Screening & Transition of Care Tools Technical Assistance Webinar March 29, 2023



Housekeeping



Participants are in listen only mode.



Please submit questions via the Q&A function.



Live closed captioning is available. Please find the link in the Chat.



The webinar slides will be posted to the DHCS CalAIM webpage soon.

Welcome & Introductions

- » Alexandria Simpson, Medi-Cal Behavioral Health Policy Division, California Department of Health Care Services
- Jesse Raynak, Medi-Cal
 Behavioral Health Policy Division,
 California Department of Health
 Care Services

Continuous Coverage Unwinding

- » The continuous coverage requirement will end on March 31, 2023, and Medi-Cal members may lose their coverage.
- » Medi-Cal redeterminations will begin on April 1, 2023, for individuals with a June 2023 renewal month.
- » **Top Goal of DHCS:** Minimize member burden and promote continuity of coverage.
- » How you can help:
 - Become a DHCS Coverage Ambassador
 - Join the DHCS Coverage Ambassador mailing list to receive updated toolkits as they become available
 - Check out the <u>Medi-Cal COVID-19 PHE and Continuous Coverage Unwinding Plan</u> (Updated January 13, 2023)

Continuous Coverage Unwinding Communications Strategy

- » On February 8, 2023, DHCS launched the Medi-Cal renewal campaign, a broad and targeted public information, education, and outreach campaign to raise awareness among Medi-Cal members about the return of Medi-Cal redeterminations when the continuous coverage requirement ends on March 31, 2023. The campaign will complement the efforts of the <u>DHCS Coverage</u> <u>Ambassadors</u> that was launched in April 2022.
- Download the <u>Phase 2 Toolkit</u> that focuses on Medi-Cal renewals and customize for your use.
- Direct Medi-Cal members to the newly launched <u>KeepMediCalCoverage.org</u>, which includes resources for members to update their information and find their local county offices. It will also allow them to sign up to receive email or text updates from DHCS.



- » Background
- » Guidance & FAQs
- » Case Examples
- » Next Steps
- »Q&A



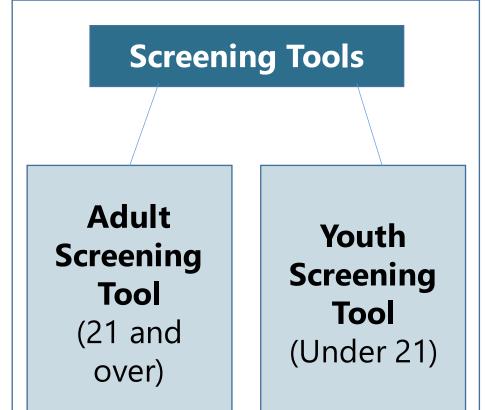
Background

- Previously, multiple mental health screening and transition tools were in use for Medi-Cal beneficiaries across the state, which led to inconsistencies around when and how beneficiaries were referred to county networks and managed care plan networks.
- » To streamline this process and improve patient care, DHCS developed standardized Screening and Transition of Care Tools for Medi-Cal Mental Health Services.

Statewide implementation of the initiative began on January 1, 2023.

Adult and Youth Screening Tools for Medi-Cal Mental Health Services

- The Adult and Youth Screening Tools for Medi-Cal Mental Health Services determine the appropriate delivery system for beneficiaries who are not currently receiving mental health services when they contact the Medi-Cal Managed Care Plan (MCP) or county Mental Health Plan (MHP) seeking mental health services.
- Distinct Screening Tools have been developed for Adults ages 21 and over and Youth under age 21.



Transition of Care Tool for Medi-Cal Mental Health Services (Adult and Youth)

- The Transition of Care Tool for Medi-Cal Mental Health Services supports timely and coordinated care for individuals currently receiving mental health services. This tool is used when completing a transition of services to the other delivery system (i.e., MCP to MHP or MHP to MCP) or adding a service from the other delivery system.
- » A single Transition of Care Tool has been developed for all beneficiaries, including Adults and Youth.

Transition of Care Tool (Adults and Youth)

Guidance & Frequently Asked Questions



Guidance & FAQs

- In late December, DHCS released <u>APL 22-028</u> and <u>BHIN 22-065</u> to provide aligned guidance on Screening and Transition of Care Tools.
- In late February, DHCS released Frequently Asked Questions (FAQs) to provide additional clarity and guidance on:
 - » Purpose of Tools
 - » Requirement for Use of Tools
 - » Tool Administration
 - » Scoring

- » Referrals
- » Translation
- » Compliance
- Suidance and FAQs are available on the <u>Screening and Transition of Care</u> <u>Tools for Medi-Cal Mental Health Services webpage</u>.

