

# CalAIM Justice Behavioral Health Readiness Assessment Office Hours II

March 13, 2024

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<b>VISUAL</b>	<b>SPEAKER – TIME</b>	<b>AUDIO</b>
Slide 1	Alice Keane – 00:00:15	Hello, and welcome. My name is Alice and I'll be in the background answering any Zoom technical questions. If you experience difficulties during this session, please type your question into the Q&A. We encourage you to submit written questions at any time during the presentation using the Q&A function, which should be located at the bottom of your screen. With that, I'd like to introduce Lawana Welch, section chief of the Justice Involved Reentry Service Oversight section.
Slide 1	Lawana Welch – 00:00:43	Hello, good morning. Welcome, and thank you for joining us today for our second office hour session focused on the recently released Behavioral Health Readiness Assessment template. We hosted a session on February 22nd to provide an overview of the template and answer preliminary questions from county behavioral health agencies that were in attendance at that time. This is a follow-up to that meeting.
Slides 1	Lawana Welch – 00:01:11	We recently finalized the Behavioral Health Agency Readiness Assessment template, which all county behavioral health agencies must submit before going live with their Behavioral Health Links as part of the CalAIM Justice Involved Initiative. The readiness assessment was released via email on February 27th and will be posted to our website shortly. Next slide.
Slide 2	Lawana Welch – 00:01:43	Today's agenda will repeat some of the key portions of the last presentation for those agencies that were unable to attend, then spend most of the time responding to your questions about the template and submission process now that you've hopefully had some time to review the final template in advance of today's meeting. Before we get started, just a reminder, you can submit questions at any point during the webinar using our Q&A box at the bottom of your screen. We'll be collecting those questions throughout the presentation and we'll respond to them during the second half of the meeting. Now I'll hand it over to my team member Cassie Ceja, to go over the Justice Involved Initiative and Behavioral Health Links.

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<b>VISUAL</b>	<b>SPEAKER – TIME</b>	<b>AUDIO</b>
Slides 3-4	Cassie Ceja – 00:02:28	Good morning. As Lawana mentioned, I'll be going over the Behavioral Health Links. Next slide, please. Behavioral Health Links are one component of the Justice Involved Initiative. Behavioral links were created under penal code section 401-11.11. To implement a process requiring correctional facilities to facilitate referrals to county special mental health services, Drug Medi-Cal, the Drug Medi-Cal organized delivery system and/or Medi-Cal managed care plans for incarcerated members who received behavioral health services while incarcerated to allow for the continuation of behavioral health treatment. Next slide.
Slide 5	Cassie Ceja – 00:03:12	Behavioral Health Links promote continuity of treatment for individuals who received behavioral health services. While incarcerated, DHCS will require correctional facilities to facilitate referrals to post-release behavioral health providers and to share information with the individual's health plan. Behavioral Health Links will be implemented by correctional facilities, county behavioral health agencies, and managed care plans. These entities must implement links to behavioral health providers to achieve behavioral health care initiation or continuity through professional-to-professional clinical handoffs.
Slide 5	Cassie Ceja – 00:03:48	Processes for facilitated referrals and links to continued behavioral health treatment and the community for individuals who receive behavioral health services while incarcerated. Behavioral Health Links will be facilitated by county behavioral health agencies, pre-release care managers, and correctional facilities, including referrals and professional-to-professional clinical handoffs for individuals exiting incarceration to county behavioral health plans, including county managed health plans and/or DMC/DMCODS. For individuals with non-specialty mental health needs. Links will be made to medical managed care plans or fee-for-service providers. Now I'll be handing it off to my colleague, Jill Michel.

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VISUAL	SPEAKER – TIME	AUDIO
Slide 6	Jill Michel – 00:04:40	Hello, all. I'm really happy to be here today and happy that we're going to be able to answer questions, as I come off the video screen. There we go. I'm going to be talking about Behavioral Health Agency Readiness Assessment requirements and processes. Hopefully, you are able to see all of this when you looked at the readiness assessment before. So, all county health... Please change slides. Oops. Next slide.
Slide 7	Jill Michel – 00:05:08	All county behavioral health agencies are required to submit a readiness assessment demonstrating readiness to participate in Behavioral Health Links. All behavioral health agencies must receive DHCS approval prior to going live with the BH link services. The BH Agency's readiness assessment consists of attestations and narrative responses across six focus areas. The first is data sharing, pre-release planning, professional-to-professional clinical handoff, follow-up post-release, Medi-Cal billing, and over it all program and initiative oversight.
Slide 7	Jill Michel – 00:05:49	For each attestation, behavioral health agency should indicate if they meet the requirement currently, if they are on track to meet the requirement by October 1st, or if the agency is not on track to meet the requirements and is in need of TA from us at DHCS. And there's a space on the form actually to describe optional TA request to us. You don't have to reply, but if you'd like TA, you can put it in there. Remember that each narrative response has a word limit, so you need to be concise. And please note that county behavioral health agencies can use PATH dollars to support planning activities necessary to determine readiness and may leverage information from their PATH GI capacity building program progress reports to build out relevant sections of the readiness assessments. Next slide, please.

