

**Ensuring Compliance and Effective
Collaboration Among
Specialty Mental Health Services (SMHS), Drug
Medi-Cal Organized Delivery System (DMC-
ODS) and Managed Care Plan (HPSM) MOU
Training**



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- ### Cultural Humility Group Agreements
- LISTEN AS IF THE SPEAKER IS WISE: LISTEN TO UNDERSTAND
 - PRACTICE "I" STATEMENTS WHEN SPEAKING
 - OKAY TO RESPECTFULLY DISAGREE
 - TAKE RISKS
 - NO PRESSURE TO SPEAK
 - BE DISCIPLINED ABOUT NOT MAKING ASSUMPTIONS
 - NO BLAMING; NO SHAME
 - CONFIDENTIALITY IF
 - COURAGE TO INTERRUPT
 - GOING AWISS OR BEING
 - THE INVISIBLE VISIB
 - VOICES, THOUGHTS, WELCOME
 - PAY ATTENTION TO OOPS AND OUCH

Collaboration Statement

This training represents a collaborative effort between our two organizations, BHRS and HPSM, combining expertise and shared commitment to advancing quality in behavioral health care.



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Overview

- Introduction to the MOU
- MOU Requirements
- Accessing Treatment and Services
- Policies and Resources



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Definitions

HPSM: Health Plan of San Mateo

BHRS: Behavioral Health and Recovery Services

MOU: Memorandum of Understanding - An MOU is a binding, contractual agreement between Health Plan of San Mateo (HPSM) and a Third-Party Entity which outlines the responsibilities and obligations of HPSM and the Third-Party Entity to coordinate and facilitate whole-system, person-centered care for members.

MCP: Managed Care Plan

MHP: Mental Health Plan

SMHS: Specialty Mental Health Services - a program that provides mental health services to California residents who are eligible for Medi-Cal

NSMHS: Non- Specialty Mental Health Services - a set of mental health services for people with mild to moderate mental health conditions

DMC-ODS: Drug Medi-Cal Organized Delivery System - a program for the organized delivery of substance use disorder (SUD) treatment services to eligible Medi-Cal members with SUDs by providing a continuum of care modeled after the American Society of Addiction Medicine (ASAM) Criteria for SUD treatment services.

SUD: Substance Use Disorder

This Presentation does not apply to Kaiser Medi-Cal members, please do not direct Kaiser Medi-Cal Members to HPSM.



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Introduction to the MOU



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What is an MOU?

What is an MOU?

- An MOU is a binding, contractual agreement between two parties which outlines the responsibilities and obligations of parties to coordinate and facilitate whole-system, person-centered care for members.

Why is it important?

- Clarifies roles and responsibilities between HPSM and BHRS systems of care
- Facilitates care coordination and the exchange of information necessary to enable care coordination
- Improves referral processes between HPSM and BHRS
- Improves transparency and accountability



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Who Needs to Know About This?

All those who carry out activities have responsibilities under this MOU. This includes:

- Health Plan of San Mateo (HPSM) Managed Care Plan (MCP) staff
- San Mateo County Behavioral Health and Recovery Services (BHRS) Specialty Mental Health Services (SMHS) staff
- San Mateo County BHRS Drug Medi-Cal Organized Delivery System (DMC-ODS) staff
- Network Providers, Subcontractors, and Downstream Subcontractors who assist with carrying out responsibilities under the MOUs, as applicable.



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MOU's Between HPSM and BHRS

HPSM and BHRS have established **two** Memoranda of Understanding (MOU). These two MOUs are in effect as of **November 1, 2024**, automatically renewing annually thereafter or as amended in accordance with Section 14.f of the MOU.

Mental Health Plan (MHP) – Managed Care Plan (MCP) MOU

Governs coordination between HPSM and BHRS MHP for:

- **Mental Health Services**
 - **Non-Specialty Mental Health Services (NSMHS)** covered by HPSM; may at times be referred to as Mild to Moderate Services
 - **Specialty Mental Health Services (SMHS)** covered by BHRS; for members with serious mental illnesses, include outpatient and inpatient services.

