PERFORMANCE OUTCOMES SYSTEM

FOR

MEDI-CAL SPECIALTY MENTAL HEALTH SERVICES
FOR CHILDREN AND YOUTH

Stakeholder Advisory Committee

Department of Health Care Services
December 10, 2013

Welcome

- Welcome back to our Stakeholder Advisory Committee

- Welcome to our new team members
  - **Karen Baylor,** Deputy Director, Mental Health and Substance Use Disorder Division
  - **Brenda Grealish,** Division Chief, Mental Health Services
  - **Gary Renslo,** Branch Chief, Fiscal Management and Outcomes Reporting Branch
  - **Jennifer Taylor,** Section Chief, Mental Health Analytics
  - **Minerva Reyes,** Research Program Specialist, MH Analytics
  - **Sarah Brooks,** Branch Chief, Medi-Cal Managed Care Branch

AGENDA

1. Welcome and Introductions
2. Purpose & Overview of Legislation
3. Continuum of Care
4. Questions
5. Overview of System Plan
6. Questions
7. System Implementation Plan
8. What's Next
9. Public Comment

Asking Questions

In person:

Please wait for the microphone

On the call:

The operator will give you the opportunity to speak

Or

Submit your questions via the Chat function

Overview of The Law Welfare & Institutions Code (WIC) 14707.5

Purpose

- To develop a Performance Outcomes System for Medi-Cal Specialty Mental Health Services for Children and Youth that will:

  - **Improve outcomes at the individual and system levels**
  - **Inform fiscal decision making related to the purchase of services**

Overview of The Law (continued)

Objectives

- Achieve high quality and accessible mental health services for children and youth

- Provide information that improves practice at the individual, program, and system levels

- Minimize costs by building upon existing resources to the fullest extent possible

- Collect and analyze reliable data in a timely fashion

Overview of The Law (continued)

Timeline and Deliverables:

- No later than October 1, 2013, DHCS will provide a plan for the Performance Outcomes System, including milestones and timelines, to all fiscal committees and appropriate policy committees of the Legislature

- No later than January 10, 2014, DHCS will propose how to implement the Performance Outcomes System plan

June 2013 Amendment, Section (e)

- Establishes continuum of care efforts as part of the Performance Outcomes System

- Builds the bridge between managed care plans and county Mental Health Plans in accordance with California's implementation of the Affordable Care Act

Continuum of Care

Section (e) of the legislation

- Develop methods to routinely measure, assess, and communicate program information linking Medi-Cal eligible beneficiaries to mental health services and support.

- Review health plan screenings for mental health illness, health plan referrals to Medi-Cal fee-for-service providers, and health plan referrals to county Mental Health Plans, among others.

- Make recommendations regarding performance outcome measures that will contribute to improving timely access to appropriate care for Medi-Cal eligible beneficiaries.

Dates in the Legislation

I. Convene a stakeholder advisory committee no later than February 1, 2014 – we are early!

II. Update the System Plan no later than October 1, 2014

III. Update the System Implementation Plan no later than January 10, 2015

New Benefit Overview

Mental Health Benefits: Managed Care Plans

Effective January 1, 2014, eligible Medi-Cal beneficiaries may receive mental health benefits through Medi-Cal Managed Care Plans (MCPs). These services will continue to be offered as FFS benefits for eligible beneficiaries that are not enrolled in an MCP.

- **MCP/FFS Mental Health Services:**
  - Individual and group mental health evaluation and treatment (psychotherapy)
  - Psychological testing when clinically indicated to evaluate a mental health condition
  - Outpatient services for the purposes of monitoring drug therapy
  - Outpatient laboratory, drugs, supplies and supplements
  - Psychiatric consultation

