

# Behavioral Health Workgroup Medical Necessity Discussion Questions 12/20/19



## Medical Necessity Criteria

For this discussion, please review Section 3.8 Medical Necessity Criteria for Specialty Mental Health and Substance Use Disorder Services (pages 74-79) of the [CalAIM Proposal](#).

1. Does DHCS' proposal to amend medical necessity criteria for outpatient and inpatient specialty mental health services effectively improve access, eliminate barriers to care, reduce variability across delivery systems, and otherwise align with the goals of CalAIM? If not, what changes are needed to address identified gaps? What else should DHCS consider?
2. What are your recommendations regarding the specific amendments DHCS should make to the medical necessity criteria for outpatient SMHS?
3. What are your recommendations regarding the specific amendments DHCS should make to the medical necessity criteria for inpatient SMHS?
4. Does DHCS' proposal to amend medical necessity criteria for substance use disorder services effectively improve access, eliminate barriers to care, reduce variability across delivery systems, and otherwise align with the goals of CalAIM? If not, what changes are needed to address identified gaps? What else should DHCS consider?
5. What are your recommendations regarding the specific amendments DHCS should make to the medical necessity criteria for substance use disorder services?

## No Wrong Door for Children and Youth

6. How should DHCS operationalize the "no wrong door" approach for children/youth for accessing mental health services?
7. What are your recommendations to strengthen care coordination between the counties and Medi-Cal managed care plans?

## Standardizing Level of Care Assessment Tools

1. What factors should DHCS consider when selecting a level of care assessment tool for SMHS for children/youth? Do you have a recommendation regarding a specific tool(s)?

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2. What factors should DHCS consider when selecting a level of care assessment tool for adults? Do you have a recommendation regarding a specific tool(s)?
3. What are your recommendations about how to standardize, across delivery systems, screening and/or assessment procedures for mental health services? Should Medi-Cal managed care plans utilize the same standardized assessment tool selected for the SMHS delivery system?
4. What are your recommendations regarding the identification of high-risk characteristics that would act as assessment “over-rides”? How should DHCS incorporate a consideration of ACES for determining medical necessity for SMHS?
5. Should a beneficiary’s need for a specific service or services, which are not covered by both the MCP and SMHS delivery systems (e.g., Intensive Care Coordination, Day Treatment Intensive), drive delivery system determinations?
6. What factors should DHCS consider when standardizing an ASAM Criteria tool for DMC-ODS?

### **Next Behavioral Health Workgroup Meeting**

1. What research and/or deliverables should DHCS prepare for the next meeting?