Pages/OMHSAS-Information.aspx>



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- Ensuring resources are available when people need help.
- Obtaining county support and commitment to sustaining services.
- Holding payors accountable to cover the cost of providing services to their beneficiaries.
- Developing a comprehensive system to respond to individuals with complex needs.

# Questions?



# Policy Updates



# Continuous Eligibility

On September 29th, 2023 CMS issued a State Health Official (SHO) letter indicating changes to Continuous Eligibility (CE) that went into effect on January 1, 2024.

- A child's eligibility may not be terminated during a CE period unless one of the following exceptions applies:
  - The child attains age 19
  - The child or child's representative requests a voluntary termination of eligibility
  - The child ceases to be a resident of the state
  - The agency determines that eligibility was erroneously granted at the most recent determination, redetermination, or renewal of eligibility because of agency error or fraud, abuse, or perjury attributed to the child or the child's representative;
  - The child is deceased.
  - The child becomes eligible for Medicaid
  - The family fails to pay initial premium.

# Continuous Eligibility

What does this mean for CHIP families?

**No more exception for failure to pay premiums or for private insurance.**

As of 1/1/24:

- No adverse action due to income or other insurance can be taken within the continuous eligibility period.
  - Adverse action for income can only be taken at application or renewal.
  - Within the eligibility period, if other insurance is obtained or discovered CHIP becomes the payer of last resort.

# Continuous Eligibility

- What is Pennsylvania CHIP doing?
  - Focusing on educating families on Continuous Eligibility changes.
    - » Worked with managed care organizations and advocates to create letter template to share with families
      - » Explains options if obtaining other insurance or if can not make premiums payments.
      - » FAQ document will be posted on the website.
  - Held in-person meeting with managed care organizations to review changes.
  - Have second meeting pending to assist with educating on the renewal process.
  - Manual processes in place to protect families while working to complete systematic changes in eCIS.
    - » Recently shared proposed State Plan Amendment with CMS for informal review before final submission.

# Medicaid and CHIP Final Rule

- Streamlining the Medicaid, Children's Health Insurance Program, and Basic Health Program Application, Eligibility Determination, Enrollment, and Renewal Processes [CMS-2421- F2]
- CMS Requirements:
  - Remove Option to Limit the Number of Reasonable Opportunity Periods to Establish Citizenship or Immigration Status
  - Removes the requirement for applicants to provide separate proof of identity when U.S. citizenship is verified with a state's vital statistics records or the Department of Homeland Security's Systematic Alien Verification for Entitlements (SAVE) program.
  - Eliminates premium lock-out periods in CHIP and encourages other mechanisms for addressing timely payment of premiums (e.g., frequent reminders, multiple payment options, pursue past due premiums).
  - Medicaid/CHIP Transitions to Other Insurance Affordability Programs: If an individual is found ineligible for Medicaid or CHIP and potentially eligible for Marketplace coverage but has not responded to a renewal form or request for information the Dept must transfer the individual to the appropriate other insurance affordability program (e.g., BHP, Marketplace).
  - New Timeliness Requirements at Application, at Renewal, and Upon Changes in Circumstances
  - Changes in Circumstances Reported by Third Party Data Source
- CMS Resources:
  - Final rule: <https://www.federalregister.gov/documents/2024/04/02/2024-06566/medicaid-program-streamlining-the-medicaid-childrens-health-insurance-program-and-basic-health>
  - Fact sheet: <https://www.cms.gov/newsroom/fact-sheets/streamlining-medicaid-childrens-health-insurance-program-and-basic-health-program-application>
  - Slide deck: <https://www.medicaid.gov/resources-for-states/downloads/covid19allstatecall04022024.pdf>

# Questions?







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**Be prepared with CHIP.**  
Free or low-cost healthcare  
for Pennsylvania kids and  
teens.



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# Questions?



# Closing and Wrap Up

- Closing Remarks
- Topics of discussion for next meeting?
  - Topics can be sent to Jennifer at [jpinder@pa.gov](mailto:jpinder@pa.gov) or Angela Episale at [aepisale@pa.gov](mailto:aepisale@pa.gov)
- Upcoming Advisory Council meetings:
  - Upcoming Fall Meeting
  - The Council shall meet twice per year and may provide for special meetings as the council deems necessary
  - Have a great SUMMER!!