

MEETING AGENDA

Meeting / Project Name: DMC-ODS & State Plan
All County MOU Quarterly Meeting

Objective of Meeting: The purpose of this quarterly meeting is to facilitate effective collaboration and continuous improvement in all areas covered by the MOU between Managed Care Plan (MCP) and Behavioral Health Plans (BHP).

Date: March 27, 2025

Time: 10:00AM – 11:00AM

Location: Webex

Facilitator: Nicole Escobar

Attendees: Ranell Brown, Nancy McClaflyn, Vivian Agudelo, Shiann Hogan, Julie Soto, Toby Reusze, Sarah Collard, Vanessa Mayer, Deanna Bay, Emi Botzler Rodgers, Paul Bugnacki, Connie Smith, Miguel Rodriguez, Laura Burch, Tiffany Armstrong, Barbara Longo, Jenine Miller, April Giambra, Cammie Noah, Christina Marlow, Catherine Condon, Cassandra Eslami, Julie Freitas, Emily Cowan, Jayme Bottke, Sharon Sousa, Scott Kennelly, Lea Salas, Joe Hallett, Eloise Jones, Tony Hobson, Kelly Miner-Gann, Rick Bingham, Shawne Corley, Scott Genschmer, Amy Ellis, Sheryll Prinz-McMillan, Elise Jones, Chrissy Andrus, Will Gayowski, Cody Milner, Lisa Beck, Nancy Starck, Kayleigh Emry, Jordan Hall, Jessica McGill, Amber Westphal, Catherine Condon, Philip Hernandez, Nicole Escobar, Brandon Yadi, Stephanie Wilson, Carina Monroy

Materials
<ul style="list-style-type: none"> ○ Meeting PowerPoint <ul style="list-style-type: none"> • SUD Referral Data (SABIRT) • ECM Data • Community Supports (CS) Data ○ Sharefile log-in: ShareFile - Sign In ○ Policy Grid (all policies are available for download via Sharefile)

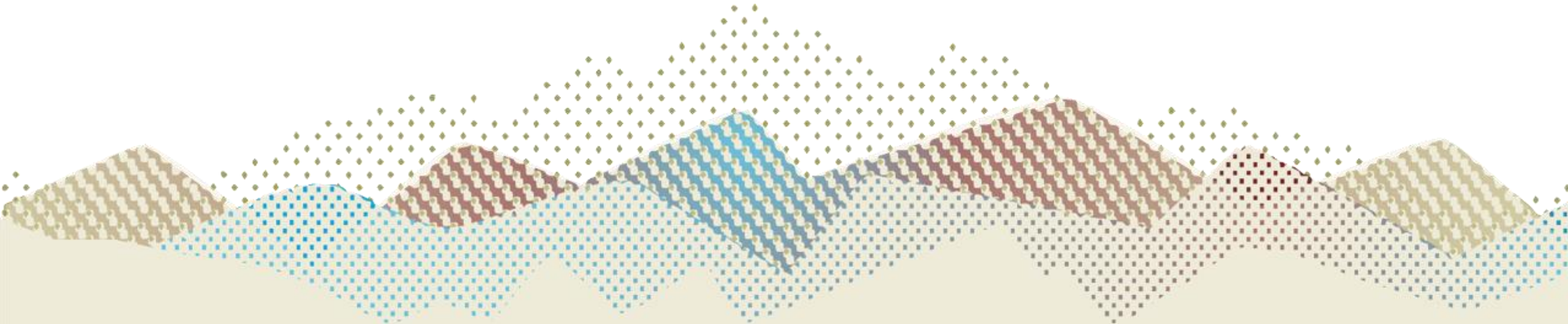
Topic	Description
New Agenda Structure	<ul style="list-style-type: none"> • Intended to better align with annual DHCS MOU updates • Topic and bullet points included in the agenda will be used by Partnership for annual report
Care Coordination	<ul style="list-style-type: none"> • Care coordination may be requested by completing the appropriate form found here: https://www.partnershiphp.org/Providers/HealthServices/Pages/Care-Coordination.aspx • Call 800-809-1350 if you have questions regarding a particular member
Screening, Assessment, and Referrals	<ul style="list-style-type: none"> • 2024 data provided indicates number of PCP screenings and interventions provided in primary care • ECM data -2024 • CS data -2024

