



Behavioral Health Integration Advisory Hub Meeting

March 28, 2025

10-11:30 AM EST

Please update your display name
on Zoom to include your name and
organization. Thank you!

Housekeeping



All attendees will enter the meeting on mute



To use the “Chat” function, click the speech bubble icon at the bottom of the screen



Use the “raise hand” function if you wish to speak



You can enable closed captions at the bottom of the screen

Behavioral health services transitioning in three phases

Phase 1

(Jan. 1, 2025)

Outpatient behavioral health services



Phase 2

(No earlier than Jan. 1, 2026)

Residential care and opioid treatment programs



Phase 3

(Date to be determined)

Select other behavioral health services

- MH outpatient counseling / psychotherapy
- MH partial hospitalization
- MH partial care in outpatient clinic
- MH outpatient hospital or clinic services
- SUD outpatient counseling
- SUD intensive outpatient
- SUD outpatient clinic
 - Ambulatory withdrawal management
 - Peer support services
 - SUD care management
- SUD partial care

- Adult mental health rehab (AMHR) / MH supervised residential
- SUD short-term residential
- SUD — medically monitored inpatient withdrawal management
- SUD long-term residential
- Opioid treatment programs (OTPs)

The services to be **considered** for integration in this phase include:

- Opioid Overdose Recovery Programs (OORPs)
- Psychiatric Emergency Screening Services (PESS)
- Behavioral Health Homes (BHHs)
- Community Support Services (CSS)
- Certified Community Behavioral Health Clinics (CCBHCs)
- Targeted case management (TCM):
 - Program of Assertive Community Treatment (PACT)
 - Children's System of Care (CSOC)
 - Intensive Case Management Services (ICMS)

These services for adults and youth are included in Phase 1, regardless of treatment setting

Today's Agenda

- 1 Phase 1 monitoring update
- 2 MCO perspectives on Phase 1 implementation
- 3 Stakeholder feedback on Phase 1 implementation
- 4 Stakeholder resources and upcoming meetings
- 5 Q&A

Phase 1 monitoring update

Priorities of Phase 1 monitoring during transitional period

- Members experience continuity of care
- MCOs expand provider networks and these networks are stable
- Timely prior authorization processes through MCOs and NJSAMS
- Timely and accurate claims submission and payment to providers

Transitional Period Extension

To reduce provider burden and ensure continuity of care for members, DMAHS and DMHAS are mandating that **all MCOs extend the following transition period policies through June 30, 2025:**

- Auto-approval of all prior authorizations for all Phase 1 BH services
- Payment of clean claims using FFS rates as the floor to all out-of-network providers

In addition to extending these policies, DMAHS and DMHAS will be continuing to work with MCOs to improve processes so that together we can better support all stakeholders and ultimately better serve members



Key highlights from first three months of Phase 1 Implementation



Many **former FFS providers** have **successfully joined MCO networks**, supporting member access and continuity of care



Provider trainings and office hours have been **well-attended** (~300 providers per session), offering opportunities for providers to ask questions and receive direct support



Educational materials on State and MCO-specific managed care processes **have been shared with providers** to help prevent issues and ease navigating the behavioral health integration



Member advocates have convened biweekly to share member perspectives on Phase 1 implementation, and raise important questions, concerns, and suggestions for improvement



MCOs have demonstrated **strong responsiveness** to the State on escalations of **provider-specific issues**



**Since go-live,
there have also
been some
challenges**

Network

- Some MCOs are continuing to report a **high share of members served by out-of-network providers**, putting member continuity of care at risk when the transition period ends in July

Prior Authorization

- Many **providers have not been submitting PAs during the transition period** given the automatic approval of requests, raising concern for both provider and MCO readiness following end of transition period
- Providers are **experiencing longer turnaround times for PAs** due to MCOs struggling to contact providers or delays in getting information required

Claims and Billing

- Some providers are reporting **claims denials, payment delays, or receipt of incorrect rate payments** due to provider submission errors and MCO configuration and processing issues
- Providers who have experienced incorrect, inconsistent, or delayed payments **lack transparency** on correct reimbursement rates and claims processing timelines, leading to uncertainty, frustration, and financial strain