Update on MH Implementation Efforts

Key Implementation Activities Ahead For Managed Care Mental Health Benefits

Milestone	Status/Target Date(s) (if not completed)
1. Submit State Plan/1915b Waiver Amendments to CMS	September 16, 2013
2. Define benefits, eligibility criteria, referral processes and care model	October 4, 2013
3. Submit 1115 Waiver Amendments to CMS (Managed Care)	October 18, 2013
4. Conduct Partner/Stakeholder Meetings and explore efficient and effective strategies to engage Partners/Stakeholders on an ongoing basis to prioritize and deal with recommendations (e.g. including *Business Plan*, *Service Plan* and "*parking lot*")	September - On-going
5. Develop MCP Capitation Rates/ MCP Contract Amendments	September - November 2013
6. MCPs develop networks	October – December 2013
7. Notify Beneficiaries and Providers of benefit changes	November – December 2013
8. DHCS conduct plan readiness reviews	November 15 – December 31
10. MCP/Counties execute MOU amendments	November 2013 – June 2014
11. Develop Beneficiary Navigation Tool	Early 2014

Update on MH and SUD Implementation Efforts

DHCS

Clear and concise communication and coordination between the County MH/SUD programs and Medi-Cal Managed Care and FFS programs is key

Screening → Assessments → Referrals → Care Coordination → Case Management

County Mental Health Plan (MHP)	County Alcohol and Other Drug Programs (AOD)	Medi-Cal Managed Care Plans (MCP)
Target Population: Children and adults who meet medical necessity or EPSDT criteria for Medi-Cal specialty mental health services	**Target Population**: Children and adults who meet medical necessity or EPSDT criteria for Drug Medi-Cal Substance Use Disorder Services	**Target Population:** Children and adults in Managed Care Plans who meet medical necessity or EPSDT for Mental Health Services **(with the exception of SBIRT)**

County Mental Health Plan (MHP)

Outpatient Services
- ✓ Mental Health Services (assessments plan development, therapy, rehabilitation and collateral)
- ✓ Medication Support
- ✓ Day Treatment Services and Day Rehabilitation
- ✓ Crisis Intervention and Crisis Stabilization
- ✓ Targeted Case Management
- ✓ Therapeutic Behavior Services

Residential Services
- ✓ Adult Residential Treatment Services
- ✓ Crises Residential Treatment Services

Inpatient Services
- ✓ Acute Psychiatric Inpatient Hospital services
- ✓ Psychiatric Inpatient Hospital Professional services
- ✓ Psychiatric Health Facility services

County Alcohol and Other Drug Programs (AOD)

Outpatient Services
- ✓ Outpatient Drug Free
- ✓ Intensive Outpatient **(newly expanded to additional populations)**
- ✓ Residential Services **(newly expanded to additional populations)**
- ✓ Narcotic Treatment Program
- ✓ Naltrexone

New Services
- ✓ Inpatient Detoxification Services
- ✓ (Administrative linkage to County AOD still being discussed)

Medi-Cal Managed Care Plans (MCP)

MCP services to be carved-in effective 1/1/14
- ✓ Individual/group mental health evaluation and treatment (psychotherapy)
- ✓ Psychological testing when clinically indicated to evaluate a mental health condition
- ✓ Outpatient services for the purposes of monitoring medication treatment
- ✓ Psychiatric consultation
- ✓ Outpatient laboratory, medications, supplies and supplements
- ✓ **Screening, Brief Intervention and Referral to Treatment (SBIRT)**

# Update on MH Implementation Efforts

- Workgroup Meetings
  - DHCS convened a time-limited group comprised of Association representatives, county Mental Health Plan representatives, and Medi-Cal Managed Care representatives to discuss immediate Managed Care, Mental Health and county Alcohol and Drug plan operational issues including:

    - Referral processes
    - Defining the benefit
    - Assessments
    - MOUs
    - Monitoring and metrics
    - Dispute resolution
  - Sub-groups were established
  - Group is being expanded to include other key stakeholders

Update on Managed Care MH Implementation Efforts

- Managed Care
  - Drafted contract language
  - Identified plan readiness requirements; released to plans
    - Aligned with DMHC on material modification
  - Identified network standards
  - Established rates and sent to plans
  - Drafted template EOC language
  - Drafted MOU requirements
    - Plans will attest by January 1 to what will be included in the MOU
  - Drafted/Released All Plan Letters on MH benefit and MOU template