Strategies to Avoid Duplication of Services	<ul style="list-style-type: none"> • Considerations: <ul style="list-style-type: none"> • Recovery residences • MAT (prescribing) <ul style="list-style-type: none"> ○ Access to Medi-Cal Rx data?
Dispute Resolution	<ul style="list-style-type: none"> • The parties must agree to dispute resolution procedures in the event any dispute or difference of opinion arises regarding which Party is responsible for service coverage arising out of or relating to the MOU. (ADM52)
Collaboration	<ul style="list-style-type: none"> • New BHINs <ul style="list-style-type: none"> ○ 25-007- Traditional Care Services https://www.dhcs.ca.gov/Documents/BHIN-25-007-Traditional-Health-Care-Practices-Benefit-Implementation.pdf ○ 25-006 – BH Connect Incentive Program https://www.dhcs.ca.gov/Documents/BHIN-25-006-BH-CONNECT-Access-Reform-and-Outcomes-Incentive-Program.pdf
Member Engagement	<ul style="list-style-type: none"> • No new member engagement content released this quarter
Other topics:	<ul style="list-style-type: none"> • Where do counties feel gaps remain in workflows? • Are there any areas where PHC can aid and training?
Walk-on Items	
Topics for Next Meeting	

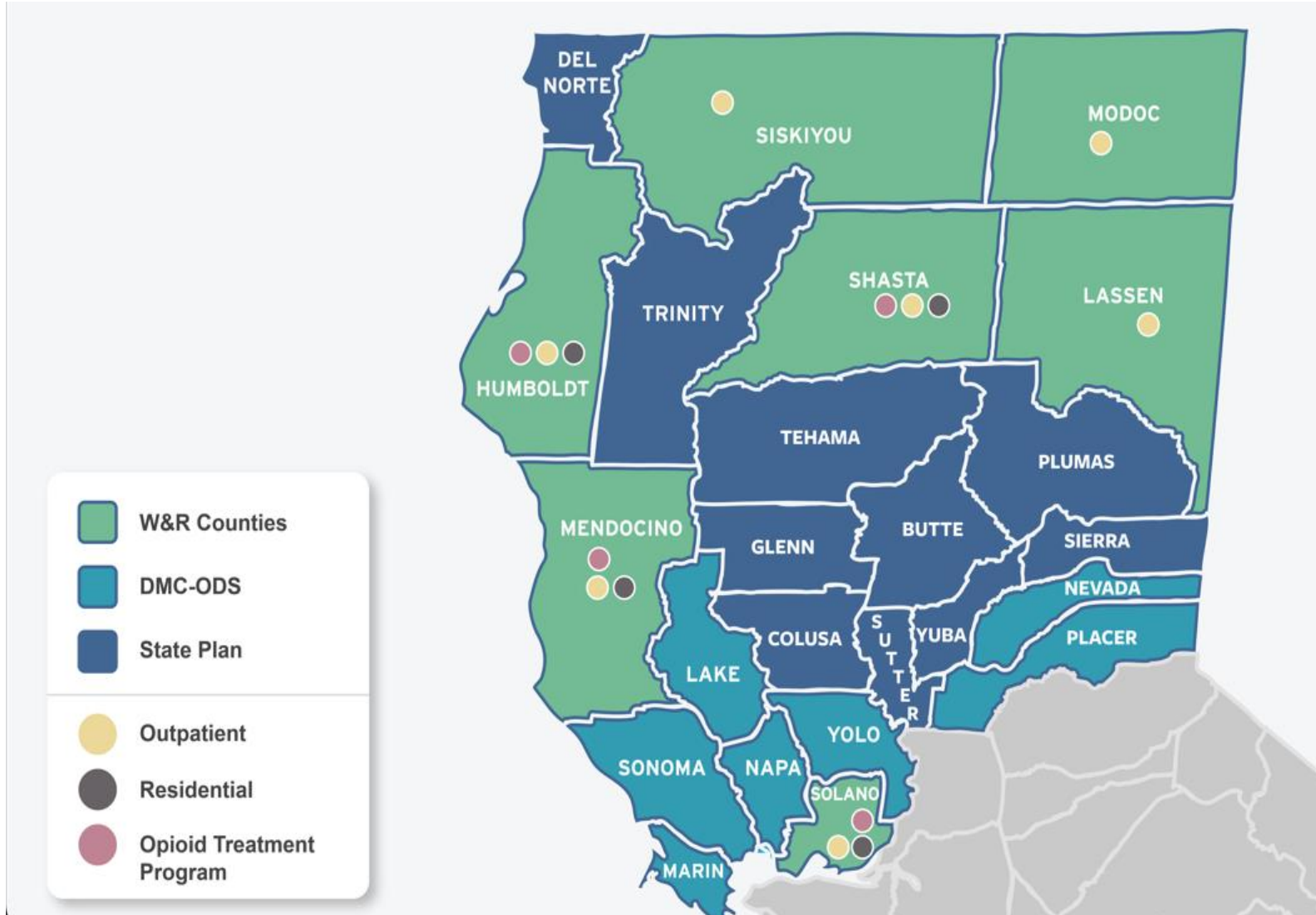


DMC-ODS & State Plan Quarterly MOU Meeting

March 27, 2025



SUD Services – 24 County View



Care Coordination/ Referral Data

- Enhanced Care Management
- Community Supports
- SUD Referrals by PCPs



Referrals

Care Coordination

