



State Profile Highlights

New Information from the National Association of State Mental Health Program Directors Research Institute, Inc (NRI)

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(Results Based on 47 States Responding)

State Mental Health Agency Relationship to Medicaid for Funding and Organizing Mental Health Services

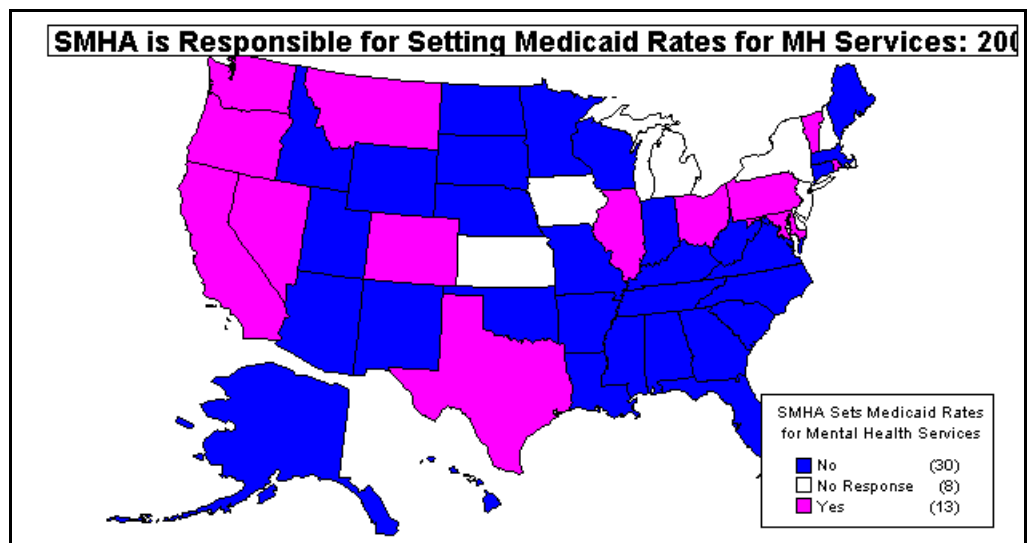
MAJOR FINDINGS

- ◆ 13 State Mental Health Agencies (SMHAs) are responsible for setting Medicaid rates for mental health services.
- ◆ 31 SMHAs have Interagency Agreements with State Medicaid Agencies to coordinate care and planning.
- ◆ 41 SMHAs use the Medicaid Rehabilitation Option to Cover Community Mental health services.
- ◆ 20 States consider Mental Illness as a factor in determining Medical Need for Medicaid
- ◆ 23 States use Medicaid Waivers to Provide Managed Care under Medicaid
- ◆ 26 States routinely link Medicaid Paid Claims data to SMHA client data sets to analyze use of Medicaid.

Medicaid is playing an increasingly important role in the provision of mental health services within states. CMHS has estimated that Medicaid expended over \$14.4 Billion for mental health services in FY'1997. In FY'2001, SMHA-controlled Medicaid revenues for mental health services accounted for over \$8.4 billion, which comprised 36% of total SMHA resources. Medicaid has been the fastest growing funding source for SMHA's public mental health services, increasing over 69% from FY'97 to FY'01. In addition to receiving Medicaid revenues as payment for services at SMHA operated facilities and SMHA-funded community programs, many SMHAs are also working with Medicaid to set rates for mental health, design service systems, maintain waivers, and analyze Medicaid data. This SMHA Profile Highlight addresses some of the ways that SMHAs are working with Medicaid to enhance access to mental health services.

SMHA's Responsibility for Setting Medicaid Rates:

State Mental Health Agencies (SMHAs) are responsible for setting Medicaid rates for mental health services in 13 States (CA, CO, IL, MD, MT, NV, OH, OR, PA, RI, TX, VT, and WA). In seven states, the SMHA is designated the "Single State Agency" for setting Medicaid Rates and Options related to mental health (CA, CO, MT, NV, OR, PA, and WA).



The SMHA Profiles System was developed by the NASMHPD Research Institute, Inc., under contract No. 280-99-0502 from the Substance Abuse and Mental Health Services Administration/Center for Mental Health Services (CMHS)/Division of State and Community Systems Development/Survey and Analysis Branch. Cited reproductions, comments and suggestions are encouraged.

