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Improve Utilization Review Process

Rigorous utilization review/management is mandatory. Currently, external review for behavioral health services is required only for Medicaid eligible consumers. The agency is in the process of developing a RFP for external review that will encompass all behavioral health consumers served in the public system. Utilization management ensures that consumers are receiving the appropriate services to promote recovery and self-determination, while also ensuring that services are only rendered and purchased for the time needed to effectively treat the consumer.

Restructure the Organization of the Regional and State Offices

The Division's regional and central offices will be blended and re-structured to increase responsiveness to the expanded provider network and the resulting contracting and monitoring practices. Regionally deployed staff will be responsible for developing and managing the provider network. The Division's state office will set and enforce policy, conduct investigations, release RFPs and contracts, develop and maintain management information systems, develop programs, and provide technical and consultative assistance. The organization will be policy driven, resulting in consistency and uniformity across the state.

Propose Re-alignment of the Seven MHDDAD Regions to Five Regions to Conform with Department of Juvenile Justice (DJJ) and Division of Family and Childrens Services (DFCS)

Lack of uniformity in the geographical human service delivery areas across agencies makes coordinated case planning and service delivery difficult. In addition, agencies are unable to do joint planning and work to eliminate duplication of services. Note: The Division of Public Health operates 19 regions, the Division of Family and Childrens Services and the Division of Aging operate 12 regions as set by House Bills 1650 and 699. The Division of Mental Health, Developmental Disabilities and Addictive Diseases works within 7 regions. The Department of Juvenile Justice utilizes the same 12 areas as DFCS but has an overlay of 5 regions; and most recently the Department of Community Health is proposing 6 regions for the managed health care system. Until uniformity is brought to the human service delivery areas, the various agencies responsible for the well being of Georgia's citizens will continue to be challenged to work in a cooperative environment. Consistency in service delivery areas in MHDDAD, DJJ and DFCS will improve planning and collaboration across the three major child and family serving agencies. This will result in integrated service delivery, reduced duplication of services and improved the quality of services. Ultimately it sets the stage for blending funding streams.

Implications of Managed Care for MHDDAD

A decision must be made to include or exclude (carve in or carve out) behavioral health services in the proposed managed health care plan developed by the Department of Community Health. Experiences in other states indicate that physical health matters take precedence over mental health issues. To prevent diversion of behavioral health funds to physical health, it is recommended that

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behavioral health *not* be included in the managed health care plan. This is a critical decision because managed healthcare organizations using contracted providers generally do not have experience dealing with the most severe cases involved in the public mental health sector. This results in those consumers being admitted to the public mental health hospitals, juvenile detention centers and jails as a cost shifting. The end result is institutional overcrowding with the consequences of increased serious incidents, deterioration of physical plants and the resultant lawsuits.

If the decision is made to include (carve in) behavioral health despite the above noted concerns, it is recommended that the carve in be delayed for a year to give both the Department of Community Health and the Department of Human Resources the opportunity to design a good benefit package, develop provider networks and avoid any unintended consequences.

cc: Shalen Nelson, Esquire