

## Systems and Medicaid Committee Agenda

Thursday, January 20, 2022

<https://us02web.zoom.us/j/86507558219?pwd=SGlaSHdkKzNvYVU0ak9JQklqSERmdz09>

Meeting ID: **865 0755 8219** Passcode: **SMC2022**

Phone-in: **+1 669 900 6833** Access Code: **\*8280905#**

8:30 a.m. – 12:00 p.m.

- |                 |   |              |
|-----------------|---|--------------|
| <b>8:30 am</b>  | <b>Welcome and Introductions – Changing of Officers</b><br><i>Liz Oseguera, Chairperson and All Members</i>   |              |
| <b>8:35 am</b>  | <b>Approve October 2021 Draft Meeting Minutes</b><br><i>Karen Baylor, Chairperson and All Members</i>   | <b>Tab 1</b> |
| <b>8:40 am</b>  | <b>Revise and Finalize SMC 2022-2023 Work Plan</b><br><i>Karen Baylor, Chairperson and All Members</i>  | <b>Tab 2</b> |
| <b>9:10 am</b>  | <b>Public Comment</b>   |              |
| <b>9:15 am</b>  | <b>Overview of CalAIM Changes</b><br><b>Re: Criteria to Access Specialty Mental Health Services (SMHS)</b><br><i>Veronica Kelley, Chief, Mental Health &amp; Recovery Services</i><br><i>Orange County Health Care Agency</i>   | <b>Tab 3</b> |
| <b>9:40 am</b>  | <b>Public Comment</b>   |              |
| <b>9:45 am</b>  | <b>Break</b>  |              |
| <b>10:00 am</b> | <b>County Perspective Re: Criteria to Access SMHS</b><br><i>Veronica Kelley, LCSW, Director of Behavioral Health, Orange County</i><br><i>Tony Vartan, LCSW, Director of Behavioral Health, San Joaquin County</i><br><i>Allie Budenz, Assistant Director of Quality Improvement, California</i><br><i>Primary Care Association (CPCA)</i><br><i>Heather Parson, Mental Health Quality Management Team Manager,</i><br><i>San Diego County Behavioral Health Services (BHS)</i> | <b>Tab 4</b> |
| <b>11:25 am</b> | <b>Public Comment</b>   |              |
| <b>11:30 am</b> | <b>Overview of Peer Support Specialist Medi-Cal Benefit</b><br><i>Ashneek Nanua, SMC Staff</i>  | <b>Tab 5</b> |
| <b>11:45 am</b> | <b>Public Comment</b>   |              |
| <b>11:50 am</b> | <b>Wrap Up/Next Steps</b><br><i>Karen Baylor, Chairperson and All Members</i>   |              |
| <b>12:00 pm</b> | <b>Adjourn</b>  |              |

*The scheduled times on the agenda are estimates and subject to change.*

**Systems and Medicaid Committee Members**

Karen Baylor, Chairperson    Uma Zykofsky, Chair-Elect

Veronica Kelley

Celeste Hunter

Deborah Pitts

Tony Vartan

Catherine Moore

Karen Hart

Noel O'Neill

Walter Shwe

Liz Oseguera

Dale Mueller

Marina Rangel

Cheryl Treadwell

Daphne Shaw

Susan Wilson

Joanna Rodriguez

Steve Leoni

**Committee Staff:** Ashneek Nanua, Council Analyst; Jane Adcock, Executive Officer

TAB 1

**California Behavioral Health Planning Council  
Systems and Medicaid Committee  
Thursday, January 20, 2022**

**Agenda Item:** Approve October 2021 Draft Meeting Minutes

**Enclosures:** October 2021 Draft SMC Meeting Minutes

**Background/Description:**

Committee members will review the draft meeting minutes for the October 2021 Quarterly Meeting.

