



Coordination of Care with Los Angeles County LACDPH-SAPC Substance Abuse Providers



*Coverage for
every stage of life™*

What is a “Managed Care Plan”?

- Managed care is a term to describe the structure of health insurance
- A managed care organization contracts with providers, facilities, and physician provider groups at negotiated rates
 - This results in lower healthcare costs for members of the health insurance plan
- For Medi-Cal only, LA County has a two plan model with LA Care and Health Net, along with Plan partners (e.g., BSC Promise, Molina)

Behavioral Health Model of Care

Medi-Cal

- New CA Medi-Cal Managed Care Plan outpatient mental health benefit
- Target population: Medi-Cal beneficiaries with a DSM diagnosis and “mild to moderate” impairment in mental, emotional, or behavioral functioning
- The state’s intent is that these therapeutic services are **time-limited** and **solution-focused** with the goal of returning patients to primary care management when clinically appropriate
- Applied Behavioral Analysis (ABA) / Behavioral Health Treatment (BHT)

Behavioral Health Model of Care

Cal MediConnect (CMC)

- Developed to support dual-eligible adults with disabilities (including the homeless), who have multiple chronic illnesses or functional or cognitive limitations
- Designed to bring a fully coordinated, person-centered focus to meeting the complex functional and health care needs of members with comorbid behavioral health and medical conditions
- Model of care promotes:
 - Coordination of care through an identified point of contact
 - Transitioning each member's care between health care settings and health care providers

Medi-Cal Managed Care Plans Behavioral Health

Medi-Cal* and CMC** Services Available

Mild-Moderate Impairments*

PCP Decision Support

Individual and group therapy

Outpatient services to monitor drug therapy

*Psychological/Neuropsychological testing

Prescription drugs (carved in)

Laboratory services

Case Management and Care Coordination Services**

Specialty Mental Health – LA County Department of Mental Health

Specialty Mental Health Services

Medication management

Assessment and treatment planning

Individual and group therapy

Crisis intervention

Crisis stabilization

Adult crisis residential services

Targeted case management

Adult residential treatment services

Full service partnerships

Acute psychiatric hospital services

Inpatient professional services

IMD psychiatric services

Clinical Exchange of Member Information

Physical Health & Substance Use Disorder Providers:

Generally, the sharing of information from a SUD provider (meaning, SAPC facility or rehab or SUD IOP/PHP/methadone provider) to a PCP **almost always requires written member consent** (except in a true emergency) due to 42 C.F.R. Part 2

Physical Health & Mental Health Providers:

Generally, the exchange of information between a mental health (not SUD) provider and a Primary Care Physician (PCP) for the purposes of care coordination does not require member consent

Care Coordination: Why Coordinate Care?

- We all have pieces of the plan, and vital patient information to potentially provide holistic care
- One provider's plan may enhance or detract from another provider's plan
- Patients tire of repeating their story, symptoms, etc., to multiple providers
- Relying on patients as historians can be “touch and go” sometimes
- Why give patients the chore of collecting information from different people/places?

Care Coordination: Why Coordinate Care?

- Evidence of coordination of care between **Cal MediConnect** Health Plans and County BH Providers is **required**
- State recommends and encourages coordination of care between MCPs and County providers for any member
- Medi-Cal patients may transition from needing different types of providers based on level of impairment changes
- We are held to state oversight of coordination with each other on shared members

Benefits of Coordinating Care

Health Net and MHN Care Managers are valuable partners in client care:

- Care Managers can identify if a client is in a medical or in a psychiatric hospital.
- Care Managers can collaborate with discharge planners
- Care Managers can help remove access barriers to treatment (ex. transportation)
- Care Managers can help access other needed medical/physical health and mental health services
- Care Managers will continue to follow up until a client is connected with care

Various Ways We Can Collaborate

Interdisciplinary Care Team Meetings (ICTs)*

Telephone calls, emails (encrypted), and fax*

Participation in clinical rounds (within DMH and MCPs)*

Sharing of treatment plans*

Sharing change of health status updates (IP admits, moves)*

Participating in meetings like this to understand best practices and share resources*

Referral Information

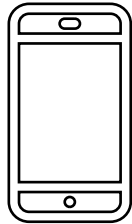


**For Behavioral Health Services, Call
(888) 327-0010 or visit www.MHN.com**

**For Health Net Member Services, Call
(800) 674-6110**

Referral Information

Health Net Transportation Services



ModivCare's Customer Service

855-253-6863 Medi-Cal

866-799-4465 Cal MediConnect

Non Medical Transportation

- Bus
- Passenger Care
- Taxi, or
- Public or private conveyance

Non Emergency Medical Transportation*

- Ambulance
- Litter Van
- Wheelchair Van

*Requires approval of Physician Certification Statement (PCS) form, can be faxed to 877-457-3352

Questions, Comments, Final Thoughts