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<b>VISUAL</b>	<b>SPEAKER – TIME</b>	<b>AUDIO</b>
Slide 8	Jill Michel – 00:06:45	Behavioral health agencies must submit their readiness assessment template to DHCS by April 1st, and that's six months prior to the Behavioral Health Links going live on October 1st, 2024. We've had several inquiries from county health agencies asking if they could get an extension and so we've decided that we will grant extensions on a case-by-case basis and that would push out your readiness assessment to be due on April 15. So, it's about a two-week extension if you need it, we will approve it on a case-by-case basis. DHCS will either issue a formal approval for the extension or we'll schedule a TA call with you to better assist you in completing the readiness assessment. And please reach out to the justice involved inbox, which I'm hoping someone can put in the chat right now, if you have a request for an extension, and please include details on your rationale for the request of the extension. Next slide.
Slide 9	Jill Michel – 00:07:52	As mentioned on the prior slides, county behavioral health agencies must submit their readiness assessment template by April 1st, which is six months prior to the go live or by April 15 if you are approved for an extension. So, let's walk through this just a little bit. So, we're talking about different timeframes and we're looking at whose responsibility is to do what. So, February and March of 2024, we anticipated that you would be convening groups of leaders and professionals to complete the readiness assessment, and we've been here and we'll be here if you need additional technical assistance for completing that.
Slide 9	Jill Michel – 00:08:30	In April through June, we're looking at possible extensions that can be approved by us. We want you to submit your readiness assessment using secure file transfer, and we want you to respond to questions and requests for additional information that we may have. During that period of time, we're going to be evaluating the readiness template submission and follow up with county behavioral health agencies to address any questions that they might have. July, we're going to be making final determinations for the readiness for go live and communicate those decisions back to county behavioral health agencies.



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<b>VISUAL</b>	<b>SPEAKER – TIME</b>	<b>AUDIO</b>
Slide 9	Jill Michel – 00:09:08	July and September, if the agency is approved, you can prepare to go live with Behavioral Health Links. If you're not ready yet, DHCS will... Let's see, not ready yet, will notify DHCS where the areas are marked ready by go live and if denied, we're going to help you create an action plan to make sure that you're able to get that by the first. And then October 1st we go live. And that's the same regardless of when the implementation plan was submitted.
Slide 9	Jill Michel – 00:09:45	The October 1, 2024, date for Behavioral Health Links is because pre-release services and county Behavioral Health Links go hand in hand. And once the pre-release services launch statewide October 1st, county behavioral health agencies will need to ensure they're able to receive a behavioral health link from any county jail or youth correctional facility across the state. Even if the jails or youth correctional facilities in your counties have not gone live yet with pre-release services, we anticipate a volume will be initially small and counties who jails or youth, youth correctional facilities have not gone live as the County Behavioral Health Agency will only participate in Behavioral Health Links with individuals released from their county or other county correctional facilities that have already gone live with pre-release services or the state prisons.
Slide 9	Jill Michel – 00:10:40	Once the county jails or youth correctional facilities have gone live with pre-release services, the county DH agency must participate in all aspects of Behavioral Health Links with individuals being released from these facilities. Next slide please.

