



OneCare Connect Cal MediConnect Plan (Medicare-Medicaid Plan)

Behavioral Health Services

Learning Objectives

- After completing this module, you will:
 - Understand the behavioral health benefits available to members.
 - Understand how OneCare Connect members access behavioral health services.
 - Understand the role of CalOptima and the County of Orange Health Care Agency Behavioral Health Services in delivering services.
 - Understand the activities involved in the coordination of behavioral and physical health care.

Course Content

- OneCare Connect Program
- Key Concepts
- OneCare Connect Covered Services
- Behavioral Health Services
- CalOptima Behavioral Health
- Accessing and Coordinating Services
- Behavioral Health Care Coordination
- Contact Information
- Reporting Abuse and Neglect

Note: Content of this course was current at the time it was published. As Medicare policy changes frequently, check with your immediate supervisor regarding recent updates.

OneCare Connect Plan

- California's Cal MediConnect plan:
 - Combines Medicare and Medi-Cal benefits
 - Coordinates all care, supports and services via one plan — CalOptima OneCare Connect Cal MediConnect Plan (Medicare-Medicaid Plan)
 - Integrates behavioral health benefits with physical health benefits
 - Offers improved access to Long-Term Services and Supports, including nursing facilities, Community-Based Adult Services (CBAS) and Multipurpose Senior Services Program (MSSP)
- Coordination of care through OneCare Connect enables the member to receive quality services to achieve optimal outcomes, independence, health and quality of life.

Eligible Members

- OneCare Connect members must meet all criteria to be eligible for benefits.
- Must be:
 - Age 21 and older
 - Residing in Orange County
 - Enrolled in Medicare Parts A, B, D
 - Receiving full Medi-Cal benefits (\$0 Share of Cost)
 - Share of Cost exception: Members who reside in a nursing home, are enrolled in the Multipurpose Senior Services Program (MSSP) or have In-Home Supportive Services (IHSS).

**Excluded are people under 21, with other health insurance, with other share of cost, in certain waiver programs, receiving services through state or regional developmental centers or intermediate care facilities, confined to correctional facilities, or living in a veteran's home.*

Key Concepts

- The Mental Health Act 1986 requires that restrictions on the liberty of persons with a mental illness must be the **minimum necessary** to enable effective treatment to occur and to ensure protection of members and of the public.
- “Recovery is an individual’s journey of healing and transformation to live a meaningful life in a community of his or her choice while striving to achieve maximum human potential.” (U.S. DHHS)
- The mental health **Recovery Model** is a treatment concept where a service environment is such that consumers have primary control over care decisions.

Key Concepts (cont.)

- Most Integrated/Least Restrictive Setting
 - All consumers of public mental health services should be treated in an environment and manner that respects each client's individual worth, dignity, and privacy and enhances their personal autonomy.
- Independent Living
 - This concept is about member choice, member autonomy and member control.
 - Members with disabilities have the right to:
 - Live in their own homes with dignity and appropriate support
 - Fully participate in their communities
 - Control their own lives

OneCare Connect

Covered Behavioral Health Services

- Behavioral health services include inpatient and outpatient mental health care and an opioid treatment program.
- Outpatient office-based mental health services are coordinated through CalOptima, except those provided by a primary care provider.
- Members needing specialty mental health services are referred to the County of Orange Health Care Agency Behavioral Health Services
- **A member may self-refer to CalOptima Behavioral Health Services.**

OneCare Connect Covered Services (cont.)

Behavioral health covered services include:

- Mental health services (assessment and therapy)
 - Psychiatric medication support services
 - Psychological testing
 - Crisis intervention
 - Crisis stabilization
 - Adult residential treatment services
 - Crisis residential treatment services
 - Psychiatric health facility services
 - Psychiatric inpatient hospital services
 - Targeted case management
- Opioid Treatment Program (OTP)
 - Specialty mental health services are available through the County and may include these same services*

** For Medi-Cal specialty mental health services, County maintains the authority to determine which services within the array shall be available and adequate to meet the needs of the community. This authority is specified in regulation (CCR Title 9, Section 1810.345) and within the federally approved state Medi-Cal 1915(b) waiver.*

OneCare Connect Covered Services (cont.)

