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State/Territory Name: Maine

State Plan Amendment (SPA) #: 24-0025-BHH

This file contains the following documents in the order listed:

- 1) Approval Letter
- 2) Summary Form (with 179-like data)
- 3) Approved SPA Page

ME - Submission Package - ME2024MS00070 - (ME-24-0025-BHH) - Health Homes

Summary Reviewable Units Versions Correspondence Log Analyst Notes **Approval Letter** Transaction Logs News Related Actions

DEPARTMENT OF HEALTH & HUMAN SERVICES
Centers for Medicare & Medicaid Services
Medicaid and CHIP Operations Group
601 E. 12th Street
Room 355
Kansas City, MO 64106



Center for Medicaid & CHIP Services

November 14, 2024

Michelle Probert
Director
Office of MaineCare Services
109 Capitol Street
11 State House Station
Augusta, ME 04330-0011

Re: Approval of State Plan Amendment ME 24-0025 Behavioral Health Homes (BHH)

Dear Director Probert,

On September 30, 2024, the Centers for Medicare and Medicaid Services (CMS) received Maine State Plan Amendment (SPA) ME 24-0025 related to Behavioral Health Homes to comply with all requirements described in 42 CFR 437.10 and 437.15 related to mandatory Core Set reporting.

We approve Maine's State Plan Amendment (SPA) ME 24-0025 (BHH) with an effective date of October 01, 2024.

If you have any questions regarding this amendment, please contact Gilson DaSilva at gilson.dasilva@cms.hhs.gov.

Sincerely,

Ruth A. Hughes

Acting Director, Division of Program
Operations

Center for Medicaid & CHIP Services

ME - Submission Package - ME2024MS0007O - (ME-24-0025-BHH) - Health Homes

- Summary
- Reviewable Units
- Versions
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- Approval Letter
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Submission - Summary

MEDICAID | Medicaid State Plan | Health Homes | ME2024MS0007O | ME-24-0025-BHH | Behavioral Health Homes

CMS-10434 OMB 0938-1188

Package Header

| | | | |
|-------------------|---------------|-------------------------|----------------|
| Package ID | ME2024MS0007O | SPA ID | ME-24-0025-BHH |
| Submission Type | Official | Initial Submission Date | 9/30/2024 |
| Approval Date | 11/14/2024 | Effective Date | N/A |
| Superseded SPA ID | N/A | | |

State Information

| | | | |
|-----------------------|-------|-----------------------|------------------------------|
| State/Territory Name: | Maine | Medicaid Agency Name: | Office of MaineCare Services |
|-----------------------|-------|-----------------------|------------------------------|

Submission Component

- ☒ State Plan Amendment
- ☒ Medicaid
- ☐ CHIP

Submission - Summary

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SPA ID and Effective Date

SPA ID ME-24-0025-BHH

| Reviewable Unit | Proposed Effective Date | Superseded SPA ID |
|---|-------------------------|-------------------|
| Health Homes Monitoring, Quality Measurement and Evaluation | 10/1/2024 | ME-22-0010-BHH |

Submission - Summary

MEDICAID | Medicaid State Plan | Health Homes | ME2024MS0007O | ME-24-0025-BHH | Behavioral Health Homes

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Executive Summary

Summary Description Including Goals and Objectives Update template for compliance with all requirements in 42 CFR §§ 437.10 and 437.15.

Federal Budget Impact and Statute/Regulation Citation

Federal Budget Impact

| | Federal Fiscal Year | Amount |
|--------|---------------------|--------|
| First | 2024 | \$0 |
| Second | 2025 | \$0 |

Federal Statute / Regulation Citation

42 CFR §§ 437.10 and 437.15.

Supporting documentation of budget impact is uploaded (optional).

| Name | Date Created | |
|--------------------|--------------|--|
| No items available | | |

Submission - Summary

MEDICAID | Medicaid State Plan | Health Homes | ME2024MS00070 | ME-24-0025-BHH | Behavioral Health Homes

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Governor's Office Review

| | | |
|--|-----------------|-----|
| <input type="radio"/> No comment | Describe | N/A |
| <input type="radio"/> Comments received | | |
| <input type="radio"/> No response within 45 days | | |
| <input checked="" type="radio"/> Other | | |