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VISUAL	SPEAKER – TIME	AUDIO
Slide 10	Jill Michel – 00:10:58	<p>We will be determining a score for each focus area based on the behavioral health agency's attestations and narrative responses. DHCS will determine the agency's overall readiness assessment score. The agency will receive an approved score in all six areas when they're approved to go live. So, an approved determination indicates readiness in each area of the template. A not ready yet determination indicates the response meets some of the components of the template, but they need to have really clear time-bound action plans for any outstanding requirements by go live. And a denied determination indicates that the behavioral health agency's response has been complete or does not sufficiently address the narrative questions or the submission does not indicate readiness to go live by go live date. If the behavioral health agency receives a denied in any focus area, we'll work with that behavioral health agency to determine an action plan to achieve readiness. Now I'm going to pass it off to my colleague, Charlotte Garcia.</p>
Slides 11-12	Charlotte Garcia – 00:12:11	<p>Hello, everyone. My name is Charlotte Garcia. I'm an analyst at DHCS in the reentry oversight and evaluation section. Today I'm going to detail the format for the Behavioral Health Readiness Assessment template. Next slide, please. Each focus area has an attestation section. For each attestation section, the County Behavioral Health Agency must denote readiness status and a timeframe to meet readiness for each minimum requirement by checking one box per row. In addition, there is a space where agencies can optionally provide details on TA requested. We've included an example of the attestation section below. Next slide please.</p>
Slide 13	Charlotte Garcia – 00:12:51	<p>For each narrative response, county behavioral health agencies must provide answers to the indicated questions and abide by word counts. We've included an example of what you should expect to see for the focus areas with narrative responses. And now I will hand this off to Megan Shandel of DHCS and Maya Shashoua of Manatt for our Q&amp;A time. Thank you.</p>

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VISUAL	SPEAKER – TIME	AUDIO
Slide 14	Maya Shashoua – 00:13:16	Hi everyone. Good morning. My name is Maya Shashoua. I'm a consultant with Manatt Health supporting the DHCS team on the Justice Involved Initiative. And welcome folks submitting Q&A through the Q&A box. I know we got some questions in advance and also see a couple coming through now. So, we'll kick things off. The general question, Megan, I'll ask this of you. How will these behavioral health agencies submit their readiness assessment to DHCS and where can they find a copy of this readiness assessment as they work on filling it out?
Slide 14	Megan Shandel – 00:13:59	Right, so behavioral health agencies can submit their readiness assessments to DHCS using the CalAIM Justice Advisory group email address. Maya will copy that into the chat now for you guys to write down. That is also where you'll submit any extension requests that you may have. We've run into some unexpected delays in getting the assessment template posted to our JI web page. Once that is posted, it'll be live on the website. If you need a copy in the meantime, please also submit a request to that CalAIM Justice Advisory group email address and we will provide you one as soon as possible.
Slide 14	Maya Shashoua – 00:14:42	Great, thank you. And another similar question. Someone asked under what circumstances extensions may be granted to April 15th.
Slide 14	Megan Shandel – 00:14:53	So, counties are encouraged to submit a detailed rationale along with their extension requests and DHCS is committed to reviewing those on a case-by-case basis. Everyone's situation will be different, so we don't want to provide too many examples of what would constitute an approved request, but we're willing to work with the counties, and if it's within reason, going to approve those or offer some TA to get you guys ready.
Slide 14	Maya Shashoua – 00:15:24	Super. Another question that came in pre-submitted was a question asking, "Will a list of the facilities that have gone live or plan to go live be posted on a web page for reference from other partners in the county?"

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<b>VISUAL</b>	<b>SPEAKER – TIME</b>	<b>AUDIO</b>
Slide 14	Megan Shandel – 00:15:44	Yes. DHCS will be posting a list of facilities that have submitted their readiness assessments and intend to go live on our web page and that will be updated on a quarterly basis.
Slide 14	Maya Shashoua – 00:15:54	Great. Okay. And turning to a couple other questions that we had come in. For individuals who have an unknown release date, when should pre-release services, which may include behavioral health services, begin?
Slide 14	Megan Shandel – 00:16:19	So, the aid coach should be activated and pre-release services should begin as soon as possible for individuals with anticipated stays of less than 90 days or for those with unclear anticipated lengths of stay at the time of entry. The release date is not needed to begin the 90-day period.
Slide 14	Maya Shashoua – 00:16:38	And I think a similar question, but maybe just making it crystal clear, if an individual doesn't have a release date, when should they begin receiving services as long as they qualify as a part of the Justice Involved Initiative?
Slide 14	Megan Shandel – 00:16:56	So, the county should start pre-release services upon intake. The 90-day period can reset once an individual is sentenced and a new release date is established. The scenario is outlined in our policy and operational guide in section 6.1. And then if somebody from the Manatt events team could post the link to the policy guide on our web page, that would be amazing.
Slide 14	Maya Shashoua – 00:17:21	Super. Then turning to a few... We've gotten a few questions in, and I think we had a few from last session focusing on the role of managed care plans and connection to post-release services. So, one question that we received is clarifying what responsibilities managed care plans have for individuals who are re-entering the community who do not meet specialty mental health criteria. They would only be qualifying for non-specialty mental health.
Slide 14	Megan Shandel – 00:17:56	The managed care plan will be responsible for ensuring the provision of non-specialty mental health services to the individual, including a behavioral health link facilitated by the pre-release care manager.