May be requested by completing the appropriate form found here:

<https://www.partnershiphp.org/Providers/HealthServices/Pages/Care-Coordination.aspx>

Call 800-809-1350 if you have questions regarding a particular member

Enhanced Case Management

https://www.partnershiphp.org/Community/Documents/CalAIM%20Webpage/ECM%20Documents/Forms/ECM%20Referral%20Form%20-%20Adult_Final.pdf

Community Supports:

<https://www.partnershiphp.org/Community/Documents/CalAIM%20Webpage/Community%20Supports%20Documents/CS%20Referral%20Form.pdf>

Members Enrolled in the ECM Program AND Breakdown of the Identified Populations of Focus for Each Member Enrolled *Members can have more than 1

Population of Focus identified for the ECM Program* *Some members may have an identified Population of Focus but are not receiving services for them*

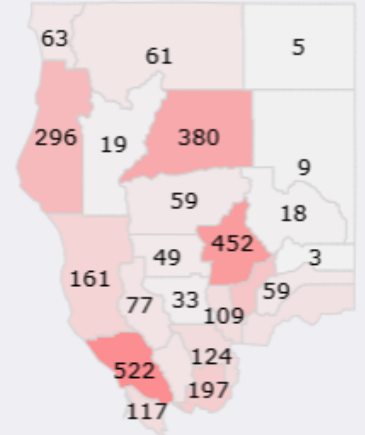
Member County	Provider	Populations of Focus
(All)	(All)	(All)

Age Group	Members Enrolled	Unhoused	Serious Mental Health (SMH) and/or Substance Used Disorder (SUD)	At Risk for Avoidable Hospital and ED Utilization
Adult	2,887	2,616	1,074	894
Child	324	268	86	35
Members Enrolled	3,211	2,884	1,160	929

Lifetime Status History of Members Identified for Enhanced Care Management *Hover over values to display definition for each status*

Age Group	Enrolled	Referred	Case Not Opened	Closed	Declined	Null
Null						9,309
Adult	11,351	15,909	258	6,465	779	
Child	927	1,323	2	332	18	
Total Members	12,278	17,232	260	6,797	797	9,309

