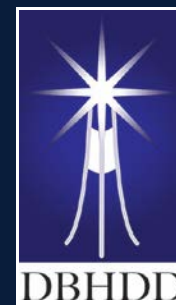




The Georgia
Collaborative ASO



Behavioral Health Open Enrollment Forum December 15, 2016



Agenda



- Welcome and Introductions
- DBHDD Overview and Expectations
- The GA Collaborative ASO
- High Level Overview of Process
- Services Available
- Pre-Qualifiers and Letter of Intent Submission
- Application Process
- Regional Field Offices
- Resources

Introductions

- Department of Behavioral Health and Developmental Disabilities
 - Lynn Copeland, Director Provider Network Management
 - Akisha Joseph, Director of Behavioral Health Provider Enrollment
 - Camille Richins, Director of Provider Enrollment & Contracts
 - Dr. Terri Timberlake, Director, Office of Adult Mental Health

- The Department of Community Health
 - Maya Carter, Program Specialist, Division of Medicaid, Aging and Special Populations
 - Linda McCall, Program Director, Long Term Care/Behavioral Health Medicaid, Operations/Policy and Provider Services

Introductions

- Georgia Collaborative ASO
 - Mona Allen, Vice President, Quality Management Division
 - Jessica Willhite, Provider Relations Manager/Trainer
 - Jenny DeLoach, Provider Relations Manager/Trainer



Division of Behavioral Health

New Provider Enrollment Forum

Monica Johnson, MA, LPC

DIRECTOR, DIVISION OF BEHAVIORAL HEALTH

Presented by Dr. Terri Timberlake,
Director, Office of Adult Mental Health

DBHDD Vision and Mission

Vision

Easy access to high-quality care that leads to a life of recovery and independence for the people we serve

Mission

To lead an accountable and effective continuum of care to support people with behavioral health challenges, and intellectual and developmental disabilities in a dynamic health care environment

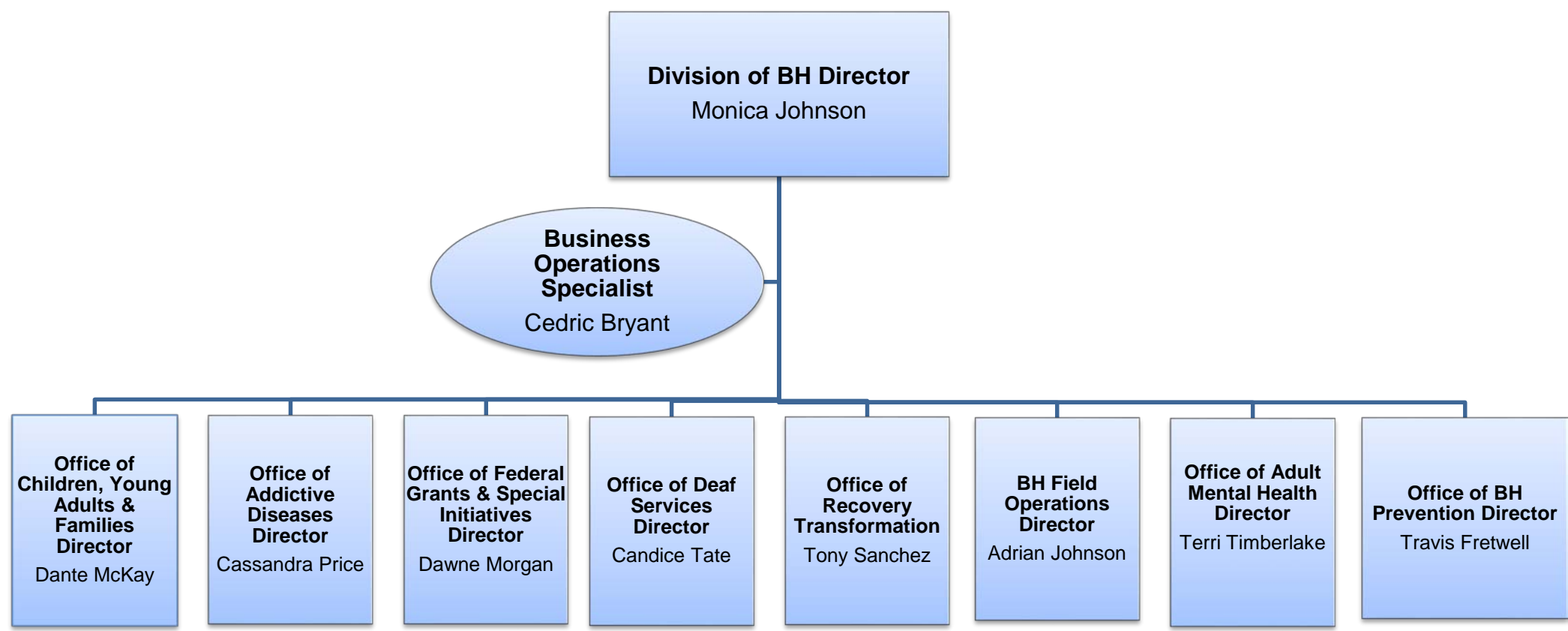
What are we charged with?

- The BH Division is the authority for behavioral health programs, services, and supports statewide.
- Our primary focus of work falls in the below categories:
 - Policy & Planning
 - Program Development
 - Budget Management & Spend Plan Development
 - Workforce Development (training)
 - Collaborating with stakeholders within the various systems of care



Georgia Department of Behavioral Health & Developmental Disabilities

Division of Behavioral Health Organizational Chart



BH Division Goal

“Build a recovery oriented community-based system of care, with the capacity to provide timely access to quality behavioral health treatment and support services.”