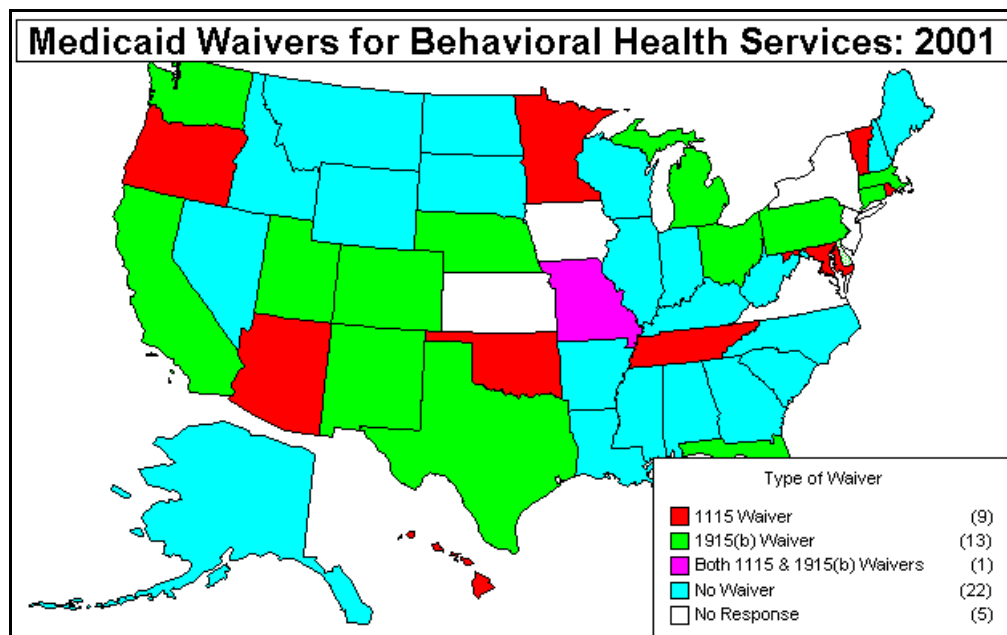
Interagency Agreements between SMHAs and Medicaid Agencies: Thirty-one states have interagency agreements between the SMHA and the State Medicaid Agency. In 18 states, there is an agreement regarding the provision of services (CA, CO, CT, FL, GA, KY, ME, MD, MA, MS, NE, NH, NM, OH, OK, SC, SD, and WY). In 18 States there are agreements regarding sharing fiscal resources (CA, DC, FL, IN, KY, ME, MA, MS, NE, NH, NY, NC, OK, SC, SD, VT, VA, and WY). Six states have agreements that cover joint training (KY, MN, NV, NC, OK, and WY), while six states have agreements that cover staffing (CT, GA, KY, OH, OK, and WY).

Medicaid Options Used to Fund Mental Health Services: Most SMHAs (41) have adopted the Medicaid Rehabilitation Option to provide community mental health services. Twenty-three states use the Clinic Option and twelve states use the COBRA Case Management Option to cover mental health Services.

Medicaid Eligibility: 26 States extend Medicaid coverage to “medically needy” clients who would not otherwise qualify for Medicaid. In 20 states, Mental Illness is a factor used in determining medical need (AZ, AR, FL, GA, HA, IL, IN, KY, MA, NV, NM, ND, OR, PA, RI, TN, TX, UT, WA, and WI).

Medicaid Managed Care Waivers: 23 states reported that they have Medicaid Waivers for behavioral health. Thirteen states reported having 1915(b) Waivers (CA, CO, CT, FL, MA, MI, NE, NM, OH, PA, UT, WA, and WI), nine states reported having 1115 Waivers (AZ, HI, MD, MN, OK, OR, RI, TN, and VT), while one state (MO) has both 1115 and 1915(b) waivers.

Almost 3.5 million people received behavioral health services provided under these waivers in twenty of the States. Over 2 million people were served in 8 states with 1115 waivers (AZ, HI, MD, MN, OK, OR, TN, and VT), and over 1.45 million people were served in the 12 states that reported client counts for 1915(b) waivers (CA, CO, CT, FL, MA, MI, NE, NM, PA, TX, UT, and WA).



SMHA Access and Use of Medicaid Data: 30 SMHAs receive Medicaid Paid Claims data from their State Medicaid Agency. In twenty-six states, the SMHA links Medicaid Paid Claims data with its own patient databases to analyze the use of Medicaid (AZ, AR, CA, CO, CT, FL, ID, IL, IN, MD, MA, MN, MO, NV, NC, OH, OK, OR, PA, SD, TN, TX, VT, WA, WV, and WY).

Twenty-nine SMHAs receive information other than paid claims data from Medicaid. In 24 States, the SMHA gets reports on Medicaid expenditures for Mental Health. In 21 States they get reports on Medicaid payment rates for mental health services. In 22 SMHAs receive reporting of data by Age Groups, 21 SMHAs receive reporting by type of services, and 17 SMHA receive reporting by race/ethnic group of recipients.

The SMHA Profile Highlights are based on information from 47 SMHAs. The SMHA Profiles data are available via the Internet at www.nasmhpd.org/nri. For further information, please contact Robert Shaw (ext.124) or Ted Lutterman (ext. 121) on (703) 739-9333 or via e-mail at robert.shaw@nasmhpd.org or ted.lutterman@nasmhpd.org

The SMHA Profiles System was developed by the NASMHPD Research Institute, Inc., under contract No. 280-99-0502 from the Substance Abuse and Mental Health Services Administration/Center for Mental Health Services (CMHS)/Division of State and Community Systems Development/Survey and Analysis Branch. Cited reproductions, comments and suggestions are encouraged.