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VISUAL	SPEAKER – TIME	AUDIO
Slide 14	Maya Shashoua – 00:18:08	Great. And following up in a similar vein, if the behavioral health link is planned and/or it occurs, does the incarcerated individual still have to be connected to enhanced care management services upon their release once they're in the community or upon their release during their release time?
Slide 14	Megan Shandel – 00:18:37	Yes. Individuals who are identified for Behavioral Health Links should still receive a warm handoff to their ECM post-release provider, if their pre-release care manager does not continue with them in the post-release setting as their ECM provider. The pre-release care manager and/or post-release ECM provider, if different, may assist in the behavioral health link to specialty mental health services, DMC or DMCODS if appropriate. If the individual is identified as only needing non-specialty mental health services, the care manager will help facilitate a BH link to managed care plan or the fee-for-service provider.
Slide 14	Maya Shashoua – 00:19:19	Thank you. Shifting gears a little bit, I think we've gotten a few questions about billing. So, first question is asking whether assessments, including assessments for behavioral health link eligibility, are billable and reimbursable?
Slide 14	Megan Shandel – 00:19:35	It's a great question, yes. Pre-release assessments are reimbursable under care management once an individual's JI aid code is activated.
Slide 14	Maya Shashoua – 00:19:47	Great. And another billing question, if the same entities of the County Behavioral Health Agency is providing free release behavioral health services and they'll be a provider post-release, do Behavioral Health Links have to be billed for separately?
Slide 14	Megan Shandel – 00:20:06	Yes. The County Behavioral Health Agency should bill KAMIS when acting as a pre-release provider. The only time they should bill Short-Doyle in the pre-release period is when they are acting as a plan and receiving a behavioral health link.
Slide 14	Maya Shashoua – 00:20:22	No, billing is a topic that we've gotten a lot of questions about. So, one more question on billing, while we're on the topic. So, question is, "Will county behavioral health agencies be able to bill Medi-Cal if the facility doesn't have an NPI number yet or a mechanism to turn on Medi-Cal for the incarcerated beneficiary?"

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<b>VISUAL</b>	<b>SPEAKER – TIME</b>	<b>AUDIO</b>
Slide 14	Megan Shandel – 00:20:49	So correctional facilities must have an NPI number and be enrolled as a Medi-Cal clinic in order to be approved to go live with pre-release services. Billing for pre-release services cannot take place until an individual's aid code is activated.
Slide 14	Maya Shashoua – 00:21:05	Great. And I lied. I have one other billing-related question for you, which is that someone asked when DHCS will share billing guidance or further information for chemists and for Short-Doyle, particularly for the professional-to-professional clinical handoff component of the behavioral health link.
Slide 14	Megan Shandel – 00:21:28	So, this guidance is in its final stages and is forthcoming and will be available in advance of the first go live date.
Slide 14	Maya Shashoua – 00:21:37	Great. Let me just take a look, what else we've had coming in. All right, we have one question that is related to PATH funding. Someone asked if you all could speak a little bit further about the difference between the readiness assessment submission and the PATH implementation plan submission and the difference between go live dates or any other information that you think would be important for folks to be aware of.
Slide 14	Megan Shandel – 00:22:13	So, behavioral health agencies are required to go live with the Behavioral Health Links by October 1st, 2024, including the ability to receive a behavioral health link from any correctional facility that may be live with pre-release services. In the PATH round three behavioral health implementation plan, the focus areas require the person filling out the implementation plan form to designate an expected go live for that go live date for that focus area. This state may differ from October 1st, 2024, as behavioral health agencies work to stand up their processes and systems in order to go live by October 1st, 2024.