How We Plan to Achieve Goals

- Examples include, but are not limited to;
 - Compliance to ADA Settlement Agreement
 - Core Redesign Initiative
 - Belton Order implementation
 - Strategic Planning for AD
 - Dissemination of practice models for emerging young adults
 - The Georgia Collaborative implementation
 - Capacity building for community based crisis care
 - Workforce development through training on evidenced based treatment models and learning collaboratives
 - Infusion of non-traditional supports for Children and Adolescents

The Provider Network

- The Division of Behavioral Health contracts 100% of the direct care work to the network of providers.
- Approximately 200 behavioral health community providers; w/the majority residing in Region 3 (approx. half);
- DBHDD and providers must work in partnership to achieve the following characteristics for the network:
 - Safe
 - Accessible
 - Efficient
 - Effective (positive clinical outcomes)
 - Financially and administratively stable
 - Accountable
 - Competent (workforce)

Tier 1, Tier 2 & Tier 3

Tier 1: CCP

- * Strengthening the Public Safety Net

Tier 2: CMP

- * Ensuring Choice
- * Quality Improvement

Tier 3: Specialty Network

- * An array of specialty treatment and support needed in the continuum of care

Tier 1: Comprehensive Community Provider (CCP)

CCPs function as the safety net for the target population, serve the most vulnerable and respond to critical access needs. Community Service Boards will serve in this capacity. The CCPs will:

- * Be a Community Service Board
- * Serve as the Safety Net for individuals identified as high risk and vulnerable
- * Serve children, adolescents, emerging adults, and adults

Tier 1: Comprehensive Community Provider (CCP)

- * Have Electronic Information Systems capability (Electronic Health Records, HIE connectivity)
- * Competently serve individuals with co-occurring Behavioral Health & Developmental Disabilities; and
- * Competently serve both individuals with Mental Health conditions, Addictive Diseases and dually diagnosed MH/AD conditions

Tier 1: Comprehensive Community Provider (CCP)

- * Offer essential core benefit package plus designated specialty services
- * Have an active Board of Directors
- * Be the clinical home for individuals enrolled in their services
- * Receives DBHDD Funds to support infrastructure needed to be a Safety Net Provider

Tier 2 – Community Medicaid Provider

CMP providers offer choice for consumers with Medicaid.
Required to:

- * Offer the essential core benefit package of services
- * Serve Medicaid-covered individuals
- * Serve Both MH & AD Individuals

Tier 2 – Community Medicaid Provider

- * May also offer Specialty Services (not mandated)
- * May be age-focused (i.e. Only C&A or Only Adults, or Both)

Tier 3 – Specialty Providers

This includes, but is not limited to:

- * Intensive Intervention Services
- * Assertive Community Treatment
- * MH & SA Clubhouses
- * Peer Services
- * Psychosocial Rehabilitation
- * Supported Employment
- * Addictive Disease Specialty Treatment
- * Residential Services



Service Delivery: Core Benefit Package

SERVICE	ADULT MENTAL HEALTH	CHILD & ADOLESCENT MENTAL HEALTH	ADULT SUBSTANCE USE DISORDER	CHILD & ADOLESCENT SUBSTANCE USE DISORDER
Behavioral Health Assessment / Service Plan Development	X	X	X	X
Psychological Testing (may be contracted out)	X	X	X	X
Diagnostic Assessment	X	X	X	X
Crisis Intervention	X	X	X	X
Psychiatric Treatment	X	X	X	X
Nursing Assessment & Health Services	X	X	X	X
Medication Administration	X	X	X	X
<i>Pharmacy & Lab Services</i>	X	X	X	X
Community Support Individual / Case Management / PSR-I	X	X	X	X
Individual Outpatient Services	X	X	X	X
Group Outpatient Services	X	X	X	X
<i>Legal Skills – Forensics/Competency</i>	X		X	
Family Outpatient Services	X	X	X	X
Addictive Disease Support Services			X	
Peer Support Individual	X		X	

Provider Standards

- Tier 1 CCPs AND Tier 2 CMPs will be required to operate in Compliance with the applicable Standards. The Standards are intended to provide clear guidance for providers on the expectations of operating as a CCP or a CMP.
- Tier 1 Standards can be found in PolicyStat: Policy #01-200
- Tier 2 Standards can be found in PolicyStat: Policy #01-230

Tier 2: CMP Standards

- * Administrative/Fiscal Infrastructure (15%)
- * Accreditation, Certification & Licensing (*not weighed*)
- * Access to Services (16%)
- * Crisis Management (10%)
- * Substance Use Treatment & Supports (10%)
- * Screening & Assessment (10%)
- * Community Behavioral Health Services (10%)
- * Transitioning Individuals in Crisis from Inpatient & Crisis Stabilization Care (10%)

Tier 2: CMP Standards

- * Staffing (not weighed)
- * Administrative Services Organization & Audit Compliance (13%)
- * Recovery Oriented Care (not weighed)
- * Quality Management (3%)
- * Training (3%)

Compliance & Monitoring

- * Providers are **required** to operate in compliance with the respective Standards. See Policy #01-249.
- * Providers will be evaluated on their performance to the overall standards annually (with a mid-year progress review) by submitting a PMR.

Due Date for Evaluation	Period of Time Included in the Evaluation
March 31, 2016	2016: July 1, 2015 thru February 29, 2016
July 31, 2017	2017: July 1, 2016 thru June 30, 2017



Performance Monitoring Report:

Examples of Standards and Indicators



Access to Care Standard

3.0	01-233	Responsiveness to initial request for service
3.1	01-233	<ul style="list-style-type: none">• 0 - 2 Business Days - From initial intake to scheduled assessment.
3.2	01-233	<ul style="list-style-type: none">• 0-5 Business Days - From intake to scheduled appointment for treatment.
3.3	01-233	<ul style="list-style-type: none">• 0-14 Business Days - From Intake to first scheduled MD appointment.
3.4	01-233	What is the percentage of appointments cancelled by staff?