**Motion:** Accept and approve the October 2021 Systems and Medicaid Committee draft meeting minutes.

## **Systems and Medicaid Committee**

### Meeting Minutes (DRAFT)

Quarterly Meeting – October 21, 2021

#### **Members Present:**

Karen Baylor, Chair-Elect	Catherine Moore	Joanna Rodriguez
Walter Shwe	Celeste Hunter	Uma Zykofsky
Noel O’Neill	Susan Wilson	Daphne Shaw
Karen Hart	Deborah Pitts	

#### **Staff Present:**

Ashneek Nanua, Jane Adcock, Eva Smith, and Jenny Bayardo

#### **Public Attendees:**

Steve Leoni, Stacy Dalglish, Megan Otter, William Garrity, Theresa Comstock, Steve McNally

#### **Meeting Commenced at 10:30 a.m.**

---

#### **Item #1      Approve June 2021 Draft Meeting Minutes**

---

The Systems and Medicaid Committee (SMC) reviewed the June 2021 Draft Meeting Minutes. Catherine Moore requested a correction regarding her statement to track the implementation of CalAIM on Page 5 of the SMC June 2021 Quarterly Meeting packet. Noel O’Neill motioned approval of the SMC June 2021 meeting minutes with the correction. Susan Wilson seconded the motion. The motion was approved.

#### **Action/Resolution**

The June 2021 SMC Meeting Minutes are approved.

#### **Responsible for Action-Due Date**

N/A

---

#### **Item #2      Revise SMC 2021-2022 Work Plan**

---

SMC Chair-Elect, Karen Baylor, reviewed the goals from the draft SMC 2021-2022 Work Plan. SMC staff reviewed changes made to the Work Plan from the June 2021 Quarterly Meeting and summarized implementation timelines for major initiatives lead by the Department of Health Care Services (DHCS) and California Health and Human Services Agency (CalHHS). Karen Baylor asked the committee to prioritize activities for 2022 and determine which items can be addressed in 2023. Committee members provided the following input:

- Susan Wilson commented on committee decision-making processes and indicated that some responsibilities may be delegated to committee staff.
- Noel O’Neill proposed to educate the entire Planning Council on the changes brought forth by CalAIM and inform the Council about the proposals that will be implemented based on the decisions made by DHCS.
- Catherine Moore expressed interest to focus on items that the committee emphasized in their CalAIM letters written to DHCS and to keep track of progress towards the recommendations provided in the letter.
- Uma proposed that the SMC Work Plan be extended to a multi-year Work Plan with activities categorized by each year.
- For Goal 1, Karen Baylor suggested that the SMC provide a high-level overview of CalAIM proposals at General Session in January 2022 with their associated timeframes in order to help map out the Initiative and its impact on the behavioral health service delivery system.
- Committee members proposed introducing the CalAIM Initiative to the entire Planning Council over several General Sessions by order of the implementation timeline.

### **Action/Resolution**

SMC staff and Committee Officers will continue making changes to the SMC Work Plan based on the committee’s input.

### **Responsible for Action-Due Date**

Ashneek Nanua, Liz Oseguera, Karen Baylor, Uma Zykofsky – January 2022

---

### **Item #3      Public Comment**

---

Theresa Comstock stated the CalAIM priorities for the California Association of Local Behavioral Health Boards and Commissions (CalBHBC). She indicated that there is interest in seeing how Enhanced Care Management (ECM) and Community Supports will address issues related to Adult Residential Facilities (ARFs) and if additional funding can be provided by Medi-Cal. Theresa also expressed the priority to increase evidence-based practices for Medi-Cal recipients who receive vocational rehabilitation services.

Steve Leoni stated that the goals and objectives on the Work Plan can be implemented at different times rather than in one specific year. He added that it is unclear who will monitor the implementation of CalAIM due to the vague nature of the CalAIM proposal document and that the SMC may want to pay attention to this issue. On conservatorship, Mr. Leoni stated that individuals should be evaluated by acuity.

