Health Related Social Needs (HRSN) July Stakeholder Meeting

# Overview

## 7/18 Meeting Agenda

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| --- | --- |
| **Topic**  | **Time** |
| Welcome and Introduction | 5 minutes |
| Review: HRSN Framework | 5 minutes |
| Transition to HRSN Services in 2025 | 5 minutes |
| HRSN Service Manual | 60 minutes |
| Additional Key Topics:Network AdequacyProvider CredentialingHubs | 15 minutes |
| HRSN Budget and Next Steps | 5 minutes |
| Q&A | 20 minutes |

## Guidance for Participants for Virtual Meetings

* This meeting is open to the public.
* You are welcome to share questions throughout the meeting using the “Q&A” feature.
* Questions will be held and answered during the dedicated Q&A section of the meeting.
* For the first portion of the session, your microphone will be disabled. During the Q&A section, please use the “raise hand” feature to ask a question, and a team member will unmute your microphone.
* This meeting is being recorded until the Q&A section.
* Slides will be posted after the meeting. Link will be sent following the meeting.

# Review: HRSN Framework

## Health Related Social Needs (HRSN) Services Framework

In September 2022, the Centers for Medicare & Medicaid Services (CMS) approved MassHealth’s 1115 demonstration waiver renewal, which included re-authorization and changes to both Flexible Services Program (FSP) and Specialized Community Support Program (CSP) services.

* 1115 demonstration waivers provide federal flexibility for state Medicaid programs to test innovations that support the goals of the Medicaid program, including improving health care outcomes and reducing costs.
* As approved in this waiver, MassHealth will implement FSP through the **Accountable Care Organization (ACO) managed care delivery system starting in 2025**.

As of January 1, 2025, MassHealth plans to combine Specialized Community Support Program for Homeless Individuals (CSP-HI), Specialized Community Support Program Tenancy Preservation Program (CSP-TPP), Specialized Community Support Program for Individuals with Justice Involvement (CSP-JI), and FSP into **a new HRSN Services framework** (i.e., HRSN Housing, HRSN Nutrition, HRSN JI).

## HRSN Services Framework in 2025 and Beyond

Under the **HRSN Services framework**, MassHealth will set standards for these services (e.g., rates, member eligibility, provider qualifications).

* **HRSN-JI** will encompass **Specialized CSP-JI** as currently provided.
* **HRSN Housing** will encompass:
	+ **Specialized CSP-HI** and **Specialized CSP-TPP** as currently provided, but with an expanded population of eligible members.
	+ **Supplemental HRSN Housing Services** for eligible ACO members that are currently under FSP. ACOs will be required to provide at least one supplemental HRSN Housing Service to eligible members.
* **HRSN Nutrition** will encompass **Supplemental HRSN Nutrition Services** for eligible ACO members that are currently available under FSP. ACOs will be required to provide at least one supplemental HRSN Nutrition Service to eligible members as well as transportation/delivery services as needed to provide access for members.

Note: ACO provision of supplemental HRSN Nutrition and Housing Services will be subject to funding availability, among other considerations.

## Overview of the Anticipated Framework for ACO HRSN Services

Under the HRSN Services framework, MassHealth is setting standards for these services (e.g., member eligibility, provider qualifications).

Pre-2025 consists of:

* Flex Services
	+ Flexible Services (Nutrition)
	+ Flexible Services (Housing)
* Specialized CSP
	+ Specialized CSP-HI
	+ Specialized CSP-TPP
	+ Specialized CSP-JI

2025 – 2027 consists of:

* HRSN Service Domains
	+ HRSN Nutrition\*
		- Home Delivered Meals
		- Food Boxes
		- Food Prescriptions and Vouchers
		- Application Assistance
		- Benefit Maintenance Assistance
		- Nutrition Education Classes and Skills Development
		- Nutrition Counseling
		- Kitchen Supplies
		- Nutrition Transportation
	+ HRSN Housing\*
		- Specialized CSP-HI (required)
		- Specialized CSP-TPP (required)
		- HRSN Housing Search
		- Transitional Goods
		- HRSN Housing Navigation
		- Healthy Homes
		- Home Modifications
	+ HRSN JI
		- Specialized CSP-JI (required)

\*HRSN Services on this slide are shown at the category level. Subcategories exist underneath certain services.

