

Housekeeping



Participants are in listen only mode.



Please submit questions via the Q&A function.



Live closed captioning is available. Please find the link in the Chat.



The webinar slides will be posted to the DHCS CalAIM webpage soon.

Welcome & Introductions

- » Alexandria Simpson, Medi-Cal Behavioral Health Division, California Department of Health Care Services
- » Jesse Raynak, Medi-Cal Behavioral Health Division, California Department of Health Care Services

Agenda

- » Background & Timeline Review
- » Review of Frequently Asked Questions on Draft Guidance and Tools
- » Expectations for Launch & Implementation Considerations
- » Q&A
- » Next Steps



Public Health Emergency (PHE) Unwinding

- » The COVID-19 PHE will end soon and millions of Medi-Cal beneficiaries may lose their coverage.
- » **Top Goal of DHCS:** Minimize beneficiary burden and promote continuity of coverage for our beneficiaries.
- » How you can help:
 - » Become a DHCS Coverage Ambassador
 - » Download the Outreach Toolkit on the DHCS Coverage Ambassador webpage
 - » <u>Join the DHCS Coverage Ambassador mailing list</u> to receive updated toolkits as they become available

Public Health Emergency (PHE) Unwinding

- » Phase One: Encourage Beneficiaries to Update Contact Information
 - » Launch immediately.
 - » Multi-channel communication campaign to encourage beneficiaries to update contact information with county offices.
 - » Post flyers in provider/clinic offices, social media, call scripts, website banners.
- » Phase Two: Watch for Renewal Packets in the mail. Remember to update your contact information!
 - » Launch 60 days prior to COVID-19 PHE termination.
 - » Remind beneficiaries to watch for renewal packets in the mail and update contact information with county office if they have not done so yet.

Background

» Currently, multiple mental health screening and transition tools are in use for Medi-Cal beneficiaries across the state, which can lead to inconsistencies around when and how beneficiaries are referred to county networks and managed care plan networks.

CalAIM seeks to streamline this process and improve patient care by creating standardized statewide Screening and Transition of Care Tools for Medi-Cal Mental Health Services.

Overview

- Adult and Youth Screening Tools for Medi-Cal Mental Health
 Services: Distinct Screening Tools are being developed for Adults ages
 21 and over and Youth under age 21.
- >> Transition of Care Tool for Medi-Cal Mental Health Services: A single Transition of Care Tool is being developed for all beneficiaries, including Adults and Youth.
- » The tools will be required for use by Managed Care Plans (MCPs) and Mental Health Plans (MHPs).

Statewide implementation of Adult and Youth Screening and Transition of Care Tools occurs January 1, 2023.

Overview (Cont'd)

- » The **Screening Tools** determine the appropriate delivery system for beneficiaries who are not currently receiving mental health services when they contact the MCP or MHP seeking mental health services.
- The Transition of Care Tool supports timely and coordinated care when completing a transition of services to the other delivery system or adding a service from the other delivery system.

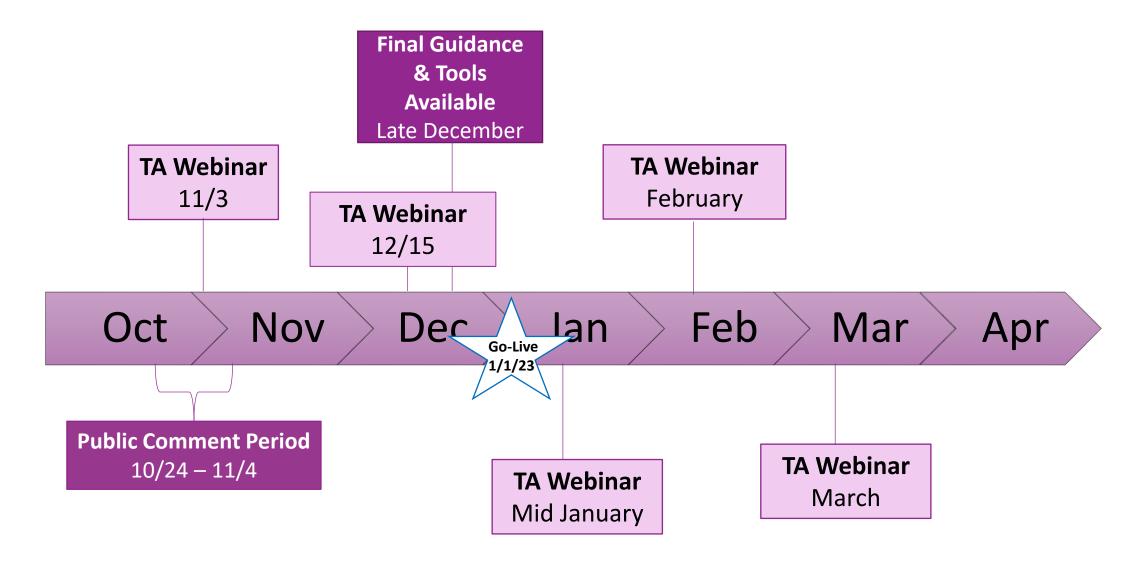
Together, the tools ensure beneficiaries have access to the right care, in the right place, at the right time.