Deep dive | The State is closely tracking key MCO performance metrics to ensure continued progress



% of active fee-for-service providers in-network¹

- **92%+** of MCO members receiving BH services in Q2-Q3 2024 saw an MCO-contracted provider
- **97%+** of MCO members receiving BH services in Q2-Q3 2024 saw a provider that was contracted with an MCO or in the contracting process



% of members seen by an in-network provider

- **80%** of members receiving Phase 1 BH services between 2/22 and 3/7 saw an in-network provider

Represents a **5% increase** over the share of members seeing in-network providers in January



% of claims denied on first pass

- Performance **varies across MCOs** with the lowest MCO denial rate reported at **7%** of claims and the highest reported to be **26%** for this period

1. Data as of 2/21/25;

DMAHS / DMHAS have been working to address these key concerns



Updating **provider readiness packet** to ensure guidance relays current policies and addresses questions / concerns frequently raised by providers across all BH integration topics



Distributing **training materials and updated guidance** outlining prior authorization submission processes and MCO-specific billing and coding instructions



Continuing conducting virtual and in-person **provider office hours** with MCOs to field provider questions/concerns



Working with MCOs to **ensure use of accurate FFS rate schedule** and **reprocess claims** denied or paid incorrectly



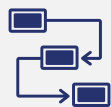
Directing providers to **MCO and State contact information** for providers to outreach when experiencing issues



Developing roadmap to **further integrate MCO PA systems with NJSAMS** in partnership with DMHAS IT



Tracking and **escalating provider-specific issues** with managed care processes to DMAHS / MCO leadership to facilitate timely remediation



Requiring **MCOs to submit action plans** to address issues, with regular reporting **weekly MCO check-ins** to track progress towards resolution

Insights from Advocates, Wellness/Recovery Centers, and Member/Caregiver/Parent Coalitions

- Medicaid members and some provider/agency staff have limited awareness of behavioral health integration
- Stakeholders are hearing minimal feedback on implementation and its impact on service delivery
- There is concern about potential disruptions in care after the transition period ends
- Participants were unaware of MCO-led behavioral health care management
- Stakeholders brainstormed engagement opportunities and conferences the State could attend to increase awareness

Managed Care Organization (MCO) Perspectives on Phase 1 Implementation

MCO Perspectives

- Horizon – member connection to case management services
- UnitedHealthcare – member story

Stakeholder feedback on Phase 1 implementation

For discussion | Provider feedback

What knowledge do provider agency staff have of this integration?

What issues do providers continue to experience?

Where do providers still have questions?

What else can DMAHS do to better address provider issues and educate providers on managed care processes, such as billing and prior authorization?

Please respond in the chat or raise your hand to share!

**For discussion |
NJ FamilyCare
member and
member
advocate feedback**

What successes or challenges have members had with accessing services or MCO integrated care management?

What questions do members have about services available to them through their MCO/health plan?

How can the State and MCOs better support members in accessing Phase 1 services?

Please respond in the chat or raise your hand to share!

Stakeholder resources and upcoming meetings

Provider resources available

Behavioral Health Integration Stakeholder Information website¹

The [Behavioral Health Integration stakeholder website](https://www.nj.gov/humanservices/dmhas/information/stakeholder/) has the following materials for providers:

- [Provider readiness packet](#)
- DMAHS training materials and recordings
- [Behavioral Health Integration Overview and FAQ Pamphlet](#)
- Provider Phase 1 Implementation FAQs

Member's Managed Care Organization

For specific member inquiries and MCO-related questions, please contact the member's MCO:



Aetna Fidelis Care Horizon



United Wellpoint

Refer to key MCO points of contact [here](#) or also in [provider readiness packet](#)