QUESTIONS
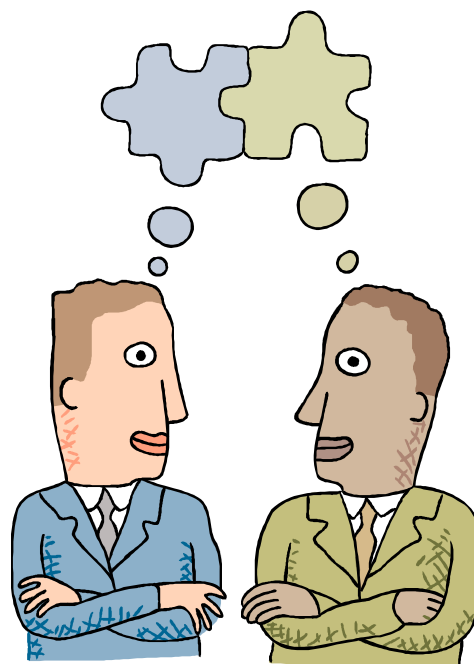
System Plan Overview

PEOPLE

- **Stakeholder/Partner Involvement**
  - **Stakeholder Advisory Committee**
  - **Subject Matter Expert Workgroup**
  - **Measures Task Force**
  - **Information Technology/Data Workgroup**
  - **Quality Improvement**

DATA

- **Current DHCS Systems**
  - **Short Doyle Medi-Cal (SDMC) Claim System**
  - **Client and Services Information (CSI) System**
  - **Web-Based Data Collection Reporting System – Consumer Perception Surveys**
  - **Data Collection and Reporting (DCR) System**
  - **Management Information System/Decision Support System (MIS/DSS)**

TECHNOLOGY

- **Assess current information technology**
- **Consider broader needs for the system represented by other evaluation efforts**

System Plan Overview

Background

- Include: History of Major California Performance Outcomes Measurement Initiatives

Evidence-based Models for Performance Outcomes Systems

- National Evaluation Efforts
- State Evaluation Efforts
- County Evaluation Efforts

System Plan Overview (cont.)

Development of System Plan	• Stakeholder/Partner Involvement • Evaluation Methodology • Reporting • Continuous Process for Quality Improvement
Dependencies	• Standardization • Data Systems' Capacity and Data Quality • Overall Collaboration
Preliminary Framework for System	• Conceptual Framework: The Performance Measurement Paradigm • Performance Outcomes System Domains

Levels

Individual Youth/Family Level
Outcomes and results for those who
receive direct mental health services.

Provider/Program Level
Outcomes and results for those individuals
or groups who provide direct mental health services to the individual
youth/family level.

Mental Health System/State Level
Outcomes and results for those individuals or groups who provide
the infrastructure support to the provider level.

Public/Community Level (new)
Outcomes and results for all; both those who do not receive direct
mental health services as well as those who do. (Broader vision)

Community

System

Provider

Individual
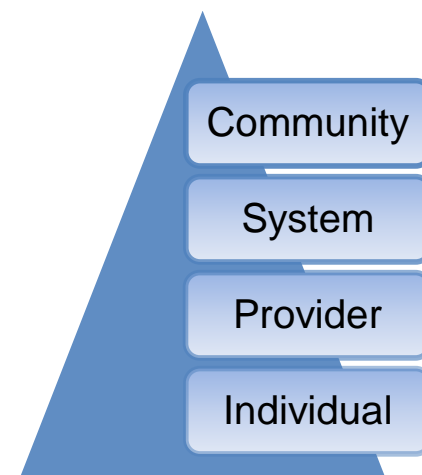
Domains

- **Original Domains**
  - Access
  - Engagement
  - Service Appropriateness to Need
  - Service Effectiveness
  - Linkages

