Access and Medical Necessity Criteria (for SMHS)

July 2024

Download the PPT from the QM Website:

https://www.smchealth.org/bhrs/qm

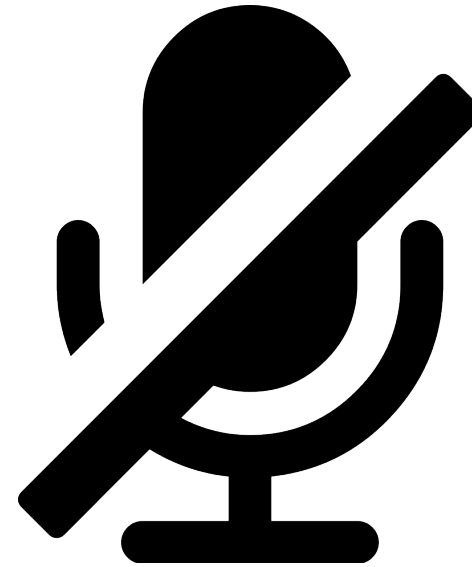Click on the "Webinar Recording & PPTs" Tab
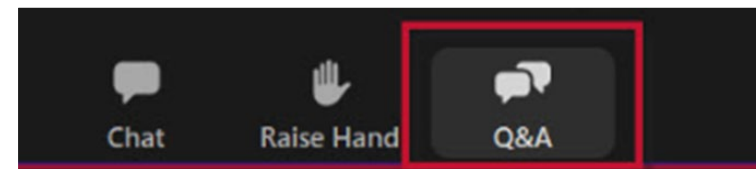
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Housekeeping

- Reminder- Please keep your mic muted

- Type your questions into the chat –Q&A will be at the end of the webinar

- Today's session will be recorded.

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Chat   Raise Hand   Q&A

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Agenda

At the conclusion of this training, participants will have a better understanding of the following:

- The distinction between services provided by BHRS vs a Managed Care Plan

- Criteria to Access SMHS

- Medical Necessity Criteria

- Where and how the Screening Tool fits into the process of determining Access and Medical Necessity Criteria

Documentation Manual

Today, we will be covering the material from the following sections of the Documentation Manual:

Access to SMHS and Medical Necessity

CalAIM Adult and Youth Screening Tools

https://www.smchealth.org/sites/main/files/file-attachments/bhrsdocmanual.pdf?1719525776

BHRS Documentation Manual for SMHS

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— Service Code, Location Code, Time Field Matrix

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Last Updated: 7/18/2024

BHRS Documentation Manual for Specialty Mental Health Services

1 of 97

MHP Services vs MCP Services

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MHP vs MCP

MHP = BHRS
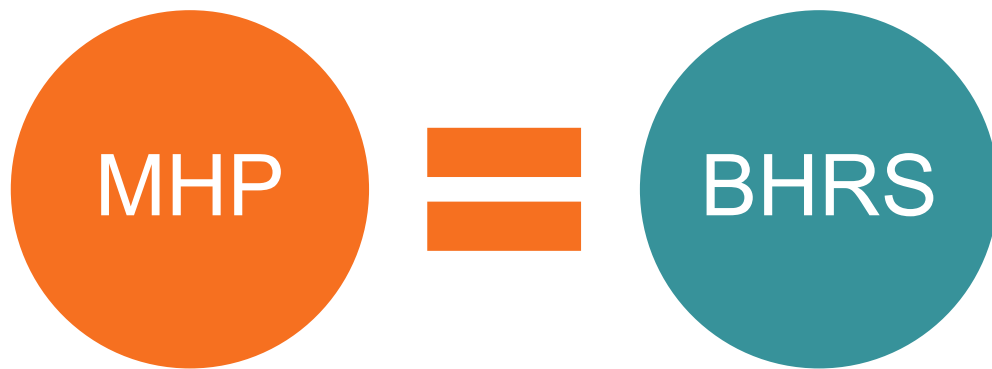
Mental Health
Plan

San Mateo
County BHRS

MCP = HPSM & Kaiser
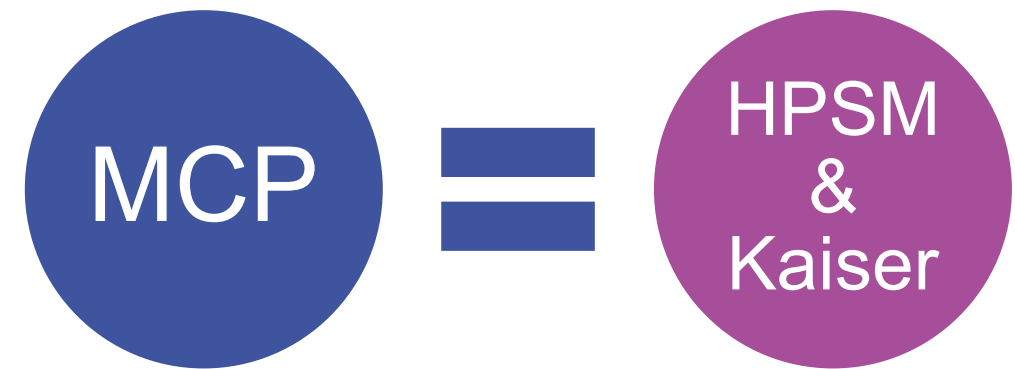
Managed
Care Plan

Health Plan of San Mateo
and
Kaiser (Medi-Cal)

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MHP vs MCP

MHP

Specialty Mental Health Services (SMHS)

MCP

Non-Specialty Mental Health Services (NSMHS)

Individuals might transition to and from the MHP and MCP over the course of their lives.

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MHP vs MCP

SMHS

SMI SED

- Assessment
- Plan Development
- Rehabilitation Services
- Therapy Services
- Collateral
- Medication Support Services
- Targeted Case Management
- Crisis Intervention
- Intensive Care Coordination (ICC)
- Intensive Home-Based Services (IHBS) and
- Therapeutic Behavioral Services (TBS).

NSMHS

Mild-to-Moderate

- Mental health evaluation and treatment, including individual, group and family psychotherapy
- Psychological and neuropsychological testing, when clinically indicated to evaluate a mental health condition.
- Outpatient services for purposes of monitoring drug therapy
- Psychiatric consultation
- Outpatient laboratory, drugs, supplies and supplements

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Access Call Center

The BHRS Access Call Center serves as the "hub" of all requests for Mental Health Services for **both** BHRS and HPSM.