Drug Medi-Cal-Organized Delivery System (DMC-ODS) – Managed Care Plan MOU

Governs coordination between HPSM and BHRS DMC-ODS for:

- Substance Use Disorder (SUD) Services, also known as **DMC ODS Services** are covered by BHRS for Medi-Cal members with substance use disorders.



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MOU Requirements



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Training and Education

HPSM and BHRS will provide training and orientation for their staff who carry out activities under the MOU to ensure all staff involved in the MOU have a thorough understanding of their responsibilities.

Training Content:

- MOU Requirements
- What services are provided or arranged for by each Party
- How HPSM covered services, DMC-ODS and MHP covered services, may be accessed, including during non-business hours.
- Policies and Procedures outlined in the MOU



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Obligations and Oversight Responsibility

HPSM is responsible for authorizing medically necessary covered services, including NSMHS, and coordinating member care provided by HPSM's network providers and other providers of carve-out programs, services, and benefits.

BHRS MHP and **BHRS DMC-ODS** are responsible for providing or arranging for the provision of SMHS and covered SUD services.

Liaisons from HPSM and BHRS are responsible to ensure:

- Quarterly Meetings
- Reporting to Compliance Officer no less than quarterly
- That there are sufficient staff to support this MOU
- That the appropriate level of leadership are involved in implementation and oversight of the MOU
- Training and education regarding MOU provisions are conducted annually for employees responsible for carrying out activities under this MOU, and as applicable for Subcontractors, Downstream Subcontractors, and Network Providers
- MOU compliance requirements are met, as determined by policies and procedures established by MHP and DMC-ODS, and reporting to the MHP and DMC-ODS Responsible Person.



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Screening, Assessment, and Referrals

HPSM and BHRS are responsible for developing shared policy and process to use the required DHCS screening tools:

Screening and Assessment Tools

- Adult Screening Tool for adults aged 21 and older
- Youth Screening Tool for youth under age 21
- Transition Care tool to facilitate transitions of care for members when their service needs change and for adults aged 21 and older and youth under age 21*
- American Society of Addition Medicine (ASAM) Level 0.5 Alcohol and Drug Screening, Assessment, Brief Interventions, and Referral Treatment (SABIRT)

Referrals

HPSM and BHRS work collaboratively to develop and establish policies and procedures that ensure that members are referred to the appropriate MHP and DMC-ODS services.

- “No Wrong Door” Referral Process
- Patient-centered , shared decision-making process
- Closed Loop Referrals for non-specialty mental health services
- HPSM and BHRS have developed policies and procedures that address how members must be screened and assessed for mental health services.
- Please read HPSM’s and BHRS's Screening, Assessment, and Referral P&P

***Ongoing collaboration is occurring to develop and improve processes and procedures for this item.*



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Care Coordination and Collaboration

HPSM and BHRS are responsible to ensure they have comprehensive policies and procedures that guide care coordination efforts across all aspects of member care.

Care Coordination

- **Transitional Care** – Facilitating smooth transitions between care settings.
- **Clinical Consultation** – Enabling effective communication and information sharing between medical and mental health providers.
- **Enhanced Care Management** – Prioritizing and coordinating care management services for high-need populations.
- **Community Supports** – Coordinating with community-based providers to ensure comprehensive support for members.
- **Eating Disorder Services** – BHRS MHP provides medically necessary psychiatric inpatient hospitalization and outpatient SMHS. HPSM provides or arranges for NSMHS for member requiring eating disorder services.
- **Prescription Drugs** – Coordinating and streamlining prescription drug, laboratory, radiological, and radioisotope service procedures

***Ongoing efforts are focused on further developing and improving processes and procedures.*



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Quarterly Meetings

HPSM and BHRS meet quarterly to ensure proper oversight of the MOUs. These meetings are crucial for ongoing communication, collaboration, and effective implementation of the MOUs.