Engagement in Care

4.1	01-234	No show rate - What is the percentage of Initial Intake Behavioral Health Assessment = Should not exceed 25% (No Show/Cancel rate based on Same Day access models)
4.2	01-234	No show rate -What is the percentage of no show/cancelled appointments for: Treatment Outpatient Services (Non-Medical = individual, family, group counseling) Should not exceed 25%
4.3	01-234	No show rate - What is the percentage of Initial Psychiatric Evaluations = should not exceed 25%

Crisis Management

12.1	01-242	Providers who receive GCAL referrals for a non-enrolled individuals with urgent needs are scheduled for an appointment within one (1) business day of referral. The appointment is to occur as soon as possible, but no later than 3 calendar days from the date of referral.
12.2	01-242	What percentage of no shows had an outreach attempt within one (1) business day of missed crisis appointment?

Final Key Points

- * Gain an understanding of the standards and the provider's ability to meet them.
- * Review the DBHDD Provider Manual and Services.
- * Ensure you will be able to serve **both** AD & MH populations
- * Offer the **full array** of services of the Core Benefit Package
- * Ensure competency in best practices for community care for the target population is in place.
- * Ensure you are able to serve our target populations.

Questions





The Georgia Collaborative ASO

The Georgia Collaborative ASO



- The right service
- In the right amount
- For the right individuals
- At the right time

Goals of the Collaborative

“Providing Easy Access to High Quality Care That Leads to a Life of Recovery and Independence”

- Support recovery, resiliency and independence in community based service system
- Leverage technology through an integrated, customizable platform allowing all core functions to “communicate” (The CONNECTS platform)
- Coordination of previously disparate systems
- Improve state wide and provider specific outcomes and provider performance

Goals of Recruitment

DBHDD recruits providers who have the required clinical knowledge, financial stability and successful experiences in serving individuals with behavioral health and substance abuse disorders, [policy 01-111](#). The review process is accomplished through the use of a pre-qualification process and an application process. The Georgia Collaborative, on behalf of DBHDD, is responsible for these reviews.





High Level Overview & Time-frames

Enrollment Forums/Open Enrollment

<u>BH Provider Forum</u>	<u>BH Open Enrollment</u>
December 15, 2016	January 1-31, 2017

- The Georgia Collaborative hosts three BH forums each fiscal year, followed by an open enrollment period.
- Attendance of the enrollment forum is required for **NEW** providers. A certificate of attendance will be emailed to providers following forum, which must be submitted along with the LOI to enrollment for processing.

Behavioral Health Enrollment Phases

Enrollment Occurs in Two Phases

Phase I Open Enrollment Period	Phase II (Application) During Open Enrollment or After
Pre-Qualifiers	Provider Application and Site Visit
Letter of Intent (LOI) Form	DCH Enrollment E- Application

Process Timeline Based on Process Flow

Milestones	Turn around time (Days)	Notes	Deficiencies
Letter of Intent Notification of Receipt	5 business days of receipt	Email sent to provider for receipt of LOI with tracking number	
Internal review of LOI	30 days		1 opportunity to correct; must respond within 5 business days
Review of Application**	Within 30 days		1 opportunity to correct; must respond within 5 business days
Scheduling of Site Visit	30 Calendar Days		
DCH Application	Approximately 4 – 8 weeks	From online submission to DCH	
Orientation Training	Within 30 Calendar Days	GA Collaborative via Webinar	
LOA Issued	15		



Services Available During BH Enrollment

Adult Behavioral Health Services Available During Enrollment

Core Benefit Package	Addictive Diseases Peer Support Group
Peer Support Group	Peer Support Whole Health & Wellness
Substance Abuse Intensive Outpatient	Psychosocial Rehabilitation Group
Ambulatory Substance Abuse Detoxification	Community Support Team *
Assertive Community Treatment	Medication Assisted Treatment

Adult Core Benefit Package

****Agency must have a DATEP License and offer ALL services in the Core Benefit Package**

Addictive Diseases Support Services	Individual Outpatient Services
Behavioral Health Assessments and Service Plan Development	Medication Administration
Case Management	Nursing Assessment & Health Services
Crisis Intervention	Psychiatric Treatment
Psychosocial Rehabilitation - Individual	Diagnostic Assessment
Peer Support Individual Services	Family Outpatient Services <ul style="list-style-type: none">• Family Counseling• Family Training
Psychological Testing	

Substance Abuse Intensive Outpatient

Agency must have a DATEP License and offer ALL services

Addictive Diseases Support Services

Group Outpatient Services

- Group Counseling
- Group Training

Behavioral Health Assessment

Family Outpatient Services

- Family Counseling
- Family Training

Diagnostic Assessment

Service Plan Development

Nursing Assessment and Health Services

Psychiatric Treatment

Peer Support Individual Services

Individual Counseling

C&A Behavioral Health Services Available During Enrollment

Core Benefit Package

Intensive Family Intervention

Substance Abuse Intensive Outpatient

C&A Core Benefit Package

****Agency must have a DATEP License and offer ALL services in the Core Benefit Package**

Behavioral Health Assessment	Individual Outpatient Services
Community Support Individual	Medication Administration
Crisis Intervention	Nursing Assessment & Health Services
Diagnostic Assessment	Psychiatric Treatment
Family Outpatient Services: <ul style="list-style-type: none">• Family Counseling• Family Training	Group Outpatient Services <ul style="list-style-type: none">• Group Counseling• Group Training
Psychological Testing	Service Plan Development

A close-up portrait of a middle-aged Black man with short, graying hair and a light beard. He is wearing a light blue button-down shirt and looking directly at the camera with a slight smile. The background is a neutral, light-colored wall.