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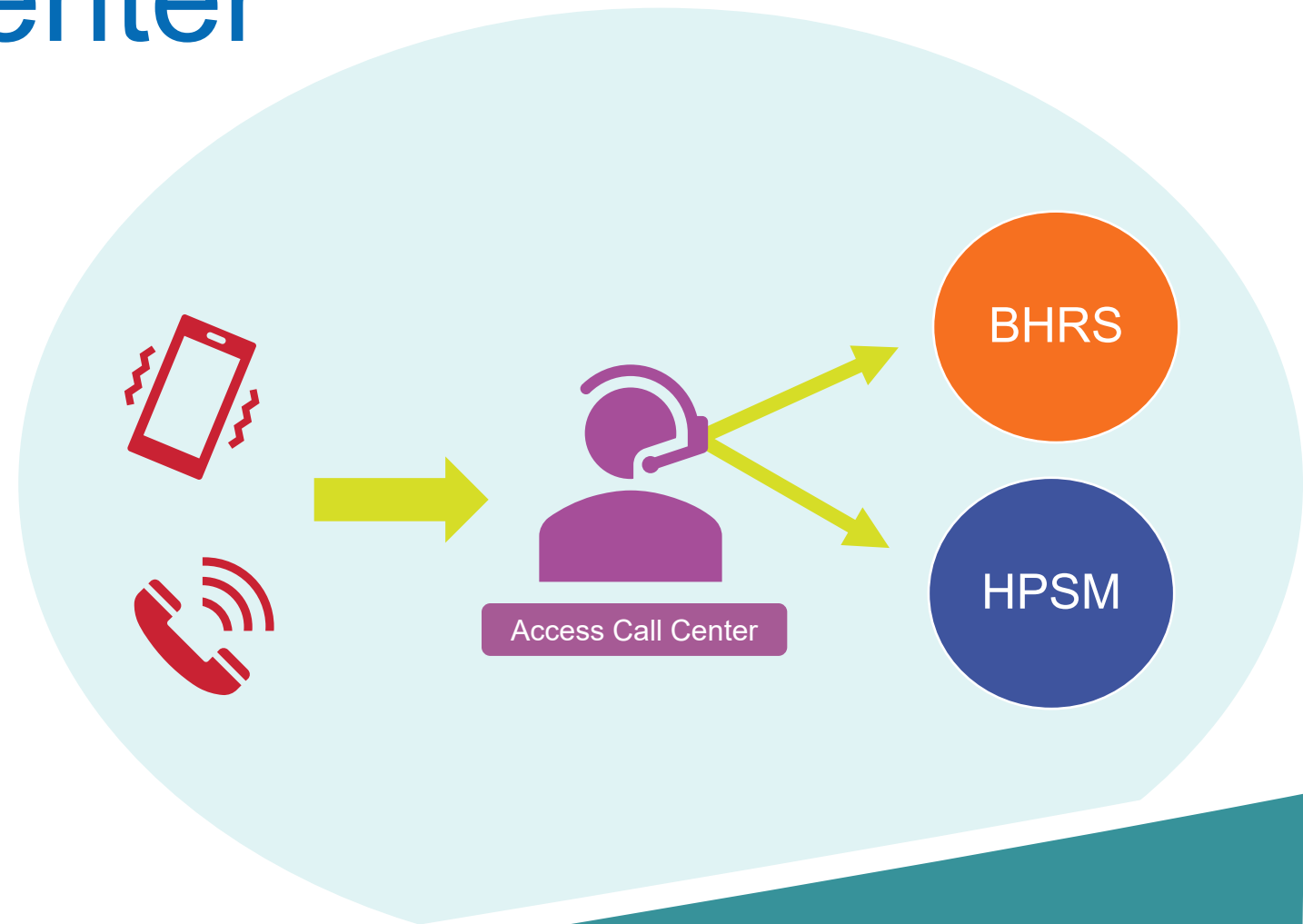
Poll

Contract Agencies – Have you put your full name and agency name in the chat?

A. Yes

B. No

✅ I can't remember. I'm too distracted by this beautiful fur baby on the left!

D. I'm not a contract agency provider, but I want to test this poll feature

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WHERE DO I GO TO RECEIVE SERVICES?

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Where to Go for Services

There have been multiple new processes/policies issued by DHCS in recent years that relate to determining where a client should receive services.

23-01

Screening Tools

- Determines in which system it is most appropriate for an individual to receive a clinical assessment.

22-01

Criteria for Access to SMHS

- Outlines the criteria to receive SMHS.
- This was previously known as "Medical Necessity" criteria.

22-03

No Wrong Door

- Allows clients to receive services from an MCP / FFS Provider and MHP (BHRS) concurrently.
- Allows for services to be provided prior to the completion of assessment.

20-01

Continuity of Care

- Has to do with continuing care with an out-of-network Medi-Cal provider or a terminated network provider who would continue delivering SMHS.

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Where to Go for Services

Today's training will focus on the policy for "Criteria to Access for SMHS" and the CalAIM Screening Tools.

23-01

Screening Tools

- Determines in which system it is most appropriate for an individual to receive a clinical assessment.

22-01

Criteria for Access to SMHS

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Where to Go for Services

FALSE — There is no longer a differentiation between the level of severity of clients served by BHRS and an MCP.

✔ BHRS is still the service delivery system for individuals identified as SMI / SED.

✔ MCPs are still the service delivery system for individuals identified as mild-to-moderate.

✔ CalAIM allows for services to be provided by either system while a determination is made about which system is most appropriate for the individual to receive ongoing services.

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OVERVIEW OF NEW CRITERIA

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Overview

Access to SMHS

- Answers the question: Is the individual **eligible** to receive SMHS?

+

Medical Necessity

- Answers the question: Is the **service** provided clinically appropriate and necessary?
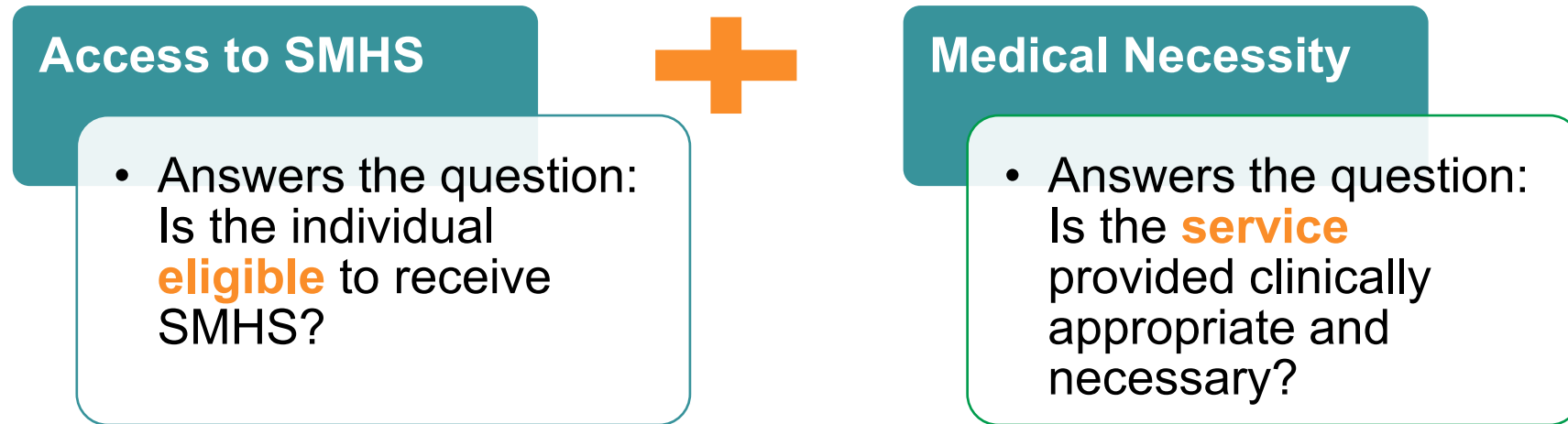
One of the innovations under CalAIM is that Medical Necessity has been separated out to provide a more nuanced look at where the client should receive services and what types of services are appropriate.

