

## **BH-ASO Agreement– Non-Resident Individuals**

In order to ensure consistent processes across the state, HCA staff met and BH-ASO Administrators discussed payment responsibility for individuals who access services outside his or her “**Region of Residence**”. Each BH-ASO agrees to honor the decisions below.

**Definition of “Region of Residence”** for non-Medicaid individuals will be determined using the following criteria: 1) a Provider One (P1) address within a regional service area; or if no information is available in P1 or its accuracy in question, 2) good-faith investigation by the servicing facility, and 3) an individual’s self-identification along with good-faith efforts to coordinate between regions.

### **These agreements are predicated on the following conditions:**

- Medically necessary behavioral health crisis services, and services related to the administration of the Involuntary Treatment Act and Involuntary Commitment Act (Chapters 71.05 and 71.34 RCW) are available to all individuals, regardless of level of income, residence, insurance status, or ability to pay.
- Approval of non-crisis behavioral health services, including crisis stabilization and voluntary behavioral health admissions, are based on medical necessity within available resource.
  - These services are only available to individuals with an income up to two hundred twenty percent (220%) of the federal poverty level (FPL).
  - The BH-ASO is not required to pay for non-crisis behavioral health services to persons above 220% FPL, or individuals who are residents of other states, including those on Medicaid who move into the region from out of state.
- BH-ASOs do not have financial responsibility to cover any out of state behavioral health admissions for citizens from Washington, with the exception of specific populations such as State funded CNP and MAGI on a case-by-case, in a recognized border city.

### **Court Costs**

#### **Medicaid Clients and Non-Medicaid Individuals**

Court Costs are the responsibility of the BH-ASO in which the hearing takes place. The BH-ASO in which the hearing takes place will invoice the BH-ASO in individual’s region of residence for repayment.

### **Inpatient Treatment Costs**

#### **Medicaid Clients**

When a Medicaid client is detained (ITA), or voluntarily seeks inpatient treatment, the servicing facility is required to coordinate care and payment with the MCO, in which the enrollee is assigned to in P1.

When a Medicaid client from another state is detained (ITA) and the individual’s state of residence does not cover a service model unique to Washington State, such as Secure Withdrawal Management and Stabilization Services (Secure Detox), the servicing facility is required to coordinate care and payment with the BH-ASO of the detaining Designated Crisis Responder.

## **Non-Medicaid Individuals**

- *ITA*
  - When a Non-Medicaid individual is detained (ITA) outside of their region of residence, the BH-ASO of the individual's region of residence is responsible for authorization and payment to the servicing facility. This includes E&T facilities and Community Hospitals.
- *Voluntary*
  - When a Non-Medicaid individual voluntarily seeks inpatient treatment, outside of their region of residence, the BH-ASO of the individual's region of residence is responsible for authorization and payment to the servicing facility. This includes E&T facilities and Community Hospitals. Prior-authorization is required for these services. Approval or denial will be based on medical necessity and available resources.

### Services within Crisis Triage, Crisis Stabilization, and Withdrawal Management Facilities

#### **Medicaid Clients and Non-Medicaid Individuals**

The servicing facility, based on the individual's region of residence, is required to coordinate for authorization and payment, with one of the following: the MCO (for Medicaid clients); or the BH-ASO (within available resources for non-Medicaid individuals that meet the criteria above).

### Outpatient Crisis and DCR Services

#### **Medicaid Clients and Non-Medicaid Individuals**

Outpatient crisis providers and DCR providers will work directly with the regional BH-ASO in which they are contracted for payment and the provision of services.

### Next Steps

- HCA will continue to work to develop policies for known gaps in this process and work with the BH-ASOs and MCOs to find solutions.