Pre-Qualifiers for New DBHDD BH Providers

Pre – Qualification Elements

LOI	Current Drug Abuse Treatment and Education Program (DATEP) License**
Resume of Clinical Director	Accreditation**
Current resumes of Owners	2 year's agency business tax returns or audited financials
Current resume of applicant's CEO/Director. If different from owner	6 months of agency bank statements
Copy of current Georgia Secretary of State registration	IRS Exempt Status
Trade name or "DBA" Registration	
Evidence of Delivering Community – Based BH Services**	
Three professional references	
Additional Contract Requirements for Tier 2 Providers	
Three Professional Reference Letter	
Copy of Current City or County Business License or Permit	

Resume's Required

- Clinical Director
 - May not be the CEO
- Owner
- Applicant's CEO/Director, if different from the owner
- Clinical Directors for Tier 2 providers must be:
 - A full-time employee of the agency
 - Have an independent and unrestricted professional license in Georgia
 - Have at least two years experience in behavioral health service delivery



Pre-Qualifiers for New DBHDD BH Providers

- Copy of the current Georgia Secretary of State Registration
- Trade name or “DBA” registration, if applicable
- Copy of current City or County Business license/permit
- **A business license or permit must be submitted for each location in which the applicant operates or intends to operate at the time of LOI submission.**



Pre-Qualifiers for New DBHDD BH Providers

Evidence of Delivering Community-Based Behavioral Health Services:

Applicants must provide evidence that the applicant (not individuals within the agency) has provided community-based behavioral health services that are the same or similar in definition to those being requested for a minimum of a one year immediately prior to submission of LOI and Pre-Qualifiers.



Delivery of Community Based Services

Evidence:

- Copy of fully executed, verifiable contract
- Contracts submitted must demonstrate a contractual relationship with one of the following types of organizations:
 - An insurance company for BH services
 - A government agency of the State of Georgia or a government agency of another state
- Documentation that services described in the contract were delivered; Volunteer work is not acceptable

Delivery of Community Based Services (cont.)

- The contract must:
 - Include descriptions of each service listed in the contract
 - Clearly identify the specific population served for each service
 - Include the reimbursement rates and mechanism for each service

- Documentation to verify the services described in the contract that were delivered must meet the following criteria:
 - Describes the specific service during the term of the contract being submitted as verification of service delivery; and
 - Describes staff (i.e., title and credentials) employed for each service during contract period being submitted as verification of service delivery

Delivery of Community Based Services (cont.)

- Providers who hold (or previously held) a contract with another state government agency must submit contact information for that government agency's Contract Manager, who provided the oversight of the contract along with a copy of the contract.
- Information regarding the result of performance measures required in the contract must be included.



Contract Requirements for Tier 2 Applicants

Must demonstrate a minimum of one year providing **ALL** of the following services:

- Behavioral Health Assessments
- Psychological Testing
- Diagnostic Assessments
- Crisis Intervention
- Psychological Treatment with MD
- Nursing Services
- Case Management*
- Community Support Services (CSI)*
- Individual Counseling
- Group Counseling
- Family Counseling



Pre-Qualifiers for New DBHDD BH Providers

The applicant must provide three 3 professional reference letters that:

- Are signed and on professional letterhead
- Are from individuals or organizations that have had experience with the applicant (not with employees, owners or principals of the applicant)
- Can validate the applicant has provided Community Behavioral Health Services that are same/similar to those requested
- Personally attest to the credibility and quality of the applicants service
- Include contact information



REFERENCE

© Can Stock Photo - csp17178437

Pre-Qualifiers for New DBHDD BH Providers

- Professional reference letters must be dated within one (1) year of LOI submission.
- The person or organization providing the reference letter must not:
 - Be a current or former employee, officer or principal of the applicant
 - Have ownership interest in the applicant
 - If a reference is provided by an entity, then that entity must not have an officer, principal or ownership interest holder who is also an employee, officer, principal or has an ownership interest holder of the applicant.

DATEP License

- No governing body shall operate a drug abuse treatment and education program in the state without first obtaining a license or provisional license [O.C.G.A. § 26-5-7 \(2015\)](#)
- If applying for Core Services Benefit Package or Substance Use Disorder Specialty Services, A DATEP License is required and must be submitted for each location at the time of LOI submission.
- Please visit:
http://dch.georgia.gov/sites/dch.georgia.gov/files/related_files/document/Drug_InitialLicensurePacket_6-12-12.pdf



Pre-Qualifiers for New DBHDD BH Providers: Accreditation

Accreditation

- A three year accreditation is required
- All accreditation documents must:
 - List the type of service the agency is accredited to provide
 - List the address of the service site(s)
 - Indicate the agency is currently providing the services listed

Applicants must provide a copy of accreditation certificate and survey report from one of the following accrediting bodies:

- Council on Accreditation (COA)
- Commission on the Accreditation of Rehabilitation Facilities (CARF)
- The Council on Quality and Leadership (CQL)
- The Joint Commission (TJC)

Pre-Qualifiers for New DBHDD BH Providers

The following must be submitted:

- IRS Exempt Status Determination (Non-profit applicants only)
- Most recent calendar year Income Tax Form (IRS 990)

Financial Requirements

The following documents must be in the name of the agency and not the individual owner:

- Most recent 2 years of tax returns or audited financials
- Most recent 6 months of bank statements



Pre-Qualifiers for New DBHDD BH Providers

- Tier 3 applicants requesting specialty services must comply with staffing requirements as outlined in the specific service definition(s) in the Provider Manual for Community Behavioral Health Providers, 01-112.



