

# Behavioral Health Claims Resource Guide

## Overview

Under Michigan's Highly Integrated Dual Eligible Special Needs Plan (HIDE-SNP) program, behavioral health (BH) and substance use disorder (SUD) services are managed through a collaborative model involving prepaid inpatient health plans (PIHPs) and Humana.

- PIHPs administer Medicaid specialty services per Michigan's 1115 BH waiver. This includes mental health and SUD treatment for Medicaid-eligible members requiring BH, intellectual or developmental disability services and supports.
- Humana is the responsible payer for all covered Medicare BH services and those Medicaid BH services not managed by PIHPs.

The Michigan Department of Health and Human Services (MDHHS) provides a benefit grid, the **Medicaid Mental Health and Substance Use Disorder Authorization and Payment Responsibility Grid**, which includes details about the types of Medicaid-covered services and who is responsible for reimbursement for these services. To improve care delivery coordination and reduce administrative complexity, Humana partners with local PIHP's to delegate certain administrative functions for both Medicare and Medicaid BH services plan administration, including provider contracting, credentialing, utilization management and claims administration.

## Wayne County (Detroit Wayne Integrated Health Network provider)

### **Payment responsibility:**

The Detroit Wayne Integrated Health Network (DWIHN) manages both Medicare and Medicaid BH claims, utilization management, credentialing, and network management within its network.

**Utilization management:** DWIHN manages prior authorization for Medicare/Medicaid BH services for providers within DWIHN's provider network.

### **Claim submission process:**

1. Providers within DWIHN's provider network submit all BH claims directly to DWIHN.
2. DWIHN adjudicates claims.
3. Humana reconciles and pays DWIHN for the portion for which Humana is responsible.

## Wayne County (Non-DWIHN provider)

### **Payment responsibility:**

- Humana pays the Medicare portion.
- Humana pays the Medicaid portion including Medicare cost sharing in accordance with the MDHHS BH responsibility grid (i.e., responsible for mild to moderate).
- DWIHN pays Medicaid services in accordance with the MDHHS BH responsibility grid (i.e., responsible for serious mental illness [SMI] and SUD).

**Utilization management:** Humana manages prior authorization for Medicare BH services and Medicaid services in accordance with the MDHHS BH responsibility grid. DWIHN is responsible for Medicaid prior authorization in accordance with the MDHHS BH responsibility grid.

### **Claim submission process:**

1. Provider bills Humana first for services covered by Medicare.
2. Humana processes the Medicare Advantage (MA) claim.
3. Humana evaluates Medicaid cost share eligibility. Humana will reimburse under Medicaid in accordance with the MDHSS BH responsibility grid (Medicaid Health Plan [MHP] responsibility).
4. If a claim falls under PIHP responsibility (i.e., DWIHN), Humana will deny the Medicaid portion and instruct the provider to bill PIHP as the secondary payer (coordination of benefits [COB]).

## Macomb County

### Payment responsibility:

- Humana pays the Medicare portion.
- Humana pays the Medicaid portion including Medicare cost sharing in accordance with the MDHHS BH responsibility grid (i.e., responsible for mild to moderate).
- Macomb PIHP pays Medicaid services in accordance with the MDHHS BH responsibility grid (i.e., responsible for SMI and SUD).

**Utilization management:** Humana manages prior authorization for Medicare BH services and Medicaid services in accordance with the MDHHS BH responsibility grid. Macomb PIHP is responsible for Medicaid prior authorization in accordance with the MDHHS BH responsibility grid.

### Claim submission process:

1. Provider bills Humana first for services covered by Medicare.
2. Humana processes the MA claim.
3. Humana evaluates Medicaid cost share eligibility. Humana will reimburse under Medicaid in accordance with the MDHSS BH responsibility grid (MHP responsibility).
4. If a claim falls under PIHP responsibility (i.e., Macomb PIHP), Humana will deny the Medicaid portion and instruct the provider to bill PIHP as the secondary payer (COB).

## Key contacts for claims and provider support

Payer/Entity	Claims/Billing support	Provider relations	Website/portal
DWIHN	Phone: 313-833-3232	Phone: 313-833-3232	<a href="https://dwihn.org/">https://dwihn.org/</a>
Macomb PIHP	Phone: 586-469-5126	Phone: 855-966-2264	<a href="https://www.mccmh.net/">https://www.mccmh.net/</a>
Humana	Phone: 855-281-6070	Phone: 855-281-6070	<a href="https://provider.humana.com/medicaid/michigandsnp">https://provider.humana.com/medicaid/michigandsnp</a>