## Required vs. ACO Supplemental HRSN Services

Beginning in 2025, MassHealth will classify each ACO HRSN Service as one of two “service types”:

* Population
	+ MassHealth members who are enrolled in ACOs
* ACO HRSN Required Services
	+ ACOs must provide these services to all eligible members. The required services will include:
		- Specialized CSP-HI
		- Specialized CSP-TPP
		- Specialized CSP-JI
* ACO HRSN Supplemental Services
	+ ACOs must offer at least two supplemental services (one housing, one nutrition).
		- There are **17 different ACOs** and there may be **different services selected by each ACO.**
		- Once the ACO offers the service, it must be offered to all eligible members, **subject to funding availability**. If an ACO does not have enough funding to offer these services to all eligible members, they must maintain a waitlist.
		- If an ACO offers a Supplemental Nutrition Service that requires transportations to access, the ACO must also offer Nutrition Transportation.

## Criteria for ACO HRSN Supplemental Services

To qualify for ACO HRSN Supplemental Services, a MassHealth ACO-enrolled member must:

* Must e enrolled in a MassHealth ACO
* Must meet ***at least one*** of the defined Health Needs Based Criteria (HNBC) below:
	+ Behavioral Health Need
	+ Complex Physical Health Need
	+ Assistance with one of more Activities of Daily Living or Instrumental Activities of Daily Living
	+ Repeated Emergency Department (ED) use
	+ Pregnant individuals with high-risk pregnancy or complications
	+ Pregnant individuals without additional clinical factors
* Must meet ***at least one*** of the defined Risk Factors (RF) below:
	+ Experiencing Homelessness
	+ At Risk for Homelessness
	+ Experiencing Food Insecurity

For example, a member must be enrolled in an MassHealth ACO, have a Behavioral Health Need, and be experiencing homelessness, in order to receive HRSN services. Note that there may be additional eligibility criteria as well, depending on the service.

# Transition to HRSN Services in 2025

## HRSN Transition in 2025

* MassHealth is **deeply committed** to addressing the HRSNs of its members. We are excited to be one of the first states in the nation to leverage new federal authority to offer HRSN Services under a sustainable framework that aligns with more traditional Medicaid services.
* MassHealth is working with health plans and HRSN Providers to lay the groundwork to **sustainably transition HRSN Services into its managed care framework** for years to come. This transition will ensure many more MassHealth members will be able to receive these services in the future and will lay a critical foundation for other states to provide similar HRSN Services across the country. We appreciate everyone’s partnership in embarking on this exciting journey.
* Per CMS requirements, this transition must occur on January 1, 2025, and will **include changes to how such HRSN Services are provided and paid for today**.
	+ In the long term, these changes set the Commonwealth up for success and sustainability.
	+ These changes will require time and resources for MassHealth, health plans, and HRSN Providers to implement.
	+ MassHealth expects the **next 12-24 months to be a transition period** in lead up to steady-state implementation.
	+ During this transition period, **there may be differences from previous or future years** in the expectations that MassHealth sets for health plans and HRSN Providers, the number of organizations providing HRSN Services, and the number of members receiving such services.
* MassHealth **is committed to supporting all stakeholders and MassHealth members in the journey towards a long-term sustainable model** that will result in improved care to support HRSNs.

# HRSN Service Manual

## HRSN Service Manual

**On July 9th, MassHealth released the HRSN Service Manual:**

* The HRSN Service Manual provides MassHealth ACOs, Massachusetts Behavioral Health Partnership (MBHP), and HRSN Providers with the standards they need to follow when providing HRSN Services, such as:
	+ Definitions of key HRSN terms
	+ Service Descriptions
	+ Member Eligibility
	+ Provider Qualifications
	+ Payment Guidance
	+ Billing Code Requirements
* The HRSN Service Manual is available via [MassHealth's webpage regarding HRSN Services](https://www.mass.gov/info-details/information-for-masshealth-acos-and-hrsn-providers).
* Additional information may be released on this new webpage throughout the coming months. MassHealth will issue notices to various listservs (e.g., all-Managed Care Entities office hour listserv, HRSN Integration Fund listserv) as additional information is released.
* Please note: all materials within the HRSN Service Manual are subject to CMS approval and subject to change.