**Action/Resolution**

N/A

**Responsible for Action-Due Date**

N/A

**Item #4      Nominate 2022-2023 SMC Chair-Elect**

Noel O'Neill nominated Uma Zykofsky as the 2022-2023 Systems and Medicaid Committee Chair-Elect. Catherine Moore seconded the nomination. Uma Zykofsky accepted the nomination. SMC staff took a roll call vote to nominate the Chair-Elect. The Executive Officer, Jane Adcock, clarified that official approval of the SMC Chair-Elect will occur by the Council's Officer Team.

**Action/Resolution**

The nominated SMC Chair-Elect will be submitted to the Council's Officer Team for approval.

**Responsible for Action-Due Date**

Jane Adcock – January 2022

**Item #5      Discussion of General Session CalAIM Presentation**

Karen Baylor proposed the SMC to provide a high-level overview of CalAIM and implementation timelines during the General Session in January 2022, and to continue planning for a more in-depth presentation during subsequent quarterly meetings. Karen asked for the committee to provide input on who they believe should be the designated presenter(s) for the CalAIM overview. Noel O'Neill proposed DHCS or the County Behavioral Health Directors Association (CBHDA) to provide the high-level overview during the January 2022 Quarterly Meeting. Uma Zykofsky proposed hearing the county and provider perspective for subsequent presentations of the CalAIM Initiative.

Committee members expressed that the CalAIM presentation may be best presented at the April 2022 Quarterly Meeting in order to allow time to see the impact of CalAIM as

well as the successes and challenges of implementation. Committee members decided to present the CalAIM behavioral health proposals and timelines with a corresponding handout during the January 2022 Quarterly Meeting's General Session Committee Reports.

### **Action/Resolution**

SMC staff will create a handout that identifies key CalAIM behavioral health proposals and timelines to track through the implementation period.

### **Responsible for Action-Due Date**

Ashneek Nanua, Liz Oseguera, Karen Baylor, Uma Zykofsky – January 2022

## **Item #6      Public Comment**

Steve Leoni stated that the medical necessity changes and eligibility has been defined differently in the past than it is defined currently. He stated that it may be helpful to define how medical necessity is defined at this time.

### **Action/Resolution**

N/A

### **Responsible for Action-Due Date**

N/A

## **Item #7      Wrap Up/Next Steps**

Karen Baylor summarized the following next steps and action items for the Systems and Medicaid Committee:

- Continue modifying the SMC Work Plan
- Provide a report-out and handout regarding the proposals, timeframes, and priorities for the CalAIM Initiative during the January 2022 Quarterly Meeting General Session Meeting
- Submit Uma Zykofsky's name to the Planning Council's Officer Team to approve as the 2022-2023 SMC Chair-Elect
- Continue working on the development of a CalAIM General Session presentation during the January 2022 Quarterly Meeting

### **Action/Resolution**

The action items are outlined above.

**Responsible for Action-Due Date**

Ashneek Nanua, Liz Oseguera, Karen Baylor, Uma Zykofsky – January 2022

Meeting Adjourned at 11:40 a.m.

## TAB 2

**California Behavioral Health Planning Council  
Systems and Medicaid Committee  
Thursday, January 20, 2022**

**Agenda Item:** Revise and Finalize SMC 2022-2023 Work Plan

**Enclosures:** Draft SMC 2022-2023 Work Plan

**How This Agenda Item Relates to Council Mission**

*To review, evaluate and advocate for an accessible and effective behavioral health system.*

The Work Plan is an instrument to guide and monitor System and Medicaid Committee activities in its efforts to uphold its duties within the framework of the Planning Council.

**Background/Description:**

The purpose of the Work Plan is to establish the objectives and goals of the SMC, as well as to map out the necessary tasks to accomplish those goals. The SMC will modify the 2021-2022 SMC Work Plan based on committee feedback provided during the October 2021 Quarterly Meeting.

**Motion:** Approve the Systems and Medicaid Committee 2022-2023 Work Plan

---

**Goal #1:** *Leverage the Council's role in the State of California to influence policy changes the committee identifies as necessary to improve the state's behavioral health system*

---

**Objective 1.1: Participate in efforts relating to Peer Support Specialist Certification in California.**

**Phase 1:** Explore options to make recommendations on financing and regulations for California's Peer Support Specialist Certification law.