Development Process

The development process for the Screening and Transition of Care Tools has involved robust testing and stakeholder input, including:

- » Working groups to inform tool development and process
- » Beta testing to refine tools before piloting on a larger scale
- » Pilot testing to ensure statewide applicability
- » Field testing (as needed) to identify critical issues following updates
- » Public comment periods to solicit additional feedback

Milestones & Technical Assistance



Draft Guidance & Tools

» In October, DHCS released a draft All Plan Letter (APL) and Behavioral Health Information Notice (BHIN) to provide aligned guidance to MCPs and MHPs on Adult and Youth Screening and Transition of Care Tools implementation.

» Draft guidance:

- » Provided an overview of each tool;
- » Outlined when, how, and by whom the tools are required for use; and
- » Included links to the draft Adult Screening Tool, Youth Screening Tool, and Transition of Care Tool.

Adult and Youth Screening Tools: Requirements for Use

- » MCPs and MHPs must administer the Screening Tools for individuals who are not currently receiving mental health services, when they contact the MCP or MHP seeking mental health services.
 - » The Adult Screening Tool is required for use with individuals age 21 and older.
 - » The Youth Screening Tool is required for use with individuals under age 21.
- » The Screening Tools are <u>not required</u> for use with beneficiaries who are currently receiving mental health services or who contact mental health providers directly to seek mental health services.

Q: Should an individual be screened if they are not currently receiving services but have received services within the last few years?

A: The Screening Tools are designed for beneficiaries who are not currently receiving mental health services when they contact their MCP or the MHP seeking mental health services. So, if the beneficiary is currently receiving mental health services, the Screening Tool would not be administered. But if, for example, they received services many years ago, stopped for a period of time, and are now seeking services again, then the screening tool would be administered.

Q: What if an individual reaches out to a provider directly for services?

A: The Screening Tools are not required for use with beneficiaries who contact mental health providers directly to seek mental health services. Mental health providers who are contacted directly by beneficiaries seeking mental health services are able to begin the assessment process and provide services during the assessment period without using the Screening Tools, consistent with the No Wrong Door for Mental Health Services Policy described in APL 22-005 and BHIN 22-011.

Adult and Youth Screening Tools: Requirements for Administration

- The Screening Tools can be administered by clinicians or non-clinicians and may be administered in a variety of ways, including in-person, by telephone, by video conference, or through other virtual means.
- » Questions from the Screening Tools must be asked using the specific wording provided in the tools and in the specific order the questions appear in the tools.
- The Screening Tools will be provided as PDF documents. However, MCPs and MHPs are <u>not required</u> to use the PDF format to administer the tools.

Q: What is meant by "clinician" and "non-clinician"?

A: For the purposes of this BHIN, clinicians are the provider types defined on Supplement 3 to Attachment 3.1-A, pages 2m-2p in the California Medicaid State Plan as providers of Rehabilitative Mental Health Services. Non-clinicians may include administrative staff, peer support staff, or other professionals who do not meet the definition for clinician.

Q: What if the wording needs to be altered as part of translation?

A: DHCS intends to translate the final Screening Tools into Spanish and other threshold languages. Given this process will take some time, deviation from the specific wording of the tools is allowable as part of translation into another language if DHCS has not yet provided a translated version of the tool in that language.

Q: What if a beneficiary asks the screener to clarify a question? Can the screener deviate from the specific wording of the question?

A: There may be instances where the screening administrator is asked to clarify a question. As part of the implementation of the Screening Tools, MCPs and MHPs are expected to train staff on approaches to respond to requests for clarification that are aligned with the intent of the question(s) and existing internal policies.

Adult and Youth Screening Tools: Requirements for Referrals

- » After administration of the Screening Tools, individuals must be referred to the appropriate Medi-Cal mental health delivery system based on their score.
 - » If score is 5 or below, the individual is referred to MCP.
 - » If score is 6 or above, the individual is referred to MHP.
- » Once an individual is referred to their MCP or MHP they must receive a timely clinical assessment and medically necessary services.
- » MCPs and MHPs must coordinate to facilitate referrals.

Adult and Youth Screening Tools: Sample Referral Process (MHP to MCP)

MHP administers
Screening Tool
& beneficiary score is 5 or below



MHP refers
beneficiary to
MCP and shares
the completed
Screening Tool



MCP offers and provides a timely clinical assessment without requiring an additional screening



MHP follows up with MCP to coordinate referral

Adult and Youth Screening Tools: Sample Referral Process (MCP to MHP)

MCP administers Screening Tool & beneficiary score is 6 or above



MCP refers beneficiary to MHP and shares the completed Screening Tool



MHP offers and provides a timely clinical assessment without requiring an additional screening



MCP follows up with MHP to coordinate referral

Q: What if the screener disagrees with the screening score?