Pre-Qualifiers for New DBHDD BH Providers

Please Be Advised:

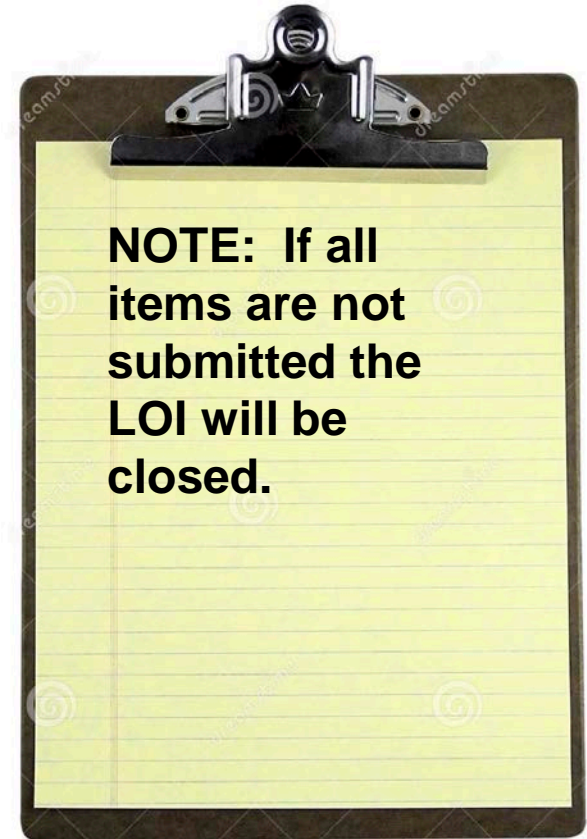
- It is not permitted under DBHDD contracts for enrolled providers to sub-contract or establish extended relationships with another organization to sub-contract the entirety of an approved service or set of services, such as Core Services Benefit Package. This relationship is not approved and does not qualify the applicant the opportunity to meet the one year experience requirement.



Letter of Intent (LOI) Submission for New Applicants

Letter of Intent

- All applicable items on the checklist must be submitted
- All fields must be completed
- Handwritten Documents will be rejected
- Contract must contain contents outlined in Recruitment Policy 01-111
- Right to request additional information
- No LOI will be accepted prior to January 1, 2017 or after January 31, 2017



LOI Submission

Letter of Intent and supporting documents must be **mailed to**

**GA Collaborative Enrollment
240 Corporate Blvd, Suite 100
Norfolk, VA 23502**

All information sent to the Georgia Collaborative as any part of the pre – qualification process must be submitted via US Postal Service certified return receipt requested, FedEx, or UPS delivery to the address listed above.

Letter of Intent (LOI)

- Within 5 business days you will receive correspondence from enrollment, which will include a tracking number and notification that your LOI was received via email.
- Within 30 calendar days of receipt of LOI and pre-qualifiers, the GA Collaborative will send a pend letter, via email.
- If the LOI is complete, then an Invitation to complete an application will be sent to the provider and will include:
 - Instructions on completing the Agency Application for New Providers

Rejection v. Deficiencies LOI

Rejected/Closed	Deficient
Handwritten	License or other documents near expiration
Incomplete/blank spaces in body	Incomplete/insufficient documentation
Documentation not attached/Missing Documentation (e.g.. DATEP)	
Packet not postmarked by midnight on the last day of enrollment (1.31.2017)	

- Applicants have 5 business days from the date of the initial outreach notifying them of deficiencies to submit the corrections. The information can be sent via US Postal Service certified return receipt of mail, FedEx, UPS Delivery or email GA_Enrollment@BeaconHealthoptions.com
- Applicants have **one opportunity to submit corrections!**

Important LOI Information

- The Georgia Collaborative ASO may close an applicants LOI if each of the required Pre-qualifiers is not included in the submission of information. The provider will be informed via email, that the LOI is closed.
- Applicants must meet ALL applicable Pre Qualifiers to move forward in process.
- The applicant's email address specified in the Pre-Qualifiers must be valid and able to accept email as it is the main form of communication.
- The Georgia Collaborative ASO and DBHDD reserve the right to request additional documentation and deemed relevant to the qualification process.

Letter of Intent Submission

Counties to be served:

- The counties requested to be served must be within a 50 mile radius of the service delivery location.
- Only counties that are approved are eligible for service

Next Steps

- Applicants will receive a completion letter from the GA Collaborative notifying them that all requirements have been met and will be invited to complete the application with the GA Collaborative.



Application Process

Submission of Application

- Upon receipt of the Invitation to Apply to become a provider in the DBHDD network, you will have 30 days to complete and submit the New Provider Application and any other required documentation and materials.
- Upon receipt of application, you will receive correspondence from enrollment that your application was received **within 5 business days**.
- Within 30 business days of receipt of the application, the GA Collaborative will send correspondence to notify you of any deficient information. The provider has 5 days to make corrections.

Submission of Application

- If application is complete, you will be notified via email to schedule the site visit with your Regional Field Office. The site visit must be scheduled within 14 days of notification and completed within 30 days thereafter.
- GA Collaborative will forward recommendations for approval to DBHDD.
- The provider will be informed to submit a Medicaid Application through DCH. This process could take 4-8 weeks.
- An approval letter will be sent to the provider from DBHDD, or
- A denial letter will be sent to the provider from DCH

Response to Correction of Incomplete Application

- Any agencies that have not submitted required elements of application will be informed they must wait until next enrollment cycle to re-submit Letter of Intent.
- Any incomplete applications, as well as those not received during correction period will result in closure of application and notification will be submitted to DCH that application is incomplete.
- If DCH denies the application, DCH will inform provider of next steps. Please note that per DCH policy, the provider must wait 1 year before submitting another application.

Submission of Application (cont.)