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<b>VISUAL</b>	<b>SPEAKER – TIME</b>	<b>AUDIO</b>
Slide 14	Maya Shashoua – 00:23:00	All right, let's see. Looks like we got a question, which I think was covered a little bit in the slides, but someone asked you all to revisit the rationale for Behavioral Health Links going live on 10/1/2024. But while facilities do not necessarily go live in every single county as they have a two-year-long period up until 2026 to go live, so they ask that you all clarify the rationale behind that.
Slide 14	Megan Shandel – 00:23:41	The DHCS sets the October 1st, 2024, go live date for Behavioral Health Links because pre-release services and county Behavioral Health Links go hand-in-hand. Once pre-release services launch statewide on October 1st, county behavioral health agencies will need to ensure they are able to receive a behavior health link referral from any county jail, sorry... For many county jails, youth correctional facilities across the state, even if the jails in our youth correctional facilities in their county have not yet gone live with pre-release services. And also want to note that DHCS anticipates that your initial volume of those referrals received would be low until your county goes live.
Slide 14	Maya Shashoua – 00:24:26	Great. Thank you. Another logistical question about the readiness assessment. Someone asked if county behavioral health agencies will be required to submit any policies and procedures or supporting documentation with their readiness assessment.
Slide 14	Megan Shandel – 00:24:48	No. The readiness assessment will request attestations and narrative responses to support the requirements.
Slide 14	Maya Shashoua – 00:24:56	Great. All right. Got another question submitted that someone inquired, "Do we have the latitude to begin services for an individual after their sentencing?"
Slide 14	Megan Shandel – 00:25:16	So, the mandate for the CalAIM JI initiative is to begin these services prior to release. If services cannot happen prior to release, there are specific form handoff requirements that are further outlined in section 8.4 of our policy and operations guide.
Slide 14	Maya Shashoua – 00:25:33	Super. Another more general question, "Are incarcerated individuals with inactive Medi-Cal not eligible for pre-release services?"

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<b>VISUAL</b>	<b>SPEAKER – TIME</b>	<b>AUDIO</b>
Slide 14	Megan Shandel – 00:25:48	To bill and claim for pre-release services, Medi-Cal must be activated, and the JIA code must be turned on. Correctional facilities must follow required processes to enroll and activate Medi-Cal to bill and claim for pre-release services.
Slide 14	Maya Shashoua – 00:26:06	Great. Just taking a look at what has come in, someone asked where they can find additional information on billing as a reference going forward.
Slide 14	Megan Shandel – 00:26:25	Billing information can be found in section 10 of our policy and operations guide. And then we are also working to provide additional billing details, hopefully sooner rather than later. And then this information will also be available on our CalAIM JI web page.
Slide 14	Maya Shashoua – 00:26:42	Great. And I will drop a link for that in the chat for folks if they have not had the chance to visit yet. Someone asked a clarifying question. "Just checking in. If you could provide more information on the distinction between pre-release care management and post-release enhanced care management."
Slide 14	Megan Shandel – 00:27:06	So, care management is a pre-release service that must be billed fee-for-service while the individual is incarcerated. Enhanced care management is a managed care plan benefit that is only available once the member is in the community. ECM providers can bill for pre-release care management services under fee-for-service.
Slide 14	Maya Shashoua – 00:27:28	Great. All right. Another billing question. So if a behavioral health assessment is completed within 14 days as is set forth in the policy guide, but someone is released from custody later than expected, they're released perhaps a year later, can another behavioral health assessment be completed prior to released and be billed in order to ensure that that individual receives appropriate levels of care?
Slide 14	Megan Shandel – 00:28:03	Yes. Our short answer is yes on that. We're working to create some updated sections of the policy guide and hope to release that shortly. And so, you'll see in the next version of our policy and operations guide, we will walk through scenarios where the 90-day pre-release services can be paused, reset, or restarted.



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VISUAL	SPEAKER – TIME	AUDIO
Slide 14	Maya Shashoua – 00:28:23	Great. And then another question on the extensions. Someone inquired if there is a deadline by which they have to request an extension or any information they should know about that submission.
Slide 14	Megan Shandel – 00:28:39	Yes. Your deadline to submit an extension request will be prior to April 1st.
Slide 14	Maya Shashoua – 00:28:48	Great. Let's see. Thank you all for these great questions. See them all coming in. All right. So, another question that we've gotten is, "Is the county Behavioral Health Agency responsible for establishing Behavioral Health Links to both the mental health plan and the managed care plan? Or is the managed care plan responsible for their own behavioral health link?"
Slide 14	Megan Shandel – 00:29:20	The County Behavioral Health Agency is responsible for establishing Behavioral Health Links to those who will continue to receive their behavioral healthcare through the county plan.
Slide 14	Maya Shashoua – 00:29:33	Great. And we got another question relating to the PATH implementation plan. I think follow up to the answer you gave a little bit ago, someone asked specifically what the difference is between the expected go live date versus the PATH implementation plan expected date and that those are different sections and they have some confusion about how to respond to that specifically.
Slide 14	Megan Shandel – 00:30:04	Right. So, your behavioral health implementation plan for PATH Run three will read a lot like a budget narrative. And so, you're just telling DHCS how you plan on spending your PATH funding for that focus area. Your behavioral health readiness assessments will read as how you plan on implementing the policy. And so, they are similar, yet different. And your go live dates referenced throughout the implementation plan for each of the focus areas is just telling DHCS when you're going to be spending that money to adhere or to stand up the process for that focus area. And if you have additional questions on that, we'd be happy to answer them. You can reach out to our PCG partners, who are our third-party administrator for the PATH Round three grant and then you can also reach out to our CalAIM Justice advisory inbox with any questions you may have.

