

Mental Health Services for Children in Medi-Cal

Working with a Fragmented System

Family Voices Conference
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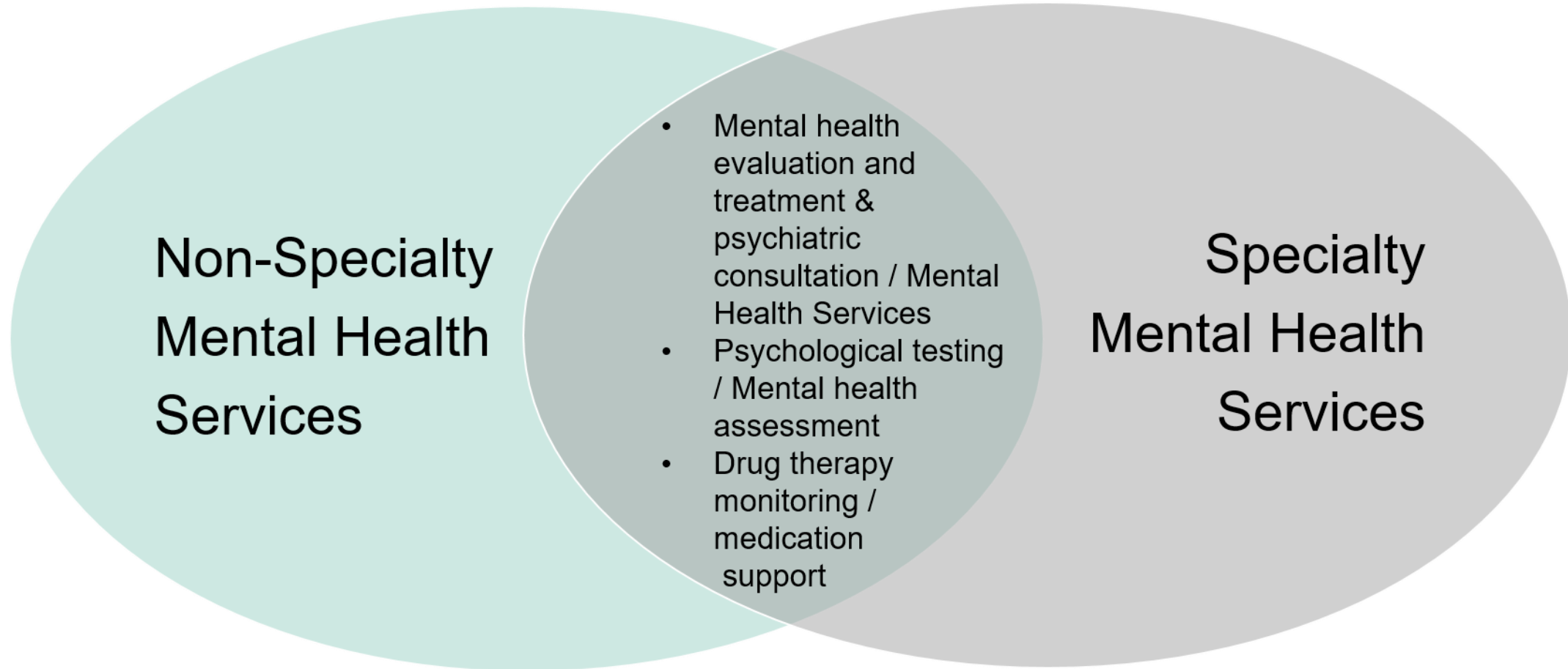
Roadmap

- Overview of the Medi-Cal mental health delivery system
- Special Medi-Cal rules for children under 21: EPSDT
- Particular mental health interventions for children in Medi-Cal
- New requirements for Medi-Cal mental health services
 - network adequacy
 - grievance and appeals
- Opportunities for advocacy

Medi-Cal Mental Health Delivery System

An Overview

Medi-Cal's "Carve Out" Mental Health Delivery



Medi-Cal's Mental Health Delivery

Medi-Cal Managed Care Plans (MCPs)