# Network Adequacy

## Network Adequacy Overview

**The goal of Network Adequacy is to ensure that Enrollees receive adequate access to care across all of the geographic areas that their MCE or plan (i.e., Accountable Care Partnership Plan (ACPP) or MBHP) serves.**

Each plan contracts with MassHealth to provide care in certain areas throughout the state.

* MassHealth sets standards for Network Adequacy. These standards create minimums that plans must meet when they contract with providers.
* MCEs contract with a **network** of providers to provide care to their members.
* Each MassHealth ACO covers a unique combination of geographic areas, which overlap.
	+ Specific information by plan is available here: [www.mass.gov/lists/masshealth-member-guides-and-handbooks#masshealth-enrollment-guide](http://www.mass.gov/lists/masshealth-member-guides-and-handbooks#masshealth-enrollment-guide)
* Network Adequacy is **solely the responsibility of MassHealth and the plans, not the providers.**

## Network Adequacy for HRSN Supplemental Services

* **Beginning on 1/1/25, MassHealth anticipates implementing the following network adequacy standards:**
	+ For each selected HRSN Supplemental Service, ACOs shall contract with at least one HRSN Provider located anywhere in the Commonwealth.
	+ ACOs may need to contract with more than one provider to ensure timely access to services.
		- If an ACO is unable to ensure Enrollees have timely access to HRSN Supplemental Services with one HRSN Provider, the ACO must contract with additional providers.
* **MassHealth anticipates implementing additional network adequacy standards for HRSN Supplemental Services, including time and distance standards, in 2026.**
* Note for Primary Care ACOs (PCACO) and MBHP: PCACOs and MBHP shall collectively meet the network adequacy requirements.
* Current network adequacy standards for Specialized CSP-HI and CSP-TPP will remain in place. Plans must enter into contracts with any qualified providers for CSP-HI and CSP-TPP that operate within the Plans’ Service Areas.

# Provider Credentialing

## Credentialing HRSN Providers

**Provider credentialing is a process by which a health plan ensures a potential HRSN Provider meets state and federal qualifications, and other plan-specific requirements.** To provide HRSN Services, HRSN Providers must be credentialed and enroll as network providers with ACPPs and/or MBHP.

**Standard managed care credentialing requirements that apply to HRSN Providers include:**

* Completing the MassHealth Federally Required Disclosures Form (FRDF).
* Providing demographic information (e.g., National Provider Identifier (NPI) number, licenses & certifications if applicable, address(es), etc.) to plans.
	+ Note: MassHealth strongly recommends that organizations that may already have an NPI for a different set of MassHealth services, procure and credential with a separate NPI for HRSN services
* Submitting tax information, such as a W-9 form, to plans.

**Plans will use the information provided by HRSN Providers to:**

* Verify that HRSN Providers do not appear in any exclusion databases.
* Confirm that HRSN Providers meet minimum qualifications necessary, as outlined in the HRSN Services Manual, to provide the HRSN Service.

There are other standard credentialing processes that are not applicable for HRSN Providers, which HRSN Providers will not need to complete.

* **MassHealth expects plans to tailor their credentialing forms specifically for HRSN Providers, or otherwise account for the fact that HRSN Providers may not be able to complete certain fields.**
* Note that many HRSN Providers are not licensed providers subject to National Committee for Quality Assurance (NCQA) standards, which dictate certain typical plan credentialing requirements.
* Specific forms and processes vary by plan.

## Example of Standard Credentialing Form Fields Not Applicable to HRSN Providers

The HealthCare Administrative Solutions (HCAS) form used by the majority of health plans and the standard form used by MBHP to collect provider demographic information for provider credentialing have multiple fields that **are not relevant for HRSN Providers**.