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<b>VISUAL</b>	<b>SPEAKER – TIME</b>	<b>AUDIO</b>
Slide 14	Maya Shashoua – 00:31:04	Great. Another question relating to PATH. Someone asked to use funds for staffing, they would like to clarify if this can only fund a portion of the position, the staff position, for up to six months from the startup date.
Slide 14	Megan Shandel – 00:31:27	So, the PATH funding is intended to be one-time startup funds, and for this reason funding for salary support will be capped at six months past your go live date.
Slide 14	Maya Shashoua – 00:31:38	Great. A general question. Someone just inquired if this Q&A will be shared with folks who are attending the webinar, if this will be publicly available.
Slide 14	Megan Shandel – 00:31:54	I'm going to go out on a limb and say yes because we've made them available for past office hours, but I don't recall that conversation for this one. So yes, I will commit to it.
Slide 14	Maya Shashoua – 00:32:05	Yes, I think we will be able to have this webinar recording posted. It does take a little bit of time to get it up, but that is on the DHCS JI website that was in the chat, and I'll put it in there once more, but it is not instantaneous.
Slide 14	Maya Shashoua – 00:32:24	All right. Another question that came in asking whether Behavioral Health Links are required for juvenile hall and other youth correctional facilities as well as jails and prisons.
Slide 14	Megan Shandel – 00:32:50	Behavioral Health Links are required for county youth correctional facilities, county jails, and state prisons.
Slide 14	Maya Shashoua – 00:32:58	Great, thank you. Getting a bunch of questions, so just making sure I'm not missing any. Someone just asked a clarifying question overall on the Justice Involved Initiative. They asked for entities, meaning correctional facilities to claim for pre-release services, they wanted to clarify that those jails, prisons, youth correctional facilities will need to establish NPIs.
Slide 14	Megan Shandel – 00:33:32	Yes, jails will need to establish an NPI number and enroll in Medi-Cal.
Slide 14	Maya Shashoua – 00:33:38	Great. All right. Another general question. Someone asked, "For Behavioral Health Links to and from other counties, will there be a website or other source to provide guidance on who the provider is in each county or what their process is?"

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VISUAL	SPEAKER – TIME	AUDIO
Slide 14	Megan Shandel – 00:34:02	So DHCS encourages counties to build communication processes to support these scenarios, but we will not be posting or coordinating a webpage to facilitate that.
Slide 14	Maya Shashoua – 00:34:14	Great. Thank you. All right, let's see. Someone asked, "Will behavioral health linkage services be uncompensated until pre-release services go live?" Could they get some clarity on how that reimbursement will work?
Slide 14	Megan Shandel – 00:34:38	So, the counties will be able to build Short-Doyle for the professional-to-professional component of the BH links prior to a county going live with pre-release services. This is detailed in table 17 on the policy guide and then it lays out what can be billed and when.
Slide 14	Maya Shashoua – 00:34:59	Right. Just taking a pause, making sure we've gone through, see what else is coming through. Thanks again, folks, for submitting questions. All right. Someone asked a question about the correctional facility readiness assessment process, and they asked to get a little bit more information about the correctional facility readiness assessment submission and timeframe for when those submissions are due for correctional facilities.
Slide 14	Megan Shandel – 00:35:50	So correctional facilities must go live with pre-release services between October 1st, 2024, and September 30th, 2026. And correctional facilities will be able to go live on a quarterly basis during this two-year period. They must submit their readiness assessment six months prior to the date they wish to go live on. And then DHCS will review and approve or provide technical assistance to get them to their target goals.
Slide 14	Megan Shandel – 00:36:19	For more information on the readiness assessment and the submission and the processes, we will have posted shortly to our webpage the office hours recordings for the two correctional Facility Readiness Assessment office hour sessions that we held one at the end of February and one last week. So those should be posted shortly. I know they're in their final stages and I would refer you to view those and then also you can ask your questions to our CalAIM Justice Advisory group email address and someone would be happy to respond to those.

