



A Briefing for Stakeholders

Since January 1st 2014 federal and state behavioral health benefits in Michigan have been managed by 10 Prepaid Inpatient Health Plans (PIHP), the PIHP system has existed in Michigan since 2002 with a major restructuring happening in 2014. With the assent of the federal government, specifically the Center for Medicare and Medicaid Services (CMS) through 1915 (b) and (c) waivers, the state and Michigan Department of Community Health (MDCH) the PIHP system was created. SWMBH covers the Medicaid, Healthy Michigan Plan, iSPA Autism, Block Grant, and PA2 funds for people with Mental Illness, Developmental Disabilities, and Substance Use Disorder in eight counties.

This briefing provides an overview of SWMBH, with particular attention to its creation, governance management, structure and goals.

What is Southwest Michigan Behavioral Health?

A MICHIGAN GOVERNMENTAL ENTITY SEPARATE FROM EACH OF THE 8 CMHSPS WHICH ESTABLISHED IT. SOURCE STATUTE: MICHIGAN MENTAL HEALTH CODE 330.1204B.

- **HAS ITS OWN GOVERNING BOARD, WITH REPRESENTATIVES APPOINTED BY MEMBER CMHSPS. EACH CMHSP BOARD HAS APPROVED SWMBH BYLAWS.**
- **SERVES AS THE BENEFITS MANAGEMENT ORGANIZATION (PREPAID INPATIENT HEALTH PLAN) FOR ALL MEDICAID BEHAVIORAL HEALTH SERVICES UNDER MDCH CONTRACT FOR REGION 4**

SWMBH is an administrator of specialty supports and services behavioral health benefits (mental illness, developmental disabilities, and substance abuse) for Medicaid and Healthy Michigan beneficiaries - often referred to as Plan Members - in our region.

SWMBH covers approximately 4,500 square miles, 150,000 eligible Medicaid recipients and has a \$200 million annual Medicaid budget.

The participant CMHAs affiliated with SWMBH are: Barry County Community Mental Health Authority; Riverwood Center (Berrien Mental Health Authority); Pines Behavioral Health (Branch County Community Mental Health Authority); Woodlands Behavioral Healthcare Network (Cass County CMH); Summit Pointe (Calhoun County CMH); Kalamazoo Community Mental Health and Substance Abuse Services, Community Mental Health & Substance Abuse Services of St. Joseph, and Van Buren Community Mental Health Authority. While SWMBH manages the Medicaid mental health benefits, the participant Community Mental Health manages the General Fund mental health benefits and services in their communities through direct contracts with MDCH.

SWMBH has a Governing Board made up of the Community Mental Health Authority CMH Board representatives from the eight county areas in southwest Michigan (Barry, Berrien, Branch, Cass, Calhoun, Kalamazoo, St. Joe and Van Buren). This Board oversees the service delivery and financial conditions of the administration of benefit.

The PIHP uses a payment model with interim sub-capitation style payments with cost reconciliation. As part of their CMHA Board and managed care delegated functions, participants provide, directly or through contracts with others, all clinical care and several formally delegated care management functions.

SWMBH values the local responsiveness and connectedness of participant CMHA partners.

SWMBH and our participant CMHAs organize a panel of specialty behavioral health providers that members can choose from for services.

SWMBH assures that providers offer professional services for a fair price and monitors the services delivered to ensure that taxpayers and Plan members are well served for the available dollars. Accessibility of services, acceptability of services, value, and impact of services are routinely monitored.

Consumer focus, involvement, and meaningful opportunities are continually sought at the PIHP and at CMHAs. Each CMHA maintains its independent status, functionality, and governance, while jointly managing clinical and financial risk and seeking opportunities for taking advantage of economies of scale, enhanced services and other administrative and clinical benefits.

Through the Customer Handbook and other means of communication, Plan Members are made aware of their benefits, rights, responsibilities, SWMBH's role in oversight, and their right to use SWMBH as an advocate and supporter.

SWMBH is also the Coordinating Agency for our 8 counties. This means that SWMBH is responsible for the Substance Abuse Disorder funds for the region and oversee treatment in a manner similar to the oversight used for our funding lines.

In essence, SWMBH operates as a public insurance company, managing some – though not all – of the tax dollars dedicated for purchasing needed behavioral healthcare in its catchment area in Southwest Michigan.

Through administrative excellence, SWMBH supports clinical and programmatic excellence, value, and compliance with applicable federal and state regulations.

SWMBH is responsible for assuring several things, either directly or through contracts with others. These include, but are not limited to, the following:

- Assurance of a regional cost-effective quality uniform benefit and service for Medicaid Plan Members per requirements of the state-federal waiver, the MDCH-PIHP contract, the Medicaid Provider Manual and other guiding documents.
- Assurance that Medicaid benefits are uniformly accessible, acceptable, have impact, and deliver value.
- Assurance that federal and state regulations related to Medicaid benefits management and enrollees are enforced.
- Assurance and adherence to development of regional methods for planning; measuring and reducing risk; performance improvement; regional administrative efficiencies and cost savings; data collection, analysis and submission of Medicaid data; managing health resources based upon medical necessity; and others.

Who Does Southwest Michigan Behavioral Health Serve?

SWMBH is contracted to provide specialty supports and services to enrolled individuals with Developmental Disabilities, Substance Use Disorders (SUD), Severe Mental Illness (SMI) and youth with Severe Emotional Disturbance (SED). The Medical Health Plans (MHPs) are contracted to provide services to individuals with mild to moderate mental illness through an outpatient benefit package.