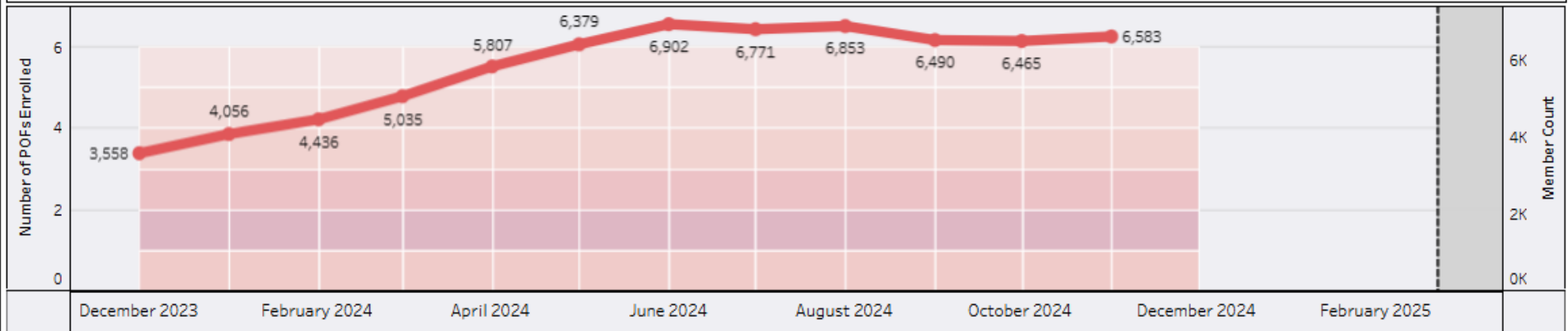
County Map



PoF

- Unhoused
- Serious Mental Health (SMH) and/or Substanc...
- At Risk for Avoidable Hospital and ED Utilization
- SED or CHR for Psychosis
- At-Risk for Institutionalization (LTC)
- SNF to Community

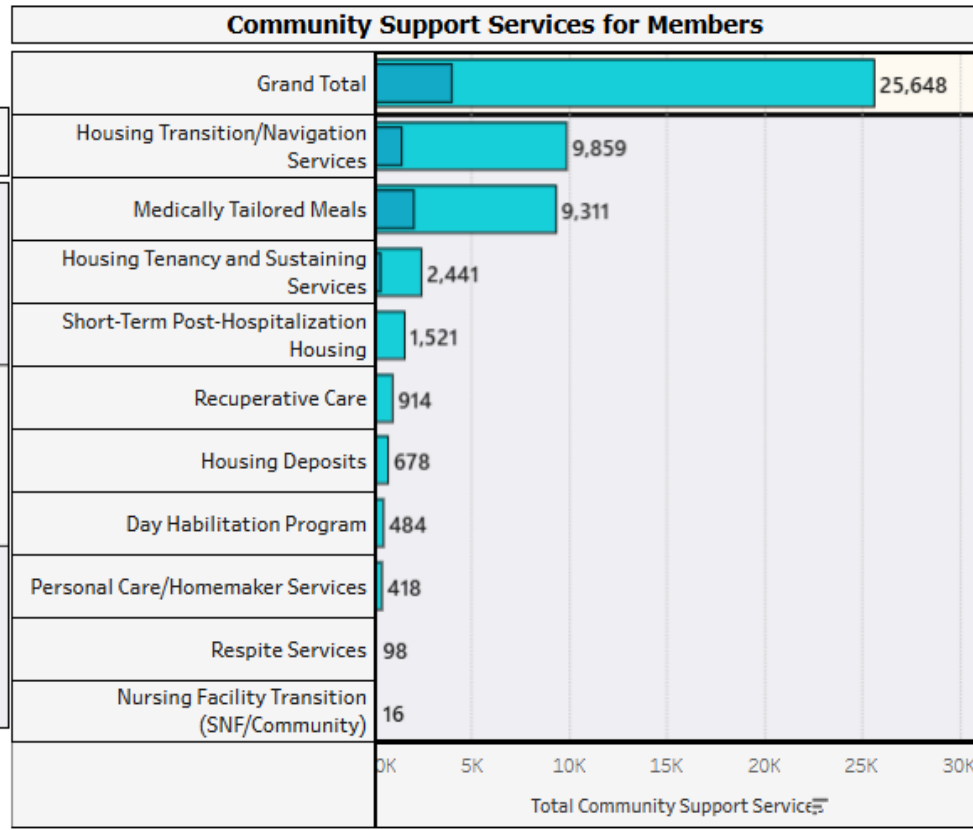
Historical Enrollment and Identified Populations of Focus for Enhanced Care Management (Year to Date)