Topics for Review

- >> When and how to use each tool
- >> Specific topics related to the Screening Tools, including:
 - » Using the tool word for word
 - » Meaning of the screening score
 - » Administrator disagreement with the screening score
 - » Rescreening
 - » Screening score v. assessment outcome

Screening Tools: Notable Requirements

When to Administer

- » The Screening Tools are <u>required</u> for use by MCPs and MHPs when individuals contact the MCP or MHP seeking mental health services.
- » The Screening Tools are *not required* for use:
 - » With beneficiaries who are currently receiving mental health services, or
 - » When individuals contact providers directly seeking mental health services.

How to Administer

- » The Screening Tools <u>can be</u> administered by clinicians or non-clinicians and in a variety of ways (e.g., by phone, or in person) or formats (e.g., PDF or EHR).
- » The specific order and wording of questions *cannot be* altered.

Screening Tools: Notable Requirements (continued)

Following Administration

- » After administration of the Screening Tools, individuals <u>must be</u> referred to the appropriate Medi-Cal mental health delivery system based on their score.
- » Once an individual is referred to the MCP or MHP, they <u>must</u> receive a timely, clinical assessment and medically necessary services.
- » MCPs and MHPs *must* coordinate to facilitate referrals.

Transition of Care Tool: Notable Requirements

When to Administer

- » <u>Required</u> for use by MCPs and MHPs when an individual needs their care transitioned to, or services added from the other mental health delivery system.
- » <u>Not required</u> for use when referring an individual for services within the same delivery system.

How to Administer

- » The determination to transition and/or add services <u>must be</u> made by a clinician.
- » Once a determination is made, the Transition of Care Tool <u>can be</u> completed by clinicians or non-clinicians and in a variety of formats.
- » The specific order and wording of fields *cannot be* altered.

Transition of Care Tool: Notable Requirements (continued)

Following Administration

- » After the Transition of Care Tool is completed, the individual <u>must be</u> referred to their MCP or MHP.
- » MCPs and MHPs <u>must</u> coordinate to facilitate transitions of care and addition of services from the other delivery system to ensure the referral process has been completed.

Q: Are the Screening Tools and Transition of Care Tool intended to be used together?

A: No. The Screening Tools and the Transition of Care Tool are distinct tools with distinct purposes. The Screening Tools are for when individuals who are not currently receiving mental health services contact an MCP or an MHP to be connected to services. The Transition of Care Tool is for individuals who are currently receiving mental health services from either the MCP or MHP, and who need their services transitioned from one Medi-Cal mental health delivery system to the other, or who need services added to their treatment from the other Medi-Cal mental health delivery system.

Q: Are those administering the Screening Tools able to deviate from the specific wording if they are asked to clarify a question?

A: Questions in the Screening Tools must be asked in full using the specific wording provided in the tool and in the specific order the questions appear in the tools, to the extent that the individual is able to respond. There may be instances where the person administering the screening is asked to clarify a question for the individual to be able to respond. As part of the implementation of the Screening Tools, MCPs and MHPs are expected to train staff on approaches to respond to requests for clarification that are aligned with the intent of the question(s) and existing internal policies.

Q: What does the Screening Tools score determine?

A: The Screening Tools each include a scoring methodology based on responses to the tools' questions. The score generated by the Screening Tools determines whether the individual will be referred to the MCP or the MHP for clinical assessment. The screening score does not determine level of care or which services are medically necessary. These determinations are made during clinical assessment and clinically appropriate services may be provided during the assessment period, as described in in APL 22-005 and BHIN 22-011.

Q: What if the person administering the Screening Tool disagrees with the screening score? Are MCPs and MHPs required to adhere to the delivery system referral indicated by the screening score?

A: Individuals must be referred to the appropriate Medi-Cal mental health delivery system (i.e., the MCP or the MHP) for a clinical assessment based on their screening score. The Screening Tools are designed for administration by both non-clinicians and clinicians and do not require clinical judgment to be administered. Once referred to the MCP or MHP, the individual will receive a clinical assessment that will determine the level of care and medically necessary services.

Q: Are MCPs and MHPs allowed to re-screen individuals if they feel they were not scored appropriately?

A: No. Once an individual is referred to an MCP or MHP after using the Screening Tools, the receiving MCP or MHP may not re-screen individuals. If an individual is referred to an MCP or MHP based on the score generated by administration of the Screening Tool, the MCP or MHP must ensure the individual receives timely access to care, including a timely clinical assessment in alignment with existing standards and medically necessary services.

Q: What if an individual is referred to the MCP or MHP based on their screening score, but their subsequent clinical assessment indicates that they belong in the other delivery system?

A: While the Screening Tools are intended to direct individuals to the most appropriate delivery system for clinical assessment and medically necessary services, there may be instances when the clinical assessment (which captures additional information) reveals that the individual should receive services in the other delivery system. In these cases, the determination of level of care and medically necessary services from the clinical assessment would take priority over the delivery system referral indicated by the screening score.

