



Department of Health Care Services



Behavioral Health Services Transition to Medi-Cal Managed Care

DHCS Stakeholder Advisory Committee Meeting

November 20, 2013

Update on MH implementation efforts

Clear and concise communication and coordination between the County MH programs and the Medi-Cal Managed Care and FFS programs is key

Screening → Assessments → Referrals → Care Coordination → Case Management

County Mental Health Plan (MHP)

Target Population: Children and adults who meet medical necessity or EPSDT criteria for Medi-Cal Specialty Mental health Services

Outpatient Services

- ✓ Mental Health Services (assessments plan development, therapy, rehabilitation and collateral)
- ✓ Medication Support
- ✓ Day Treatment Intensive Services and Day Rehabilitation
- ✓ Crisis Intervention and Crisis Stabilization
- ✓ Targeted Case Management
- ✓ Therapeutic Behavior Services

Residential Services

- ✓ Adult Residential Treatment Services
- ✓ Crises Residential Treatment Services

Inpatient Services

- ✓ Acute Psychiatric Inpatient Hospital Services
- ✓ Psychiatric Inpatient Hospital Professional Services
- ✓ Psychiatric Health Facility services

County Alcohol and Other Drug Programs (AOD)

Target Population: Children and adults who meet medical necessity or EPSDT criteria for Drug Medi-Cal Substance Use Disorder Services

Outpatient Services

- ✓ Outpatient Drug Free
- ✓ Intensive Outpatient (**newly expanded to additional populations**)
- ✓ Residential Services (**newly expanded to additional populations**)
- ✓ Narcotic Treatment Program
- ✓ Naltrexone

New Services

- ✓ (Administrative linkage to County AOD still being discussed)

Medi-Cal Managed Care Plans (MCP)

Target Population: All beneficiaries in Managed Care Plans who meet medical necessity criteria

MCP services to be carved-in effective 1/1/14

- ✓ Individual/group mental health evaluation and treatment (psychotherapy)
- ✓ Psychological testing when clinically indicated to evaluate a mental health condition
- ✓ Outpatient services for the purposes of monitoring medication treatment (Current list of psychotropic medications will continue to be carved-out.)
- ✓ Psychiatric consultation
- ✓ Outpatient laboratory, medications, supplies and supplements
- ✓ Substance Use Screening and Brief Intervention for adults ages 18 and older (target 2014)

Update on MH implementation efforts

MH Benefits: Managed Care Plans

Effective January 1, 2014, eligible Medi-Cal beneficiaries may receive mental health benefits through Medi-Cal Managed Care Plans (MCPs). These services will continue to be offered as FFS benefits for eligible beneficiaries that are not enrolled in an MCP.

- MCP/FFS Mental Health Services:
 - Individual and group mental health evaluation and treatment (psychotherapy)
 - Psychological testing when clinically indicated to evaluate a mental health condition
 - Outpatient services for the purposes of monitoring medication treatment
 - Outpatient laboratory, medications, supplies and supplements
 - Psychiatric consultation
 - Screening and Briefing Intervention (SBI) – target 2014



Update on MH implementation efforts

- **Workgroup Meetings**

- DHCS convened a group comprised of stakeholders, county specialty mental health representatives, and Medi-Cal managed care representatives to discuss issues including:
 - Referral processes
 - Defining the benefit
 - Assessments
 - MOUs
 - Monitoring
 - Dispute resolution
 - Sub-groups were established
 - Group will continue to meet monthly until January 1, 2014 and then quarterly thereafter
-



Update on MH implementation efforts

- **Managed Care**

- Drafted contract language
- Identified plan readiness requirements; will release this week
 - Aligned with DMHC on material modification
- Identified network standards
- Established rates and sent to plans
- Drafted template EOC language
- Drafted MOU requirements
 - Plans will attest by January 1 to what will be included in the MOU
- Drafted All Plan Letters on MH benefit and MOU template; will release by early December



Update on MH implementation efforts

Implementation Activities Ahead For Managed Care Mental Health Benefits

Milestone	Completion/Target Date(s)
1. Submit State Plan/1915b Waiver Amendments to CMS	September 30, 2013
2. Define benefits, eligibility criteria, referral processes and care model	October 4, 2013
3. Submit 1115 Waiver Amendments to CMS (Managed Care)	October 18, 2013
4. Conduct Partner/Stakeholder Meetings and explore efficient and effective strategies to engage Partners/Stakeholders on an ongoing basis to prioritize and deal with recommendations (e.g. including <i>Business Plan</i> , <i>Service Plan</i> and “ <i>parking lot</i> ”)	September - On-going
5. Develop MCP Capitation Rates/ MCP Contract Amendments	September - October 2013
6. MCPs develop networks	October – December 15, 2013
7. Notify Beneficiaries and Providers of benefit changes	November – December 2013
8. DHCS conduct plan readiness reviews	December 2013
9. MCP/Counties execute MOU amendments	December 2013 – June 2014
10. Develop Beneficiary Navigation Tool	Early 2014
11. Additional plan requirements reviews	Early 2014



More information

- E-mail for Questions:
- Managed Care: MMCD.TPGMC@dhcs.ca.gov
- Mental Health and Substance Use Disorder Services: MHSUDStakeholderInput@dhcs.ca.gov