Completed applications can be sent via mail or email:

Georgia Collaborative Enrollment

240 Corporate Blvd, Suite 100

Norfolk, VA 23502

or

GA_Enrollment@beaconhealthoptions.com

Next Steps

Upon Approval Notification by DCH

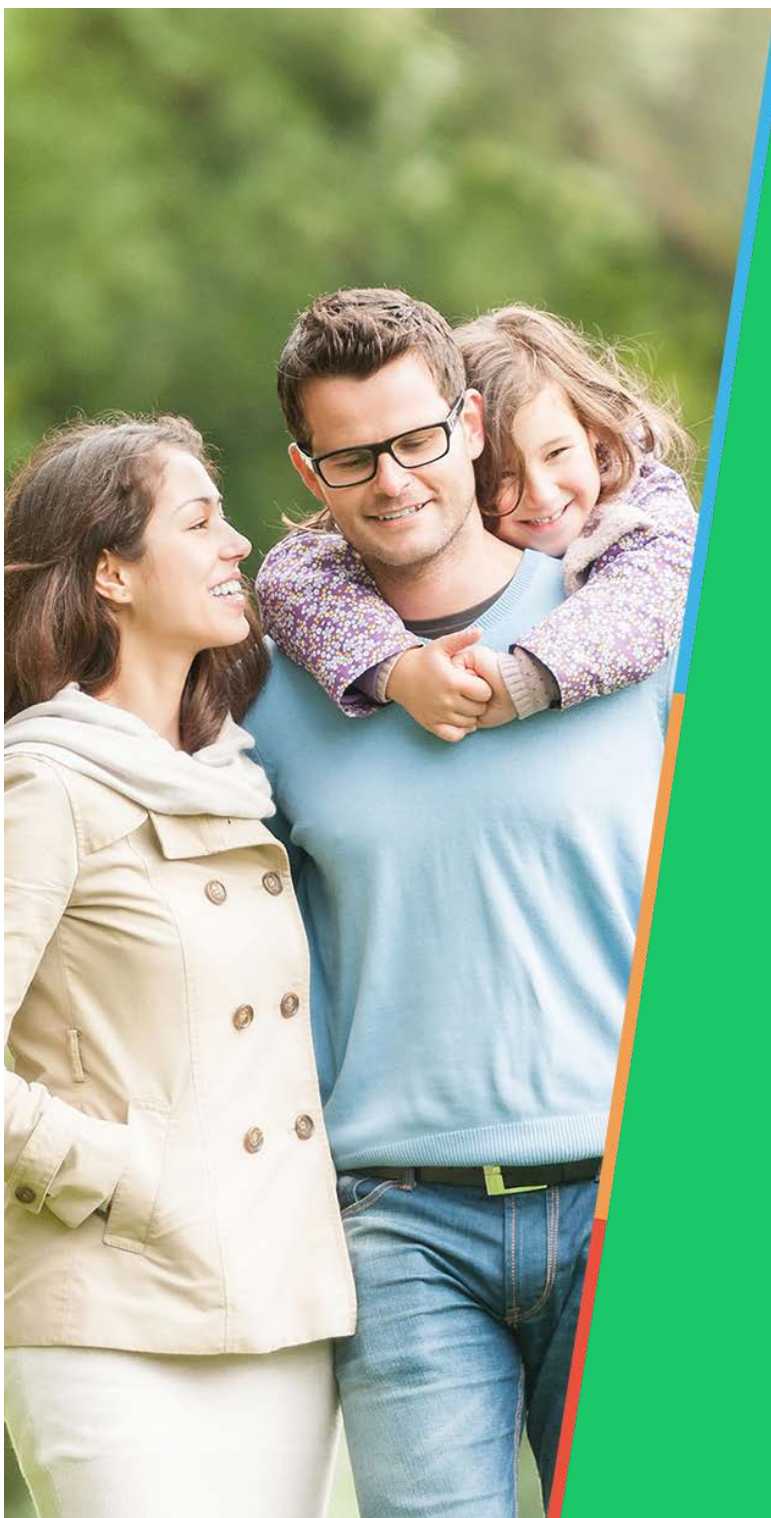
- Provider must register and attend a provider orientation session within 30 days.
- Orientation sessions will be held twice per month. Details will be available at www.georgiacollaborative.com.
- Once the provider orientation is completed, a Letter of Agreement (LOA) will be issued by DBHDD.
- The LOA will be sent to the provider for signature via email.
- Provider must return the signed, original LOA via mail or email to DBHDD
- DBHDD notifies the Collaborative to add the provider to the Network.

Things to Remember

- Services may not be provided without a fully Executed LOA.
- Notification of periodic Provider Meetings will be announced to providers who are expected to attend per LOA.
- Agencies should refer to DBHDD Policy 04-104 Criminal Record Check for Contracted Providers, before staff can work with any individuals.

