

## **Managed Care Operations (MCO) Functions**

Macomb County Community Mental Health performs specific Managed Care Operations for clients eligible for MCCMH-SUD funding. These services include determining funding eligibility based on finances, residency and insurance coverage; identifying type(s) of funding individuals qualify for; performing clinical screening to determine service needs, level of treatment needed based on ASAM Criteria and medical necessity for services; providing linkage and referral to the individual's provider of choice; conducting care management to ensure successful engagement with referrals and follow up services; and authorizing services as in accordance to MCCMH policies. Clinical screenings occur at the time an individual contacts MCO for services by telephone, with follow up contacts as necessary.

As a function of the screening process, MCO obtains income, insurance, and residency information, to be used in determining a client's eligibility for funding assistance. Screenings includes the use of standardized patient placement criteria (ASAM) in determining level of care to be authorized. The current version of the Diagnostic and Statistical Manual will be utilized to establish a diagnostic impression. This information is documented in the FOCUS system, and made available with written client consent to the treatment agency where the client has been referred. Treatment services are offered to the client based on the results of the substance use disorder screening. MCO informs clients of choice of providers, recipient rights, grievance and fair hearing information. After a client selects a provider from the choices provided, MCO staff links the client to the provider to arrange an intake via a three-way telephone call. MCO informs clients of any copays associated with treatment services as applicable and/or assist the client in utilizing 3<sup>rd</sup> party coverage.

MCO also provides information to the general public or those not qualifying for MCCMH-SUD funded services related to accessing substance use disorder treatment and supports in Macomb County and maintains an up to date directory of resources and assists in directing the client in the recipient rights, grievance and fair hearing process.

Routine managed care operations services are available Monday through Friday, 8:00 am – 4:45 pm., with arrangements for urgent situations after hours. MCO will not be closed for more than three consecutive days. MCO maintains procedures to ensure the ability to respond to urgent situations. An after-hours message directs callers to the Macomb County Crisis Center or medical emergency center if immediate service is needed when the agency is closed. The Crisis Center will contact the on-call MCO clinician based on the "Crisis Center Back Up Procedures". MCO has a toll-free number and will accept collect calls from clients as needed. The MCCMH "Language Line Procedures" is used for people with limited English proficiency and the Michigan Relay line utilized to assist hearing impaired callers.

MCO coordinates needed interpreter services for clients receiving services at MCCMH-SUD contracted treatment in accordance with MCCMH policies.

### **Priority and Interim Services**

MCO manages any waiting lists when there is a lack of funding resources for a particular service or service capacity issue. Priority status is given to block grant funded clients waiting for funded treatment in the following order: pregnant injecting drug use; pregnant; injecting drug use; parents at risk of/ have lost custody of child(ren) related to substance use; others. MCO screens pregnant clients and ensures treatment services are offered within 24 hours of contacting Access Center for intensive services, or 48 hours for non-intensive treatment. MCO also screens clients who have injected drugs within 24 hours of request and ensure treatment services are initiated within 14 days of referral. Parents at risk of losing their children are screened and referred within 24 hours of request for services and offered admission to treatment within 14 days of screening/request for service. MCO provides interim services for clients who cannot access recommended treatment services in these time frames. MCO also ensures that MDOC referrals and all other clients (non-priority) are screened and offered admission to treatment within 14 days of request for service. MCO ensures that Medicaid, Healthy Michigan Plan, and MICHild eligible clients receive admission to treatment within 14 days of request for services.

### **Authorizations**

MCO completes utilization management responsibilities that include, but are not limited to, ensuring timely access to screening and treatment services, determine eligibility, process authorization and reauthorization requests, and provide quarterly status reports related to these activities to MCCMH-SUD for substance use disorder services. MCO also distributes the PIHP HIPAA Policy, Member Handbook, Advanced Directive information, and the list of available PIHP services and provider information when requested. MCO completes authorization and reauthorization requests for all funded clients within the MCCMH-SUD system receiving a higher level of care (see Auth Matrix for details).