DHCS Behavioral Health Forum
Integration Forum

July 21, 2014
1:30 to 2:30 p.m.
Agenda

I. Welcome and Introductions

II. Integration Forum Documents

III. Announcements and Project Updates
   a. Stakeholder Engagement
   b. SBIRT Trainings
   c. Monitoring Effectiveness of MHP/MCP MOUs
   d. Dissemination of Best Practices
   e. Development of Provider Networks

IV. Stakeholder Discussion

V. Next Steps
Behavioral Health Forum Leads

Karen Baylor, Ph.D., Deputy Director
Mental Health and Substance Use Disorder Services
Department of Health Care Services

Brenda Grealish, Chief
Mental Health Services Division
Department of Health Care Services

Dina Kokkos-Gonzales, Chief
Policy and Program Quality Assurance Branch
Mental Health Services Division
Department of Health Care Services

Marjorie McKisson, Special Advisor
Substance Use Disorder Services
MHSUD Deputy Director’s Office
Department of Health Care Services

Sarah Brooks, Chief
Medi-Cal Managed Care
Department of Health Care Services

Rob Maus, Chief
Program and Fiscal Policy Branch
Substance Use Disorder Services
Department of Health Care Services

Lanette Castleman, Chief
Program Oversight and Compliance Branch
Mental Health Services Division
Department of Health Care Services

Gary Renslo, Chief
Fiscal Management and Outcomes Reporting
Mental Health Services Division
Department of Health Care Services

Rachelle Weiss, Chief
Office of Applied Research and Analysis
Substance Use Disorder Services
Department of Health Care Services

Liana Lianov, M.D., Senior Medical Consultant
Medi-Cal Managed Care
Department of Health Care Services
KEY FORUM DOCUMENTS
Revised Stakeholder Issues Grid

• DHCS reviewed stakeholder feedback and made revisions to the grid structure:
  – Removed duplication and consolidated issues
  – Separated distinct issues that were grouped under a single heading
  – Added category themes to each issue
  – Moved issues to appropriate Forum, if indicated
  – Created a “Fiscal” Forum

• DHCS prioritized issues and converted the issues grid into Forum Charters for the current Fiscal Year (2014/2015)
Prioritization of Issues

• DHCS identified critical areas to be addressed during this fiscal year’s Behavioral Health Forum (FY2014/2015)
• FY 14/15 priorities have been included on Forum Charters
• Other issues will be prioritized as needed
Prioritization Criteria

• Improves access and/or quality of services for a large group of beneficiaries
• Promotes effectiveness and/or efficiency of services (without impacting outcomes in a negative way)
• Assures or promotes judicious use of funds/resources
• Aligns with DHCS Strategic Plan, Quality Strategy, and Prevention Strategy
• Required by state or federal laws and regulations
DHCS BEHAVIORAL HEALTH FORUM

STAKEHOLDER — CONSUMER / FAMILY MEMBER
“OPEN TO ALL” STAKEHOLDER FORUMS (Frequency TBD)

MEMBERSHIP:
- CMHDA & CADPAAC
- CSAC
- MHSOAC
- CA MH Plann
- Managed Care
- Other key DHCS areas of jurisdiction
  (E.g. Elig./Benefits, Financing, Med. Dir., Health Care Del. Sys. etc.)

DHCS – PARTNERS BEHAVIORAL HEALTH SERVICES STEERING COMMITTEE
KAREN BAYLOR
MHSUD DEPUTY DIRECTOR
CHAIR

STRENGTHEN SPECIALTY MENTAL HEALTH AND DRUG MEDICAL COUNTY PROGRAMS AND DELIVERY SYSTEMS FORUM
CHAIRS
MHSUD – DINA KOKKOS-GONZALEZ
SUD-CD– MARJORIE MCKISSON

DEVELOP A COORDINATED AND INTEGRATED SYSTEM OF CARE FOR MHSUD AND MEDICAL CARE FORUM
CHAIRS
MHSD – LANETTE CASTLEMAN
SUD-PTRSD– ROB MAUS
MMCD – LIANA LIANOV, MD

CREATE COORDINATED AND USEFUL DATA COLLECTION, UTILIZATION & EVALUATION OF OUTCOMES FORUM
CHAIRS
MHSD – GARY RENSLO
SUD-PTRSD – RACHELLE WEISS

FISCAL FORUM TBD
CHAIRS TBD

• Recommend prioritization of issues and work plan tasks
• Recommend policy and program actions
• Invite participation from other DHCS as well as other areas of jurisdiction (e.g. Managed Care, Benefits, Office of the Medical Director etc.)
• Invite Steering Committee members and/or stakeholders to meetings and/or solicit review and comment as needed
• Invite Legislative staff to meetings and/or solicit review and comment
• Report out as needed (internally and externally)

Version 7/18/14
This forum will focus on issues related to the new and expanded interaction between the county mental health plans, county alcohol and other drug programs, MH & SUD providers, and the managed care plans in order to more effectively integrate the delivery of mental health, substance use and primary care services.

Goal is to develop a coordinated and integrated system between these delivery systems and benefits.