- Services available through Drug Medi-Cal Organized Delivery System:
 - Intensive outpatient treatment services
 - Residential treatment services
 - Outpatient drug free services

Behavioral Health Services

- CalOptima facilitates access to behavioral health services (mental health and substance use disorder treatment) currently covered by Medicare and Medi-Cal.
- Services covered directly by CalOptima:
 - Delivered by PCP in the primary care setting
 - Delivered by CalOptima's network of providers for **Medicare** covered behavioral health services
- Services coordinated and referred to by CalOptima:
 - County of Orange Health Care Agency Behavioral Health Services for **Medi-Cal** only covered behavioral health benefits
 - Drug Medi-Cal Organized Delivery System (DMC-ODS) for substance use disorders

CalOptima Behavioral Health

- CalOptima provides Medicare covered mental health services.
 - Network includes psychiatrists, psychologists, licensed social workers, psychiatric physician assistants and nurse practitioners.
 - Ensures access directly or by referral to a comprehensive spectrum of behavioral health services
 - Provider locations throughout Orange County
 - Provides telephonic assessments to proactively identify and ensure referral to treatment for a wide variety of behavioral health conditions
 - Works with primary care providers
 - Manages psychiatric hospital admissions and coordinates with post-hospitalization case management

Access to Behavioral Health Services

- CalOptima Behavioral Health is the gateway to mental triage and referrals.
 - OneCare Connect members should be referred to the **CalOptima Behavioral Health Line** for service level determination.
- Most behavioral health services are **not** delegated to CalOptima's primary care health networks.
 - Exception, services that can be provided in the primary setting are delegated

Knowledge Check

1. OneCare Connect members have:
 - a) The right to receive inpatient behavioral health services
 - b) The right to receive outpatient behavioral health services
 - c) No behavioral health services
 - d) a and b

2. CalOptima directly coordinates OneCare Connect behavioral health services.
 - a) True
 - b) False

Knowledge Check (cont.)

3. A OneCare Connect member must have a physician refer them to CalOptima for behavioral health services.
 - a) True
 - b) False

4. The mental health Recovery Model gives a member control over their care decisions.
 - a) True
 - b) False

5. County of Orange Health Care Agency receives referrals from CalOptima for covered Medi-Cal mental health services.
 - a) True
 - b) False

Knowledge Check Answers

1. d) a and b
2. a) True
3. b) False
4. a) True
5. a) True

Care Coordination

- Components for coordination of behavioral and physical health care include:
 - **Health Risk Assessment (HRA)**
 - Includes behavioral health questions
 - **Primary Care Physician (PCP) assessment**
 - Includes Alcohol Misuse Screening And Counseling (AMSAC)
 - **Interdisciplinary Care Team (ICT)**
 - Includes behavioral health providers
 - **Individual Care Plan (ICP)**
 - Includes the behavioral health provider in the development, evidenced by the behavioral health provider's signature

Behavioral Health Professionals

- Behavioral health providers eligible to participate in the ICT and in the development and update of the ICP include:
 - Physicians
 - Clinical psychologists
 - Clinical social workers
 - Psychiatric nurse practitioners
 - Psychiatric physician assistants
- Members with Serious and Persistent Mental Illness (SPMI) will have an ICT that includes:
 - Specially trained psychiatrists or other mental health professionals
 - Expertise in managing SPMI needs
 - Participation of appropriate care staff to address medical needs

Behavioral Health Collaboration

- The primary care provider (PCP):
 - Conducts an assessment after a member HRA is completed
 - History and physical, AMSAC, lab work, etc.
 - Patient Health Questionnaire (PHQ)-9, Generalized Anxiety Disorder (GAD)-7, Alcohol Use Disorders Identification Test (AUDIT) or AUDIT-C
 - Identifies if a member is receiving behavioral health services either through:
 - CalOptima Behavioral Health
 - County of Orange Health Care Agency Behavioral Health Services or county-contracted provider
 - Drug Medi-Cal Organized Delivery System
- The health network's Personal Care Coordinator (PCC) assists to identify the member's behavioral health provider(s), as needed.