[answer continued on next slide]

Frequently Asked Question (Cont'd)

Q: What if an individual is referred to the MCP or MHP based on their screening score, but their subsequent clinical assessment indicates that they belong in the other delivery system?

A: If the clinical assessment indicates the individual should receive services in the other delivery system, the MCP or MHP would use the Transition of Care Tool to facilitate a transition of care to the other mental health delivery system. As part of this process, the MCP or MHP must coordinate with the other mental health delivery system, including ensuring that the referral process has been completed, the individual has been connected with a provider in the new system, the new provider accepts the care of the individual, and medically necessary services have been made available to the individual.





Case Example 1: MHP/MCP Required Use of Screening Tools

- MCP/MHP Access Line handles all calls from individuals seeking services.
- A mix of staff conduct the screening (administrative and licensed professionals), in accordance with the order and wording of the tool and coordinate referrals as indicated by score.
- Following the screening, staff collect additional demographic details to facilitate the referral, including a contact phone number.

- MCP/MHP must administer the Screening Tools to all individuals who contact them seeking services.
- MCP/MHP can utilize **non-clinical and/or clinical staff** to administer the Screening Tools.
- MCP/MHP must follow order and wording of the Screening Tools.
- Workflows should be aligned to avoid requesting duplicative information.

Case Example 2: MHP/MCP Required Use of Screening Tools

- MCP/MHP Access Line collects basic demographic information from all callers, including name, language, purpose of the call, and call back number.
- Callers seeking mental health services are then routed to a clinician.
- The clinician confirms the individuals name, which has already been collected, and proceeds with the remainder of the screening and coordination of the referral indicated by the screening score.

- MCP/MHP must administer the Screening Tools to all individuals who contact them seeking services.
- MCP/MHP can utilize non-clinical and/or clinical staff to administer the Screening Tools.
- MCP/MHP must follow order and wording of the Screening Tools.
- Workflows should be aligned to avoid requesting duplicative information.

Case Example 3: MHP/MCP Required Use of Screening Tools

- MCP/MHP Access Line routes all callers seeking mental health services to a clinician.
- The clinician conducts the screening and bills the activity as an assessment.
- If the screening score indicates a referral to the other delivery system, they complete the Transition of Care Tool and refer the individual.

- MCP/MHP must administer the Screening Tools to all individuals who contact them seeking services.
- MCP/MHP can utilize non-clinical and/or clinical staff to administer the Screening Tools.
- X The Screening Tool is **not an assessment** and cannot be billed as such.
- X The Transition of Care Tool should not be used to refer individuals after a screening. The Transition of Care Tool is for those currently receiving services.

Case Example 4: MHP/MCP Required Use of Screening Tools

- MCP/MHP Access Line routes all callers seeking mental health services to a clinician.
- The clinician conducts the screening and asks additional questions to further assess the individual's needs.
- The clinician uses their judgement and determines the individual should be referred to a delivery system inconsistent with their screening score.

- MCP/MHP can utilize non-clinical and/or clinical staff to administer the Screening Tools.
- X MCP/MHP cannot deviate from or add questions to the screening tool.
- X Individual **must be referred in accordance with their screening score**. Once referred, the individual then receives an assessment.

X MCP/MHP cannot override the screening score even if a clinician is administering the tool.

Case Example 5: MHP/MCP Required Use of Transition of Care Tool

- A psychologist within the MCP network believes a patient they are seeing may benefit from medication.
- The psychologist follows MCP policies for in-network referrals to refer the patient to an MCP psychiatrist for additional consultation.

 The Transition of Care Tool is not required when referring an individual for services within the same delivery system.

Case Example 6: MHP/MCP Required Use of Transition of Care Tool

- An MHP clinician has determined that a patient's care should be transitioned to the MCP.
- Their medical assistant completes the Transition of Care Tool form and sends it to the MHP along with several attachments with additional clinical details.
- The MHP gives the patient contact information for the MCP and tells them to reach out to the MCP if they don't hear anything in a few days.

- ✓ Whether to transition/add services must be determined by a clinician.
- The Transition of Care Tool form may be completed by clinicians or nonclinicians.
- X MCP/MHP **must ensure the referral process has been completed**, including that the individual has been connected with a provider in the new system, the provider accepts the care of the beneficiary, and medically necessary services have been made available.

Next Steps

Next Steps

- » Additional Technical Assistance & FAQs
 - Additional FAQs will be released on rolling basis and will be available on the <u>Screening and Transition of</u> <u>Care Tools webpage</u>
 - Information on additional TA support is forthcoming
- » Translation
 - DHCS is working to develop translations of the Screening Tools
 - Additional details are forthcoming





Questions?

- » If you have additional questions, please e-mail DHCS at: <u>BHCalAIM@dhcs.ca.gov</u> and/or <u>MCQMD@dhcs.ca.gov</u>
 - Subject Line "Screening and Transition of Care Tools"

Thank You