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Overview

Access to SMHS

- Answers the question: Is the individual **eligible** to receive SMHS?

+

Medical Necessity
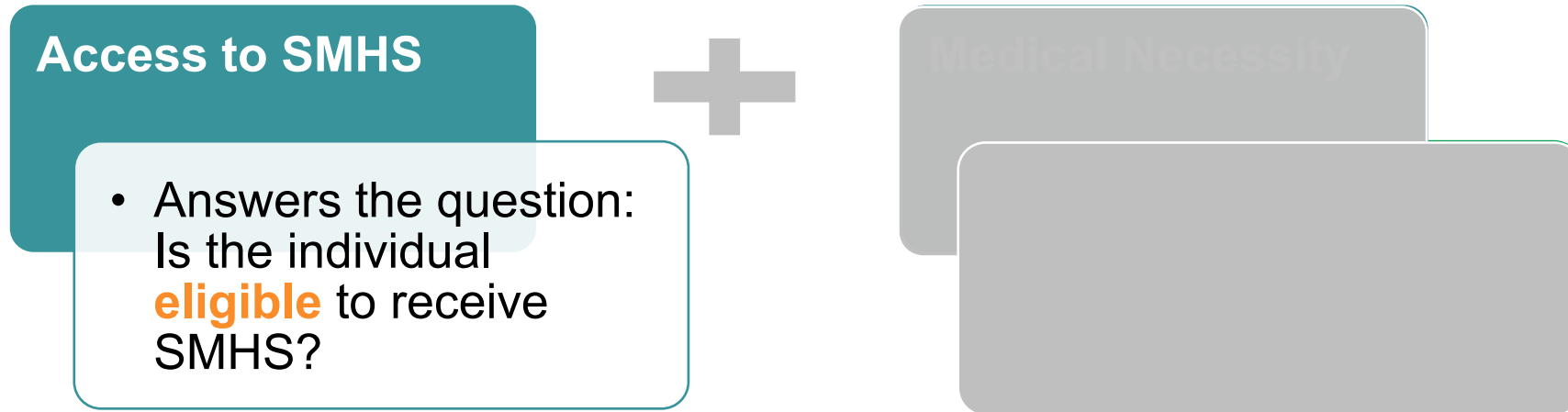
Access to SMHS looks at the beneficiary's history and current presentation to see if their experiences and symptoms make them eligible to receive SMHS.

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Overview

Medical Necessity

- Answers the question: Is the **service** provided clinically appropriate and necessary?

In BHRS, we are looking to see if the service that was provided was a medically necessary SMHS.

Essentially, medical necessity looks at what type and level of service is appropriate for the individual seeking care.

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Overview

Screening →

Assessment →

The Screening and Assessment processes are both part of the process to determine if Criteria to Access SMHS and Medical Necessity Criteria are met.

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MEDICAL NECESSITY CRITERIA

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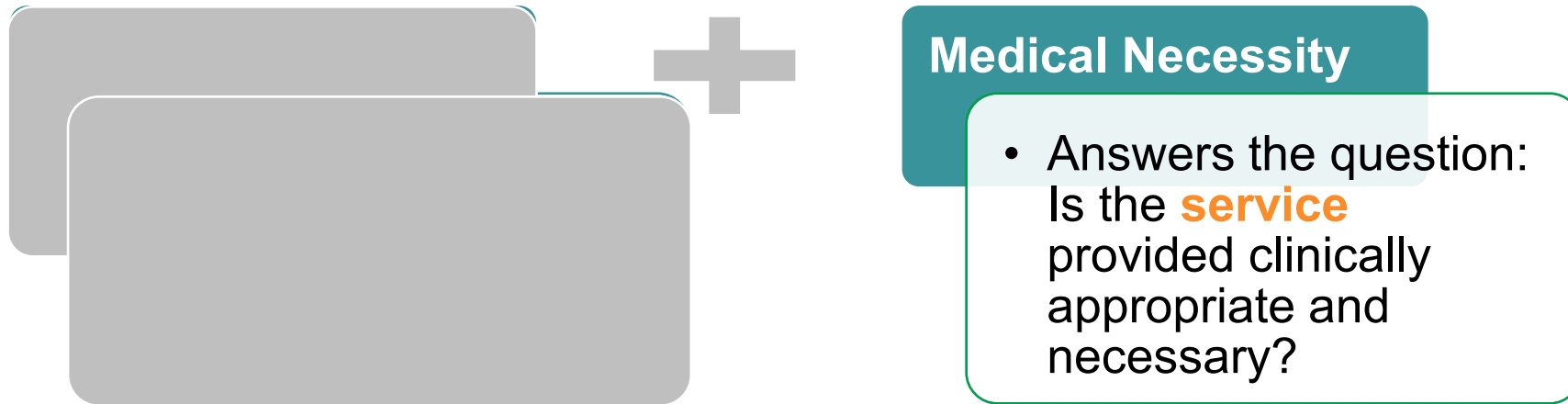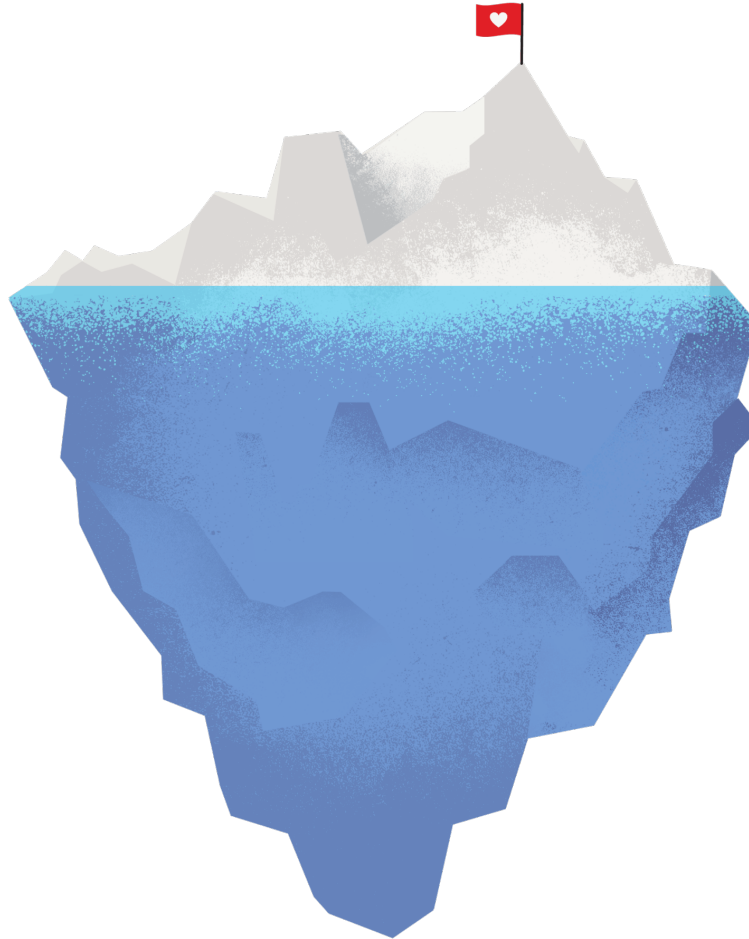
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Medical Necessity Criteria

Definition of Medical Necessity was brought into alignment with Welfare and Institutions Code 1418.402(a) for those 21 and over and with Section 1396(r)(5) of Title 42 of the US Code for Individuals under 21 years of age.