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<b>VISUAL</b>	<b>SPEAKER – TIME</b>	<b>AUDIO</b>
Slide 14	Maya Shashoua – 00:36:59	Great. Another question that came in, so in the Behavioral Health Agency Readiness Assessment, if the agency doesn't need TA support, but they are worried about meeting the 10/1/2024 four deadlines, what should they check their ability to meet that 10/1/2024 deadline? They were feeling it may be based on whether pre-release services and other correctional facility related things are completed, which are outside of their control.
Slide 14	Megan Shandel – 00:37:41	Great. So, I think it would be really helpful if you just included that information in the narrative section of the question, and then me and my team when we're reviewing it, we can reach back out if we need some more clarification or provide TA if that's what you're needing.
Slide 14	Maya Shashoua – 00:38:07	Let's see. Another question. Someone asked us about youth criteria for pre-release services. They asked since criteria for pre-release services for youth is just that they are a part of a Medi-Cal or chip eligibility group, they asked if there is screening tool that they need to use for those services or if anything other than Medi-Cal or chip eligibility needs to be determined for that age group.
Slide 14	Megan Shandel – 00:38:45	Yes. So, youth, which is defined as 21 and younger or former foster youth between 18 and 26 years old, do not need to meet healthcare criteria to be eligible for pre-release services.
Slide 14	Maya Shashoua – 00:39:04	This is a specific question and I think maybe was submitted via email, but someone inquired about missing a deadline for their interim progress report and if there could be some clarification on where they should submit the progress report to once it is completed, whether there's a template they should be using.
Slide 14	Megan Shandel – 00:39:27	I don't have specific information on the interim progress reports. I believe that may be in reference to PATH Rounds one or two. Our team only deals with PATH round three. If that is your situation, I would encourage you to reach out to PCG and ask this question of them and hopefully Maya has their email address, she can post it, but they'd be more than happy to help walk you through that process.

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<b>VISUAL</b>	<b>SPEAKER – TIME</b>	<b>AUDIO</b>
Slide 14	Maya Shashoua – 00:39:54	We will track down that email address. I don't have it on hand.
Slide 14	Megan Shandel – 00:39:59	Someone will drop it in the chat shortly.
Slide 14	Maya Shashoua – 00:40:00	It's a follow-up, yeah. All right. Got another few billing questions, which I know are common. So, someone asked, "What are the new billing codes for linkage services which are currently not covered by Medi-Cal benefits?"
Slide 14	Megan Shandel – 00:40:24	So, all of the billing codes that we're working on for the Justice Involved Initiative will leverage existing fee-for-service billing codes. DHCS has created five new care management bundles to support the delivery of pre-release care management. And then all of the guidance and details surrounding these codes and bundles is forthcoming and will be released prior to the go live date of 10/1, and hopefully well in advance of that.
Slide 14	Maya Shashoua – 00:40:52	Great. Oh, and I've got a message with the PATH email, so I'll just drop that in the chat for everyone. So that would be for folks that are in need of contacting someone relating to PATH rounds one or two, though Megan, correct me if I'm wrong, your team and the Justice Involved inbox would be an appropriate contact as well for PATH round three?
Slide 14	Megan Shandel – 00:41:22	Yes.
Slide 14	Maya Shashoua – 00:41:24	Great. While we're on the subject of PATH, another question just clarifying that, something that was said earlier. Someone asked to confirm that PATH funds for staff can only be used six months beyond the go live date and wondered what would happen if positions took longer to fill than that.
Slide 14	Megan Shandel – 00:41:59	So, this information can be found in the guardrails for supporting staff salaries section of the PATH round three guidance, which should be linked to our ... it is... our JI website, and Maya will go ahead and drop that link for everyone.

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<b>VISUAL</b>	<b>SPEAKER – TIME</b>	<b>AUDIO</b>
Slide 14	Maya Shashoua – 00:42:15	That one I had on hand. So, to the asker of that question, that's the link that I just placed in the general chat. All right. Let's see. Other billing question. Can the county behavioral health entity be the one to complete and bill for the behavioral health needs assessment even if they are not the designated pre-release care manager?
Slide 14	Megan Shandel – 00:42:54	So, behavioral health related pre-release services are the responsibility of the correctional facility, but the correctional facility may contract with the county behavioral health for completing those services.
Slide 14	Maya Shashoua – 00:43:09	Great. All right. Another question that came in. If a person is booked and released, do the pre-release care managers need to do outreach to that person and offer all of the JI services in the community, including Behavioral Health Links? Is that one of the workflows that's set forth as a part of this initiative?
Slide 14	Megan Shandel – 00:43:36	So once an individual is released into the community, they will have access to full Medicaid benefits, enrolled in a managed care plan, and have access to ECM. And the post-release case manager will be responsible for providing care once someone is released into the community.
Slide 14	Maya Shashoua – 00:43:54	Great. All right, I see just a few other questions coming through. I saw one further question on staff salaries. Just want to refer folks to the link in the chat with guidance that's more robust on that information. I think that's a good source to get a deeper level of information on staff salaries. All right. Someone asked a general question. They asked what the process might be for getting added to the distribution list for the Justice Involved Initiative, making sure that they are keeping up with any emails or webinars that are coming out and that they're aware of everything going on.
Slide 14	Megan Shandel – 00:44:41	Please, please, please go ahead and send an email to <a href="mailto:calaimjusticeadvisorygroup@dhcs.ca.gov">calaimjusticeadvisorygroup@dhcs.ca.gov</a> and we will add you to the distribution list for all of that information.
Slide 14	Maya Shashoua – 00:44:54	Great. I'll just drop that in the chat again at risk of putting it too many times in the chat. Let's see, I think we've got just a few more questions. Let me just make sure we've addressed everything.