Quarterly Meeting Focus

- Care Coordination
- Quality Improvement (QI) activities
- QI Outcomes
- Systemic and case specific concerns
- Communication within organizations

Quarterly Meeting Participation

- Responsible Persons and appropriate program executives from HPSM and BHRS

Quarterly Meeting Transparency

- Posting meeting dates and times
- Distributing summaries of follow-up actions and process changes

Quarterly Meeting schedule is available here:

HPSM: <https://www.hpsm.org/about-us/community-impact/county-agencies>

BHRS: [Behavioral Health Staff: Forms & Policies - San Mateo County Health](#)



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Quality Improvement and Data Sharing and Confidentiality

Quality Improvement

HPSM and BHRS will develop and implement QI activities to oversee the requirements of the MOU

QI Activities:

- Preventing duplication of services
- Tracking referrals, member engagement, and service utilization
- Monitoring member access to mental health services across different care settings

Data Sharing and Confidentiality

HPSM and BHRS will establish and implement policies and procedures for the secure and timely exchange of the minimum necessary member information.

HPSM and BHRS will share protected Health information (“PHI”) for the purposes of medical and behavioral health care coordination pursuant to Cal. Code Regs. tit. 9, Section 1810.370(a)(3), and to the fullest extent permitted under the Health Insurance Portability and Accountability Act and its implementing regulations, as amended (“HIPAA”) and 42 Code Federal Regulations Part 2, and other State and federal privacy laws.



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Dispute Resolution

HPSM and BHRS has a dispute resolution process to address any disagreement regarding service coverage responsibilities arising from or related to the MOU.

- ❑ **Good Faith Efforts:** HPSM and BHRS will attempt to resolve disputes amicably through mutual negotiation and communication.
- ❑ **Documented Procedures:** Agreed-upon dispute resolution procedures is documented in policies and procedures
- ❑ **Continued Service Delivery:** Ensure timely and uninterrupted service delivery to members.
- ❑ **Escalation:** If a resolution cannot be reached within 15 working days, HPSM or BHRS may pursue legal or equitable measures under California law.

Specific Responsibilities During Disputes

SMH –MCP Service Disputes	SUD –MCP Service Disputes
Scenario 1: If HPSM contends that BHRS SMH should provide SMHS services because the member’s condition may not respond to physical health care and BHRS SMH disagrees with the diagnosis and coverage. HPSM manages member’s care and BHRS SMH provides a qualified mental health professional for consultation to HPSM provider responsible for member’s care.	Scenario 1: If HPSM contends BHRS DMC-ODS should provide SUD services and BHRS DMC-ODS incorrect determined the diagnosis is not covered. HPSM manages the member’s care and is responsible for providing, arranging, and paying for necessary SUD services.
Scenario 2: If BHRS SMH contends HPSM should provide physical health care, medications, or diagnostic services related to a mental health condition. BHRS SMH is responsible for providing, arranging, and paying for these services.	Scenario 2: If BHRS DMC-ODS contends HPSM should provide physical health care, medications, or diagnostic services related to a mental health condition. BHRS DMC-ODS is responsible for providing, arranging, and paying for these services.



Equal Treatment

No Discrimination

- The MOU does not prioritize members over non-members service by BHRS SMHS, BHRS DMC-ODS, or HPSM MCP.
- HPSM and BHRS may not provide any service, financial aid, or other benefit differently to any individual based on race, color, national origin, religion, sex, disability, or other protected characteristics.



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General MOU Requirements

MOU Posting

- The SMHS and DMC-ODS MOUs are posted on the HPSM and BHRS websites.
 - HPSM website: <https://www.hpsm.org/about-us/community-impact/county-agencies>
 - BHRS website: <https://www.smchealth.org/bhrs>

Annual Review

- HPSM and BHRS conduct an annual review of the HPSM - BHRS SMHS and HPSM -DMC-ODS MOUs to determine whether any modifications, amendments, updates, or renewals of responsibilities and obligations area required.

Governance

- HPSM MCP MOUs for SMHS and DMC-ODS MOUs are governed by and construed in accordance with the laws of the state of California.



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Accessing Treatment and Services



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Accessing Mental Health Services

Members can call their primary care provider (PCP) to check-in

Members can call BHRS ACCESS Call Center at 1-800-686-0101 anytime, 24 hours a day, 7 days a week.

- For mild to moderate mental health issues, Members will be connected with a mental health provider through HPSM. This is known as the ***non-specialty mental health provider network***.
- For more serious mental health issues, Members will be connected with a mental health provider through BHRS. This is also known as the ***specialty mental health provider network***.
- For alcohol and/or substance use treatment needs, Members will be connected through ***BHRS's substance use treatment network***.