A: Individuals must be referred to the appropriate Medi-Cal mental health delivery system (i.e., either the MCP or the MHP) for a clinical assessment based on their screening score. The Screening Tools are designed for administration by both non-clinicians and clinicians and do not require clinical judgement. Once referred to the MCP or MHP, the individual will receive a clinical assessment which will determine level of care and medically necessary services.

Q: What is meant by "timely clinical assessment"? How soon after an individual is referred to the MHP or MCP based on their screening score must an assessment be offered?

A: In accordance with AB 205, plans must comply with the appointment time standards pursuant to Section 1300.67.2.2 of Title 28 of the California Code of Regulations (CCR), as well as the standards set forth in contracts between DHCS and plans.

Adult and Youth Screening Tools: Contents



Adult Screening Tool: Questions

» The Adult Screening Tool includes 14 screening questions that are intended to elicit information about the following:



Safety



Life Circumstances





Youth Screening Tool: Questions

» The Youth Screening Tool includes 23 screening questions that are intended to elicit information about the following:



Safety



Life Circumstances



System Involvement



Risk

- » There are two versions of the Youth Screening Tool.
 - » Youth Respondent: Youth reaching out on their own.
 - » Respondent on Behalf of Youth: A person reaching out on behalf of the youth.

Q: Who can complete a screening on behalf of a child or youth? Is it limited to parents?

» **A:** MCPs and MHPs should follow their existing policies and procedures for who can share information and act on behalf of another person.

Transition of Care Tool: Requirements for Use

- » MCPs and MHPs are required to use the Transition of Care Tool to facilitate transitions of care to or addition of services from the other delivery system for individuals when their service needs change.
- » The determination to transition and/or add services from the other delivery system must be made by a clinician.
- » Once a clinician has made the determination, the Transition of Care Tool may be filled out by a clinician or non-clinician.

Q: Can MCPs and MHPs require providers to use the Transition of Care Tool when adding services from or transitioning a beneficiary to the other delivery system?

A: Yes. MCPs and MHPs may choose to require providers to use Transition of Care Tool when transitioning a beneficiary to or adding services from the other delivery system. MCPs and MHPs must ensure that their subcontractors and network providers comply with all applicable state and federal laws and regulations, contract requirements, and other DHCS guidance.

Transition of Care Tool: Requirements for Use

- The Transition of Care Tool will be provided as a PDF document. However, MCPs and MHPs are not required to use the PDF format to administer the tool.
- The contents of the Transition of Care Tool must not be altered, including the specific order and wording of fields. However, referring entities may provide additional documentation, such as care plans and medication lists, as attachments.

Transition of Care Tool: Requirements for Referrals

- » After the Transition of Care Tool is completed, the individual must be referred to their MCP or MHP.
- » MCPs and MHPs must coordinate to facilitate transitions of care and addition of services from the other delivery system to ensure the referral process has been completed.

Transition of Care Tool: Contents

Instructions

Referring plan and care team

Beneficiary demographics and contact information

Beneficiary health information Services requested and destination plan information

Q: Is there a scoring methodology that determines whether a beneficiary will transition to or have services added from the other delivery system?

A: No. A determination to transition care to or add services from the other delivery system must be made by a clinician. The Transition of Care Tool provides a standardized process for sharing information and facilitating coordination across delivery systems. The tool is not meant to be diagnostic, nor to replace existing DHCS criteria for access to specialty and non-specialty mental health services.

Expectations for Launch

- » Statewide implementation of Screening and Transition of Care Tools begins January 1, 2023
- » Final guidance and tools will be released late December
- » Per DHCS guidance, P&Ps for MHPs are due March 1, 2023; P&Ps for MCPs are due 90 days following release of final guidance
- » DHCS anticipates fluid implementation during Q1 2023 in accordance with P&P development

Implementation Considerations

- » Final tools will be released to MCPs and MHPs as fillable PDFs
 - » MCPs and MHPs are permitted to build the tools into their own systems; however, DHCS is not requiring plans to do so
- » DHCS anticipates MCPs and MHPs will have additional questions regarding implementation as they begin operationalizing the tools
 - » To address questions and support implementation, DHCS will provide ongoing technical assistance in Q1 2023
- » DHCS is facilitating the development of translated versions of the Adult and Youth Screening Tools in threshold languages

Steps MCPs and MHPs Can Take to Prepare for Statewide Launch

- » Review draft guidance and tools
- » Begin coordination with MCP/MHP partners
- » Begin development of workflows for tool implementation, which could include:
 - » Identify staff who will administer tools
 - » Develop a training plan
 - » Identify short- and long-term documentation processes
 - » Determine requirements for data exchange with plan partners
 - Determine changes needed to P&Ps and MOUs to comply with new requirements
- » Continue to identify questions to support ongoing technical assistance

Q&A

Next Steps

- » Release of final guidance and tools
- » Statewide launch January 1, 2023
- » TA Webinar January 19, 2023
 - » Review final guidance and tools
 - » Address stakeholder questions



Questions?

» If you have additional questions, please e-mail DHCS at:

BHCalAIM@dhcs.ca.gov and/or

MCQMD@dhcs.ca.gov

» Subject Line "Screening and Transition of Care Tools"



