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## CalAIM Screening & Transition of Care Tools for Youth

### Results from Pilot Testing

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#### Overview

The Department of Health Care Services (DHCS) California Advancing and Innovating Medi-Cal ([CalAIM](#)) initiative “Screening and Transition of Care Tools for Medi-Cal Mental Health Services” (Screening and Transition of Care Tools) aims to design a coherent plan to address beneficiaries’ service needs across Medi-Cal mental health delivery systems, ensure all Medi-Cal beneficiaries receive coordinated services, and improve health outcomes. The goal of the Adult and Youth Screening Tools is to determine the appropriate mental health delivery system referral for Medi-Cal beneficiaries newly seeking mental health services. The goal of the Transition of Care Tool is to ensure that Medi-Cal beneficiaries who are receiving mental health services from one delivery system receive timely and coordinated care when their services are being transitioned to or added from the other delivery system. This document contains results from the Youth Screening and Transition of Care Tools. The results of the Adult Screening and Transition of Care Tools are contained in a separate document.

Both Adult and Youth Screening and Transition of Care Tools were designed in consultation with stakeholders and have undergone testing. Following a beta testing period, the Youth Screening and Transition of Care Tools were updated and pilot tested. This document summarizes feedback collected as part of the Youth Screening and Transition of Care Tools Pilot, which was conducted from June 20, 2022 to September 26, 2022. Pilot testing was conducted by eight county Mental Health Plan (MHP) and Medi-Cal Managed Care Plan (MCP) pairs in seven counties, representing large counties, small counties, counties with urban regions, and counties with rural regions. Pilot testing was designed to gather robust feedback to assist in further refinement of the tools before the January 1, 2023 implementation date. During the pilot, MHP/MCP staff completed a survey after each tool administration. The survey was designed to help identify critical issues in use of the tools and areas for improvement. The survey also included several beneficiary-facing questions to gather information about their

experience with the tools. The results presented below represent DHCS' findings based on the survey data.

### **Results Summary**

A total of 1,960 surveys were completed for the Youth Screening Tool, including 1,591 for the adult-facing version of the tool, which is designed for when an adult is answering screening questions on behalf of a child or youth, and 369 for the youth-facing version of the tool, which is designed for when a child or youth answers screening questions on their own behalf. A total of 112 surveys were completed for the Youth Transition of Care Tool. Data from survey responses revealed several notable findings, which are outlined below.

### **Youth Versus Adult Versions of the Screening Tool**

- The adult-facing version of the screening tool was administered most of the time (84%).

### **Beneficiary Satisfaction**

- Median beneficiary satisfaction with the Youth Screening Tool was 10 out of 10.
- Median beneficiary satisfaction with the Transition of Care Tool was 10 out of 10.

### **Administration Time & Completion**

- Median administration time for the Youth Screening Tool was 13 minutes.
- Median administration time for the Transition of Care Tool was 20 minutes.
- The majority of Youth Screening and Transition of Care Tools were completed over the phone.

### **Staff Training Levels**

- The primary training levels of staff administering the Youth Screening Tool were Master's degree (69%) and Bachelor's degree (17%).
- The primary training levels of staff administering the Transition of Care Tool was Master's degree (48%) and Doctorate degree (48%).
- A majority of tool administrators felt the tools were appropriate to their training level (>75% across all training levels).

## **Scoring & Beneficiary Placement**

- Screening Tool:
  - 74% of beneficiaries screened were referred to non-specialty level of care (MCP) for assessment.
  - 26% of beneficiaries screened were referred to specialty level of care (MHP) for assessment.
  - 93% of those administering the screening tool believed that the beneficiary was referred to the right level of care for assessment.

## ***Modifications to Tools***

In response to the pilot testing results, the following updates have been made to the draft Youth Screening and Transition of Care Tools:

### **Screening Tool**

- Reordered questions to improve flow and reduce redundancy.
- Revised instructions to enhance clarity.
- Minor formatting revisions.

### **Transition of Care Tool**

- Minor formatting revisions.

If you have questions about the Screening and Transition of Care Tools initiative, please e-mail DHCS at [BHCalAIM@dhcs.ca.gov](mailto:BHCalAIM@dhcs.ca.gov).