Stakeholder Advisory Committee

Medi-Cal Benefit Package for Newly Eligible

May 30, 2013
Medi-Cal Benefit Package for Newly Eligible: Agenda

1. May Revise Summary:
   - Medi-Cal Benefit Package
   - Long-term Care (LTC) Services – with Asset Test
   - Mental Health and Substance Use Disorder (SUD)
     • Current Benefit Packages – same delivery system
     • Enhanced Substance Use Disorder Benefit County Option
   - Pregnant Women and Non-Qualified Immigrants – Medi-Cal Affordability and Benefit Wrap in the Exchange

2. Medi-Cal comparison to Kaiser Small Group
Long-Term Care Services for Newly Eligible

• LTC services will be covered, provided the federal government approves the use of an asset test for accessing these services.

• Those who receive an asset test would remain in the newly eligible coverage category (including enhanced FFP).

• DHCS will work with CMS to apply a separate asset transfer/look back to the new adult group for LTC services based on existing Medicaid rules.
Mental Health and SUD Benefits for Newly Eligible

• Newly eligible individuals will receive the comprehensive benefits currently provided by Medi-Cal, including county-administered specialty mental health services and county-administered substance use disorder services.

• For Mental Health & SUD services this includes:
  – Basic mental health services through Medi-Cal Managed Care Plans PCPs and the Fee-For-Service (FFS) delivery system.
  – Specialty Mental Health (SMH) services through county mental health plans
  – Drug Medi-Cal (DMC) services as currently provided
Enhanced SUD Benefit: County Option

- Counties have the option to provide a standard enhanced substance use disorder benefit package through the Drug Medi-Cal program for both the currently eligible and expansion populations.
  - We’ll talk more about an “enhanced” benefit later in the presentation

- If the counties opt-in, they would agree to pay for the non-federal share of these benefits, using realignment funds, at the applicable sharing ratio.

- Counties would manage these programs through an organized delivery system under a Medicaid Waiver - in place within three years.
Pregnant women with incomes between 100-200% FPL and Newly Qualified Immigrants Present Fewer than Five Years – coverage through Covered California with Medi-Cal “Affordability Wrap:”

- Medi-Cal pays all cost sharing not covered by federal advanced premium tax credits and cost sharing reductions.
- Medi-Cal provides wrap-around benefits for benefits that are covered by Medi-Cal but not covered by Covered California.
1. Essential Health Benefit (EHB) Requirements

2. “Medi-Cal Wrap:”
   1. Covered by Medi-Cal - Not covered by Kaiser Small Group (Covered CA package)

3. “Kaiser Small Group (KSG) Supplement for Medi-Cal”
   Covered by KSG – Not covered by Medi-Cal

4. Covered or Not covered by Both

5. More Detail on SUD, Mental Health, and Applied Behavioral Analysis (ABA)
Essential Health Benefit Requirements and Medi-Cal

- If current Medi-Cal benefit package is used, there is probably no need to supplement to meet EHB requirements, based on proposed federal guidance.
- It is very likely CMS will not require California to add Kaiser Small Group benefits to the Medi-Cal benefit.
- Medicaid programs need to choose one of the 10 EHB plans to compare coverage to the benchmark selection (Secretary-approved is one of these options).
- The proposed rule only requires supplementation when the benchmark selection is *missing* a “category of EHB.”
- Still awaiting final federal guidance with respect to the rules and/or how CMS will ultimately assess whether an EHB category is missing.
- CMS may employ a more specific, benefit-by-benefit comparison and supplementation but that was not included in the January NPRM.
1. Nursing Home Services over 100 Days
2. Personal Care Services (IHSS)
3. Over-the-counter drugs
4. Only hearing aids and tests of hearing aid for efficacy (not hearing tests broadly)
5. Methadone Maintenance – (KSG limits to pregnant/postpartum women)

Optional benefits provided with limits on populations or delivery systems:
1. Acupuncture, Chiropractic, Podiatry
2. Adult Dental Services – Federally Required Adult Dental Services (FRADS); pregnant women provided the full array of dental services.
Covered by KSG – Not Medi-Cal

• Substance Use Disorder Services:
  – Intensive Outpatient Treatment (Day Care Rehabilitation) - for non-pregnant/postpartum beneficiaries
  – Residential Substance Use Disorder Services - for non-pregnant/postpartum beneficiaries
  – Inpatient Detox broadly available (not restricted to physical medical necessity)

• Mental Health – Group Therapy for non Serious Mental Illness

• Applied Behavioral Analysis (behavioral health treatment for pervasive developmental disorder or autism)
  – Outside of the DDS HCBS waiver, and provided by the Regional Centers.