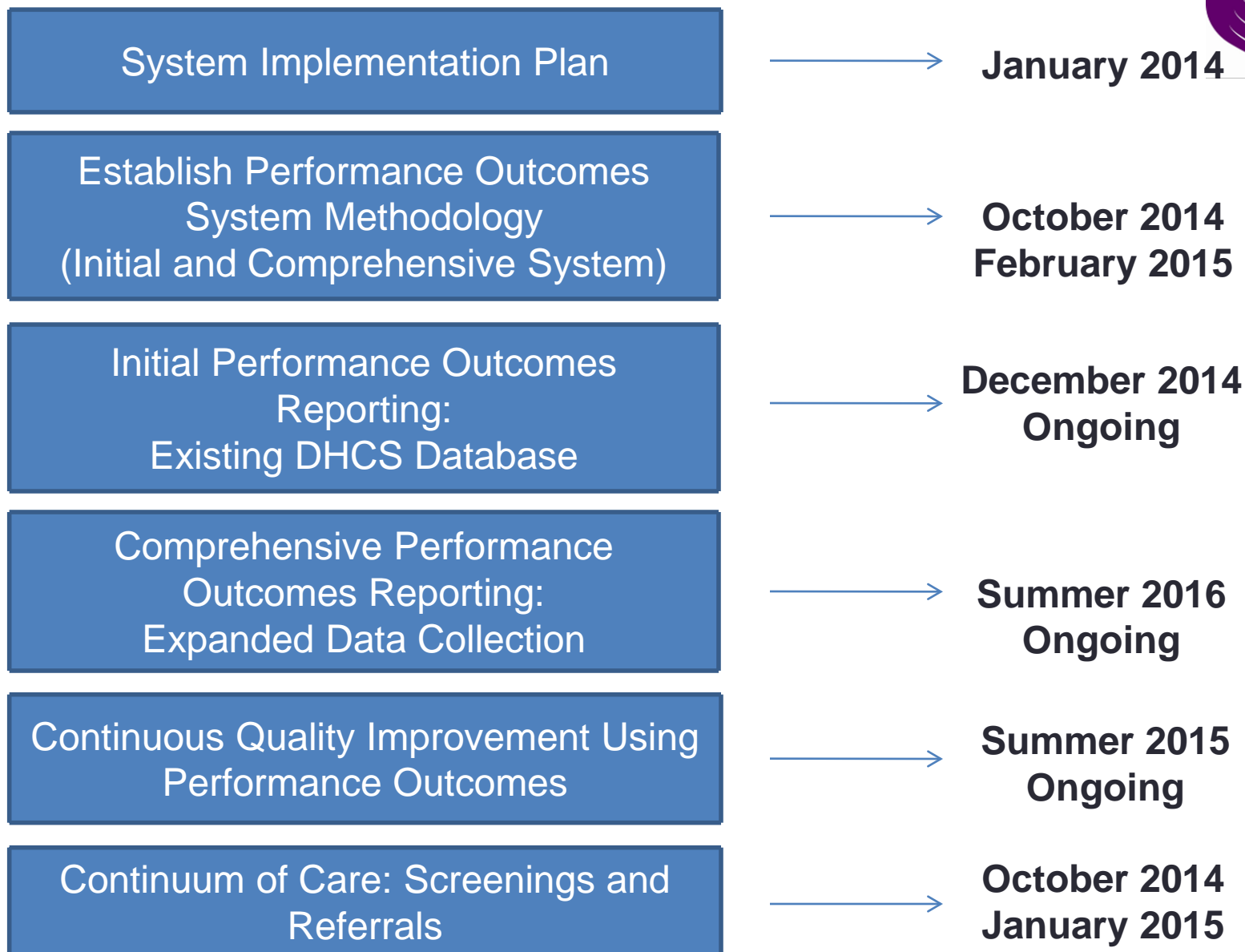- **Additional Domains**
- **Cost-Effectiveness**
  - Cost-Effectiveness is measuring whether the dollars invested have produced the best outcomes possible.
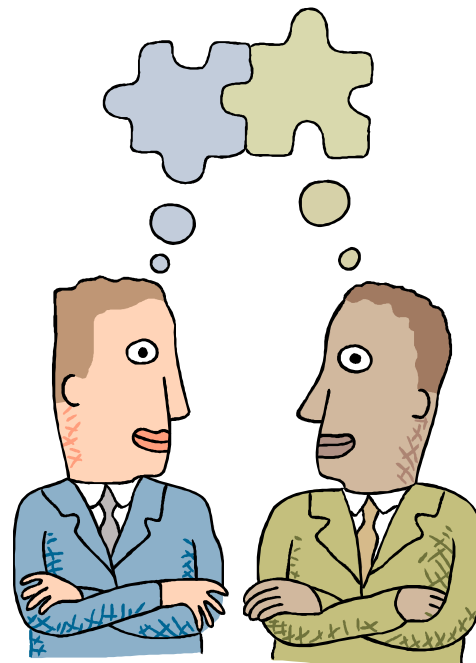- **Satisfaction**
  - Satisfaction is the perception that the child/youth's needs are being met. A sample domain category is the integration and coordination of care.

