

## Appendix F

### Network Access Plan Requirements Due Friday, September 21, 2018

#### Section One: Executive Summary

- I) Provide a summary of the 2018 Network Adequacy and Accessibility Analysis Report and the areas of focus that will be addressed in the upcoming year.
- II) Describe progress of activities, projects, and initiatives developed and/or implemented to address service gaps and service exceptions identified in last year's gaps analysis report. For areas in which continued gaps exist and service exceptions are still needed what barriers have been identified and addressed?

#### Section Two: Access Plan

- I) Describe the actions that are underway or will be taking place over the next fiscal year to address the identified service gaps in **Section One: Network Availability and Accessibility**.
- II) Describe the actions that are underway or will be taking place over the next fiscal year to address geographic, cultural or special populations needs identified in **Section Two: Accommodation**.
- III) Describe the actions that are underway or will be taking place over the next fiscal year to improve consumer and stakeholder experience as identified in **Section Three: Acceptability**.

#### Section Three: In Lieu of and Alternative Services

- I) For Medicaid-funded "In Lieu of" Services, using the list from the following pages of approved Medicaid "in lieu of" service definitions for the LME/MCO, address the following:
  - A. Geographic area covered by each approved "in lieu of" service
  - B. Service capacity of each "in lieu of" service
  - C. Demonstrate how each "in lieu of" service filled the gap it was intended to address, including the number and characteristics of members served and how they accessed the service
  - D. Barriers encountered or challenges experienced during implementation
- II) For approved non-Medicaid-funded alternative services, using the list from the following pages of non-Medicaid Alternative service definitions for the LME/MCO, address the following:
  - A. Geographic area covered by each approved non-Medicaid-funded alternative service definition
  - B. Service capacity of each non-Medicaid-funded definition
  - C. Demonstrate how each non-Medicaid-funded definition filled the gap it was intended to address, including the number and characteristics of members served and how they accessed the service
  - D. Barriers encountered or challenges experienced during implementation

## Approved Medicaid and Non-Medicaid “In Lieu of” Services or Alternative Service Definitions

### Alliance

#### *Approved “In Lieu of” Service Definitions -- Medicaid Services*

H2022-22-Z1; H2022-U3-HE; H2022-22-Z2	Family Centered Treatment
90837-22-PL; 90834-22-PL; H0036-22	Outpatient Plus
H0040 TS; H0040-22	ACT Step Down
S5145-22-Z3	Rapid Response
T2016 U5	Behavioral Health Urgent Care

#### *Approved Alternative Service Definitions -- Non-Medicaid (State) Services*

YA323	Assertive engagement
YA324	Crisis Evaluation & Observation
YA325	Recovery support
YA343	Peer Support Hospital Discharge & Diversion – Individual
YA346	Hospital Discharge Transition Service
YA377	Comprehensive Screening and Community Connection
YA386	Outpatient DBT (Group)
YA387	Outpatient DBT (Individual)

### Cardinal

#### *Approved “In Lieu of” Service Definitions -- Medicaid Services*

H0036 HK U5	Family Centered Treatment
H0040 TS U5	ACTT Step Down
H0018 HA; H0018 HB	Complex Needs
S9480 U5; S9480 HK U5	Rapid Care Services

## Cardinal

### *Approved Alternative Service Definitions -- Non-Medicaid (State) Services*

YA308	Peer support
YA309	Peer support group B3
YA311	Residential supports SF 002Community Assistance Series
YA312	Residential supports SF 003 Community Assistance Series
YA323	Assertive engagement
YA343	Peer Support Hospital Discharge & Diversion - Individual
YA356	Assertive engagement
YA375	Peer Support Hospital Discharge & Diversion - Group
YA385	Hourly Safety Supervision
YA391	Senior IDD – My Turn
YA392	Afterschool Summer Enrichment Program
YA395	Youth Enrichment Supports

## Eastpointe

### *Approved "In Lieu of" Service Definitions -- Medicaid Services*

H2022 P1 U5; H2022 P2 U5; H2022 P3 U5	Family Centered Treatment
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### *Approved Alternative Service Definitions -- Non-Medicaid (State) Services*

YA308	Peer support
YA365	Assertive engagement

## Partners

### *Approved "In Lieu of" Service Definitions -- Medicaid Services*

H2022 Z1; H2022 HE	Family Centered Treatment
H0032 U5	CTI
Plan is to use 90873 U5	Outpatient Plus
S5145 U5	Rapid Response Crisis Services for Children and Youth
H2019 U5	Dialectical Behavioral Therapy
T2016	Behavioral Health Crisis Assessment and Intervention
H0019 U5	High Fidelity Wraparound

## Partners

### *Approved Alternative Service Definitions -- Non-Medicaid (State) Services*

YA341	Assertive engagement
YA343	Peer Support Hospital Discharge & Diversion - Individual
YA346	Hospital Discharge Transition Service
YA369	Crisis Evaluation & Observation

## Sandhills

### *Approved "In Lieu of" Service Definitions -- Medicaid Services*

H2022 Z1; H2022 Z2; H2022 HE	Family Centered Treatment
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### *Approved Alternative Service Definitions -- Non-Medicaid (State) Services*

YA308	Peer support
YA309	Peer support group B3
YA343	Peer Support Hospital Discharge & Diversion - Individual
YA352	Assertive Engagement - QP (Licensed & Unlicensed)
YA353	Assertive Engagement - AP & Paraprofessional
YA382	CAET School to Work Transition-Group

## Trillium

### *Approved "In Lieu of" Service Definitions -- Medicaid Services*

90791; 90832; 90834; 90837; 90839; 90840; 90846; 90847 T1017 TJ	Child First
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### *Approved Alternative Service Definitions -- Non-Medicaid (State) Services*

YA328	TBI Long term Residential Rehabilitation
YA340	Wellness Education Group
YA341	Assertive engagement
YA386	Outpatient DBT (Group)
YA387	Outpatient DBT (Individual)

## Vaya Health

### *Approved "In Lieu of" Service Definitions -- Medicaid Services*

H2022; H2015-HT	Outpatient Plus
H2021HN	QP Community-based wrap-around services
H2021HO	LP Community-based wrap-around services
T2016 U5	Behavioral Health Crisis Risk Assessment and Intervention

### *Approved Alternative Service Definitions -- Non-Medicaid (State) Services*

YA308	Peer support
YA309	Peer support group B3
YA323	Assertive engagement
YA366	Recovery Education Center (REC) - Individual
YA367	Recovery Education Center (REC) - Group
YA368	Assertive engagement
YA383	Long Term Vocational Support Group
YA394	CAET Group