Department of Health Care Services

Behavioral Health Treatment (BHT) Services

Stakeholder Webinar
Tuesday, March 24, 2016
1:00 p.m. – 2:30 p.m.

Welcome

Today's Presenters:

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Health Care Delivery Systems

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Health Care Benefits & Eligibility

Today's Presentation

- Welcome
- Updates:
  - Medi-Cal State Plan Amendment 14-026
  - BHT Transition Plan
  - Continuity of Care
  - Monitoring
  - Transition Process
  - Medi-Cal BHT Services
- Next Steps
- Questions and Responses

http://www.dhcs.ca.gov/services/medi-cal/Pages/BehavioralHealthTreatment.aspx

Medi-Cal State Plan Amendment (SPA)

- SPA 14-026 was formally submitted to the Centers for Medicare and Medicaid Services (CMS) on September 30, 2014.
- Stakeholder comments relating to the SPA included:
  - Eligibility Criteria: CDE required
  - Provider Participation Criteria: per H&S Code Section 1374.73
  - Utilization Controls: PA for treatment not less than 180 days, with exceptions
  - Delivery System for Services: Regional Centers and Managed Care
- SPA was formally approved by CMS on January 26, 2016.
- 1915(c) Developmentally Disabled Waiver Amendment
  - Waiver amendment not required
  - Waiver renewal March 2017

SPA, cont.: BHT Services

- BHT services may be administered by California State Plan approved providers.
- BHT services are provided under a behavioral treatment plan that has measureable goals over a specific timeline for the specific beneficiary being treated and developed by a qualified autism service provider as defined by Health & Safety Code Section 1374.73(c) (3).
- BHT services must be provided, observed and directed under an approved behavioral treatment plan.
- BHT services, such as Applied Behavior Analysis and other evidence-based behavioral intervention services, prevent or minimize the adverse effects of autism spectrum disorder and promote, to the maximum extent practicable, the functioning of a beneficiary.
- BHT services include behavioral interventions, cognitive behavioral intervention package, comprehensive behavioral treatment for young children, language training, modeling, natural teaching strategies, parent/guardian training for individual or groups for the direct benefit of the child, peer training package, pivotal response training, schedules, scripting, self-management, social skills package, story based intervention and coordination of care.

BHT Transition Plan

- The transition of 1915(c) waiver BHT services from the Regional Centers to state plan BHT services from Medi-Cal managed care plans began **February 1, 2016.**
  - **Counties with ≤100 beneficiaries** began transition of all beneficiaries at once on February 1
  - **Counties with >100 beneficiaries** started the transition on February 1 by the beneficiary's birth month over a period of 6 months
  - **Los Angeles County** will transition beneficiaries by Regional Center over a period of 6 months
- The transition of 1915(c) waiver BHT services from Regional Centers to State Plan BHT services for Medi-Cal Fee-for-Service (FFS) beneficiaries is administrative only and occurred on **February 1, 2016**.
- DHCS and DDS staff continue to meet to facilitate the transition.

Continuity of Care

The MCP must enter into a continuity of care agreement for up to 12 months when:

1) The beneficiary has a pre-existing relationship[1] with the provider;

2) The plan and the provider can agree to a minimum of the Medi-Cal FFS rate;

3) The provider meets professional standards and has no quality of care issues;

4) The provider is a State Plan approved provider as defined in Health & Safety Code § 1374.73; and

5) Documents (i.e., assessment and treatment plan) are provided to the Plan by the provider to facilitate continuity of care

[1] Defined in All Plan Letter 15-025 as having seen the out-of-network BHT provider at least one time during the six months prior to transitioning responsibility of BHT services from the Regional Center to the MCP, or the date of his or her initial enrollment in the MCP if enrollment occurred on, or after, September 15, 2014.