High-Level Timeline

System Implementation Plan	→ January 2014
Establish Performance Outcomes System Methodology (Initial and Comprehensive System)	→ October 2014 February 2015
Initial Performance Outcomes Reporting: Existing DHCS Database	→ December 2014 Ongoing
Comprehensive Performance Outcomes Reporting: Expanded Data Collection	→ Summer 2016 Ongoing
Continuous Quality Improvement Using Performance Outcomes	→ Summer 2015 Ongoing
Continuum of Care: Screenings and Referrals	→ October 2014 January 2015

QUESTIONS

System Implementation Plan

I. System Methodology

II. Initial Performance Outcomes Reporting: Existing DHCS Databases

- **Identify variables**
- **Evaluate data integrity (DHCS) / Data quality (Counties)**
- **Develop report templates / Reports**

III. Comprehensive Performance Outcomes Reporting: Expanded Data Collection

- **Identify variables and data collection tools**
- **Coordinate county and DHCS data management**
- **Collect & test expanded data**
- **Modify reports**

System Implementation Plan (cont.)

IV. Continuous Quality Improvement

- Develop QI Process

  - **Data quality feedback**

  - **Practice improvement**

  - **Technical assistance**

  - **Establish QI Committee**

V. Risks and Barriers

  - **Data**
  - **Systems**
  - **Resources**
  - **Resistance to Change**

Comments Form

Performance Outcomes System Plan Comments Form

Please use this document to capture your comments by page and section.

Email your comments to cmhpos@dhcs.ca.gov by December 16, 2013.

Page Number	Section	Reviewer Name	Suggested Changes/Comments
[Enter Page # of System Plan]	[Enter Section Name of System Plan]	[Enter your name]	[Enter comments: be specific, provide the wording you suggest]

Next Steps

- ❑ Stakeholder Review Period for System Implementation Plan
  - • **November 27 through December 16, 2013**

- ❑ Submission of System Implementation Plan to Legislature
  - • **January 10, 2014**

- ❑ Stakeholder Meeting – Updates on Performance Outcomes System and Continuum of Care Progress
  - • **Spring 2014**

- ❑ Stakeholder Meeting – Evaluation Methodology and Continuum of Care System Plan
  - • **July 2014**

Stakeholder Activities

❑ All Stakeholders
- Review the System Plan

- Provide feedback on System Implementation Plan

- Receive periodic project updates

❑ Counties
- Continue to make data submissions current

PUBLIC COMMENT

Performance Outcomes System for Medi-Cal Specialty Mental Health Services for Children and Youth

THANK YOU FOR YOUR PARTICIPATION…

The System Implementation Plan and Comments Form are available here:

http://www.dhcs.ca.gov/individuals/Pages/PerformanceandOutcomesSystemforMedi-CalSpecialtyMentalHealthServices-StakeholderAdvisoryCommittee.aspx

Send comments/feedback/suggestions to cmhpos@dhcs.ca.gov by December 16, 2013