**Timeline:** January - December 2022

**Activities:**

- Invite the Department of Health Care Services and other involved public entities such as the County Behavioral Health Directors Association (CBHDA) or the California Mental Health Services Authority (CalMHSA) to discuss the implications of Senate Bill 803 implementation from a program, financing and oversight perspective

**Phase 2:** Track the implementation of Peer Support Specialist Certification in California and provide recommendations on areas of needed improvement.

**Activities:**

- Track implementation activities through CalMHSA and county sources to understand how peer certification is operationalized to help ensure that peer specializations are appropriately assigned and utilized
- Monitor implementation of incorporation of peer services into California's Medicaid system
  - Review results of the triennial reviews to identify the impact of peers in the system and any key problem areas in order to provide recommendations for improving implementation of this program

**Timeline:** January 2023 – Ongoing

<b>Peer Support Specialist Certification Implementation Timeline</b>	
<b>Activity</b>	<b>Date</b>
CalMHSA identifies criteria for specializations for providers, crisis, unhoused, and justice-involved persons	January – March 2022
Go-Live with Peer Certification	May - July 2022
DHCS to obtain federal approvals for Peer Support Services reimbursement	July 2022

**Objective 1.2: Monitor implementation of the California Advancing and Innovating Medi-Cal (CalAIM) Initiative and assess successes and challenges in order to provide policy recommendations for areas of improvement to the Department of Health Care Services.**

**Phase 1:** Keep Council members and public stakeholders informed about the CalAIM behavioral health proposals that will result in major changes at the local level for county systems and providers operating in the Medi-Cal behavioral health system.

**Activities:**

- Provide updates on timelines and changes occurring from the implementation of CalAIM's behavioral health proposals during General Session meetings
- Distribute existing or staff-developed handouts to help Council members and public stakeholders understand the CalAIM changes and impact at the local level
- Track activities of the DHCS CalAIM Behavioral Health Workgroup

**Timeline:** January – December 2022

**Phase 2:** Track implementation of the CalAIM behavioral health proposals and provide recommendations to the Department of Health Care Services throughout the CalAIM implementation period, particularly for measuring and tracking outcomes.

**Activities:**

- Determine how CalAIM will be measured and how to track behavioral health outcomes
  - Work with DHCS, CBHDA, and other collateral partners to identify data points that all counties will collect
  - Review and provide feedback on measurement tools that are compatible across systems to analyze whether programs and services rendered under CalAIM are effective
- Invite presenters to provide updates on successes and challenges of CalAIM implementation to determine the impact on individuals with Serious Mental Illness (SMI) and Substance Use Disorders (SUD)
- Participate in DHCS CalAIM Behavioral Health Workgroup meetings and stakeholder engagement sessions relating to CalAIM behavioral health proposals
- Provide recommendations to DHCS regarding identified challenges to access and quality of care for individuals with SMI and SUD
- Track CalAIM stakeholder sessions regarding the proposals to initiate a Medi-Cal pre-release application and services for individuals 30 days prior to release from incarceration

**Timeline:** July 2022 – Ongoing

## CalAIM Behavioral Health Initiatives Timeline Update

Policy	Go-Live Date
Criteria for Specialty Mental Health Services	January 2022
Drug Medi-Cal Organized Delivery System 2022-2026	January 2022
Drug Medi-Cal ASAM Level of Care Determination	January 2022
Updated Annual Review Protocol and Reasons for Recoupment FY 2021-2022	January 2022
Documentation Redesign for Substance Use Disorder & Specialty Mental Health Services	July 2022
Co-Occurring Treatment	July 2022
No Wrong Door	July 2022
Updated Annual Review Protocol and Reasons for Recoupment FY 2022-2023	October 2022
Standardized Screening & Transition Tools	January 2023
Behavioral Health CPT Coding Transition	July 2023
County Behavioral Health Plans Transition to Fee-for-Service and Intergovernmental Transfers	July 2023
Administrative Behavioral Health Integration	January 2027 <sup>s</sup>