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<b>VISUAL</b>	<b>SPEAKER – TIME</b>	<b>AUDIO</b>
Slide 14	Maya Shashoua – 00:45:28	All right. One question again on timing. Someone just wanted to clarify that whether they are going to not have to provide Behavioral Health Links to local custody referrals until their local facility goes live. So maybe if you could describe a little bit about what folks can expect once they're live with Behavioral Health Links if the correctional facility is not live in their county.
Slide 14	Megan Shandel – 00:45:55	So, we encourage you to develop these relationships with the referring counties. Your process may look different across all those counties. Those county correctional facilities may reach out to you and ask you what your preferred process is, but we encourage you to work together. And they may have an individual that is releasing to your county, and it's entirely up to the two of you to work out what the process will look like and what the actual referral process or transaction ends up being.
Slide 14	Maya Shashoua – 00:46:31	Great. All right. I think we might be towards the end. Oh, okay. One question that came through, someone inquired whether behavioral health plans, county behavioral health agencies will be contacted by CDCR, the state prison system regarding Behavioral Health Links for people leaving state prisons.
Slide 14	Megan Shandel – 00:47:03	Once CDCR goes live with pre-release services, yes, they will be sending referrals to the counties that they are releasing to.
Slide 14	Maya Shashoua – 00:47:12	Great. And I think this is our final question, and it was just a confirmation of whether behavioral health agencies would bill for the pre-release behavioral health assessment that got asked a minute ago. So just wanted to clarify whether they would be billing or not or under what circumstance they would bill.
Slide 14	Megan Shandel – 00:47:47	So, the correctional facilities, again, are responsible for ensuring pre-release services are provided, including the behavioral health assessment. The billing for these services should be done under the correctional health care facilities NPI number. If County Behavioral Health has been contracted to provide those services in the pre-release setting, it would be billed under the correctional facilities NPI number.

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<b>VISUAL</b>	<b>SPEAKER – TIME</b>	<b>AUDIO</b>
Slide 14	Maya Shashoua – 00:48:11	Great. All right. I think that that is all that we have coming through. Oh, I see one final question to close us out. Someone just followed up on state prisons CDCR. They asked if there is an awareness of when CDCR may go live during that two-year timeframe.
Slide 14	Megan Shandel – 00:48:47	We're engaged with CDCR in regular stakeholder meetings, and when we get closer to solidifying a go live date for them, we'll post that on our webpage and communicate that to you guys at that time.
Slide 14	Maya Shashoua – 00:49:01	Great. Thank you. I think that that does it for all of our questions. I know that was a lot and thanks, folks, for submitting them. And again, if you submitted a question that we missed or you had a follow-up question, that Justice Advisory Group email is in the chat. Otherwise, Megan, I think I'll hand it back to you to close us out.
Slide 14	Megan Shandel – 00:49:22	Awesome. Thank you so much, everyone. I think Lawana is going to share kind of like a next steps and then close us out, so I'll pass it over to her.
Slides 15-16	Lawana Welch – 00:49:34	Thanks, Megan. Next slide. We just want to remind everyone; we'll continue to offer technical assistance to you as you complete your readiness assessment templates and prepare to go live with Behavioral Health Links on October 1st. The next slide. And we want to thank you. This is the end of our presentation for today. Thanks for making time to attend this office hour session. If you have any additional questions or technical assistance requests, please submit them to our justice involved inbox. It's in the chat. It's <a href="mailto:calaimjusticeadvisorygroup@dhcs.ca.gov">calaimjusticeadvisorygroup@dhcs.ca.gov</a> . And that's it, everybody. Have a great day.