Beneficiaries <u>under</u> 21 years of age

- …the service is necessary to **correct or ameliorate** a mental illness or condition….
- Services that sustain, support, improve, or make more tolerable a mental health condition are considered to ameliorate the mental health condition.

Beneficiaries 21 years of age and older

- …the service is reasonable and necessary to…
  - **protect life,**
  - **to prevent significant illness or significant disability,** or to
  - **alleviate severe pain.**
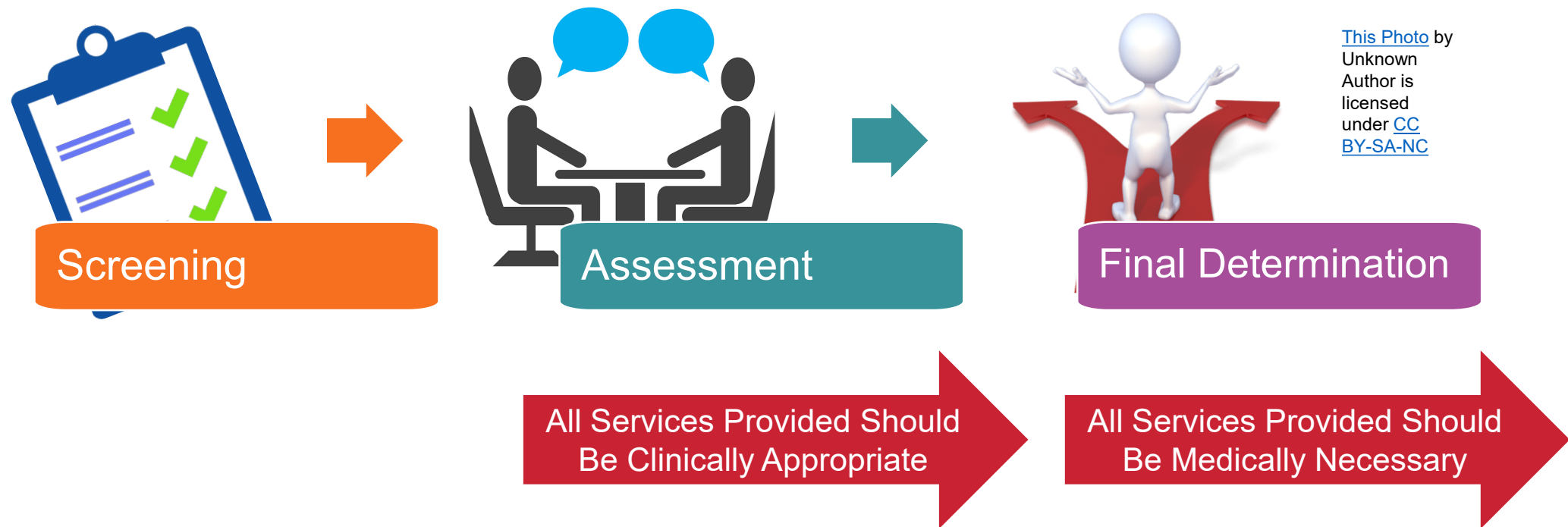
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Overview

Screening

Assessment

Final Determination

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All Services Provided Should Be Clinically Appropriate

All Services Provided Should Be Medically Necessary

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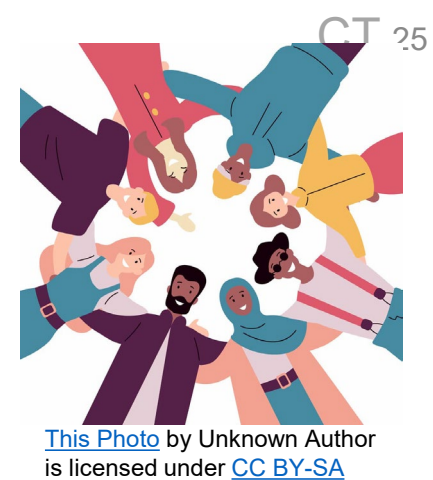& RECOVERY SERVICES

CRITERIA TO ACCESS SMHS

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Access to SMHS Criteria Adults 21+

Must meet **BOTH** of the following criteria:

Criteria 1 (Adult)	Criteria 2 (Adult)
The beneficiary has **one or both** of the following:	The beneficiary's condition is due to **either** of the following:
❑ Significant impairment, where impairment is defined as distress, disability, or dysfunction in social, occupational, or other important activities, **AND/OR** ❑ A reasonable probability of significant deterioration in an important area of life functioning.	❑ A diagnosed DSM mental health disorder, **OR** ❑ A suspected mental disorder that has not yet been diagnosed.

AND

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Poll

Which of the 2 Criteria for Adults 21+ do adults have to meet to be eligible for SMHS?

A. Criteria 1 only

B. Criteria 2 only

✅ Both Criteria 1 AND 2

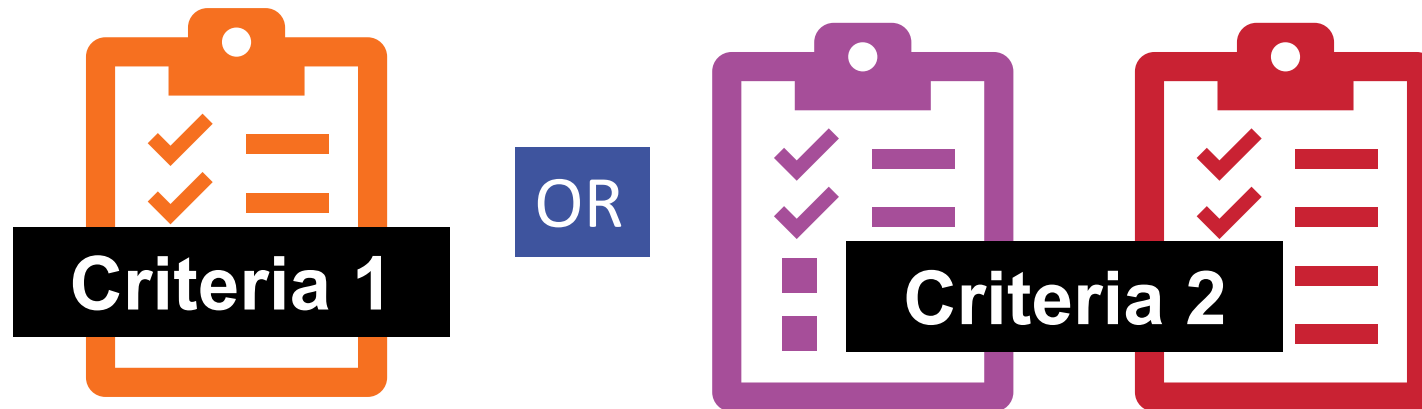D. Neither, as long as they give staff a photo of their fur baby

Access to SMHS Criteria:
Youth Under 21

Covered SMHS shall be provided to enrolled beneficiaries who meet either:

Criteria 1 OR Criteria 2 (see next 2 slides)

Criteria 1 OR **Criteria 2**

Access to SMHS Criteria: Youth Under 21

Criteria 1

The beneficiary has a condition placing them at high risk for a mental health disorder due to experience of trauma evidenced by **ANY** of the following:

❑ Scoring in the high-risk range under a trauma screening tool approved by DHCS, OR

❑ Involvement in the child welfare system, OR

❑ Juvenile justice involvement, OR

❑ Experiencing homelessness

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Access to SMHS Criteria:
Youth Under 21

Criteria 1

The use of a **specific** trauma screening tool is not yet required.

