



Department of
Health Care Services



a presentation to the
**Alzheimer's Disease and Related
Disorders Advisory Committee**
on
California's Public Mental Health Services

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Agenda Overview

I. Presentation and Discussion

- DHCS Mission and Role in the Delivery of Mental Health
- Public Mental Health Services
 - California's Expanded Optional Mental Health Benefit
 - 1915 (b) Specialty Mental Health Services (SMHS) Freedom of Choice Waiver

II. Questions





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*Preserving and Improving the Physical
and Mental Health of all Californians*

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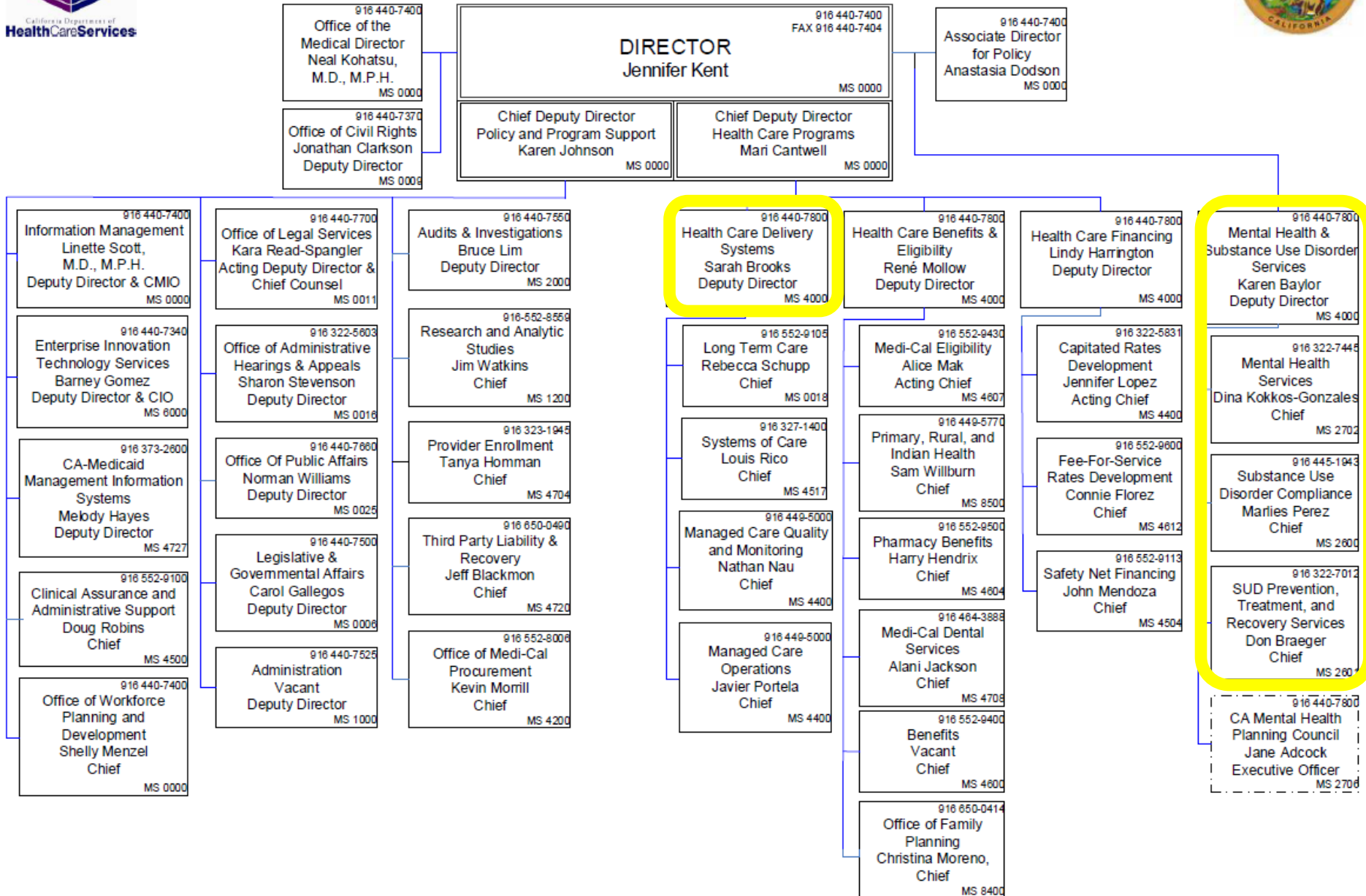
- DHCS Is California's (CA) Single State Agency (SSA) for Medi-Cal, CA's Medicaid Program Administers \$90 billion annually in public funds that support the health of more than 12.3 Million Californians (and growing)
- Two DHCS areas responsible for public behavioral health care services:
 - Health Care Delivery Systems
 - Mental Health and Substance Use Disorder Services





Department of Health Care Services

October 7, 2015





Managed Care Plan Mental Health Services

Managed Care Plan Mental Health Services

- The Affordable Care Act (ACA) provided the opportunity for millions of individuals and families to access affordable health care.
- Prior to ACA, mental health services in CA were primarily “carved-out” and provided through county Mental Health Plans (MHPs) under the CA 1915 (b) Specialty Mental Health Services (SMHS) Freedom of Choice Waiver
- In 2013, CA elected to adopt an optional benefit expansion, which expanded services available to beneficiaries in their local Managed Care Plan (MCP)