**Objective 1.3: Track efforts that increase access to Medi-Cal behavioral health services via telehealth modalities to help reduce disparities and improve health equity and outcomes among unserved and underserved Medi-Cal populations.**

**Activities:**

- Gather and present information on factors relating to the digital divide in Black, Indigenous, and Persons of Color (BIPOC) and other unserved or underserved communities
  - Utilize information gathered, including the Planning Council’s 2020 Data Notebook, to compile a white paper or recommendation letter advocating for additional funding, resources, and technical assistance needed to reduce the digital divide
  
- Track implementation and outcomes of the DHCS Telehealth Policy regarding behavioral health services and provide recommendations to DHCS Telehealth Advisory Workgroup

**Timeline:** TBD

---

**Goal #2:** *Collaborate with other entities on behavioral health system reform, including issues with the current system, recommendations for policy change and current efforts to influence the change*

---

**Objective 2.1:** Collaborate with state, county, and health plan partners to participate in priority initiatives that work towards increasing and improving behavioral health services and student mental health services for children and youth.

**Phase 1:** Participate and provide recommendations for upcoming key initiatives for children and youth as appropriated in the Governor's 2021-2022 Budget.

**Activities:**

- Assist California Health and Human Services Agency (CalHHS) with community outreach and stakeholder forums to ensure that the consumer and family voice is represented in the design and policy development of the Children and Youth Behavioral Health Initiative
- Participate in stakeholder sessions and provide policy recommendations to DHCS and CalHHS as necessary relating to:
  - Children and Youth Behavioral Health Initiative, including but not limited to coordinating with key entities to provide guidance to Managed Care Plans who will be responsible for overseeing capacity and infrastructure development for student mental health services
  - Medi-Cal Dyadic Services, an integrated model of physical and behavioral health screening and services to the whole family
  - Behavioral Health Continuum Infrastructure Program (BHCIP)

**Timeline:** January – December 2022

**Phase 2:** Continue participation in efforts to improve the system of care for children and youth.

- Participate in efforts to implement *Assembly Bill 2083 (2018): Children and Youth System of Care*, which requires each county to develop and implement a Memorandum of Understanding (MOU) outlining the roles and responsibilities of the various local entities that serve children and youth in foster care who have experienced severe trauma. *\*\*\*Please note that CalHHS is delaying submission requirements for the finalized MOUs until further notice*
- Engage in stakeholder sessions and provide recommendations for the Children and Youth Behavioral Health Initiative, BHCIP, and other initiatives impacting the intersection of behavioral health and children's system of care

**Timeline:** January 2023 – Ongoing

**Objective 2.2:** Support efforts to make improvements to the conservatorship system in California including tracking the implementation of the Institutes for Mental Disease (IMD) Exclusion Waiver as well as the utilization of the Behavioral Health Continuum Infrastructure funding.

**Activities:**

- Invite key stakeholders to initiate committee discussion regarding current issues around conservatorship as well as the barriers and strategies to meet the needs of individuals defined as gravely disabled or needing care in an IMD facility
- Track and participate in efforts relating to the use of Behavioral Health Continuum of Care Infrastructure funding to ensure a robust continuum of care for individuals with behavioral health conditions in order to fulfill the requirements under the IMD Exclusion Waiver in California

**Timeline:** TBD

TAB 3

**California Behavioral Health Planning Council  
Systems and Medicaid Committee  
Thursday, January 20, 2022**

**Agenda Item:** Overview of CalAIM Changes Re: Criteria to Access Specialty Mental Health Services (SMHS)

**Enclosures:** [DHCS Informational Webinar: Criteria for Access to Specialty Mental Health Services](#)

**How This Agenda Item Relates to Council Mission**

*To review, evaluate and advocate for an accessible and effective behavioral health system.*

The purpose of this agenda item is to provide the SMC with an overview of the changes to the criteria for individuals to access SMHS as proposed under the CalAIM Initiative. Committee members will utilize this information to determine the impact at the local level and educate Council members and community partners about the changes occurring.