The beneficiary has a condition placing them at high risk for a mental health disorder due to experience of trauma evidenced by **ANY** of the following:

❑ Scoring in the high-risk range under a trauma screening tool approved by DHCS, OR

❑ Involvement in the child welfare system, OR

❑ Juvenile justice involvement, OR

❑ Experiencing homelessness

Can be a past experience.

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Access to SMHS Criteria: Youth Under 21

Criteria 2

The beneficiary meets *BOTH* of the following requirements

The beneficiary has at least __one__ of the following:		The beneficiary's condition is due to __one__ of the following:
❑ A significant impairment		❑ A diagnosed mental health disorder
❑ A reasonable probability of significant deterioration in an important area of life functioning	**AND**	❑ A suspected mental health disorder that has not yet been diagnosed.
❑ A reasonable probability of not progressing developmentally as appropriate.		❑ Significant trauma placing the beneficiary at risk of a future mental health condition, based on the assessment of a licensed mental health professional.
❑ A need for specialty mental health services, regardless of presence of impairment, that are not included within the mental health benefits that a Medi-Cal managed care plan is required to provide.		

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Poll

Which of the 2 Criteria for individuals 20 years and under have to be met to be eligible for SMHS?

✅ Either Criteria 1 OR Criteria 2, not both

B. Both Criteria 1 AND 2

C. I'm not sure. Can I request that the good boy on this slide provide further training on this topic???

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Putting It All Together

Screening
- Determines system in which client should receive a clinical assessment.

Assessment
- May include other clinically appropriate services.

Final Determination
- Determine where to access ongoing treatment.
- Diagnosis is determined.

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More About the Screening Tool
(Applying the Criteria)

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More About the Screening Tool

Screening
- Determines system in which client should receive assessment.

The Adult and Youth Screening Tools do not determine benefit or service eligibility, but instead **determine the appropriate mental health delivery system referral for an initial assessment** for Medi-Cal members who are not currently receiving mental health services.

In other words, the Screening Tool is a quick way to see if the individual seeking services *might likely* meet all criteria to Access SMHS.

The clinical assessment (not the screening) would determine if the client meets full criteria to Access SMHS.

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More About the Screening Tool

Example of how Access Criteria fits into the Screening Tool

- If a child/youth, or the person responding on their behalf, responds "Yes" to question 6, 7, or 9, in the Youth Screening Tool, they meet criteria to access specialty mental health services.

Youth Screening Tool
6. Are you currently or have you ever been in **juvenile hall, on probation, or under court supervision**?
7. Are you currently in foster care or involved in the **child welfare syst**em?
9. Are you currently **without housing or a safe place to sleep**?

More About the Screening Tool

Example of how Access Criteria fits into the Screening Tool

- If a child/youth, or the person responding on their behalf, responds "Yes" to question 6, 7, or 9, in the Youth Screening Tool, they meet criteria to access specialty mental health services.

Youth Screening Tool
6. Are you currently or have you ever been in **juvenile hall, on probation, or under court supervision**?
7. Are you currently in foster care or involved in the **child welfare syst**em?
9. Are you currently **without housing or a safe place to sleep**?

Criteria 1 of Criteria to Access SMHS for Youth
The beneficiary has a condition placing them at high risk for a mental health disorder due to experience of trauma evidenced by <u>**ANY**</u> of the following:
❑ Scoring in the high-risk range under a trauma screening tool approved by the department, OR
❑ **Involvement in the child welfare system,** OR
❑ **Juvenile justice involvement,** OR
❑ **Experiencing homelessness**

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More About the Screening Tool

Example of how Access Criteria fits into the Screening Tool

- **In these cases, BHRS would be the appropriate delivery system for clinical assessment** and, therefore, the remainder of the screening is not required.

- The screener must conclude the screening and refer the individual to a BHRS program for clinical assessment and <u>must not ask</u> the remaining screening questions.

- **The assessment will further determine if involvement in these systems as experienced by the individual places them "at high risk for a mental health disorder due to experience of trauma"**

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More About the Screening Tool

Screening

- Determines system in which client should receive assessment.

Score	Delivery System for Clinical Assessment
0-5	MCP
6+	MHP

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PUTTING CRITERIA INTO PRACTICE

(Who? What? When? of the Screening Tool)

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Putting Criteria into Practice

When and by whom should the Screening Tool be administered?

When a beneficiary who is not currently receiving mental health services, or a person on behalf of a beneficiary under age 21, **contacts the BHRS Access Call Center** seeking mental health services.
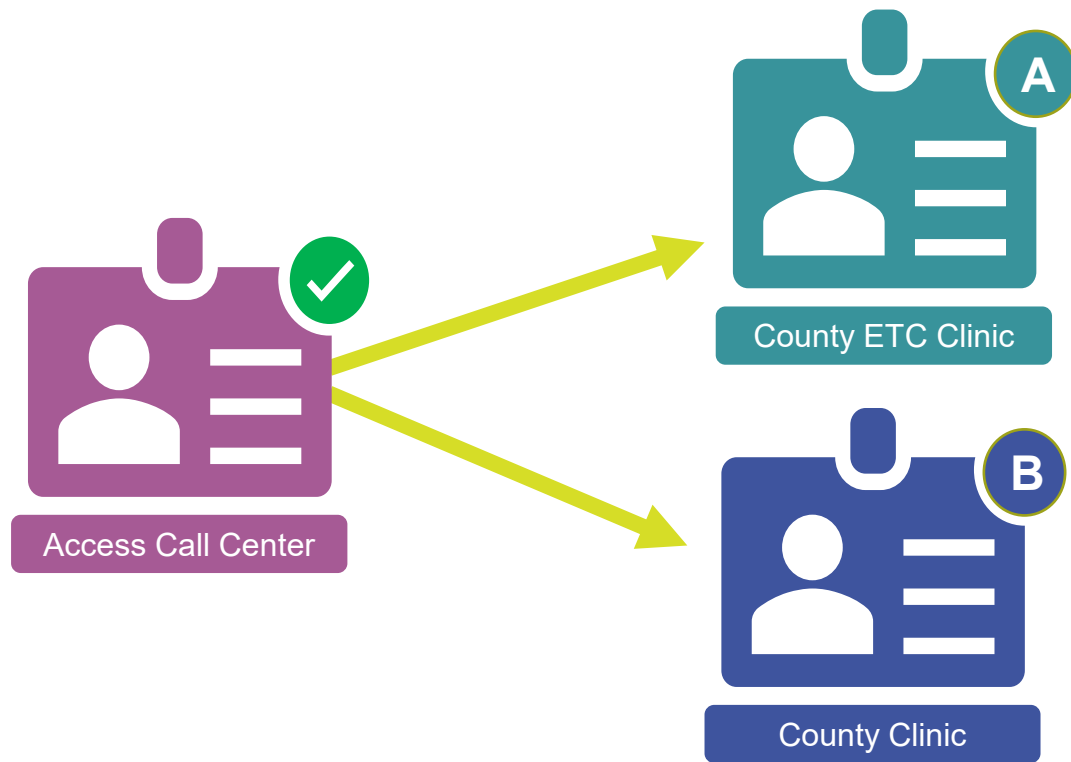
Access Call Center

County Program

Contracted Agency

Programs / Agencies that do not utilize the screening tool may use their usual process for processing referrals.