PRA Disclosure Statement: Centers for Medicare & Medicaid Services (CMS) collects this mandatory information in accordance with (42 U.S.C. 1396a) and (42 CFR 430.12); which sets forth the authority for the submittal and collection of state plans and plan amendment information in a format defined by CMS for the purpose of improving the state application and federal review processes, improve federal program management of Medicaid programs and Children's Health Insurance Program, and to standardize Medicaid program data which covers basic requirements, and individualized content that reflects the characteristics of the particular state's program. The information will be used to monitor and analyze performance metrics related to the Medicaid and Children's Health Insurance Program in efforts to boost program integrity efforts, improve performance and accountability across the programs. Under the Privacy Act of 1974 any personally identifying information obtained will be kept private to the extent of the law. According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0938-1188. The time required to complete this information collection is estimated to range from 1 hour to 80 hours per response (see below), including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection. If you have comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: CMS, 7500 Security Boulevard, Attn: PRA Reports Clearance Officer, Mail Stop C4-26-05, Baltimore, Maryland 21244-1850.

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ME - Submission Package - ME2024MS0007O - (ME-24-0025-BHH) - Health Homes

Health Homes Monitoring, Quality Measurement and Evaluation

MEDICAID | Medicaid State Plan | Health Homes | ME2024MS0007O | ME-24-0025-BHH | Behavioral Health Homes

CMS-10434 OMB 0938-1188

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| Superseded SPA ID | ME-22-0010-BHH | | |
| | System-Derived | | |

Monitoring

Describe the state's methodology for calculating cost saving (and report cost savings annually in Quality Measure Report). Include savings that result from improved coordination of care and chronic disease management achieved through the Health Homes Program, including data sources and measurement specifications, as well as any savings associated with dual eligibles, and if Medicare data was available to the state to utilize in arriving at its cost-savings estimates:

Maine reports annually on the Health Home core set. In addition, Maine is concluding a multi-year study of the Behavioral Health Home (BHH) model in comparison to similar Medicaid services for similar populations. This evaluation assessed characteristics, quality of care, service use, and costs for enrollees in MaineCare's BHHs, and compared these data with corresponding metrics for members enrolled in alternative MaineCare programs with similar eligibility. The study period ranged from 2016 to 2019. Specific aims were:

1. To compare enrollment trends and characteristics; and
2. To explore differences in service use and cost patterns across groups in order to determine whether BHHs have quality or efficiency advantages in any domains of behavioral health-related or non-behavioral health service use (hospital, emergency department [ED], outpatient, residential care, and prescription drug use).

Maine will report relevant findings through Health Home core set reporting, including data related to dual eligible (though Medicare data was not used in the analysis).

Describe how the state will use health information technology in providing Health Homes services and to improve service delivery and coordination across the care continuum (including the use of wireless patient technology to improve coordination and management of care and patient adherence to recommendations made by their provider).

Maine requires BHHS to use EHRs. The state has an advanced HIE (HealthInfoNet). Maine has also committed to assisting its behavioral health providers in accessing HIT. Maine provides resources/training to BHH providers connect to the HIE.

MaineCare makes available to BHHs utilization and quality data via a web portal.

Health Homes Monitoring, Quality Measurement and Evaluation

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Quality Measurement and Evaluation

- ☒ The state provides assurance that all Health Homes providers report to the state on all applicable quality measures as a condition of receiving payment from the state.
- ☒ The state provides assurance that it will identify measureable goals for its Health Homes model and intervention and also identify quality measures related to each goal to measure its success in achieving the goals.
- ☒ The state provides assurance that it will report to CMS information to include applicable mandatory Core Set measures submitted by Health Home providers in accordance with all requirements in 42 CFR §§ 437.10 through 437.15 no later than state reporting on the 2024 Core Sets, which must be submitted and certified by December 31, 2024 to inform evaluations, as well as Reports to Congress as described in Section 2703(b) of the Affordable Care Act and as described by CMS. In subsequent years, states must report annually, by December 31st, on all measures on the applicable mandatory Core Set measures that are identified by the Secretary.
- ☒ The state provides assurance that it will track avoidable hospital readmissions and report annually in the Quality Measures report.

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