Member Receiving Services

- Member's behavioral health provider(s) participating in an ICT include:
 - CalOptima or County provider
 - Behavioral health providers, such as the member's psychiatrist, psychologist, care coordinator, social worker and/or nurse practitioner.
- ICT to review:
 - Mental health diagnoses
 - Frequency and type of treatment
 - Behavioral health treatment plan (inpatient, partial hospitalization, outpatient care)
 - Psychiatrist prescribed medications, including recent changes or intent to change

Member Receiving Services (cont.)

- ICT to review (cont.):
 - Metabolic monitoring request/coordination of all lab monitoring
 - Answers to PCP behavioral health consultation questions (differential diagnosis, depression/anxiety/psychological factors affecting pain management)
 - Suggestion for PCP's behavioral health follow up and/or resumption of care
- Behavioral health providers document their participation in ICT and the development of the member's ICP.

Member Not Receiving Services

- PCP to communicate to member reason for behavioral health referral.
- Health network or PCC completes a warm handoff referral to CalOptima Behavioral Health and includes:
 - Reason for referral
 - Differential diagnosis or other consultation questions
 - Psychiatric medication recommendations or request to assume management of psychiatric medication
 - Psychotherapies to address psychological factors affecting medical condition
 - Evaluate and manage concurrent co-morbid serious mental illness

Referral for Behavioral Health Services

- **CalOptima Behavioral Health line**

- General Line (Members or Providers): **855-877- 3885**
- TTY: 800-735-2929

For screening and referral to mental health services.
Available 24 hours a day, 7 days a week.

A member may self-refer.

Abuse and Neglect

- Members with behavioral health or substance use issues may be vulnerable to abuse or neglect due to medical or mental conditions or disability, age and frailty, social isolation and poverty.
- All providers and staff are required to watch for and report incidents of abuse or neglect.
- To report suspected abuse or neglect:
 - **Orange County Adult Protective Services**
800-451-5155 (24-Hour Hotline)

Reportable Abuse and Neglect

- Health care professionals, their office staff and health plan staff are examples of mandated reporters.
- The following are examples of reportable abuse and neglect:
 - Abuse (physical, mental and/or verbal)
 - Neglect
 - Exploitation
 - Disappearance of a member (missing person)
 - Death
 - Serious, life-threatening event requiring immediate emergency evaluation by a medical professional
 - Seclusion and restraints
 - Suicide attempt or self abuse/neglect

Knowledge Check

1. A member's behavioral health provider is a participant in the ICT.
 - a) True
 - b) False

2. Which is not a licensed behavioral health professional:
 - a) Psychiatrist
 - b) Psychologist
 - c) Personal Care Coordinator
 - d) Clinical social worker

Knowledge Check (cont.)

3. Participation in an ICT is requested when appropriate for which behavioral health providers:
 - a) CalOptima behavioral health providers
 - b) County of Orange Health Care Agency
 - c) Drug Medi-Cal Organized Delivery System
 - d) All of the above

4. Examples of reportable abuse include:
 - a) Neglect
 - b) Exploitation
 - c) Mental or verbal abuse
 - d) a and c
 - e) a, b and c

Knowledge Check Answers

1. a) True
2. c) Personal Care Coordinator (PCC)
3. d) All of the above
4. e) a, b and c

Authorities

- DHCS/CMS/CalOptima Cal Medi-Connect 3-way contract
- H8016-2018 Model of Care, Orange County Health Authority
- CMS/DHCS — California Duals Demonstration Memorandum of Understanding
- CalOptima/Orange County Health Care Agency mental health contract 2013; amendment 2015
- Medi-Cal Managed Care Division (MMCD) Policy Letter #96-11, Managed Care Plan relationships with Alcohol and Drug Treatment Providers
- DHCS Duals Plan Letter (DPL) 15-006: Crossover claiming responsibility for Mental Health provided to CMC beneficiaries
- DHCS Duals Plan Letter (DPL) 15-001: ICT and ICP Requirements for Medicare-Medicaid Plans

References

- CalOptima Policy CMC.6033: Behavioral Health Assessment, Referral, Coordination and Information Sharing for OneCare Connect
- CalOptima Policy Medi-Cal GG.1100: Alcohol and Substance Abuse Treatment Services
- CalOptima Policy CMC.1003: CalOptima OneCare Connect Staff Education and Training
- CalOptima Policy EE.1103: Provider Education and Training

CalOptima's Mission

To provide members with access to quality health care services delivered in a cost-effective and compassionate manner