County	Provider Name
(All)	(All)

Community Supports for All Prior Enrolled Members		Community Supports for Currently Enrolled Members	
Total Cumulative Count of Unique Enrolled Members	15,680	Total Cumulative Count of Unique Enrolled Members	2,767
Total Cumulative Count of Unique Services Approved For Each Member	25,648	Total Cumulative Count of Unique Services Approved For Each Member	3,943
Total Recorded Community Support Services Received by Members	56.4%	Average # of Approved Services Per Member	1.43

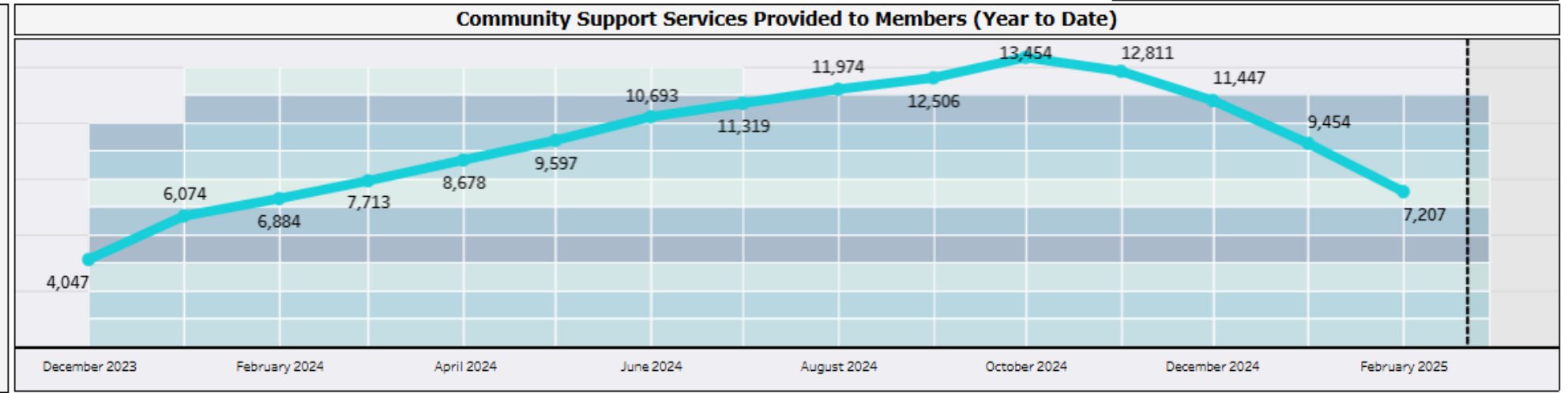
Recorded Community Support Services are all filed and paid claims by providers and may have a claim delay of at least 3 months



Members Receiving Services by County

	1
BUTTE	305
COLUSA	29
DEL NORTE	18
GLENN	67
HUMBOLDT	189
LAKE	171
LASSEN	4
MARIN	95
MENDOCINO	136
MODOC	4
NAPA	78
NEVADA	98
PLACER	107
PLUMAS	16
SHASTA	380
SISKIYOU	35
SOLANO	225
SONOMA	350
SUTTER	124
TEHAMA	91
TRINITY	8
YOLO	88
YUBA	150

