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## Senate Bill 549 Administrative Services Organizations – Requirements for Retraction, Repayment, or Mitigation of Claims

Finance Committee February 16, 2021 Position: SUPPORT

The Mental Health Association of Maryland is a nonprofit education and advocacy organization that brings together consumers, families, clinicians, advocates and concerned citizens for unified action in all aspects of mental health and substance use disorders (collectively referred to as behavioral health). We appreciate the opportunity to provide this testimony in support of Senate Bill 549.

SB 549 is an emergency bill requiring Optum – the state's current administrative services organization (ASO) for public behavioral health services – to meet certain requirements before it can retract or require repayment for certain claims submitted by mental health and substance use providers. If Optum is unable to comply with these requirements they must retain an independent auditor to determine any amounts owed by providers. The bill also allows providers to request an independent auditor at Optum's expense to resolve differences regarding amounts owed, following reasonable efforts to reach resolution with Optum. Lastly, it requires the Maryland Department of Health (MDH) to report to the legislature on plans to forgive any provider balances that resulted from service disruptions due to COVID-19.

Over two years have passed since Optum took over as ASO for the state's public behavioral health system, and Maryland providers are still struggling to navigate the company's faulty claims payment system. The Maryland General Assembly passed legislation and enacted budget language in 2021 to increase accountability and oversight of Optum, but the challenges persist. In September, the Maryland Behavioral Health Coalition sent a letter to Governor Hogan detailing these challenges and pleading for a fix, yet not a single one of the enumerated system failures has been completely resolved. That letter, which was co-signed by over 120 organizations, is attached to this testimony.

Now, mental health and substance use providers face the prospect of paying back an unverified differential in estimated payments that were made for several months to keep the public behavioral health system afloat when Optum's IT system crashed immediately upon launching in January 2020. These recoupment plans are moving forward despite the lack of reliable data to reconcile historical payments and services.

This is a situation that would be untenable in normal times. However, it is particularly disconcerting at a time of skyrocketing demand. The need for mental health and substance use treatment is at an all-time high, yet our behavioral health providers are finding they must spend enormous time and resources attending to an administrative failure not of their making.

For these reasons, MHAMD supports Senate Bill 549 and urges a favorable report.

## Maryland Behavioral Health Coalition

1301 York Road, Suite 505 ♦ Lutherville, Maryland 21093 ♦ (443) 901-1550 ♦ info@mhamd.org

September 28, 2021

The Honorable Larry Hogan Governor of Maryland 100 State Circle Annapolis, MD 21401

Dear Governor Hogan,

In the midst of the greatest health care crisis in the United States in a century, which has been accompanied by rising mental illness and addiction, alarming suicide rates, and increased opioid deaths, the basic functionality of Maryland's Public Behavioral Health System (PBHS) remains broken due to the selection in 2019 of a faulty IT vendor. As we approach two years of basic claims payment system failure, we are again writing with a desperate plea to you to take direct action to fix this solvable problem. Attached are copies of our prior correspondence, dating back to April 2020.

## After 21 months:

- Claims receipts and payments remain missing
- Insurance coverage and Medicaid eligibility functions do not work and continue to cause erroneous claims denials
- Contractual turn-around times for authorization approvals are missed, delaying services to consumers
- Guardrails preventing multiple authorizations by different providers for the same service do not exist, so services are routinely rendered by authorized providers and not paid
- Plans for the recoupment of unverified overpayments continue to move forward despite the lack of reliable data to reconcile historical payments and services
- Manual interventions to address claims processing failures are plagued by insufficient staffing, resulting in missed deadlines and vendor failure to meet contractual system performance standards
- Optum continues to not be held accountable for contract deliverables

In short, this is a mess. It is clear the Incedo system will never be properly functional and needs to be discarded. And it is likely that reconciliation of estimated payments and claims may not be fully possible due to the extreme dysfunction of the Incedo system.

Failing to act now only increases the likelihood of increased negative impact on the public and the providers who serve them in this time of great need.

This is not the first time an IT vendor has delivered a product with disastrous results, an issue we all are familiar with in today's world, and it won't be the last. Times are hard and we have no interest in casting blame anywhere. We appreciate the impact of COVID 19 on the Health

Department's operations and are well aware that the state government workforce has been impaired in its wake. We appreciate your leadership, Secretary Schrader's leadership and the entire MDH team's responsiveness with respect to COVID 19.

What is heartbreaking about this unfortunate situation is that Maryland's PBHS is among the highest rated in the nation and was poised to move forward with a system transformation effort to advance value-based purchasing using best practice measurement-based care tools, ensuring results-based accountability and incentives promoting the most effective care for those in need. Instead, modernizing the system has been shelved, while our community providers continue to act heroically to serve their clients, amidst increasingly precarious circumstances.

Of utmost importance to us is a commitment that Optum be held financially accountable in any reconciliation effort and that consumers and providers be held harmless as the state moves forward with these plans.