**Background/Description:**

The California Advancing and Innovating Medi-Cal (CalAIM) Initiative will go-live in January 2022 through 2024. CalAIM has a number of behavioral health proposals that aim to expand access and improve quality of care for individuals receiving services in California's public behavioral health system. The criteria to access specialty mental health services is one proposal that has an implementation date of January 1, 2022, and is anticipated to create more access for individuals with severe mental illness.

Veronica Kelley, Chief, Mental Health & Recovery Services at the Orange County Health Care Agency, will provide an overview of the changes occurring in regards to individuals who may access the SMHS system of care. Committee members will have the opportunity to ask questions regarding this proposal.

**About Veronica Kelley, DSW, LCSW:**

*Veronica A. Kelley is the Chief of Mental Health & Recovery Services for the Orange County Health Care Agency and oversees the daily operations for both Mental Health and Substance Use Disorder Services. She is a member of the Governing Board for the County Behavioral Health Directors Association of California (CBHDA), she sits on the Executive Committee, and serves as the Co-Chair for the Substance Abuse Prevention & Treatment (SAPT) Committee. She is also a Council Member to the California Behavioral Health Planning Council, Board Member to the California Mental Health Services Authority and Associate Member to the American Society of Addiction Medicine.*

TAB 4

**California Behavioral Health Planning Council  
Systems and Medicaid Committee  
Thursday, January 20, 2022**

**Agenda Item:** County Perspective Re: Criteria to Access SMHS

**Enclosures:**

[DHCS CalAIM Behavioral Health Workgroup Webpage](#)  
[DHCS CalAIM Webpage](#) and [Behavioral Health CalAIM Webpage](#)

**How This Agenda Item Relates to Council Mission**

*To review, evaluate and advocate for an accessible and effective behavioral health system.*

The purpose of this agenda item is to provide the SMC with an overview of the changes to the criteria for individuals to access SMHS as proposed under the CalAIM Initiative. Committee members will utilize this information to determine the impact at the local level and educate Council members and community partners about the changes occurring.

**Background/Description:**

The California Advancing and Innovating Medi-Cal (CalAIM) Initiative will go-live in January 2022, staggering implementation of various proposals through 2024. CalAIM has a number of behavioral health proposals that aim to expand access and improve quality of care for individuals receiving services in California's public behavioral health system. The criteria to access Specialty Mental Health Services (SMHS) is one proposal that has an implementation date of January 1, 2022, and is anticipated to create more access for individuals with severe mental illness and substance use disorders.

Small, medium, and large county behavioral health directors and leaders in primary care will offer their perspective on the CalAIM changes to the criteria to access SMHS. The panelists will also speak about the challenges, successes, and opportunities brought forth from these changes as well. Committee members will have the opportunity to ask questions regarding this proposal.

*Please contact SMC staff at [Ashneek.Nanua@cbpc.dhcs.ca.gov](mailto:Ashneek.Nanua@cbpc.dhcs.ca.gov) for copies of the presentation materials.*

**California Behavioral Health Planning Council  
Systems and Medicaid Committee  
Thursday, January 20, 2022**

**Agenda Item:** Peer Specialist State Certification Update

**Enclosures:** Peer Support Services PowerPoint Presentation

[BHIN 21-041: Medi-Cal Peer Support Specialist Program Implementation](#)

[BHIN 20-056: Peer Support Services Funding Sources](#)

[Proposed State Plan Amendment \(SPA\) 21-051: Peer Support Services](#)

[Roles and Responsibilities](#)

[Senate Bill 803: Bill Text](#)

[DHCS Peer Support Services Webpage](#)

[CalMHSA Peer Certification Webpage](#)

**How This Agenda Item Relates to Council Mission**

*To review, evaluate and advocate for an accessible and effective behavioral health system.*

This agenda item provides committee members with information regarding the design and upcoming implementation of Senate Bill 803, Peer Specialist Certification. Committee members will use this information to track how peer certification is operationalized at the local level and make recommendations on financing and regulations to the Department of Health Care Services (DHCS) when appropriate.

