The Massachusetts Behavioral Health Partnership (MBHP) is pleased to announce its continuation of the Treatment Outcomes Package (TOP) Subsidy Program effective July 1, 2007. Under this program, upon signing a contract with Behavioral Health Laboratories (BHL), providers who are first-time or continuing users of BHL’s TOP and who are interested in participating in this subsidy program will be entitled to use the BHL TOP with MBHP Members without incurring any of BHL’s regular administrative fees, for a period of one fiscal year running from July 1, 2007 through June 30, 2008.

Note that providers will be responsible for costs associated with mailing or faxing TOP-related materials for MBHP Members and for fees related to use of the TOP with non-MBHP members.

Subsidy Program Participation Standards:

In order to participate in the TOP Subsidy Program, providers are required to agree with the subsidy program participation standards. The provider’s signed contract with Behavioral Health Laboratories indicates that the provider agrees to the participation standards as outlined in this Alert:

Current status with BHL invoices
- The provider must be current with any outstanding invoices with BHL by February 15, 2008 in order to qualify for the subsidy. To verify the provider’s current status, contact BHL at 508-281-6737.

Compliance with BHL training and instructions
- The provider will comply with BHL TOP user manuals, guidelines, training, and instructions. Such manuals, guidelines, and core training will be provided at no cost to providers by BHL in accordance with MBHP instructions. Providers may purchase additional on-site TOP training at their own expense.
Using Recipient Identification Number (RID) number
• All submissions of TOP surveys and questionnaires to BHL are required to include the Member’s MassHealth RID number for tracking purposes. See Attachment 1, “Clarification Regarding Changes Effective February 15, 2007, for Providers Participating in the MBHP TOP Subsidy”.

Incorporating results into treatment plan
• According to MBHP’s policy on the Comprehensive Outcomes Management Program, the provider is required to review the results of Members’ outcome assessments, discuss those results with Members, and to incorporate such results into Members’ treatment plans, in collaboration with Members and as clinically appropriate.

Fees
• MBHP only agrees to pay for the “new administration” fees associated with the provider’s use of the BHL TOP. MBHP shall not be responsible for any contractual obligations or liabilities between the provider and BHL.

• MBHP will only be responsible for costs related to the provider’s use of the BHL TOP for the period from July 1, 2007 through June 30, 2008.
  o MBHP is not responsible for any expenses or costs related to the provider’s use of the BHL TOP with regard to non-MBHP members.
  o MBHP will not be responsible for any fax, mailing, or shipping costs associated with the provider’s participation in, or use of, the BHL TOP.
  o MBHP will not be responsible for any costs of the provider’s use of the BHL TOP after termination of the provider agreement between MBHP and the provider or after termination of the agreement between MBHP and BHL.

Using BHL TOP with non-MBHP members
• Providers who wish to use the BHL TOP with clients who are non-MBHP members should negotiate directly with BHL and express their interest in using the TOP with such clients. In the event that the provider does contract to use the BHL TOP with non-MBHP members, the provider will be solely responsible to BHL, or any other parties as applicable, for any and all expenses related to the use or participation in the BHL TOP with regard to such non-MBHP members.

Use of data
• The provider understands and agrees that any and all survey data or other data related to Members’ and providers’ participation in the BHL TOP and collected by BHL will be periodically forwarded to MBHP. It is understood that MBHP will use the outcomes data generated by the TOP for the purpose of routine healthcare operations related to clinical evaluation, improved care management, and the identification of best practices within the provider network.
• MBHP will not use outcomes data to manage Member benefits. MBHP uses the medical necessity criteria described in the *Provider Manual* to manage benefits. The outcomes data available to MBHP will not replace or supersede these medical necessity criteria.

• MBHP will not use outcomes data as a sole indicator for taking corrective action against a provider. MBHP is collecting outcomes data for the purpose of promoting best practices. While MBHP intends to use outcomes data positively, providers should note that MBHP will continue to conduct quality audits of providers’ medical records and will institute corrective actions when service quality does not meet the performance specifications contained in the MBHP *Provider Manual*.

*The provider’s participation and use of the BHL TOP and provider’s agreement to the terms of this Alert does not in any way supersede, infringe upon, or nullify the provider agreement entered into by MBHP and the provider.*

In its continuous efforts to protect the privacy of its Members, MBHP’s activities related to the BHL TOP will be in accordance with state and federal laws relating to the confidentiality of health information, including, but not limited to, the Health Insurance Portability and Accountability Act (HIPAA) of 1996 and any regulations enacted thereunder.

**Questions or Concerns:**

MBHP is pleased to present you with an opportunity that we believe will lead to network-wide improvements in service quality and greater public accountability. If you have any questions or concerns regarding this Alert or participation in the TOP Subsidy Program, please contact Tori Brower, Outcomes Project Manager, at 617-350-1951 or MBHPOutcomes@valueoptions.com.
Clarification Regarding
Changes Effective February 15, 2007, for Providers Participating in the MBHP TOP Subsidy

Understanding RIDs (Recipient Identification Numbers) for PCC Plan Members

*It is imperative that providers copy the correct RID number for MBHP Members, in the correct format, on the TOP forms.*

Effective **Feb. 15, 2007**, Behavioral Health Laboratories (BHL) implemented a system to verify that RIDs (Recipient Identification Numbers) copied on the TOP Consumer Registration Forms are eligible RID numbers for MBHP Members. The following information clarifies the changes to the individual client reports, which will inform providers whether or not the RID noted on the TOP form is a match to an eligible MBHP Member.

If a submitted TOP form has a **correct** MBHP RID number:
- the provider will receive the client report; **and**
- the report will include the MBHP logo.