Monitoring 1/3

- DHCS has completed readiness reviews of all plans, which included reviews of:
  - Staff training plan
  - Policies and procedures
  - Member informing materials
  - Continuity of care procedures
  - BHT transition plans
  - Subcontract boilerplates
- DHCS has certified all health plan provider networks to validate that each health plan has the capacity to serve anticipated utilization rates.
  - Networks were certified with the Center for Medicare and Medicaid Services (CMS).
  - Network certification requirements are outlined in CFR 438.206, 438.207, and 438.214.

Monitoring 2/3

- Additionally, DHCS has implemented communication processes throughout all of the transitional phases:
  - For the first few weeks of the transition, the contract managers have had daily check-ins with their assigned MCPs to provide guidance and assistance
  - Weekly calls are held with the MCPs
  - Weekly calls are held with the Department of Developmental Services (DDS)
  - Biweekly calls are held between the MCPs and Regional Centers
  - Weekly internal meetings with the management team

Monitoring 3/3

- DHCS also conducts enhanced monitoring of health plans during transitions.
- The following data is collected on a monthly basis during the initial phase of the transition then will be evaluated to continue quarterly:
  - Provider networks capacity changes
  - Continuity of care approvals and denials
  - Authorized hours by provider type
  - Services provided by age
  - Number of hours to complete an assessment
  - Grievances and appeals
  - Call center data related to BHT
  - Health plan outreach and education call campaign
- Other monitoring indicators that are utilized include:
  - Ombudsman data
  - State Fair Hearings data
  - DMHC's Independent Medical Review (IMR) data
  - Secret shopper calls/quality assurance surveys

Transition Process

- To facilitate continuity of care, DHCS provides a list of transitioning beneficiaries and claims data to the MCPs prior to transition.
- Beneficiaries will only be allowed to transition when either a continuity of care agreement is in place with the Regional Center provider or a treatment plan has been obtained and the beneficiary has been assigned to an in-network provider.
- As such, some beneficiaries have had their transition roll forward to the following month in order to ensure that the MCPs have the treatment information they need to continue to provide the same level of BHT services so that there are no gaps in care.

Medi-Cal BHT Services

(through March 2016)

Fee-for-Service BHT Services

Beneficiaries Receiving BHT Services *After* Transition[1]		1,759

Managed Health Care Plan (MCP) BHT Services

Beneficiaries Receiving BHT Services *Before* Transition[2]		4,260
Beneficiaries Receiving BHT Services *After* Transition[3]		2,566
	Total	6,826
Increase Since February 1st, 2016 Transition		↑60%

MCP Continuity of Care (COC)

Statewide Percentage of Transitioned Beneficiaries Receiving COC[4]	90%

MCP BHT Provider Network

Statewide Total of MCP Provider Network[5]	35,974
Increase Since February 1st, 2016 Transition	↑7%

[1] FFS beneficiaries transitioned on February 1, 2016
[2] Beneficiaries presenting to MCPs for BHT services as of September 15, 2014
[3] Beneficiaries transitioned from the Regional Centers to MCPs as of February 1, 2016
[4] Beneficiaries receiving BHT services through current Regional Center provider as of February 1, 2016
[5] Includes all State Plan approved BHT provider types in the MCP's network

Next Steps

- **BHT 15-16 Rate Development for Managed Care Plans**
- **Managed Care Plan Contract Amendments**

References

- BHT Transition Plan
  www.dhcs.ca.gov/services/medi-cal/Documents/BHT_Transition_Plan_Final.pdf
- LA County Transition Plan
  www.dhcs.ca.gov/services/medi-cal/Documents/LA_County_Transition_Plan_Final.pdf
- Transition Schedule
  www.dhcs.ca.gov/services/medi-cal/Documents/BHT_Transition_Rollout_Schedule_final.pdf
- FAQs
  www.dhcs.ca.gov/services/medi-cal/Documents/BHT_FAQ.pdf

Questions and Responses

If you have questions contact DHCS at:

Email Address:

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