- Service Type
- Nursing Facility Transition (SNF/Community)
 - Respite Services
 - Personal Care/Homemaker Services
 - Day Habilitation Program
 - Housing Deposits
 - Recuperative Care
 - Short-Term Post-Hospitalization Housing
 - Housing Tenancy and Sustaining Services
 - Medically Tailored Meals
 - Housing Transition/Navigation Services

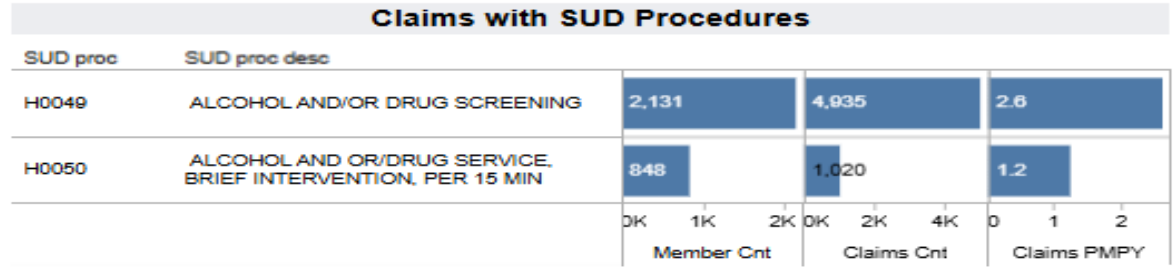
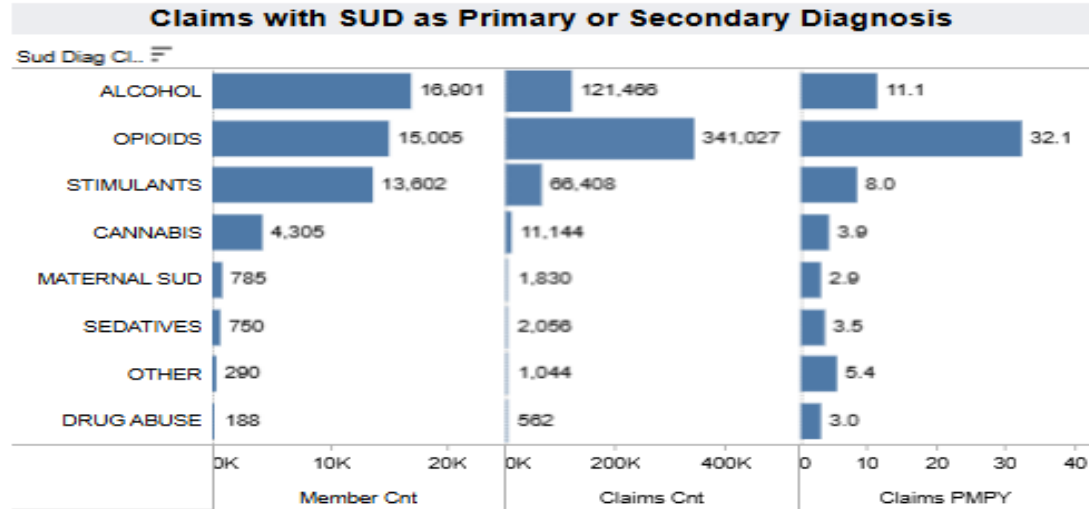