If a submitted TOP form has an **incorrect** MBHP RID number:
- the provider will receive the client report; **however**
- the client report will **NOT** include the MBHP logo; **and**
- the PAYER field will be highlighted in **RED** (for e-mail reports) or **SHADED** (for fax reports).

The highlighted PAYER field indicates that the RID number copied on the TOP form is an incorrect MBHP RID number and needs to be corrected. Providers **must** correct the RID number by calling BHL customer service (**1-800-329-0949**) and providing the correct RID number. If the RID number is **not** corrected, it is deemed a “Failed MBHP Report”, and the provider will be responsible for the payment of that TOP administration.

**Additional Clarification on Failed MBHP Reports**

If you receive an RID failure notification on the client report (PAYER field highlighted in **RED** or **SHADED**) and you believe the RID is correct for your client, there are a few possible explanations. The following describes what to do in these situations.

1) Newly eligible MassHealth Members
There is a seven-to-ten day lag between when a Member becomes eligible with MassHealth and when that Member’s information is included in the eligibility file that is sent to BHL. This also applies to Members who have recently changed eligibility. For example, if a Member becomes eligible on a Friday, due to lag times with data feeds, his or her RID would not be included in the file that is sent to BHL until the following week.

- If a TOP Consumer Registration form is submitted for a newly eligible MBHP Member and you receive an RID failure notification, that registration form will need to be re-faxed to BHL one week later. When the form is resubmitted, the client report will be reproduced, the RID should be accepted as an eligible RID, and you will not be charged for that administration.

2) **Submitting a Clinical Scales Form Only (re-test)**

If you are doing a re-test and just submitting a TOP Clinical Scales form, the BHL system pulls the most recent Consumer Registration form on file for that Member to run through the RID verifying system. If you receive an RID failure notification on the client report, it may be due to an incorrect RID on the originally submitted Consumer Registration Form on file with BHL.

- Call BHL customer service (1-800-329-0949) to re-enter the RID for that Member (this will overwrite the original RID that was incorrect), and the client report will be reproduced.

- **Or** submit an updated Consumer Registration form along with the Clinical Scales form. This will ensure the most recent information, including the correct RID, is on file. Be sure to complete the **entire form**; this information will overwrite the information on file. In the Client Code field, fill in the Member’s client code you have been using on the Clinical Scales forms, not the BHL Form Code on the new Registration form.

3) **RID Character Clarification**

In many cases, the RID on a TOP form is copied incorrectly. Be sure to **write legibly** to prevent scanning errors. RIDs can be in a variety of forms; keep in mind that RID characters:

- are always 10 characters;
- may contain letters, numbers, or a combination; and
- a **zero** at the beginning or end of the number is **included as part of the RID**.
Information Sheet for Understanding RIDs (Recipient Identification Numbers) for PCC Plan Members

It is imperative that providers copy the correct RID number for MBHP Members, in the correct format, on the TOP forms. Please carefully read these instructions for copying RID numbers.

GENERAL RID INFORMATION

1. RIDs are located to the right of the Member’s name and always have ten (10) characters.
2. RIDs may contain numbers, letters, or a combination of numbers and letters.
3. All letters are included as part of the 10 characters of the RID.
4. If the RID contains a zero at the beginning or end of the number, those zeros are included as part of the 10 characters of the RID.
5. There is often more than one Member – and more than one RID – on a MassHealth card. Be sure to identify the correct RID for the correct Member!

EXPLANATION OF THE MASSHEALTH CARD
(see facsimile of card on reverse side)

1 - Card Number
The unique 10-digit number assigned to this card by the MassHealth system. This is not a RID. (The card number is NOT to be used on any of the TOP forms.)

2 - Member’s Sequence Number
The two-digit number assigned by MassHealth for verification purposes.

3 - Member’s Name
Listed on the card are the names of up to four Members. Households with more than four Members are issued multiple cards.

4 – Member’s Recipient Identification Number (RID)
The Member’s 10-character RID is printed beside the cardholder’s name. Use this for the TOP forms. Record all 10 characters of the RID on the TOP forms.

Please see example on next page.
<table>
<thead>
<tr>
<th>1 - Card Number</th>
<th>2 - Sequence Number</th>
<th>3 - Member's Name</th>
<th>4 - Member's Recipient ID (RID)</th>
</tr>
</thead>
</table>

**WHERE TO WRITE THE RID ON BEHAVIORAL HEALTH LABS’ (BHL) CONSUMER REGISTRATION FORM**

1. On the BHL Consumer Registration Form (version 4.1), look for the “For Office Use Only” section at the bottom of the form.
2. Copy **all 10 digits** of the RID, **for the appropriate Member**, in the “Primary Payer Card ID” field (field 6), starting in the first space. (See example below)
3. Please proofread and double-check the RID. Make sure all numbers and letters are included. **Write legibly to prevent scanning errors.**

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**FOR OFFICE USE ONLY**

<table>
<thead>
<tr>
<th>Provider Code</th>
<th>Client Code</th>
<th>Primary Payer ID</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>MAMBHP</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>BHL Form/Client Code</th>
<th>Date Treatment Began (or is to begin)</th>
<th>Primary Payer Card ID</th>
</tr>
</thead>
<tbody>
<tr>
<td>1001</td>
<td></td>
<td>1234560002</td>
</tr>
</tbody>
</table>

For questions regarding technical difficulties or to correct an MBHP RID number, please call BHL customer service at 1-800-329-0949.

After calling BHL, if you continue to receive a failure notification for a RID number you have confirmed is an eligible MBHP Member, call Tori Brower at MBHP at **617-350-1951** to document the RID number and BHL client code.

Thank you for your cooperation!