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.

<u>Phase 1:</u> 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

<u>Phase 2:</u> Track the billing, reimbursement and the impact of Peer Support Specialists as a new Medi-Cal provider category to identify issues and provide recommendations to the Department of Health Care Services.

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 billed in the Medi-Cal system
- Monitor Medi-Cal billing and difference between peer services in-California's Medicaid system and non-Medicaid funding streams for peers
 - 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

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

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 to the Department of Health Care Services.

<u>Phase 1:</u> 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

<u>Phase 2:</u> 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 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 state and local-level presenters such as county behavioral health directors,
 Managed Care Plans, providers, and consumers_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 the coordination and implementation of Enhanced Care Management (ECM) and Community Supports as these services for individuals with complex health and social needs will be administered by Managed Care Plans that normally serve mild-tomoderate behavioral health populations.
- Track CalAIM stakeholder sessions regarding the proposals to initiate a Medi-Cal prerelease 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

<u>Objective 1.3</u>: 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: March 2022 and ongoing

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.

<u>Phase 1:</u> 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
 - o 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

<u>Objective 2.2:</u> 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
 - Includes tracking data systems and programs that build out the lower levels of care such as Full Service Partnerships (FSPs) and other Mental Health Services Act (MHSA) programs along the continuum of care

Timeline: January 2023