In many cases, this forum will interact with red (strengthening), blue (data), and yellow (fiscal) forums due to overlaps in particular areas.
Background and Purpose

• To provide key stakeholders, and other interested parties, with updates regarding critical policy and programmatic issues impacting public mental health and substance use disorder services (MHSUDS) and Medi-Cal Managed Care (MMC).
Objectives

• Identify barriers and possible solutions to coordination and integration of managed care, mental health and substance use disorder services

• Promote and identify best practices and key principles of integrated care throughout the state

• Identify user-friendly mechanisms to disseminate, maintain and update resources and case studies
Objectives (cont’d)

• Present best service models and delivery system design to support co-occurring disorders, managed care, mental health and substance use disorder services

• Help to ensure workforce development issues around coordinated and integrated care are addressed by the forum

• Provide recommendations for fiscal incentives, as well as addressing financing and billing barriers within integrated care models
FY14/15 Priority Areas

- Stakeholder involvement
- SBIRT training
- Dispute resolution process
- Monitoring MOUs
- Screening, assessment, and referral processes
- Quality improvement dashboard
- Sharing best practices
- Ombudsman services
- Exploring solutions for physical, mental, and SUD provider network adequacy and coordination
ANNOUNCEMENTS AND PROJECT UPDATES
Announcements and Project Updates

• Stakeholder Engagement
• SBIRT Status and Trainings
• Monitoring Effectiveness of Mental Health Plan/Managed Care Plan Memorandums of Understanding (MOUs)
  – Dispute Resolution Workgroup
• Dissemination of Best Practices
• Development of Provider Networks
Announcements and Project Updates

• SBIRT Overview and Importance
  – Alcohol abuse is associated with morbidity and one of the leading causes for mortality. Early identification and intervention reduces alcohol-related health consequences.
  – In 2013, the USPSTF recommended that clinicians screen adults age 18 years or older for alcohol misuse and provide persons engaged in risky or hazardous drinking with brief behavioral counseling interventions to reduce alcohol misuse.
  – One of the ACA goals is to increase quality and efficiency of care by integrating behavioral and physical health elements of care.
  – SBIRT is an evidence-based benefit that models integration and coordination of screening, early intervention, and treatment into a system of care. This system links physical care, social services and specialty treatment programs.
Announcements and Project Updates

- **SBIRT Status and Trainings**
  - Effective January 1, 2014, California offers an Alcohol Screening, Brief Intervention and Referral to Treatment (SBIRT) benefit in primary care settings to all Medi-Cal beneficiaries, 18 years and older
  - SBIRT website
    - Website has been up and running since January 2014
    - Improving website look and making more user friendly
    - Adding a screening tool for adolescents and a SBIRT toolkit.
  - Developing SBIRT FAQ to address ongoing questions received by DHCS.
Announcements and Project Updates

• SBIRT Status and Trainings
  – Provide face-to-face trainings
    • During SBIRT webinars offered by DHCS, providers and their leaders expressed a strong desire for more in-depth face-to-face SBIRT trainings.
    • DHCS secured funding and is executing a contract with the UCLA Integrated Substance Abuse Program (ISAP) and Harbage Consulting to provide face-to-face trainings that fulfill DHCS training requirements.
    • Between August 2014 and May 2015 30 trainings will be scheduled across the State. A minimum of 1,500 PCPs and other providers are expected to be trained.
Announcements and Project Updates

• SBIRT Status and Trainings
  – Opportunity for Stakeholder Involvement
    • Stakeholders are welcome to provide input through this Behavioral Health Forum.
    • Low-cost venues for SBIRT trainings that can hold more than 50 participants are still needed. Contact the email below if you can host a training.
    • Questions specific about trainings can be addressed to Efrat Eilat at Efrat.Eilat@dhcs.ca.gov
Announcements and Project Updates

- Monitoring Effectiveness of Mental Health Plan/Managed Care Plan Memorandums of Understanding (MOUs)
  - Effective working relationships between MCPs and MHPs is crucial to assure quality care.
  - MCPs and MHPs need agreement to cover key areas, for example screening/assessment results, appropriate level of care, care coordination, timely information exchange, warm hand-offs.
Announcements and Project Updates

• Monitoring Effectiveness of Mental Health Plan/Managed Care Plan Memorandums of Understanding (MOUs) (cont.)
  – Executed MOUs were due June 30, 2014.
  – About 12 executed MOUs and 3 unexecuted MOUs have been received to date, and 11 extensions have been requested.
  – DHCS will send follow-up communications about the overdue MOUs.
  – The MOUs are being reviewed to assure they include the 10 topic areas listed in the MOU template of the All Plan Letter 13-018.
  – MCPs and MHPs will be asked to address any areas that were not mentioned in the MOUs.
Announcements and Project Updates

- Monitoring Effectiveness of Mental Health Plan/Managed Care Plan Memorandums of Understanding (MOUs) (cont.)
  - DHCS will convene regional calls in 2015 with MCPs and MHPs to share lessons learned for effective MOU implementation.
  - MCPs and MHPs involved in Cal MediConnect (Coordinated Care Initiative or Dual Demonstration) have a longer experience in coordinating behavioral health services and will be asked to share best practices.
  - Stakeholders can provide input through Behavioral Health Forum; the Forum will provide updates on the status of MOUs implementation
  - Input on specific MOUs should be provided to the local MCP and MHP
STAKEHOLDER DISCUSSION
Future Meeting Dates

Please mark your calendars as the Behavioral Health Forums will next be meeting:

- October 2, 2014
- January 9, 2015
- April 2, 2015
Contact Information

Behavioral Health Forum Stakeholder Website:
http://www.dhcs.ca.gov/provgovpart/Pages/MH-SUD-UpcomingMeetings.aspx

Please e-mail questions, comments or concerns to:
MHSUDStakeholderInput@dhcs.ca.gov