Screening

- Determines system in which client should receive assessment.

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Putting Criteria into Practice

Workflow A: Access Call Center has direct access to ETC ("Entry to Care") Clinic schedules and will be able to directly schedule initial appointments at an ETC clinic.

Workflow B: Access Call Center will also refer individuals to non-ETC clinics for services but will NOT schedule the initial appointment. This is because Access Call Center does not have direct access to the non-ETC Clinic schedules.

County ETC Clinic

County Clinic

Access Call Center

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Additional Screening Tool Trainings

Workflow A: July 25th @ 3 p.m.

Workflow B: July 31st @ 9 a.m.

Adult ETC Clinics

Youth ETC Clinics

Youth Clinics
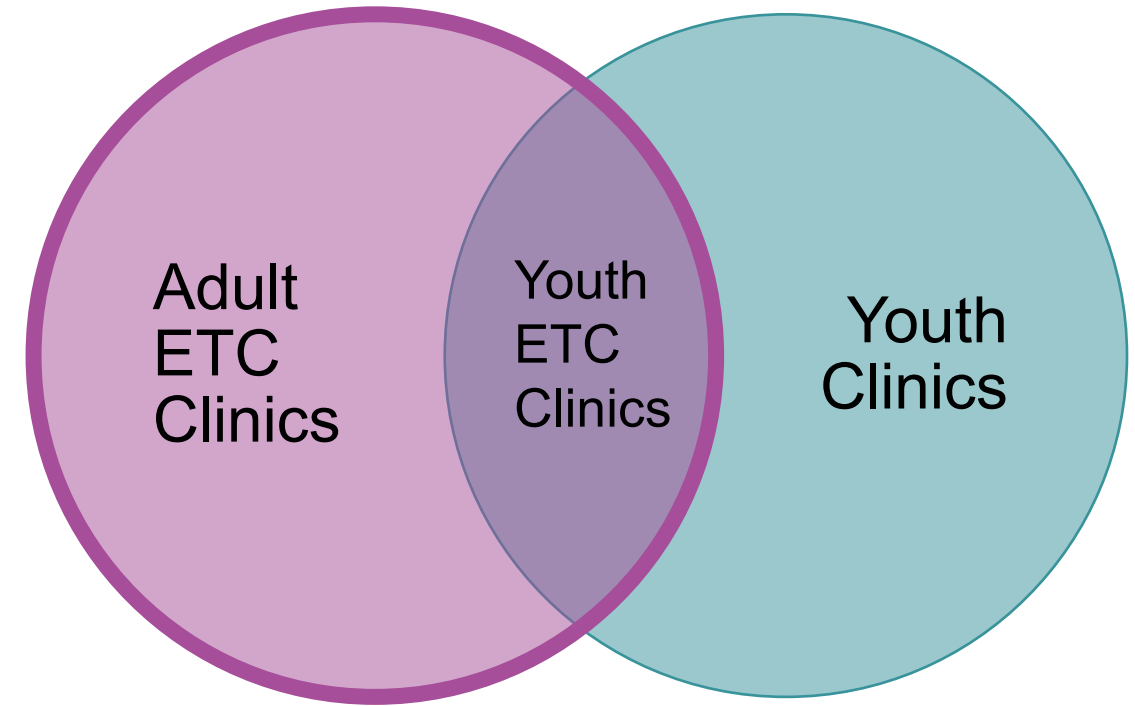
Workflow A

- North Adult
- Central Adult
- South Adult
- Coastside Adult and Youth
- EPA Adult and Youth

Workflow B

- North Youth
- Central Youth
- South Youth Shasta

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Poll

Who is required to administer the Screening Tool?

A. All staff in all programs

✅ Only Access Call Center staff

C. The cute honorary BHRS ambassador on this slide

D. Nobody is required to use it

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Putting Criteria into Practice

Clinically appropriate outpatient services (e.g. rehab, case management, etc.) may be provided prior to determination of an official diagnosis.

Make sure to use Z-codes in the absence of a mental health diagnosis during this phase.

Z-codes are covered in a separate training, available in the LMS.

Assessment
- May include other clinically appropriate services
- May use Z-Codes without MH diagnosis

This is when you **gather the information** needed to determine if the client meets full criteria to access SMHS.

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Putting Criteria into Practice

Screening
- Determines system in which client should receive assessment.

When the screening tool must be re-administered:

In most cases, a re-referred individual who is **not currently receiving services** from either the MCP or BHRS should be re-screened using the appropriate CalAIM Screening Tool **if they meet either of these conditions:**

✓ The request is after 365 days (1 year) of the administration of their most recent screening OR

✓ The request is after 365 days (1 year) of their last billable direct service.

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Putting Criteria into Practice

Screening

- Determines system in which client should receive assessment.

When the screening tool must be re-administered:

Exception to this rule:

If a returning individual had a Youth Screening Tool completed recently and are now of age for the Adult Screening Tool… **the Adult Screening Tool must be administered** even if they are returning within a year of the administration of the Youth Screening Tool.

This is because the Criteria for Access to SMHS for Youth and Adult are different.

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Poll

When should the Screening Tool be re-administered?

A. If an individual is returning for services and has not had direct services in over a year.

B. If a re-referred individual's last screening was completed over a year ago.

C. If a re-referred individual was last screened as a youth but they are now 18 years old.

✅ All of the above.

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PUTTING CRITERIA INTO PRACTICE

(Medically Necessary Services For Co-Occurring Diagnoses)

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Co-Occurring Diagnoses

Screening

- Determines system in which client should receive assessment.

While the CalAIM Screening Tools are not specifically designed as an SUD screening tool, the CalAIM Screening Tools include questions related to substance use disorder (SUD) that do not impact the screening score.

If a beneficiary responds affirmatively to an SUD question, the MCP or BHRS must offer them a referral for an SUD assessment in addition to completing the screening tool and making an appropriate mental health delivery system referral.

The person seeking care may decline the referral for an SUD assessment without any impact to their mental health delivery system referral.

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Co-Occurring Diagnoses

Beneficiaries in a MH program who also have an SUD diagnosis

Clinically appropriate and covered SMHS delivered by MH providers…

are covered whether or not the member has a co-occurring SUD.

Beneficiaries in an SUD program who also have MH diagnosis

Clinically appropriate and covered SUD services delivered by SUD providers…

are covered, whether or not the member has a co-occurring mental health condition.

