



Michelle Lujan Grisham, Governor
David R. Scruse, M.D., Secretary
Nicole Comeaux, J.D., M.P.H., Director

Letter of Direction #54

Date: December 30, 2020

To: Centennial Care 2.0 Managed Care Organizations

From: Nicole Comeaux, Director, Medical Assistance Division
Neal A. Bowen, Director, Behavioral Health Services Division

Subject: Behavioral Health Delivery System Improvement Performance Targets

Title: BH DSIPTs

This Letter of Direction (LOD) serves as direction to the Centennial Care 2.0 Managed Care Organizations on the Behavioral Health Delivery System Improvement Performance Targets (BH DSIPTs) outlined in the Medicaid Managed Care Services Agreement, Attachment 3.

Delivery System Improvement Performance Targets for Year Two (2) of Centennial Care 2.0

Delivery System Improvement Performance Objective	Delivery System Improvement Performance Target	Number of Points out of 100
Behavioral Health Visit with a Behavioral Health Provider	<p>The CONTRACTOR shall increase the number of unique Medicaid Managed Care Members receiving outpatient Behavioral Health services with a Behavioral Health practitioner. CY 20 is the baseline year for this DSIPT. The CY 21 target is 18%. The CY 22 target is 21%. The CY 23 target is 24%.</p> <p>The CONTRACTOR shall provide quarterly reports to HSD with the number of unique Members receiving outpatient Behavioral Health services with a Behavioral Health practitioner and an analysis of trends observed. The quarterly reports are due to HSD thirty (30) Calendar Days after the end of each quarter.</p> <p>Denominator: All Medicaid Managed Care Members, based on the Medicaid Enrollment Report (MER) from the last month of the reporting quarter (March, June, September, and December).</p> <p>Numerator: Medicaid Managed Care Members with an outpatient visit provided by a Behavioral Health practitioner in the reporting period.</p>	25

Delivery System Improvement Performance Objective	Delivery System Improvement Performance Target	Number of Points out of 100
Behavioral Health Visit with a Non-Behavioral Health Provider	<p>The CONTRACTOR shall increase the number of unique Medicaid Managed Care members receiving Behavioral Health outpatient services by a Non-Behavioral Health practitioner. CY 20 is the baseline year for this DSIPT. The CY 21 target is 20%. The CY 22 target is 21%. The CY 23 target is 22%.</p> <p>The CONTRACTOR shall provide quarterly reports to HSD with the number of unique Members receiving outpatient Behavioral Health services by a Non-Behavioral health provider and an analysis of trends observed. The quarterly reports are due to HSD thirty (30) Calendar Days after the end of each quarter.</p> <p>Denominator: All Medicaid Managed Care Members, based on the Medicaid Enrollment Report (MER) from the last month of the reporting quarter (March, June, September, and December).</p> <p>Numerator: Unique number of Members who received at least one Behavioral Health outpatient visit for a Behavioral Health diagnosis listed in the top 3 diagnoses on the encounter from a Non-Behavioral Health practitioner in the reporting period. Behavioral Health outpatient encounters exclude LTC facilities and Emergency Department utilization.</p>	25