The Redesign of OASAS Residential Services – A Collaborative Effort

Rob Kent, OASAS
Norwig Debye-Saxinger, TCA
• As part of the Medicaid Redesign Team Initiatives, OASAS will bring all adult services into Medicaid managed care in October 2015 for NYC and July 2016 for the rest of the state. Children and Children’s services will begin being enrolled in January 2017.

• As part of this move, and in collaboration with residential providers, OASAS is redesigning our residential services.
**Question:** What is OASAS asking CMS for permission to do regarding residential services?

**Answer:** We are asking CMS to allow the Medicaid Managed Care Plans to purchase Medicaid reimbursable services for their members in all OASAS State Plan settings which will include residential.
**Question:** Are we asking CMS to buy residential services?

**Answer:** **NO!!!** Again we are asking CMS to allow the Medicaid Managed Care Plans to purchase Medicaid reimbursable services for their members in all OASAS State Plan settings which will include residential.
Question: When NYC and ROS go live with integrating BH services into the managed care benefit package how will that impact Part 820 residential programs?

Answer: Mainstream Plans and HARPs will implement behavioral health services October 1, 2015 in NYC; and, July 1, 2016 in ROS. At that time plans may contract with Part 820 programs for residential SUD treatment services.
**Question:** Does every residential provider need to be converted to Part 820 when it takes effect or will there be a phase-in period?

**Answer:** We will maintain the current 819 regulation for a transition period to a new Part 820 certification. Providers will transition when they are ready.
Question: What are the services for the three elements of recovery?

Answer: The services for the three elements of recovery services are:

1. **Stabilization**
   - Individual will receive medically-directed care to treat acute problems and adjust to early recovery.

2. **Rehabilitation**
   - Individual will learn to manage recovery within the safety of the program.

3. **Community Re-integration**
   - Individual will further develop recovery skills and begin to re-integrate into the community.
Question: Which of the current treatment modalities will be included in residential redesign regulation?

Answer:

- Intensive Residential
- Community Residential
- Supportive Living
- Medically Monitored Crisis
Question: Will there be any funding available for the programs to hire the new medical and clinical staff?

Answer: OASAS is working on identifying and accessing funding to provide such funding so that providers can “hit the ground running”. 
Question: Will this residential redesign apply to adolescent and children services?

Answer: Yes. This redesign initiative applies to adult services but adolescent and children services will also move into Medicaid managed care in January 2017. Any redesign of adolescent and children services will occur after similar collaboration with those providers.
Question: Will there be separate licenses for the three elements of residential redesign?

Answer: NO!!! You will receive a Part 820 license and there will be a designation process which will approve you to offer the elements you choose to offer and they will be noted on your Operating Certificate.
**Question:** As a residential provider do I have to offer all three elements of recovery?

**Answer:** **NO!!!** You can offer all three but you will not be required to do so. Our goal is to preserve existing treatment programs and locations.
**Question:** Will I have flexibility with my certified capacity?

**Answer:** YES!!! For example, if you are certified for 50 beds and designated to provide Stabilization and Rehabilitation elements, OASAS will not partition the beds (25/25). Fill the beds based on the patients who walk through your door.
Question: Do I have to become a Medicaid provider?

Answer: YES!!! If you are providing services for the Stabilization and/or Rehabilitation elements of recovery you must become enrolled with DOH as a Medicaid provider.
Question: Are you turning the Medically Monitored/Crisis services over to the Therapeutic Communities?

Answer: NO!!! Medically Monitored/Crisis services will be part of the new residential model as the Stabilization element of recovery; they will incorporate into the new model like IR, CR, and SL providers do not have to offer all three elements.
Question: Will you mandate staffing levels in the regulation?

Answer: NO!!! The services to be provided in each element of recovery will drive the staffing necessary.
Question: Can I share staff from other programs within my agency?

Answer: Yes, however, staff must be clearly designated to spend an appropriate amount of time on-site where required.
Question: Are you taking away the state aid and replacing it with Medicaid?

Answer: NO!!! NO!!! NO!!!
The goal with residential redesign is to bring new money into the system to supplement the current funding so that you can enhance your staffing to meet the needs of your patients.
Question: How will I be paid?

Answer: CURRENT FUNDING WILL REMAIN!!!

Medicaid funding will be paid on a per diem basis for Medicaid reimbursable services. OASAS net deficit, SAPT Block Grant, Congregate Care Level II, PNA and Food Stamps will remain. OASAS and DOH should have draft rates by mid November 2015.
Question: Will OASAS net deficit, SAPT Block Grant, Congregate Care Level II, PNA and Food Stamps will remain?

Answer: Yes, and the residential per diem would be in addition to such funding streams.
**Question:** How will my program access the residential per diem?

**Response:** Stabilization and Rehabilitation Programs will access the appropriate per diem via a contractual arrangement with the enrollee’s health plan. Medicaid FFS would only be available in the following limited circumstance: if the program is: a Medicaid provider; less than 16 beds and serving a Medicaid recipient not enrolled in a managed care plan.
Provider Support:
Regional Forums:
OASAS together with CASA Columbia - scheduling a series of regional forums starting later this summer to assist programs as they consider redesign.
On-going Learning Collaborative:
The forums will be followed up by on – going learning collaborative sessions.