



Medi-Cal Managed Care Screening Tools

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DHCS Trauma Screening

- DHCS does not currently have or mandate a trauma specific screening in children or adults.
- Managed Care Plans (MCPs) may have additional requirements of their providers for trauma screenings, beyond what DHCS requires, or
- MCPs may have their own Individual Health Education Behavior Assessment (IHEBAs), which may also include trauma related questions



Screening Tools

- Screening tools should take into consideration:
 - The population being screened to:
 - Ensure screenings are done in a culturally and linguistically appropriate manner that minimizes unintended negative impacts to the individual being screened.
 - The providers who will perform the screening to ensure:
 - Appropriate education, training, and resources for the providers, again to minimize unintended negative impacts to the individual being screened.



DHCS Required Screening Tools

- Required by Contract and All Plan Letters:
 - Initial Health Assessment (IHA)
 - Individual Health Education Behavior Assessment (IHEBA)
- Both tools are for universal use
 - Intended for the entire, diverse Medi-Cal population, including children and adults



Initial Health Assessment

- MCPs must ensure providers complete an IHA for each member upon MCP enrollment.
- Comprehensive assessment that enables the member's provider to assess and manage the acute, chronic and preventive health needs of the member.



IHA

- IHA includes:
 - A complete physical and mental health exam and a comprehensive medical history including a complete social history
 - An Individual Health Education Behavioral Assessment (IHEBA)
 - The provision of appropriate preventive services



IHEBA

- Individual Health Education Behavior Assessment
- MCPs must ensure providers complete an IHEBA as part of the IHA (upon enrollment) and then, subsequently, at certain age specific intervals
 - 7 pediatric IHEBAs and 2 for adults (one specific to 65 yoa and older)
- Staying Healthy Assessment (SHA) is DHCS's version of the IHEBA



IHEBA

- Goals of the IHEBA/SHA:
 - Identify and track high-risk behaviors of MCP members.
 - Prioritize each member's need for health education related to lifestyle, behavior, environment, and cultural and linguistic needs.
 - Initiate discussion and counseling regarding high-risk behaviors.
 - Provide relevant health education counseling, interventions, referral, and follow-up



Staying Healthy Assessment

- MCPs and providers are encouraged to use the SHA but can develop and use their own IHEBA with DHCS approval.
- SHA is an assessment of health risk behaviors; filled out by members in the office and reviewed with the provider.
 - Typically self-administered, completed by member w/out support
- It is not a trauma screen but questions, and subsequent answers, on the SHA could prompt the provider to do a trauma specific screen.



SHA Topics/Subtopics

- 10 topics including:
 - Nutrition, oral health, physical activity, safety/injury prevention, parenting support, alcohol/tobacco/drug use, mental health, social determinants of health, violence and sexual health
 - Within each topic are numerous subtopics – of interest to this group are:
 - Exposure to violence
 - Intimate partner violence and/or domestic violence
 - Unwanted sexual contact
 - Drug and/or alcohol screening/assessment
 - Social determinants of health



IHA/IHEBA Data

- Both the IHA and the IHEBA (SHA) remain in the member's medical record in the provider office; neither the MCPs nor DHCS have routine access to the data.
- While DHCS and MCPs do periodic reviews of provider offices and check for completion of the IHA and IHEBA, the individual responses to the screens are not collected/analyzed.



Other DHCS Required Screenings/Assessments

- Health Risk Assessment (HRA)
 - Health risk stratification to identify newly enrolled SPD and dually eligible beneficiaries with higher risk and more complex health care needs (HRA data lives with the MCPs)
- HIF/MET
 - An initial health screen mailed to all members upon enrollment (results of the tool live with the MCPs)
- SBIRT
 - Alcohol misuse screening required by APL



Other DHCS Required Screenings/Assessments

- USPSTF A and B Recommendations
 - All MCPs are contractually required to ensure the provision of USPSTF grade A and B recommendations for preventive services (results are in the member's medical record).
 - These include several clinical screenings, those that are specifically called out in the Contract (e.g., SBIRT) and those that are not



Other DHCS Required Screenings/Assessments

- AAP/Bright Futures
 - MCPs are contractually obligated to ensure providers adhere to the AAP Bright Futures Periodicity Schedule for members under 21 yoa (results are in member's medical record).
 - Includes, at various intervals, developmental screening, psychosocial/behavioral assessments, tobacco, alcohol or drug use assessments, and depression screening
 - Note, the Child Health and Disability Program (CHDP) requires routine age appropriate pediatric assessments which follow AAP/Bright Futures Periodicity Schedule



Thank you.