**Background/Description:**

Senate Bill 803 involves the development of an optional Peer Support Specialist certification program for the Drug Medi-Cal Organized Delivery System, Drug Medi-Cal, and Specialty Mental Health Services system which includes the requirements for certification as well as billing specifications for peer support service providers. As the state agency responsible for California's Medicaid program, DHCS is the entity responsible for the design, policy development, and implementation of the bill.

DHCS has completed the stakeholder engagement process and released program guidelines for peer certification in 2021. The California Mental Health Services Authority (CalMHSA), is the lead entity responsible for creating and administering the certification program on behalf of all counties who opt into the program. Individual peer programs may also create their own certification programs as long as these entities submit a peer certification program plan to DHCS for approval. Counties are currently building their programs with implementation set to begin in July 2022.

Systems and Medicaid Committee staff will provide committee members with a brief overview of peer certification efforts in California as well as an update regarding the planning process for implementation. Committee members will have the opportunity to ask questions and develop the timeline and activities required for ongoing advocacy and to make policy recommendations to DHCS on Peer Specialist Certification.

## **Senate Bill 803: Peer Support Specialist Certification in California**

Ashneek Nanua, Planning Council Analyst

### **Senate Bill 803**

- Optional Medi-Cal Benefit
- Requires the Department of Health Care Services (DHCS) to seek federal approval to establish Peer Support Specialists (PSS) as a unique Medi-Cal provider type. DHCS shall also:
  - Create statewide requirements to use in developing certification programs
  - Define the qualifications, range of responsibilities, practice guidelines, and supervision standards
  - Determine curriculum and core competencies required for certification (including specializations)
  - Specify training requirements
  - Establish Code of Ethics
  - Determine continuing education requirements
  - Determine process for initial certification, investigation of complaints and corrective action, grand-parenting requirements, and reciprocity between counties and out-of-state Peer Support Specialists

### **Behavioral Health Information Notice (BHIN) 21-041: Medi-Cal PSS Certification Program**

#### **Implementation Standards**

- [BHIN 21-041](#) Posted July 2021
- Lays out the standards for Peer Support Specialist program implementation
- Includes the elements mentioned in the prior slide e.g.) qualifications, practice guidelines, Code of Ethics, supervision standards, grand-parenting requirements, etc.

#### **Peer Support Specialist Funding**

- DHCS is currently establishing the reimbursement methods for the Drug Medi-Cal and Specialty Mental Health Services (SMHS) systems

- DHCS has released [BHIN 21-045](#) to guide counties on how to establish PSS rates for the Drug Medi-Cal Organized Delivery System
- Guidance for current funding streams for peers is provided in [BHIN 20-056](#)
  - Currently, county mental health plan (MHP) peers may provide SMHS under the “other qualified provider” category of California’s Medicaid State Plan
  - For DMC-ODS, counties must comply with the peer requirements as detailed in BHIN 21-045
  - Currently, peer services are not eligible for reimbursement under DMC

### **DHCS Roles and Responsibilities**

- Review and approve certification, supervision, and continuing education curriculum submitted by counties or designated entity
- Review and approve Implementation Plan for Medi-Cal Peer Support Specialist Certification Program
- Ensure that appropriate federal authorities are in place for the reimbursement of Medi-Cal Peer Support Services
- Determine Interim Rates for Drug Medi-Cal
- Monitor the peer support services benefit through regular reviews
- Provide data to federal partners as specified in the California 1115 Demonstration Waiver Evaluation Design Plan

[https://www.dhcs.ca.gov/Documents/CSD\\_BL/Peer-Support-Services/Roles-and-Responsibilities.pdf](https://www.dhcs.ca.gov/Documents/CSD_BL/Peer-Support-Services/Roles-and-Responsibilities.pdf)

