July 9, 2012

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SUBJECT: Invitation to Provide Public Comment – DRAFT Initial Plan Implementing the ACA in California: Transitioning the Low Income Health Program to ACA Coverage Options

On behalf of the California Mental Health Directors Association (CMHDA), which represents the directors of public mental health authorities in counties throughout California, I am writing to communicate our perspective on the *DRAFT Initial Plan Implementing the ACA in California: Transitioning the Low Income Health Program to ACA Coverage Options* that would impact California's community mental health system.

California's local recovery and rehabilitation-focused mental health system plays an integral and essential role in California's public healthcare delivery system. Effective partnership and collaboration with county mental health will make available to beneficiaries a wide variety of comprehensive, high quality, rehabilitative and targeted case management services. Increasing access to effective outpatient and crisis stabilization services provides an important opportunity to reduce costs associated with expensive inpatient and emergency room care, and to better meet the needs of individuals with mental illness in the least restrictive manner possible.

It is imperative that the state recognize the complexity of California's current mental health delivery system, and does not underestimate the valuable role that counties play in managing risk and financing critical services for Medi-Cal and the Low Income Health Program (LIHP) Medi-Cal expansion beneficiaries – particularly the counties' role in managing full risk for inpatient, outpatient and long-term psychiatric care for California's Medi-Cal and the LIHP Medi-Cal coverage expansion beneficiaries.

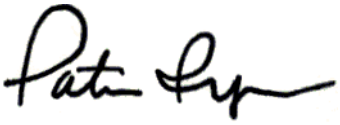
<u>Continuity of Care (Page 4)</u>
Developing strategies to create protections for all LIHP enrollees – including those with special transition needs – through the transition from LIHP to Medi-Cal coverage is essential. As witnessed in the recent transition of Seniors and Persons with Disabilities from fee-for-service Medi-Cal to Medi-Cal managed care, ensuring appropriate continuity of care is critical to mitigate unintended and devastating disruptions in emergency, hospital and outpatient care. Given the unique needs of enrollees with serious and persistent mental illness, CMHDA strongly urges the Department to ensure that any final continuity of care strategies include strategies to

mitigate negative outcomes or disruption in currently covered health and mental health care, including medications, in this coverage transition.

Process for Assuring Adequate Primary Care and Specialty Provider Supply (Page 7)
According to the draft plan, DHCS will assess comparability of LIHP and Medi-Cal provider networks, and will ensure adequate provider supply to maintain compliance with access to care standards after the transition. CMHDA strongly urges the Department to consider the unique needs of enrollees with specialty mental health service needs and the current role that counties play in this process. In particular, CMHDA would refer to Special Terms and Conditions (STCs) 67 and 68 of California's Section 1115(a) Waiver Bridge to Reform Demonstration. According to the STCs, the state will be required to submit to CMS for approval a detailed plan outlining the steps and infrastructure necessary to meet requirements of a benchmark plan, and ensure strong availability of behavioral health services statewide no later than 2014. CMHDA recommends that the Department consider aligning the existing mental health coverage requirements of the STCs, in particular STC 68, with the broader coverage transition plan, to ensure continuity of care and that the unique needs of enrollees with specialty mental health service needs are integrated into all components of the transition plan.

Thank you for your continued commitment to and leadership in California's community mental health system. We welcome the opportunity to discuss our comments and work collaboratively with the Department to further strengthen the draft plan. If you have any additional questions, please do not hesitate to contact me directly at pryan@cmhda.org or Molly Brassil at mbrassil@cmhda.org.

Sincerely,



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