- Target Population: Children and adults eligible for outpatient non-specialty mental health services (adults: mild to moderate conditions)
- Non-Specialty Mental Health Services: Carved-in Effective 1/1/14

County Mental Health Plans (MHPs)

- Target Population: Children and adults with disabling conditions that require mental health treatment (children; adults w/ severe cond.)
- Specialty Mental Health Services (“Carve out” from the MCPs)

Medi-Cal's “Carve Out” Mental Health Delivery

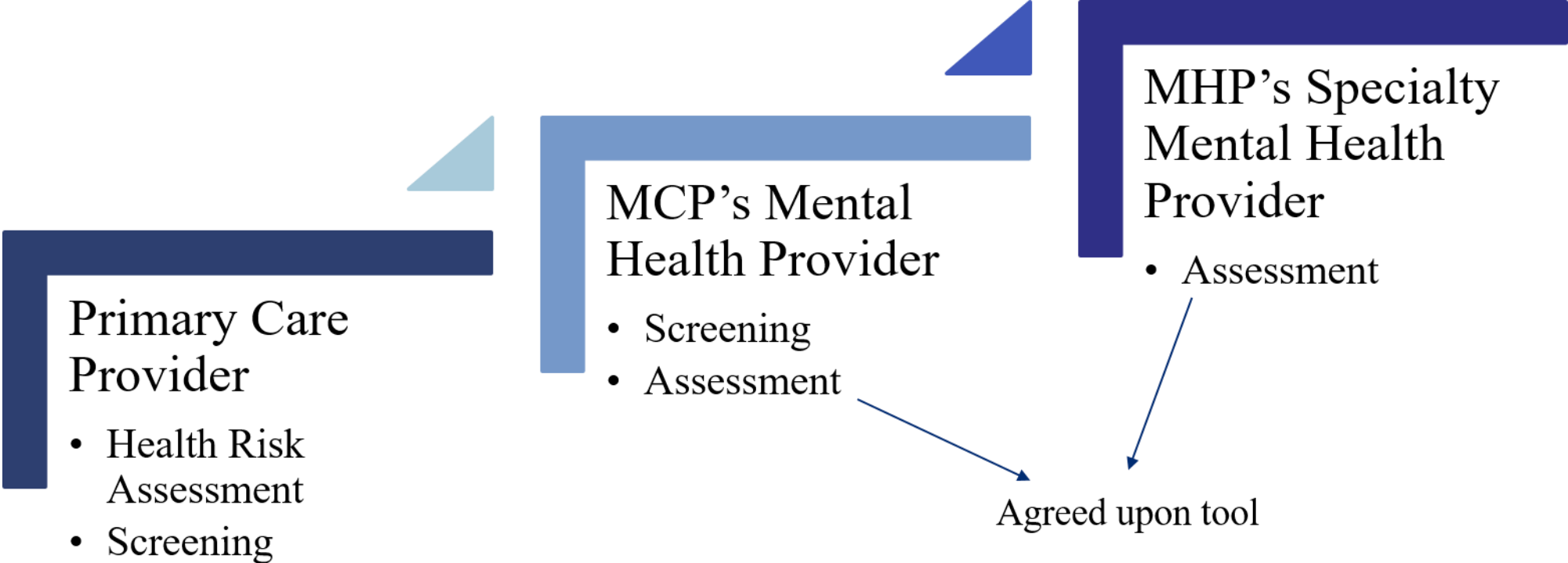
MHP Outpatient Specialty Mental Health Services (SMHS)

- Mental Health Services
 - assessments, plan development, therapy, rehabilitation and collateral, medication support
- Day Treatment services and rehabilitation
- Crisis intervention and stabilization
- Targeted Case Management
- EPSDT specialty mental health services (under age 21)

Access to Specialty Mental Health Services (SMHS)

- ✓ Included Diagnosis
- ✓ Condition not responsive to physical health care treatment
- ✓ Meet medical necessity