Additional Services and/or Sites

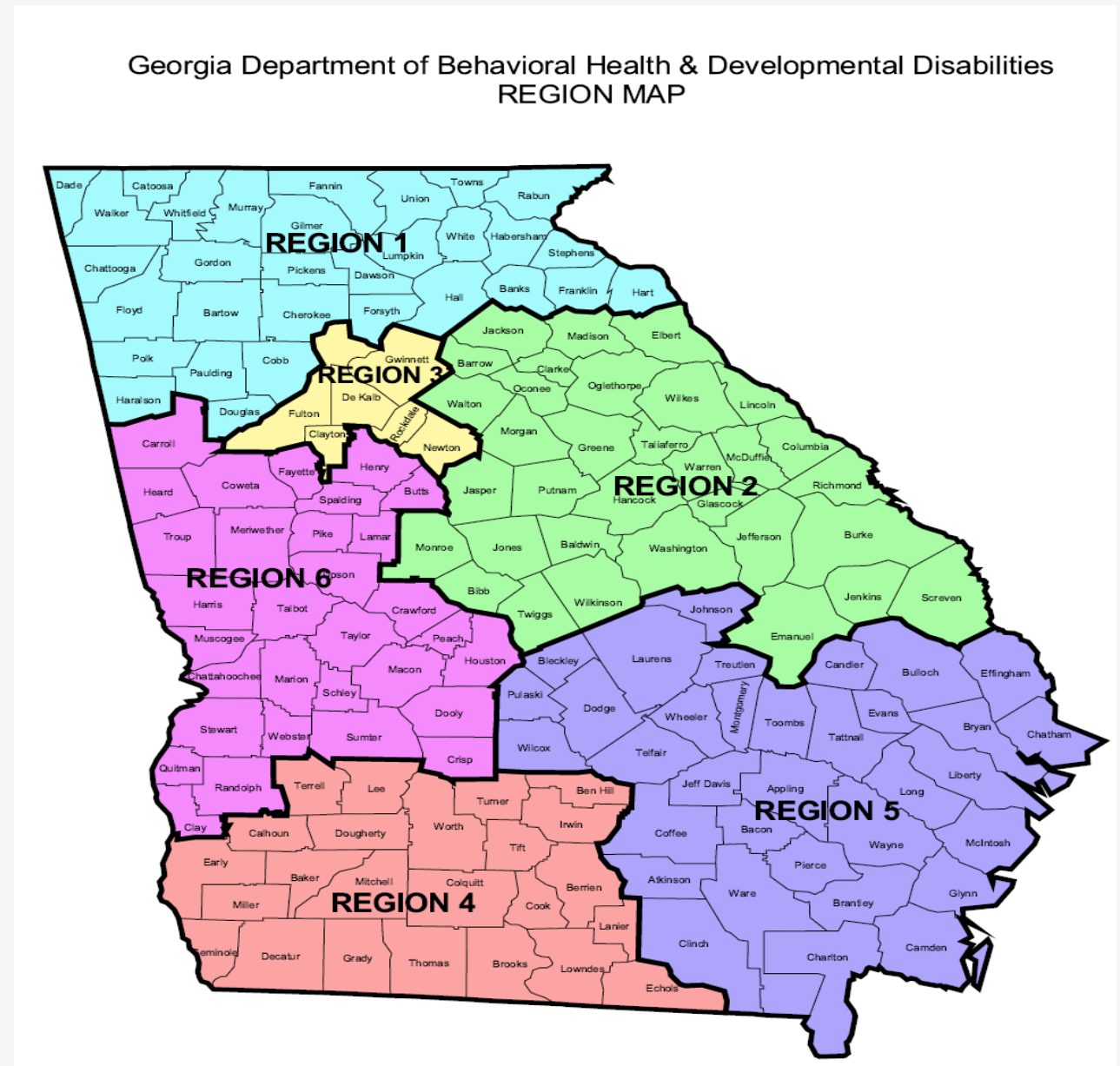
- Providers may request additional services and sites after:
 - They have obtained a score of at least 80% on the two most recent Behavioral Health Quality Reviews
- An application must be submitted for each site and service. Approvals are site and service specific.



DBHDD Regional Field Offices

DBHDD Regional Field Offices Map

- Region 1
Field Office
- Region 2
Field Office
- Region 3
Field Office
- Region 4
Field Office
- Region 5
Field Office
- Region 6
Field Office



Field Offices

DBHDD Region 1 Field Office

RSA – Kimberly Briggs
1230 Bald Ridge Marina
Rd, Suite 800
Cumming, GA 30041
Phone – (678) 947-2818

DBHDD Region 2 Field Office

RSA – Dawn Peel
3405 Mike Padgett Highway,
Bldg. 3
Augusta, GA 30906
Phone – (706) 792-7733

DBHDD Region 3 Field Office

RSA – Gwen Craddieth
3073 Panthersville Rd
Bldg. 10
Decatur, GA 30034
Phone – (404)-244-5077

DBHDD Region 4 Field Office

RSA – Jennifer Dunn
400 S. Pinetree Blvd.
Thomasville, GA 31792
Phone – (229) 225-5099

DBHDD Region 5 Field Office

RSA – Jose Lopez
1915 Eisenhower Dr, Bldg. 2
Savannah, GA 31406
Phone – (912) 303-1670

DBHDD Region 6 Field Office

RSA – Ann Riley
3000 Schatulga Rd
Columbus, GA 31907
Phone – (706) 565-7835

A photograph of two men in business attire. The man on the left is smiling and looking at a smartphone held by the man on the right. The man on the right is wearing glasses and also smiling. They are both looking down at the phone. The background is slightly blurred, suggesting an office setting.

Know Your Resources

Where can I get forms? www.georgiacollaborative.com

Georgia Collaborative ASO x


www.georgiacollaborative.com

Apps For quick access, place your bookmarks here on the bookmarks bar. [Import bookmarks now...](#) Other bookmarks

The Georgia Collaborative ASO Home About Reporting Fraud/Abuse Careers Contact Georgia Crisis & Access Line 1-800-715-4225

Georgia Collaborative ASO

Welcome to the Georgia Collaborative Administrative Services Organization (ASO) website. Working with the Georgia Department of Behavioral Health and Developmental Disabilities' (DBHDD) network of more than 600 providers, the Georgia Collaborative ASO facilitates the delivery of whole-health, person-centered and culturally sensitive supports and services to individuals and their families throughout the state.

 The Georgia Collaborative ASO

For Individuals & Families For Providers

Windows taskbar: 12:55 PM 7/13/2015



The screenshot shows a web browser window with the address bar displaying www.georgiacollaborative.com/providers/providers.html. The website has a blue header with the following navigation links: Home, About, Reporting, Fraud/Abuse, Careers, and Contact. On the left of the header is the logo for The Georgia Collaborative ASO, and on the right is the Georgia Crisis & Access Line logo with the number 1-800-715-4225. Below the header, the main content area features a section titled "Bulletins" with a subtext: "Copies of previously sent provider communications that may impact your practice, such as implementation updates, system downtime, etc... can be found in the [Bulletins](#)' section." Below this is a section titled "Provider Enrollment" which is circled in red. The subtext for this section reads: "Interested in becoming a provider for the Collaborative or need to update your information? Visit our [Provider Enrollment](#) page." Below the "Provider Enrollment" section is a section titled "Provider Information" with the subtext: "For our training calendar, important forms and many other useful tools to aid you in your practice, visit our [Provider Information](#) section." The bottom of the image shows a Windows taskbar with various application icons and a system clock indicating 12:55 PM on 7/13/2015.