**HCAS fields that HRSN Providers will not be required to complete include:**

* Council for Affordable Quality Healthcare (CAQH) ID
* License #
* Drug Enforcement Administration (DEA) #
* Provider Category
* Hospital affiliation and admitting privilege fields
* 24 hour coverage
* Waiting time to schedule

**Additional, non-HCAS fields that HRSN Providers will not be required to complete include:**

* Malpractice insurance
* CDS (Controlled and Dangerous Substances) certificates
* Board certification

**ACPPs and MBHP are streamlining their HRSN Provider credentialing processes to ensure the information requested is relevant to HRSN Providers. Please contact the health plan directly with any questions on their credentialing processes. Find a list of the plans' credentialing & enrollment contacts** [**linked here**](https://hria.org/wp-content/uploads/2024/05/HRSN-Key-Plan-Contacts-for-Credentialing_.pdf)**.**

# Hubs

## Hubs Overview

**“Hubs" are a model ACOs and HRSN Providers may leverage to provide HRSN Services**

A **Hub** is comprised of one Parent Entity and one or more Satellite Entity(ies) for the purposes of the delivering HRSN Services.

* A **Parent Entity** performs the majority of the administrative and organizational components of the Hub’s work. The Parent Entity supports Satellite Entities by centralizing administrative functions and may provide support to one or more Satellite Entities related to provider credentialing, contracting, service delivery coordination, and claims management, in addition to support in other areas.
* A **Satellite Entity** operates under the fiscal, administrative, and/or personnel management of the Parent Entity. A Satellite Entity is an organization that provides eligible HRSN Services to Enrollees.
* In the context of HRSN Hubs, the Parent Entity **may provide HRSN Services** to members but **does not have to** do so to serve as a Parent Entity.

MassHealth encourages entities involved in the delivery of HRSN Supplemental Services to explore Hub models.

# HRSN Budget

## HRSN Finances in 2025

* MassHealth has provided service pricing information in the HRSN Service Manual
	+ *For HRSN Supplemental Housing Services:*
		- These are State-Directed Payments
		- The service prices provided are either the minimum or maximum prices that health plans must pay HRSN Providers.
	+ *For HRSN Supplemental Nutrition Services:*
		- The service price reference information is provided to guide health plans and HRSN Providers in price negotiations
* This information should help ACOs begin contracting with potential HRSN Providers
	+ MassHealth anticipates sharing ACO capitation rate information with ACOs in October 2024
	+ MassHealth strongly encourages potential HRSN Providers to engage with the ACOs they wish to contract with, now, to begin the contracting process as soon as possible

Additional details are included in the table below:

|  |  |  |
| --- | --- | --- |
| **CY25 Budget (future state)** | **ACO Capitation Rates** | **Service Pricing** |
| Estimated MassHealth budget for HRSN Supplemental Services: **$35 - $45 million** | What MassHealth will pay individual ACOs to deliver HRSN Services. Final rates will be released in Information Sharing in October. ACOs will implement waitlists to stay below this threshold.  | What ACOs will pay providers for HRSN Services delivered. ACOs and HRSN Providers will negotiate these rates, with the caveats above.  |

# Anticipated Timeline

**July 2024**

* **HRSN Service Manual released**, including service pricing

**July 18, 2024**

* **Stakeholder Meeting**

**August 2024**

* **ACO Requirements and Readiness Review**
	+ ACO Requirements released; note that requirements are subject to CMS approval
	+ ACO Readiness Review begins
	+ Stakeholder meeting

**September 2024**

* **Plans select services and begin contracting with providers**

**October 2024**

* **Plans Receive HRS Add-on Payment PMPMs** as part of ACO capitation rates

**January 1, 2025**

* **HRSN Implementation**
	+ Flexible Services “grant-like model” ends as of December 31, 2024
	+ New framework goes live

**Next Steps:**

* HRSN Providers and plans should continue to communicate with one another to prepare for HRSN Implementation
* Please submit any feedback or questions for the team to FlexibleServices@mass.gov

