alameda county behavioral health
MENTAL HEALTH & SUBSTANCE USE SERVICES

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MEMORANDUM -

DATE: December 19, 2022
TO: Alameda County Behavioral Health (ACBH) ACCESS Call Centers and Specialty Mental Health Services (SMHS) Providers
FROM: Torfeh Rejali, Quality Assurance (QA) Administrator Torfeh Rejali
SUBJECT: **Screening and Transition of Care Tools for Medi-Cal Mental Health Services**

This memorandum is a summary of the DRAFT BHIN that was issued by the State on November 2022, providing information about new, standardized, statewide Screening and Transition Tools. The final BHIN and tools are expected to be released by Department of Health Care Services (DHCS) in the next two weeks and to be utilized by Medi-Cal Mental Health delivery systems effective **January 1, 2023**.

Overview

The Department of Health Care Services (DHCS) California Advancing and Innovating Medi-Cal (CalAIM) initiative for "Screening Tools and Transition of Care Tools for Medi-Cal Mental Health Services" aims to ensure that all Medi-Cal beneficiaries receive coordinated services across Medi-Cal mental health delivery systems, and to improve health outcomes. The goal is to ensure beneficiary access to the right care, in the right place, at the right time.

Medi-Cal Mental Health delivery systems must begin utilizing the standardized tools as of January 1, 2023. The DRAFT versions of the tools were provided by the State and can be accessed below. Final versions are expected to be released prior to January.

- Adult Screening Tool
- Youth Screening Tool
- Transition of Care Tool

The final Screening and Transition of Care Tools will be provided by the State as portable document formats (PDFs); however, they can be built into existing software systems as long as the content, specific wording, order of questions and scoring methodology remain intact. All Tools may be completed in person, by telephone, or by video conference.

The Screening and Transition of Care Tools do not replace:

- The plan's policies and procedures that address urgent or emergency care needs, including protocols for emergencies or urgent and emergent crisis referrals.
- The plan's protocols that address clinically appropriate, timely and equitable access to care.
- Clinical assessments, level of care determinations and service recommendations.
- Requirements to provide EPSDT services.

Adult and Youth Screening Tools

Purpose: To guide referrals to the Medi-Cal mental health delivery system, Managed Care Plan (MCP) or Mental Health Plan (MHP). The tools identify initial indicators of beneficiary needs in order to make a

determination for referral to either the beneficiary's MCP or MHP for a clinical assessment and medically necessary non-Specialty Mental Health Services (NSMHS) or SMHS.

The screening Tools will be primarily used by MCP and MHP ACCESS lines and Call Centers for beneficiaries under age 21 (youth) and beneficiaries age 21 and over (adults) who are not receiving mental health services when they contact the MCP or MHP.

The Screening tools are not required or intended for use with:

- Beneficiaries who are currently receiving mental health services, or
- Beneficiaries who contact mental health providers directly to seek mental health services.

If beneficiaries contact mental health providers directly, providers should follow their existing process and, as appropriate, complete a clinical assessment of the beneficiary without the use of the Screening Tools. This is consistent with the No Wrong Door for Mental Health Services Policy described in All Plan Letter (APL) 22-005 and BHIN 22-011, or subsequent updates.

Note: Completion of the Screening Tool is not considered an assessment. Once a beneficiary is referred to the MCP or MHP, they must receive an assessment from a provider in that system to determine medically necessary mental health services.

Administration:

- The Screening Tools include both screening questions and an associated scoring methodology.
- They can be administered by clinicians [1]or non-clinicians[2].
- Screening Tool questions must be asked in full using the specific wording provided in the tools and in the specific order the questions appear in the tools, to the extent that the beneficiary is able to respond.

Transition of Care Tool

Purpose: The tool is intended to ensure that beneficiaries (both adult and youth) who are receiving mental health services from one delivery system receive timely and coordinated care when

- their existing services are being transitioned to the other delivery system (transition of care referral); or
- services are being added to their existing mental health treatment from the other delivery system (service referral).

The Transition of Care Tool is designed to leverage existing clinical information to document a beneficiary's mental health needs and facilitate the transition of care or service referral to the beneficiary's MCP or MHP. Note that beneficiary choice is an integral part of transitioning or adding

[1] Clinicians are the following provider types defined in the State plan: Licensed mental health professionals, waivered/registered professionals or individuals providing services under the direction of a licensed mental health professional.
[2] Non clinicians include administrative staff, peer support staff and others that don't meet the definition of clinician.

services. Additionally, a beneficiary may keep services in their respective plan if they are non-duplicative.

Decisions related to transition of care or service referrals must be made by a clinician via a patient-centered, shared decision-making process in alignment with MHP protocols. **Once the determination has been made to transition the care or refer for services to the other delivery system, the Transition of Care Tool can be filled out by a clinician or a non-clinician.**

Administration:

- The information shall be collected and documented in the order it appears on the Tool.
- Additional information (i.e., medical history reviews, care plans, and medication lists) shall not be added to the form but may be included as attachments to the Transition of Care Tool.
- Beneficiaries shall be engaged in the referral process and appropriate consents obtained in accordance with accepted standards of clinical practice.

Following Administration of the Tool:

The completed Transition of Care Tool and any relevant supporting documentation should be sent to the plan the beneficiary is being transferred to, or to the new provider identified as part of the transition. It is the responsibility of the referring provider to ensure that the referral process has been completed and the beneficiary has been connected to a provider in the new system, the new provider accepts the care of the beneficiary and medically necessary services have been rendered. All appropriate consents must be obtained in accordance with accepted standards of clinical practice.

Action Steps

Please share this information with your teams, as appropriate.

Training

Per June 30, 2022 memo, ACBH has been utilizing CalMHSA's CalAIM training modules. CalMHSA is in the process of developing new Screening and Transition of Care training modules that will provide a review of the content of these tools. The modules will be posted on their CalMHSA Learning Management page once the Final BHIN and Screening and Transition Tools are released by the State (expected prior to January 1). Clinician and non-clinicians who will be utilizing these tools have until **January 31, 2023** to complete CalMHSA's training modules for Screening and Transition Tools.

Support

We encourage you to join us for our Mental Health Brown Bag meetings on the **2nd and 4th Friday of each month from 12-1 p.m.** and welcome your questions and opportunities for clarification of this and other changes and processes. **The next Brown Bag meeting is scheduled for Friday January 13, 2023**. Invitations for the 2023 sessions will be sent out and the link will be posted on the Quality Assurance Training page of the ACBH Provider website in the next couple of weeks.

For questions, please contact QATA@acgov.org.