If an HPSM Member is having a mental health crisis, and they need support beyond what you can provide, please advise them to call the 988 Lifeline.

To learn more about accessing mental health services, please visit HPSM's website at <https://www.hpsm.org/member/health-tips/mental-health/get-mental-health-care>

Medi-Cal NSMH Services (HPSM)

Non-Specialty Mental Health Benefit (HPSM Medi-Cal Member Handbook)*

- Individual mental health evaluation
- Individual, Family and group treatment (psychotherapy) Outpatient therapy
- Psychological and Neuro testing when clinically indicated to evaluate a mental health condition (requires provider referral)
- Outpatient services for the purposes of monitoring medication therapy (Network is mostly Psychiatric NP's)

* Providers should look to their NSMH contract with HPSM to see what services they are contracted to provide



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Medi-Cal Specialty Mental Health Services (BHRS SMHS)

For Medi-Cal beneficiaries who meet medical necessity criteria, they may qualify for some of these specialty mental health services. *

- Mental health services (assessment, plan development, therapy, rehabilitation, and collateral)
- Medication support services
- Day treatment intensive services, Day Rehabilitation services
- Crisis intervention services, Crisis stabilization services
- Targeted Case management services
- Therapeutic Behavioral services
- Intensive Care coordination
- Intensive home-based services,
- Therapeutic foster care
- Psychiatric Inpatient hospitalizations

* Providers should look to their SMH contract with BHRS to see what services they are contracted to provide



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Medi-Cal DMC-ODS Covered Services

San Mateo County BHRS provides these specialty DMC-ODS covered services to Medi-Cal members when medically necessary:

- Early Intervention Services (for those under age 21)
- Outpatient Treatment
- Intensive Outpatient Services
- Residential Treatment
- Withdrawal Management
- Narcotic Treatment Program/Opioid Treatment Program Services
- Medications for Addiction Treatment (MAT) – FDA approved medications such as buprenorphine and naltrexone.
- Withdrawal Management
- Peer Support Services
- Contingency Management / Recovery Incentives (pilot through 2026)
- Recovery Services
- Care Coordination
- Clinician Consultation
- Mobile Crisis Services



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Policies and Resources



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Policies and Procedures

These Policies and Procedures guide the collaboration outlined in the MOUs. These resources provide essential information for both HPSM and BHRS, network providers, and ultimately, the individuals served.

HPSM Policies and Procedures and Resources:

- [HPSM Provider Manual](#)
- [HPSM Member Handbooks](#)
 - Medi-Cal Member Handbook
 - HealthWorx HMO Evidence of Coverage
 - CareAdvantage D-SNP 2025 Member Handbook
- HPSM website: <https://www.hpsm.org/>

BHRS Policies and Procedures and Resources:

- [BHRS DMC-ODS and MHP Member Handbook](#)
- [BHRS website](#)

***Ongoing efforts are focused on further developing and improving processes and procedures.*



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HPSM Provider Resources

- <https://www.hpsm.org/provider/behavioral-health/>
- Primary Care Providers:
 - [Behavioral Health Referral Form](#) (MH and SUD services)
 - [Developmental Services Referral Guide](#)
 - [Behavioral Health Treatment \(BHT\) Referral Form \(under 21 Autism/ABA services\)](#)
- HPSM NSMH Providers:
 - [Referral for Higher Level of Care Form - Adult](#)
 - [Referral for Higher Level of Care Form – Youth](#)
 - [Behavioral Health Provider FAQs](#)
 - [Medi-Cal Specialty and Non-Specialty Behavioral Health Criteria and Services](#)



Member Resources

- [Take Action for Your Mental Health\[English\]](#)
 - [Tome medidas por su salud mental](#) [Spanish]
 - [為您的心理健康採取行動](#) [Chinese]
 - [Kumilos para sa Iyong Mental Health](#) [Tagalog]
- Key Contacts for HPSM members:
 - To access mental health or substance use services: Access Call Center: 1-800-686-0101



Provider Questions & Support

- HPSM Contracted Providers:
psinquiries@hpsm.org
- BHRS Staff and Contracted Providers, please reach out to HS_BHRS_ASK_QM@smcgov.org



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Thank you!