Medi-Cal Managed Care

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 fee-for-service (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 medication treatment
 - Outpatient laboratory, medications, supplies and supplements
 - Psychiatric consultation





Medi-Cal
Specialty Mental Health Services
1915(b) Waiver

1915(b) SMHS Waiver

- 1915 (b) SMHS Waiver is California's agreement between Center for Medicare and Medicaid Services (CMS) and DHCS, as the SSA, for the administration of the federal SMHS Medicaid program.
- 1915(b) SMHS Waiver is provided by CMS to states in order to deliver SMHS through a managed care system.
- Through CAs 1915(b) Specialty Mental Health Services (SMHS) Freedom of Choice Waiver, 56 local county mental health plans (MHPs) are responsible for the local administration and provision of SMHS
 - MHPs contract with organizational contract providers to provide SMHS
- Locally MHPs and MCPs use memorandums of understanding to ensure the coordination of mental health services to meet the needs of beneficiaries.



Section 1915(b) SMHS Waiver

Federal Requirements Waived:

- **Freedom of Choice:** Each beneficiary must have a choice of providers
- **Statewideness:** Benefits must be available throughout the state
- **Comparability of Services:** Services must be comparable for individuals (i.e., equal in amount, scope, duration for all beneficiaries in a covered group)



Section 1915(b) SMHS Waiver

Section 1915(b) Waiver Authority:

- Allows states to implement managed care delivery systems, or otherwise limit individuals' choice of provider
- May not be used to expand eligibility to individuals not eligible under the approved Medicaid state plan
- Cannot negatively impact beneficiary access, quality of care of services, and must be cost effective



Mental Health Plan Contract

- Contract required pursuant to state and federal law.
- Delineates the MHP's and DHCS' responsibilities and requirements in the provision and administration of Specialty Mental Health Services.
- Conforms with federal requirements for Prepaid Inpatient Health Plans (PIHPs). MHPs are considered PIHPs and must comply with federal managed care requirements (Title 42, CFR, Part 438).
- Current MHP contract term: May 1, 2013-June 30, 2018.

<http://www.dhcs.ca.gov/services/MH/Pages/POCB-MentalHealth-Overview.aspx>



California Regulatory and Contractual Requirements

§1810.405 Access Standards for Specialty Mental Health Standards

In accordance with the MHP Contract:

The MHP of the beneficiary shall be responsible for assuring that the beneficiary has access to specialty mental health services as provided in §1810.345 and §1810.350.

Availability and Accessibility

The California Code of Regulations, Title 9, Chapter 11, Section 1810.405(d) specifies: “Each MHP shall provide a statewide, toll-free telephone number 24-hours a day, seven days a week, with language capability in all languages spoken by beneficiaries of the county, that will provide information to beneficiaries about how to access specialty mental health services, including specialty mental health services required to assess whether medical necessity criteria are met and services needed to treat a beneficiary's urgent condition, and how to use the beneficiary problem resolution and fair hearing processes.”



Mental Health Services Responsibilities

Dimension	Medi-Cal MCP	MHP Outpatient	MHP Inpatient
Services	<p>Mental health services when provided by licensed mental health care professionals (as defined in the Medi-Cal provider bulletin) acting within the scope of their license:</p> <ul style="list-style-type: none"> • 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 medication therapy • Outpatient laboratory, medications, supplies, and supplements • Psychiatric consultation 	<p>Medi-Cal Specialty Mental Health Services:</p> <ul style="list-style-type: none"> • Mental Health Services <ul style="list-style-type: none"> o Assessment o Plan development o Therapy o Rehabilitation o Collateral • Medication Support Services • Day Treatment Intensive • Day Rehabilitation • Crisis Residential • Adult Crisis Residential • Crisis Intervention • Crisis Stabilization • Targeted Case Management 	<ul style="list-style-type: none"> • Acute psychiatric inpatient hospital services • Psychiatric Health Facility Services • Psychiatric Inpatient Hospital Professional Services if the beneficiary is in fee-for-service hospital

Memorandum of Understanding (MOU)

Objectives:

- Ensure coordination between the managed care plans and specialty mental health plans
- Promote local flexibility that exist at the county level

Core elements:

- Basic Requirements
- Covered Services and Populations
- Oversight Responsibilities of the MCP and MHP
- Screening, Assessment, and Referral
- Care Coordination
- Information Exchange
- Reporting and Quality Improvement Requirements
- Dispute Resolution
- After-Hours Policies and Procedures
- Member and Provider Education



Statutes and Regulations

- Title 42, Code of Federal Regulations
<http://www.gpo.gov/fdsys/browse/collectionCfr.action?collectionCode=CFR>
- California Welfare and Institutions Code commencing with 14700 et seq.
<http://www.leginfo.ca.gov/cgi-bin/calawquery?codesection=wic>
- Title 9, California Code of Regulations, chapter 11, Medi-Cal Specialty Mental Health Services, commencing with 1810.100 et seq.
<http://www.oal.ca.gov/CCR.htm>



QUESTIONS?