Since starting operations in January 2014, SWMBH served approximately 19,000 Medicaid and other funding source enrollees.

How is SWMBH Structured?

SWMBH has a central office located in Portage, Michigan.

Specific SWMBH departments and functions include Member Services and Recipient Rights, Finance, Provider Network Management, Health Resource Management, Information Services, Compliance, Claims Processing, and Quality Assurance and Performance Improvement. SWMBH has on going and ad hoc access to multiple technical experts in the fields of Recipient Rights,

Finance & Accounting, Law, and others. Through a contractual relationships, SWMBH is supported by a national firm, Criterion Health, Inc. Through these arrangements, technical and process experts are available and regularly support both SWMBH operations and the SWMBH Board.

A significant amount of SWMBH's efforts, analysis, plans and results come from its operational committees. SWMBH has established several formal regional committees populated by SWMBH staff and participant CMH staff, as well as external technical experts. These committees have formal charters or plans with deliverables each year.

Committees include:

Customer Advisory Council (made up of primary or secondary consumers); Finance Committee; Utilization Management Clinical Practices; Provider Network Management; Health Information Services Committee; Customer Services Committee; Regional Compliance Coordinating Committee and Quality Management Committee. Special limited time work groups have been formed periodically to identify, plan and execute remediation efforts in single function or cross-functional areas.

What is the Mission of Southwest Michigan Behavioral Health?

Mega End (Mission) Statement

Mega End

“SWMBH is Michigan’s pre-eminent integrative healthcare system, assuring regional health status improvements, quality, value, trust, and CMHSP participant success”

SWMBH and its Participant CMHs are Michigan's pre-eminent integrative healthcare partners, assuring regional population and individual health status improvements, quality, value, trust, and CMHSP Participant success. The mission of SWMBH is to provide community-based, integrated specialty care approaches for individuals and families with mental health, developmental disabilities, and substance abuse disorders empowering people to succeed. All persons receiving our services have access to the highest quality care available. SWMBH is among the top Regional Entity and a customer-satisfying, cost-effective benefits manager. All statutory, regulatory and contractual obligations of SWMBH and Participant CMHs will be fulfilled.

Acceptability

Plan Members are satisfied with their health care supports and services. Purchasers, including but not limited to the State of Michigan, judge that the performance of SWMBH exceeds expectations.

Value

Administrative and service efficiencies are achieved. Quality is measured and improved.

Accessibility

Plan members are actively encouraged to seek services. Those served receive care at or above industry standards. Physical health status is improved.

Impact

Plan members experience improvements in their quality of life and functionality with a focus on maximizing recovery, self-sufficiency, and family preservation.

Risk Management

SWMBH suffers no material negative fiscal, legal consequences.

These ideals are translated into operational plans with targets, responsibilities and accountability. Due to the nature of our structure, responsibilities and accountabilities are almost always shared between SWMBH staff and participant management, thus alignment in vision, planning and execution are key.

What Does Southwest Michigan Behavioral Health Not Do?

SWMBH does not itself deliver clinical services. A panel of credentialed community providers deliver the care. SWMBH contracts with practitioners and providers in the area who offer accessible services based upon the benefit. The majority of services are directly operated by participant CMHAs. This is appropriate, since each has a long history of providing effective, affordable care, and each administration and programmatic leaders and staff are close to the community literally and figuratively.

SWMBH does not determine the total amount of funds available to underwrite care. Michigan's Department of Community Health (and the legislature) determines the available budget for care.

SWMBH does not determine the benefits, services and eligible covered by the health plan. These are determined by CMS (Center for Medicare and Medicaid Services) and the state, with the minor exception of some benefit configurations over which SWMBH has discretion. SWMBH's role is to assure that all benefits for which the state contracts with SWMBH to offer are provided in an accessible, quality and uniform manner throughout the eight county regions, and that best value, as exemplified by results divided by cost, is tended to.

How Does SWMBH Add Value To The Community?

SWMBH manages approximately \$200 million in state benefits and services. SWMBH strives to assure that all services are coordinated with Medical Health Plans, Primary Care Physicians, other needed programs, practitioners and other payers. SWMBH also strives to assure that all those eligible and members understand and access any and all supportive social services available to them. Since SWMBH covers eight southwestern Michigan counties, it works to pool needed resources, maximizing community tax dollars and offering the community services that could not ordinarily be accessed easily. Working with all the major behavioral health organizations and facilities in the eight county areas, SWMBH saves administrative costs and puts those savings back into programs and services. By banding together and creating a single central administrative service organization, the eight CMHAs have saved significant funds over an approach requiring them each to invest in infrastructure.

SWMBH takes its planning role seriously. It is through a thorough understanding of our communities and their needs and developing improvements based upon this understanding that ongoing, sustainable improvements in individual and community health and quality of life emerge.

SWMBH staff are regular participants on statewide work groups, as well with the Michigan Department of Community Mental Health (MDCH), Mental Health and Substance Abuse Division (MHSA), and the MDCH Medical Service Administration.

Additionally, SWMBH is actively engaged with other agencies involved in the delivery of care and services to Medicaid eligibles. One example, SWMBH has written Coordinating Agreements with the Medical Health Plans which manage primary and specialty physical health care for most Medicaid enrollees in SWMBH counties. Additionally, we are active participants in clinical and business proactive sharing with others, including many of Michigan's PIHPs and CMHAs, as well as others across the nation.

Multiple initiatives and significant investments have focused on enhanced outreach and clinical services.