

Follow-Up Items from July 16, 2020, BH-SAC Webinar

Medi-Nurse Advice Line

Veronica Kelley, San Bernardino County: Are the nurses on the phone line going to be fluent on mental health and addiction? I know for COVID-19 there are interactions that might be important for a nurse to know when they are providing resources or advice.

DHCS Response: *Rene Mollow, DHCS:* We will follow up on that and get back to you.

Jacey Cooper, DHCS: We did a Request for Information (RFI) to identify a vendor who does nurse advice lines and is using a contracted vendor for this. They typically are trained in a number of clinical areas. They have broad training and have access to a physician for consultation. We will work on addressing your question about that particular competency.

Kelly Pfeiffer, DHCS: Jim Kooler will later go through what we are doing to coordinate across the different programs so if there is a caller on the Medi-Nurse line who needs counseling support, they could be connected to the COVID-19 line we created. And there are access lines available for crisis. We are trying to make sure all of the resource lines are coordinating and know about each other, so that one line doesn't have to do it all.

DHCS Follow-Up: For CareNet, individuals who call the nurse advice line with behavioral health type symptoms are triaged and provided an appropriate level of care recommendation. If the caller has questions about a behavioral health issue, the nurse will provide health education about the topic. All information provided or used to triage the caller is based on Schmitt/Thompson evidence-based guidelines and approved health education published by HealthWise. Available behavioral health guidelines include:

1. Anxiety and Panic Attacks
2. Depression
3. Suicide Concerns
4. Bipolar Disorder (Manic Depression)
5. Aggressive and Destructive Behavior
6. Alcohol Abuse and Dependence
7. Psychosocial Problems
8. Postpartum Depression

After providing symptom triage or health information, the nurse could further assist by coordinating behavioral health needs through referrals to available DHCS programs and services, as well as local, state, and national resources.

All nurses receive training on behavioral health/crisis calls. Training covers all calls considered to be urgent/emergency/911 or crisis management situations. CareNet also requires an annual (continuing education unit) training based on a behavioral health topic.

For DXC Technology, an assessment is made regarding the caller's statements (e.g., is there an intent to hurt themselves or others, or similar situation; is there a request for mental health support services, or similar services). Escalation to a supervisor may occur or de-escalation and data gathering. If an escalation is warranted, a supervisor takes over the call, assesses the caller's needs, attempts to calm the caller if agitated, and gathers the caller's general contact/demographic information. A referral will be made for resources, as appropriate. If the caller requests mental health resources, an assessment is also made. Once the call is confirmed as a resource need request, a supervisor will refer the caller to the applicable county mental health resource.

Update and Discussion of Plans for Medi-Cal 2020 1115 Waiver Extension for Drug Medi-Cal-Organized Delivery System (DMC-ODS)

Gary Tsai, MD, Los Angeles County. I want to thank you for the proposed changes in the extension of the waiver for DMC-ODS. I didn't see a mention of maintaining or doing away with the current residential length of stays. Is it correct to assume that those would stay while DHCS also requests from CMS that the residential episode caps be removed?

DHCS Response: *Kelly Pfeifer, DHCS:* We are looking to CMS to ask permission to lift the cap in the extension. I will review the language and follow up with you.

DHCS Follow-Up: Yes, this is correct. The DMC-ODS residential lengths of stay will remain as currently written in the Standard Terms and Conditions until CMS provides DHCS with an approval or denial on the extension requests. If CMS approves the removal of the caps on the length of stays, DHCS will provide notification through an Information Notice. We will follow up with you on specifics.