DMAHS – Office of Managed Health Care


If your issue is related to **contracting & credentialing, claims & reimbursement, appeals, or prior authorizations**, then contact **OMHC**:


 dmahs.provider-inquiries@dhs.nj.gov

- Include specific details regarding your claims
- If multiple claims are impacted, the information should be summarized using an Excel file
- All Protected Health Information (PHI) must be sent securely

DMAHS Behavioral Health Unit

If your issue is related to **policies & guidelines, access to services, or general questions**, then contact DMAHS BH Unit:

 dmahs.behavioralhealth@dhs.nj.gov

 1-609-281-8028

1. <https://www.nj.gov/humanservices/dmhas/information/stakeholder/>

Resources available for members, caregivers, and families

Behavioral Health Integration Stakeholder Information website¹

The [Behavioral Health Integration stakeholder website](https://www.nj.gov/humanservices/dmhas/information/stakeholder/) has the following materials for members:

- December 2024 Member Meeting materials
 - [Meeting presentation](#)
 - [Recording](#)
- Advisory Hub meetings from July 2023 — Jan 2025
 - Meeting summaries
 - Presentations
- Coming soon: Member Care Management FAQ, Behavioral Health Integration One-Pager and FAQ

Medicaid Managed Care Member Handbooks

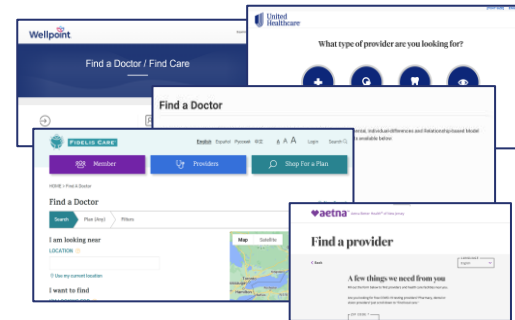
Detailed information regarding MCO Medicaid Plan



[Aetna](#)
[Fidelis Care](#)
[Horizon](#)
[UnitedHealthcare](#)
[Wellpoint](#)

Managed Care Organization Provider Directories

Where members and families can find "in-network" behavioral health providers



[Aetna](#)
[Fidelis Care](#)
[Horizon](#)
[UnitedHealthcare](#)
[Wellpoint](#)

State and MCO contact information for members

- **DMAHS Behavioral Health Unit**
 - 1-609-281-8028
 - Dmahs.behavioralhealth@dhs.nj.gov
- **Aetna**
 - 1-855-232-3596 (TTY: 711)
 - [Member Portal](#)
- **Fidelis Care**
 - 1-888-343-3547 (TTY: 711)
 - [Member Portal](#)
- **Horizon**
 - 1-800-682-9090 (TTY: 711)
 - [Member Portal](#)
- **UnitedHealthcare**
 - 1-800-941-4647 (TTY: 711)
 - [Member Portal](#)
- **Wellpoint**
 - 1-833-731-2147 (TTY: 711)
 - [Member Portal](#)

1. <https://www.nj.gov/humanservices/dmhas/information/stakeholder/>

Upcoming stakeholder engagement activities



Providers

Apr 23 (2-4pm): [Virtual Office Hours](#)

Jun 12: [DMHAS Quarterly Provider meeting](#)

Jun 26: In-person Office Hours

Ongoing: External presentations



Members

Apr - Jun: [Bi-weekly Consumer / Advocacy Organization Forums](#), next session on 04/11 (2-2:45pm)

Apr - Jun: Regional Health Hub member survey and listening sessions

Ongoing: Stakeholder presentations



Cross-stakeholder

Apr 30 (10am-12pm): [Medical Assistance Advisory Council](#) meeting

May 30: [Advisory Hub](#)

Other upcoming DMAHS / DMHAS public engagements

- New Jersey Medical Assistance Advisory Council – January 2025 and ongoing
- NJAMHAA Spring Conference – April 2025
- Coalition of Mental Health Consumer Organizations Conference – April 2025

If you know of an upcoming event, meeting, or conference where DMAHS/DMHAS can present on behavioral health integration, share details in the chat or contact

Dmahs.behavioralhealth@dhs.nj.gov.

Q&A

Thank you!