Georgia Collaborative ASO

Home About Reporting Fraud/Abuse Careers Contact

Georgia Crisis & Access Line
1-800-715-4225

Bulletins

Copies of previously sent provider communications that may impact your practice, such as implementation updates, system downtime, etc... can be found in the [Bulletins](#)' section.

Provider Enrollment

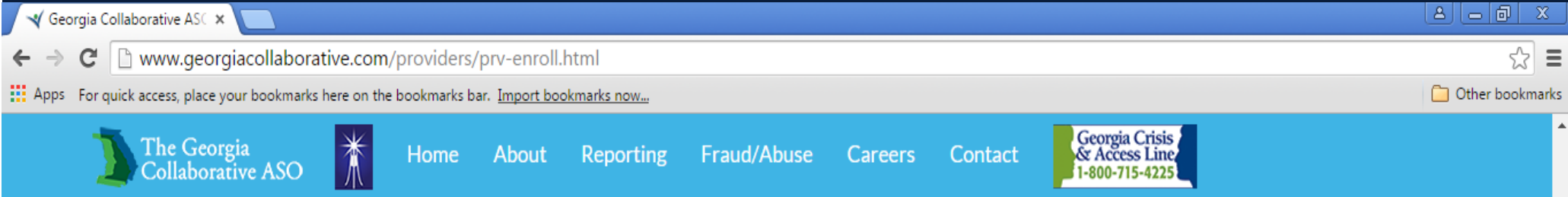
Interested in becoming a provider for the Collaborative or need to update your information? Visit our [Provider Enrollment](#) page.

Provider Information

For our training calendar, important forms and many other useful tools to aid you in your practice, visit our [Provider Information](#) section.

Collaborative ASO

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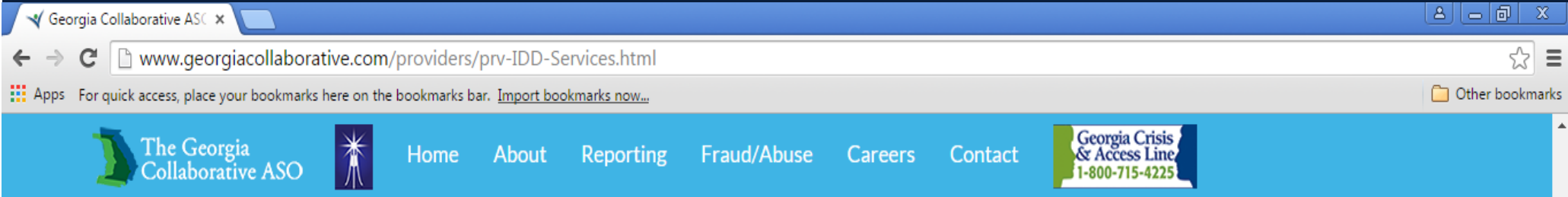
Welcome to the provider application page. Within, you'll find information related to:

- Becoming a new provider
- Continued participation as an existing provider
- How to update your existing DBHDD contract

Please note: The GA Collaborative ASO administers the enrollment process on DBHDD's behalf and all contracting decisions remain with the department. By following the links below, you will find the necessary documents to apply for enrollment consideration in the DBHDD provider network.

[Behavioral Health Services](#)

[Intellectual & Developmental Disabilities Services](#)



New providers wishing to enroll in DBHDD's network are required to attend a Provider Enrollment Forum prior to completing a Letter Of Intent and mailing it to:

GA Collaborative Enrollment
240 Corporate Blvd, Suite 100
Norfolk, VA 23502

Existing DBHDD contracted providers seeking to apply for contracting of new services or locations have a choice and may either mail their completed Application to the address above or email it to:

GA_Enrollment@beaconhealthoptions.com

Provider Enrollment Forms

Georgia Collaborative ASO x

www.georgiacollaborative.com/providers/prv-forms.html#enroll

Apps For quick access, place your bookmarks here on the bookmarks bar. [Import bookmarks now...](#) Other bookmarks

The Georgia Collaborative ASO Home About Reporting Fraud/Abuse Careers Contact Georgia Crisis & Access Line 1-800-715-4225

Provider Enrollment

- Agency Letter of Intent
- Agency Application for New Providers
- Agency Existing Application for Continued Participation
- Individual Provider Letter of Intent
- Individual Application for New Providers

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Reference Materials

- Department of Behavioral Health and Developmental Disabilities, Policy 01-111: Recruitment and Application to Become a Provider of Behavioral Health Services
 - <https://gadbhdd.policystat.com/policy/1574803/latest/>
- Department of Behavioral Health and Developmental Disabilities – Provider Information – Provider Toolkit
 - www.dbhdd.georgia.gov
 - <http://gadbhdd.policystat.com>
- Georgia Department of Community Health/Georgia Health Partnership – Georgia Web Portal
 - www.mmis.georgia.gov

Contact Information

For questions regarding the enrollment process
can be submitted to:

GACollaborative@beaconhealthoptions.com

Application materials and supporting documents can be
submitted to:

GA_Enrollment@beaconhealthoptions.com

Certificates

- Required documentation to complete the LOI process.
- Will be auto-generated and delivered via email within 10 days of completion.
- If you have not received a certificate within 10 days of completion email GACollaborative@BeaconHealthOptions.com
- Evaluations completed after 1/28/2017 will not result in a certificate of attendance as open enrollment is closed 1/31/2017.

Thank you