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Co-Occurring Diagnoses

The session must primarily address the client's …

The reason for the service encounter must include an …

Beneficiaries in a MH program who also have an SUD diagnosis

… mental health

e.g. symptom, condition, diagnosis, and/or risk factors.

ICD-10 code that corresponds to the client's **mental health.**

Beneficiaries in an SUD program who also have MH diagnosis

… substance use

e.g. symptom, condition, diagnosis, and/or risk factors.

ICD-10 code that corresponds to the client's **SUD.**

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PUTTING CRITERIA INTO PRACTICE

(What If…?)

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Special Scenarios: What if…?

What if the staff administering the screening tool disagrees with the score?

Individuals **must be referred** to the appropriate Medi-Cal mental health delivery system (BHRS or MCP) for a clinical assessment **based on their screening score** <u>even if the person administering the screening tool does not agree with the screening tool score.</u>

Screening
- Determines system in which client should receive assessment.

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Special Scenarios: What if…?

Based on the screening, it looks like the MCP would be where you should go to receive your assessment.

What do you mean?? I don't want to have to go to yet another place to try to see about where to get my services…

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Special Scenarios: What if…?

This means that individuals who decline a referral for assessment through the MCP MUST be referred to a BHRS program for assessment.

Remember, MCPs and BHRS can receive reimbursement for assessment and clinically appropriate services during the assessment period, regardless of whether the assessment results in the individual meeting access criteria.

If an individual receives a screening in one delivery system (MCP or BHRS) but **declines the referral to the other delivery system** for assessment…

… the delivery system that administered the screening must provide an assessment.

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Special Scenarios: What if…?
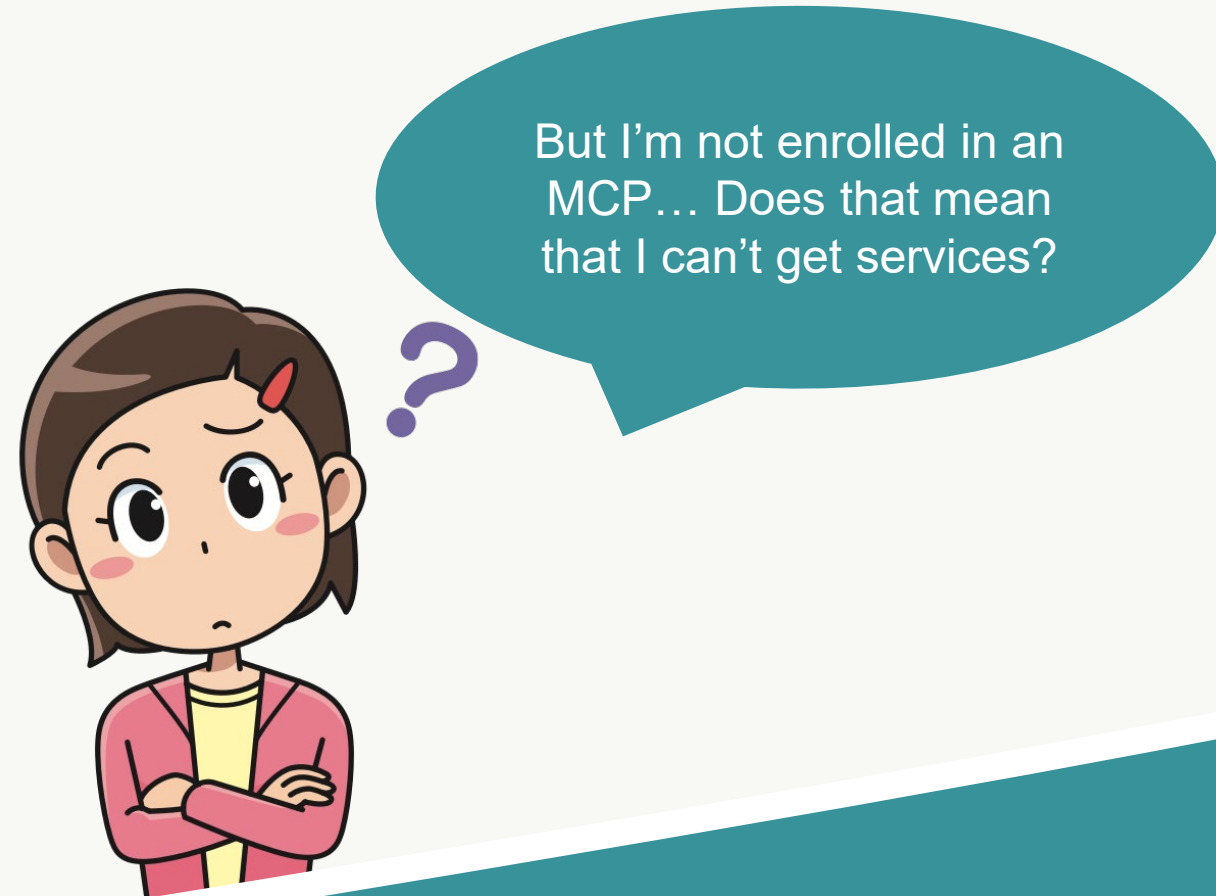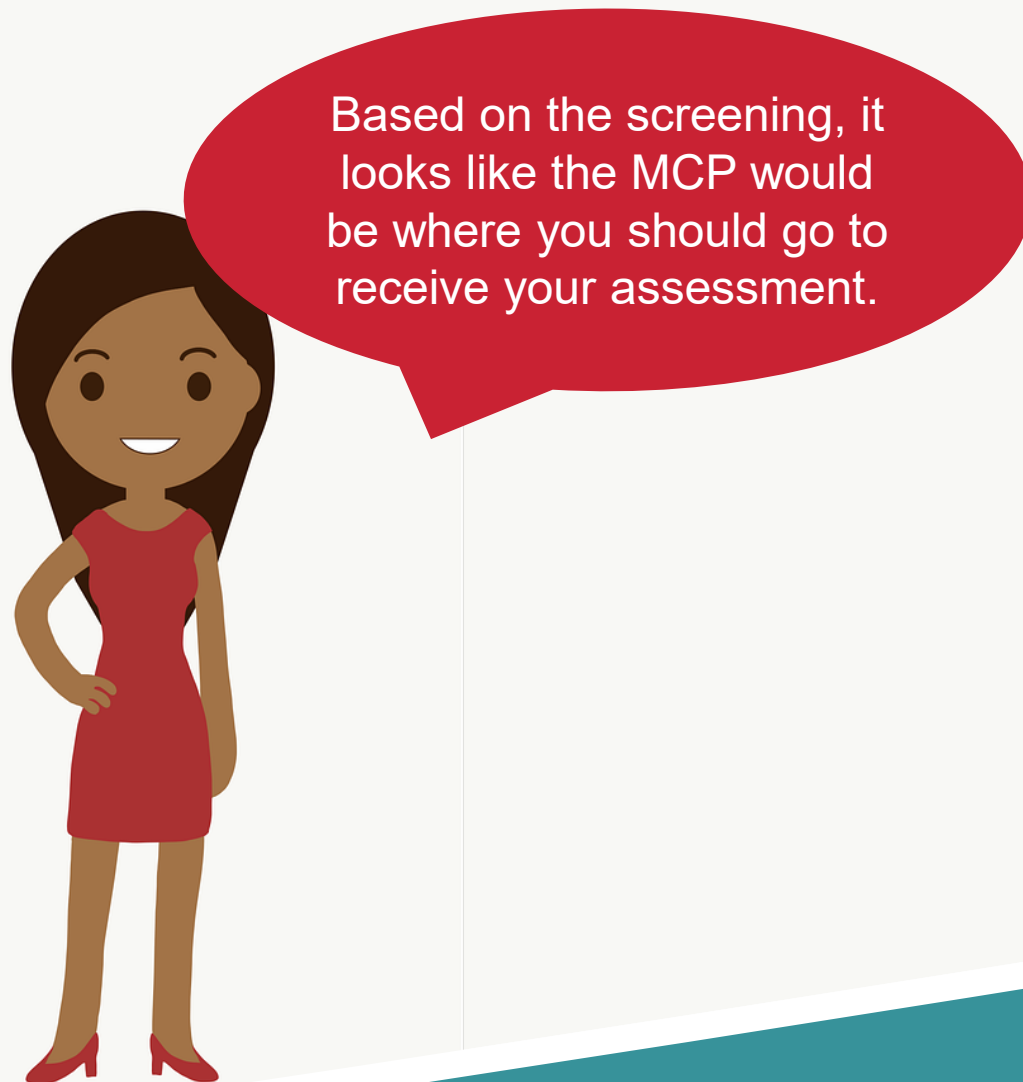
Special Scenarios: What if…?