# HRSN Services Question and Answer

* If you would like to ask a question or share a comment, please use the “Raise Hand” feature to alert the facilitator, who will call on you. Be sure to share your name and organization, if applicable.
* Please mute yourself when not speaking, and please be aware that your background is visible when your camera is on.
* Please limit your comments to no more than 2 minutes.
* For further comments after the meeting, please email FlexibleServices@mass.gov
* To keep up to date with the latest information regarding HRSN Services, please join the HRiA and MassInnovations mailing lists

# Appendix

## MassHealth Health Related Social Needs (HRSN) Integration Fund

**The HRSN Integration Fund will provide up to $10 million during the Section 1115 demonstration period to support the implementation of HRSN Services.**

* Funding will be available to organizations interested in providing HRSN Services and creating and implementing Hubs for the following activities:
	+ Technology (e.g., electronic referral systems, financial management systems, screening and/or case management systems)
	+ Developing business or operational practices to support the delivery of HRSN Services (e.g., developing policies and workflows for referral management, quality improvement)
	+ Workforce development (e.g., cultural competency training, trauma-informed training, Community Health Worker (CHW) certification)
	+ Outreach and education (e.g., design and production of outreach and education materials, translation, obtaining community input)
* Funding will also be utilized for technical assistance, trainings, and learning collaboratives.
* Subscribe to the MassHealth Innovations listserv for future procurements related to the HRSN Integration Fund. Email masshealth.innovations@massmail.state.ma.us to ask to be added to the listserv.

## Upcoming Claims 101 Webinar

**Understanding Claims and Billing as an HRSN Provider**

**Date and Time: Tuesday, August 6, 2024, 9:00 to 10:30 am**

MassHealth and Health Resources in Action (HRiA) invite you to an upcoming webinar, **Understanding Claims and Billing as an HRSN Provider**, designed to support community-based organizations in learning about and preparing for the transition to becoming HRSN Providers under the new HRSN Covered Services framework anticipated to begin January 1st, 2025.

The shift from Flexible Services to HRSN Services under managed care and will require potential HRSN Providers to become credentialed and enrolled with ACPPs and/or MBHP and begin submitting claims for HRSN Services provided to eligible MassHealth members.

**Participants will leave with:**

* A deeper understanding of claims and billing, including the required components of a claim, the claims submission process, methods to submit claims, and guidance on monitoring claim adjudication
* An understanding of common errors and tips to overcome potential challenges with the claims and billing process
* Practical steps to begin setting up infrastructure to support the claims and billing process
* Knowledge of resources and supports available to potential HRSN Providers, such as hubs and third-party billing organizations

Registration Link: <https://hria.zoom.us/meeting/register/tZIlcOitqjkjGNPfVOjBmILFiSa0P_HN5w2G>

## Useful Links and Mailing Lists

* **HRSN Webpage:** [MassHealth Health Related Social Needs Services | Mass.gov](https://www.mass.gov/masshealth-health-related-social-needs-services)
* **HRSN Service Manual -- Definitions:** [MassHealth HRSN Service Manual Definition | Mass.gov](https://www.mass.gov/doc/hrsn-service-manual-definitions/download)
* **HRSN Service Manual – HRSN Supplemental Nutrition Services:** [MassHealth HRSN Service Manual - Nutrition | Mass.gov](https://www.mass.gov/doc/hrsn-service-manual-hrsn-supplemental-nutrition-services/download)
* **HRSN Service Manual – HRSN Supplemental Housing Services:** [MassHealth HRSN Service Manual - Housing | Mass.gov](https://www.mass.gov/doc/hrsn-service-manual-hrsn-supplemental-housing-services/download)
* **HRiA Resources:** [HRSN Integration Fund - Health Resources in Action | hria.org](https://hria.org/tmf/hrsn-integration-fund/)
* **Flexible Services Directory:** [MassHealth Flexible Services Directory | Mass.gov](https://www.mass.gov/lists/masshealth-health-plan-materials-and-information-for-members#masshealth-directories-)
* **HRiA Mailing List:** [Sign up for the HRiA Mailing List | hria.org](https://forms.office.com/r/SzZ3A60QE7)
* **MassInnovation Mailing List:** Email masshealth.innovations@massmail.state.ma.us to be added to the mailing list