On behalf of the 122 undersigned organizations, we are requesting a meeting with you at your earliest convenience. We wish to share our concerns, discuss solutions and offer our partnership to eliminate this problem.

Thank you for your attention to this issue and request.

Sincerely,

Center for Children Change Health Systems

Acadia Healthcare Maryland Clinics Advantage Psychiatric Services **Archway Station Arrow Child and Family Ministries** Arundel Lodge Aspire Wellness Center Awakenings Recovery Center Baltimore City Substance Abuse Directorate Baltimore Crisis Response, Inc. (BCRI) Baltimore Harm Reduction Coalition (BHRC) Baymark **Bayside Recovery** Behavioral Health System Baltimore (BHSB) Board of Child Care Born Free Wellness Centers of America Brain Injury Association of Maryland (BIAMD) **Brantwood Family Services** Carroll County Youth Service Bureau **Catholic Charities** 

**Channel Marker** 

Charles County Freedom Landing

Chesapeake Voyagers

Children's Guild

Community Behavioral Health Association of Maryland (CBH)

**Community Connections** 

**Community Residences** 

**Cornerstone Montgomery** 

Corsica River Mental Health Services

**Crossroads Community** 

Eastern Shore Behavioral Health Coalition (ESBHC)

**EveryMind** 

Families First Counseling and Psychiatry

**Family Services Foundation** 

For All Seasons

**Foundations Recovery Center** 

Frederick Institute

Fresh Start Recovery Center

**Garrett County Lighthouse** 

**Go-Getters** 

Goodwill Industries of the Chesapeake (STEP)

Greater Washington Society for Clinical Social Work (GWSCSW)

Harford Belair Community Mental Health Center

Head Injury Rehabilitation and Referral Services (HIRRS)

**Hope Health Systems** 

Humanim

**Hudson Behavioral Health** 

Institutes for Behavioral Resources (IBR)

James' Place

**Jewish Social Services Agency** 

**Key Point Health Services** 

La Clinica del Pueblo

Leading By Example

Legal Action Center (LAC)

Licensed Clinical Professional Counselors of Maryland (LCPCM)

Life Renewal Services

**Lower Shore Clinic** 

Maryland Addiction Directors Council (MADC)

Maryland Association of Behavioral Health Authorities (MABHA)

Maryland Association for the Treatment of Opioid Dependence (MATOD)

Maryland Chapter, American Academy of Pediatrics (MDAAP)

Maryland Clinical Social Work Coalition (MCSWC)

Maryland Coalition of Families (MCF)

Maryland-DC Society of Addiction Medicine (MDDCSAM)

Maryland Hospital Association (MHA)

Maryland Psychiatric Society (MPS)

Maryland Psychological Association (MPA)

Maryland Public Health Association (MdPHA)

Maryland Rural Health Association (MRHA)

Mary T Maryland

Medmark Treatment

Mental Health Association of Maryland (MHAMD)

Mental Health Association of Frederick County

Mental Health Center of Western Maryland

Mid Shore Behavioral Health (MSBH)

Mindful Healing Works

Montgomery County Federation of Families for Children's Mental Health

**Montgomery Recovery Services** 

MSA the Child and Adolescent Center

National Alliance on Mental Illness, Maryland Chapter (NAMI Maryland)

NAMI Metro Baltimore

**NAMI Carroll County** 

NAMI Frederick County

NAMI Harford County

**NAMI** Howard County

NAMI Kent and Queen Anne's

**NAMI Lower Shore** 

**NAMI Montgomery County** 

NAMI Prince George's County

NAMI Southern Maryland

National Council on Alcoholism and Drug Dependence, Maryland Chapter (NCADD Maryland)

New Journey

On Our Own of Maryland (OOOMD)

Parker Psychiatric Services

Partnership Development Group (PDG) Rehabilitation Services

**Pathways** 

People Encouraging People (PEP)

Phoenix Health Center

Pro Bono Counseling Project

Prologue

**Psychotherapeutic Treatment Services** 

Reginald Lourie Center for Children's Social and Emotional Wellness

Rehabilitation Systems, Inc.

Serenity Health

Seventy Times Seven Wellness Mission

**Sheppard Pratt** 

Silverman Treatment Solutions

Southern Maryland Community Network

Starting Point

Step by Step of Maryland

Thrive Behavioral Health
Transformation Health
Trauma Informed, Inc.
University of Maryland Medical Center (UMMS) Community Psychiatry Division
Upper Bay Counseling and Support Services
Vesta
Voices of Hope
Volunteers of America
Washington Pain Center
Wells House
WIN Family Services

cc: Boyd Rutherford, Lieutenant Governor
Dennis Schrader, Secretary, Maryland Department of Health
Aliya Jones, M.D., Deputy Secretary for Behavioral Health
Steve Schuh, Deputy Secretary for Health Care Financing and Medicaid