### **County Roles and Responsibilities**

- Determine appropriate staffing for supervision of county-employed PSS
- Determine DMC-ODS and SMHS rates for DHCS approval
- Maintain employment records

- Complete formal hiring of PSS prior to provision of Medi-Cal services
- Administer utilization controls to ensure program integrity of reimbursed peer support services
- Verify the Medi-Cal eligibility of each beneficiary for each month of service prior to billing for services
- Report to the state any overpayments made for peer support specialist services
- Maintain billing and employment data, and provide to the state as appropriate, to be included in state and federally required Medicaid reports including annual program reports

### **Certification Program Roles and Responsibilities**

- Maintain record of past and present PSS and the status of certification (active & lapsed)
- Review applications for peer certification to ensure applicant meets all standard requirements
- Organize PSS trainings and continuing education to include development of curriculum with state oversight and approval
- Provide certification training and exams when reasonable accommodation requests are made, develop certification exam
- Grand-parenting: Review applications for grandparent peer certification per a state-approved process and evaluate unique grandparent applications that do not meet the standard application requirements on a case-by-case basis
- Reciprocity: Review applications for reciprocal PSS certifications from other states per a state-approved process, review applications for reciprocal certification from one California Medi-Cal Peer Support Specialist Certification program to another
- Facilitate biennial renewal of peer support specialist certification which includes maintaining record of trainings and continuing education hours

**Certification Program Roles and Responsibilities (Continued)**

- Supervision: Developing curriculum, seeking necessary approvals from the state, administering supervisor trainings, and maintaining records of completed supervisor trainings
- Provide technical assistance to individuals seeking peer certification, and serve as a point of contact for new applicants
- Develop curriculum and requirements for specialized trainings (seeking necessary approvals from the state) to include: Crisis services, Forensic, Homelessness, and Parent peers
- Complaints and corrective action: Receive all complaints made against a PSS and determine appropriate course of action, receive appeals of any adverse action taken against a PSS and determine a resolution, maintain record of complaints, corrective actions, suspensions, revocations, and appeals related to Medi-Cal PSS, and to execute actions to include suspension of certification, revocation of certification, and required educational classes
- Provide data to the state as appropriate, to be included federally required (42 CFR § 431.424) and annual program reports. Data to be collected must include, but is not limited to: Data specified in the California 1115 Demonstration Waiver Evaluation Design Plan Maintain certification data

**California Mental Health Services Authority (CalMHSA)**

- The California Mental Health Services Authority (CalMHSA) is the identified certification program responsible for developing the certification program, exam, and administration of the PSS programs on behalf of all counties that choose to opt-in
- CalMHSA held community input sessions in Fall 2021
- CalMHSA submitted a peer certification implementation plan to DHCS in November 2021

- CalMHSA began holding stakeholder sessions in December 2022 and will continue to have sessions throughout February 2022 to begin developing exam questions and identify the curriculum for the identified specializations (parent peers, crisis, homeless, justice-involved populations)

### CalMHSA's Upcoming Listening Sessions

CalMHSA's listening sessions are posted on the peer certification webpage:

<https://www.calmhsa.org/peer-certification/>

### Peer Certification Implementation Timeline

Timeline	Activity
November-December 2021	CalMHSA submits peer certification plan to DHCS and begins development of exam questions
January-February 2022	CalMHSA listening sessions
January-March 2022	CalMHSA Stakeholder Advisory Committee to provide input to identify criteria for specializations
July 2022	Peer certification goes live for implementation

### Items for SMC Consideration

- Data collection efforts
- PSS certification exam pass rate
- Diversity achieved
- Areas of needed improvement

### Resources and Updates

- DHCS Peer Support Services Webpage: <https://www.dhcs.ca.gov/services/Pages/Peer-Support-Services.aspx>
- CalMHSA Peer Certification Webpage: <https://www.calmhsa.org/peer-certification/>