

Mental Health Definitions-mild, moderate and severe

The Department of Health Care Services (DHCS) has been discussing this issue with Medi-Cal Managed Care Plans (MCPs) and Mental Health Plans (MHPs) respectively to help inform the development of clarifying policy guidance on the meaning and application of the term “moderate” as it relates to a beneficiary’s level of mental health impairment and as it guides the delivery system in which a beneficiary should receive mental health services. Currently, there are two efforts underway to support this effort: development of an Information Notice for MHPs and exploration of the feasibility for the Department to draft guidelines for the MCPs and MHPs.

Information Notice

DHCS is in the process of drafting a MHSUDS Information Notice that will provide clarification to MHPs regarding the nature and extent of their responsibility to provide Medi-Cal specialty mental health services (SMHS) to Medi-Cal beneficiaries that meet medical necessity criteria for SMHS, and are enrolled in MCPs. Specifically, the MHSUDS Information Notice will remind MHPs of existing regulatory and contractual requirements that govern the provision of SMHS by MHPs that have not changed as a result of coverage of mental health services by MCPs and the fee-for-services/Medi-Cal (FFS/MC) program.

The MHSUDS Information Notice will clarify that MHPs may only use SMHS medical necessity criteria pursuant to Cal. Code Regs., tit. 9, Chapter 11 to determine if a beneficiary meets medical necessity criteria and requires SMHS and that MHPs may not deny SMHS and refer beneficiaries to the MCP or a FFS/MC provider for mental health services unless the beneficiary does not meet Medi-Cal necessity criteria at Cal. Code Regs., tit. 9, § 1820.205, § 1830.205 and/or § 1830.210. The MHSUDS Information Notice will further state that MHPs may not use alternate criteria as a basis for determining SMHS medical necessity or making referrals to the MCP or a FFS/MC provider, and that for children that are eligible for EPSDT services, the “impairment” criteria for SMHS is much less stringent than it is for adults, i.e., for children eligible for EPSDT services, the covered diagnosis can be corrected or ameliorated by the treatment.

Guidelines

Stakeholders asked DHCS MMCD and MHSD to consider developing guidelines for defining “moderate” mental illness. As such, DHCS MMCD and MHSD have recently begun gathering information from their respective plans to find out how the term “moderate” is currently being defined. DHCS will determine next steps based on the findings of this review.

DHCS continues provide clarification in numerous public venues that SMHS medical necessity criteria has not changed as a result of the new MCP-provided mental health services and that MHP remain responsible for providing medically necessary SMHS to

beneficiaries that meet SMHS medical necessity criteria. At this time, DHCS does not plan to implement or require standardized mental health screening, and/or assessment tools.