• Only hearing screening and testing services (not hearing aids or hearing aid tests)

• Acupuncture – (for the treatment of nausea or as part of a comprehensive pain management program for the treatment of chronic pain – more broad than M/C)
SUD Comparison: Coverage through Drug Medi-Cal and KSG

1. **Outpatient Drug-free Services**
   - **Medi-Cal**: Covered.
   - **Kaiser Small Group**: Covered.

2. **Intensive Outpatient Treatment (Day Care Rehabilitation)**
   - **Medi-Cal**: Covered but limited to pregnant and postpartum women and full scope youth under the age of 21.
   - **Kaiser Small Group**: Covered.

3. **Residential Substance Use Disorder Services (transitional – covered treatment in a non-medical setting)**
   - **Medi-Cal**: Currently a Drug Medi-Cal benefit, but limited to pregnant and postpartum women.
   - **Kaiser Small Group**: Covered.
4. Methadone Maintenance
   – **Medi-Cal**: Covered.
   – **Kaiser Small Group**: Covered only for pregnant and postpartum women.

5. Other Detoxification
   – **Medi-Cal**: Opioid Detoxification is covered through fee-for-service, outside of Drug Medi-Cal, but with a time limitation of 21 days (additional days permissible under certain conditions).
   – **Kaiser Small Group**: No information – may or may not be covered.

6. Naltrexone for Opioid Dependence
   – **Medi-Cal**: Covered through DMC, including availability of daily individual and group counseling sessions.
   – **Kaiser Small Group**: Not covered; however, Kaiser covers Buprenorphine.
7. Inpatient Detoxification
   – **Medi-Cal**: Covered only when medically necessary for physical health reasons.
   – **Kaiser Small Group**: Covered for medical management of withdrawal symptoms.

8. Other Medication Treatment for Withdrawal Symptoms
   – **Medi-Cal**: Any medication treatments for alcohol or drug dependence not provided through the Drug Medi-Cal are provided through Medi-Cal FFS.
   – **Kaiser Small Group**: Covered.

9. Screening and Brief Interventions (in primary care) and Referral to Treatment
   – **Medi-Cal**: FFS/managed care provides screening for SUD in the primary care and likely required to provide “Brief Interventions” for alcohol misuse to the Newly Eligible.
   – **Kaiser Small Group**: Provides screening for SUD. If positive, the individual is referred to the Kaiser SUD program. Kaiser does not cover “Brief Interventions.”
10. **Long Term Care Recovery Supports**

These are a broad set of longer term care management services to support the ongoing sobriety of the client and prevent relapse, with a flexible service intensity level depending upon the needs of the client. Services may include engagement, self-management supports, and counseling.

- **Medi-Cal**: Not covered.
- **Kaiser Small Group**: No information – may or may not be covered.
Based stakeholder recommendations, DHCS is considering these enhanced benefits:

1. **Intensive Outpatient Treatment**: Currently a DMC benefit, but limited to pregnant and postpartum women, children, and youth under the age of 21. This could be opened up for the general adult population.

2. **Residential Substance Use Disorder Services**: Currently a DMC benefit, but limited to pregnant and postpartum women. This could be opened up for the general adult population.

3. **Recovery Supports**: These are a broad set of longer term care management services to support ongoing sobriety of the client and prevent relapse. Currently, Medi-Cal provides the Rehabilitation Option for eligible mental health clients through Medi-Cal specialty mental health.

4. **Opioid Detoxification**: Currently a Medi-Cal benefit through fee-for-service, outside of DMC, but with a time limitation of 21 days. This could be allowed, in addition, through DMC for a longer time period of up to 6 months, which is the maximum allowed by federal regulation.

5. **Alcohol Detoxification**: This could be made available as an elective benefit in outpatient settings.
Mental Health Services
- Group and Individual Therapy
- Inpatient Psychiatric Hospitalization
- Intensive Psychiatric Treatment Programs
- Medication Support
  - **Medi-Cal**: Individual therapy and medication support are covered broadly through FFS Medi-Cal. Services are covered by county MHPs for SMI or SED individuals meeting medical necessity criteria.
  - **Kaiser Small Group**: Covered

Applied Behavioral Analysis (ABA) Services
- **Medi-Cal**: Services available only through the DDS HCBS waiver, and provided by the Regional Centers.
- **Kaiser Small Group**: Covered.
Contact Information

Brian.Hansen@dhcs.ca.gov
916-440-7400
www.dhcs.ca.gov