Screening and Referral Pathways



Special Medi-Cal rules for children under 21

Early & Periodic Screening, Diagnosis, Treatment

EPSDT= Early & Periodic Screening, Diagnostic and Treatment

- *Medicaid is an entitlement:* mandatory services for Medi-Cal eligible children and youth up to age 21
- State (MCPs) must screen all children on Medi-Cal for health and behavioral health needs
- Covers ALL treatment necessary to “*correct or ameliorate physical and mental illnesses and conditions,*” even if a service not covered under the Medicaid State Plan

SMHS cont. (from *lawsuits*)

Therapeutic Behavioral Services (TBS)

Intensive Care Coordination (ICC)

Intensive Home Based Services (IHBS)

Therapeutic Foster Care (TFC)

New Network Adequacy Rules

Time and Distance Standards; Timely Access

Time and Distance Standards – Mental Health Services

Standards vary by county size:

- **Rural:** 60 miles/ 90 minutes from beneficiary's residence
- **Small:** 45 miles / 75 minutes from beneficiary's residence
- **Medium:** 30 miles / 60 minutes from beneficiary's residence
- **Dense:** 15 miles / 30 minutes from beneficiary's residence

Timely Access to Appointments

<u>Appointment Type</u>	<u>Standards</u>
Urgent care appointments that do not require prior authorization	48 hours
Urgent care appointments that do require prior authorization	96 hours
Non-urgent <i>primary care</i> appointments	10 business days
Non-urgent <i>specialist (Psychiatry)</i>	15 business days
Non-urgent mental health provider (non-psychiatry)	10 business days
Non-urgent appointment for ancillary services for the diagnosis or treatment of injury, illness or other health conditions	15 business days
Telephone wait time	No more than 10 minutes
Normal business hours	Standards
Triage – 24/7 services	24/7 services; Call back time is no more than 30 minutes

New Grievance & Appeal Rules

Grievance and Appeal Systems

- All plans must have a grievance and appeal system that meets the requirements of federal regulations
- Plans must explain the right to file grievances and appeals in a “beneficiary handbook”
 - Procedures, timeframes, availability of assistance
- Written notices are required when services are denied, delayed, terminated or reduced

Appeals

Action = ***Adverse Benefit Determination*** =

- Denial, reduction, suspension, termination, delay of service
- Denial/limited approval of requested service based on medical necessity, appropriateness, type, level, setting or effectiveness
- Disputes involving cost sharing/financial liability/payment
- Failure to act within timeframe for standard grievances

Grievance

- An expression of dissatisfaction about any matter other than an *adverse benefit determination*
- Can be filed *any time*
- Oral or written
- Plan Resolution: w/i 90 calendar days of receipt
- Plan to provide written acknowledgement within 5 days

Notice of Adverse Benefit Determination - Timing

- **Terminations, Reductions, Suspensions:** plan must provide notice at least **10 days in advance** of the decision effect date
- **Denial, delay, or modification** of all or part of the requested specialty mental health service request: **within 2 business days** of decision /as expeditiously as condition requires (not to exceed 14 days) (**APL 17-006; MHSUDS IN 18-010**)
- **Denial of payment, at the time** of any action denying the provider's claim

Advocacy Opportunities

What can you do?

- Hold plans accountable to standards
- *Know Your Rights!*
 - *Educate other families and consumers*
 - *Make sure families have the Beneficiary Handbook*
- Work with advocacy organizations
 - [Health Consumer Alliance](#)
 - *Disability Rights California*

Additional Resources/Reading

- [*Medi-Cal Mental Health Services*](#) (January 2017)
- [*Access to Mental Health Services for Children with Special Health Care Needs: Analysis and Recommendations*](#) (August 2017)
- [*Navigating The Challenges of Medi-Cal's Mental Health Services in California: An Examination of Care Coordination, Referrals and Dispute Resolution*](#) (November 2018)
- [*Substance Use Disorders in Medi-Cal: An Overview*](#) (February 2019)
- *DHCS Model Beneficiary Handbook*
 - [*Specialty Mental Health Services*](#)
 - *Managed Care Plan services*

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