If a Medi-Cal member's screening score requires a referral to an MCP but the Medi-Cal member is not enrolled in an MCP …
BHRS must either:

1) **provide an assessment or**

2) **facilitate enrollment in an MCP and coordinate the Medi-Cal member's referral to ensure a timely clinical assessment.**

If staff need support in connecting an individual to Medi-Cal or HPSM directly after the administration of the screening tool, they can reach out to the Health Insurance Outreach & Enrollment Team. For those already enrolled in HPSM, ECM services can be provided to support linkage.

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Special Scenarios: What if…?

If an individual is not enrolled in Medi-Cal or HPSM…

- BHRS Staff should contact their unit chief to find out who is their assigned **Health Insurance Outreach & Enrollment** staff resource.

- Contracted Providers should contact Stefan Luesse at SLuesse@smcgov.org

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Special Scenarios: What if…?

For individuals who are already enrolled in HPSM, but may need case management services during or after the transition to the MCP….

Enhanced Care Management (ECM) is a service available to certain HPSM members who meet specific criteria.

Please refer to the HPSM website for more information about ECM criteria and the various avenues by which HPSM members can access ECM services.

https://www.hpsm.org/provider/calaim-at-hpsm

Special Scenarios: What if…?

Bridges to Wellness is one of several programs that offer ECM services to HPSM members.

For more information on ECM, supervisors may contact Christina Genetti cgenetti@smcgov.org, the Manager of Bridges to Wellness.

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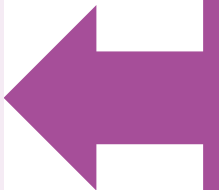
Special Scenarios: What if…?

BHRS Policy 22-03 (BHIN 22-011): Clinically appropriate services may be provided "provided prior to determination of a diagnosis, during the assessment, or prior to determination of whether NSMHS or SMHS access criteria are met."

Includes prevention, screening, assessment, and treatment services

BHRS Policy 23-01 (BHIN 22-065): "MHPs shall coordinate beneficiary care services with MCPs to facilitate care transitions or addition of services, including ensuring that the referral process has been completed, the beneficiary has been connected with a provider in the new system, and the new provider accepts the care of the beneficiary, and medically necessary services have been made available to the beneficiary. All appropriate consents shall be obtained in accordance with accepted standards of clinical practice."

Includes care coordination activities to support the individual in getting connected to the medically necessary services under the MCP

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Special Scenarios: What if…?

Assessment

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Final Determination

Includes prevention, screening, assessment, and treatment services

Includes care coordination activities to support the individual in getting connected to the medically necessary services under the MCP

All Services Provided Should Be Clinically Appropriate

All Services Provided Should Be Medically Necessary

PUTTING CRITERIA INTO PRACTICE

(NOABDs)

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NOABD Resources

LMS Training

BHRS Policy 19-01

Poll

What does the acronym "NOABD" stand for?

A.   Notice of Anniversary of Birth Date

B.   Notice of Adorable Buddy Downtime

✅   Notice of Adverse Benefits Determination
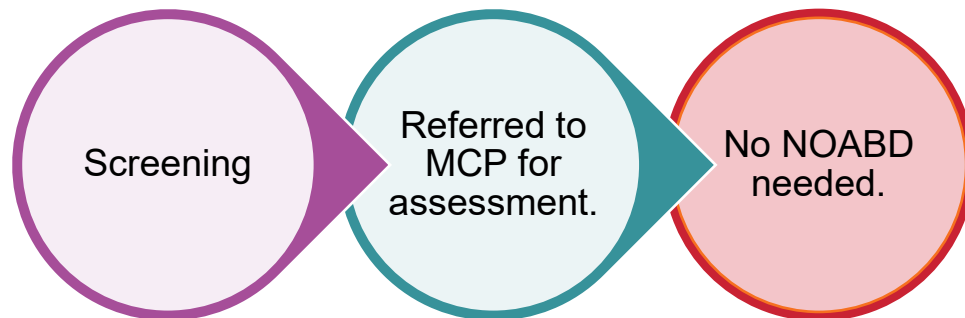
D.   Notice of Annoying Bug Deterrent

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NOABDs

MCPs/MHPs **should <u>not</u> issue a NOABD** if an individual is referred to the other Medi-Cal mental health delivery system for assessment **<u>based on their screening score</u>**.

Once assessed, if an individual does not meet access criteria for SMHS, a **NOABD must be issued.**

When the Transition of Care Tool is implemented in BHRS, if the client is to be referred to the MCP, **the Transition of Care Tool must be used to transition care to the MCP**.

Screening → Referred to MCP for assessment. → No NOABD needed.

Full Clinical Assessment → Referred to MCP for services. → NOABD **<u>and</u>** Transition Tool are required.

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NOABDs

Important Note about clients who will be referred to the MCP:

If BHRS conducts the assessment and non-specialty mental health services (NSMHS) are recommended, BHRS should facilitate care coordination activities.

This would include following existing processes for facilitating MCP enrollment if the client is not yet enrolled in the MCP and/or connecting the individual to a Fee-for-Service (FFS) provider for NSMHS.

Once assessed, if an individual does not meet access criteria for SMHS, a **NOABD must be issued.**

When the Transition of Care Tool is implemented in BHRS, if the client is to be referred to the MCP, **the Transition of Care Tool must be used to transition care to the MCP**.

Full Clinical Assessment → Referred to MCP for services. → NOABD **and** Transition Tool are required.

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2024 BHRS CalAIM Training Schedule

Training Evaluation

Go to this website to provide your feedback on today's training: LINK

https://www.surveymonkey.com/r/BJGD76D

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Questions?

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🌐 www.smchealth.org/qm

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