Paid Claims with Substance Use Disorder Diagnoses or Procedures

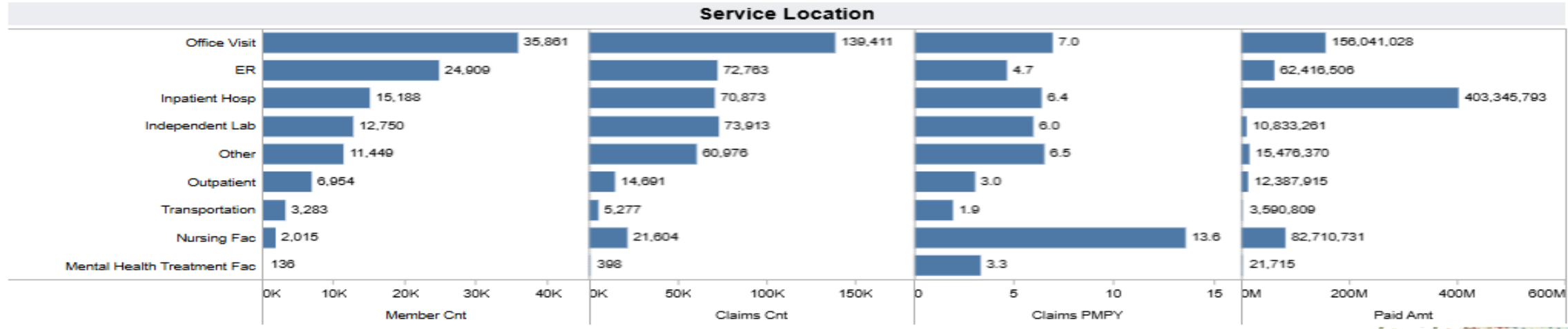
This view shows information on all the medical claims paid by PHC that had at least one substance use disorder diagnosis or procedure code in any position in the claim summarized by year and substance type, procedure, and service location.

Year of Service:
 Choose Location Level:
 Choose Location:
 Homelessness:
 Age Group:
 Risk Class:
 Kaiser Status:

Click on any bar or header below to filter on.



Location Legend
 Plan-wide



Program Updates

- BHIN 25-006
 - BH Connect Incentive Program
- BHIN 25-007
 - Traditional Healthcare Practices



Traditional Healthcare Practices

As part of a federal 1115 waiver, DHCS obtained permission to include new service types under ‘Traditional Healthcare Practices’ in October of 2024.

This establishes two new provider services that can be delivered by Indian Health Care Providers (IHCPs) in *Drug Medi-Cal Organized Delivery System (DMC-ODS) counties*. In Partnership’s geography, there is currently a total of 13 DMC-ODS counties (Marin, Sonoma, Napa, Lake, Yolo and Placer), which includes the seven in our Regional Model (Humboldt, Lassen, Mendocino, Modoc, Shasta, Siskiyou, Solano). These DMC-ODS counties are the only counties where these new provider types would be eligible for reimbursement. Reimbursement for said services are provided by the county Behavioral Health Plan (BHP).



Traditional Healers & Natural Helpers

New provider types for Medi-Cal members who meet DMC-ODS access criteria:

Traditional Healers: Traditional Healer services may use an array of interventions including music therapy (such as traditional music and songs, dancing, drumming), spirituality (such as ceremonies, rituals, herbal remedies) and other integrative approaches.

Qualifications: A Traditional Healer is a person currently recognized as a spiritual leader in good standing with a Native American Tribe, Nation, Band or Rancheria, and with two years of experience as a recognized Native American spiritual leader practicing in a setting recognized by a Native American Tribe

Natural Helpers: Natural Helper services may assist with navigational support, psychosocial skill building, self-management, and trauma support to individuals that restore the health of eligible Medi-Cal members.

- *Qualifications:* A Natural Helper is a health advisor contracted or employed by the IHCP who seeks to deliver health, recovery, and social supports in the context of Tribal cultures. A Natural Helper could be a spiritual leader, elected official, paraprofessional or other individual who is a trusted member of a Tribe

Traditional Healers & Natural Helpers

Indian Health Care Providers (IHCPs) – If IHCPs are DMC-ODS certified providers and contracted with their county DMC-ODS plan, they can provide services to both AI and non-AI members. For those IHCPs who are not certified providers and who don't have a contract with their county DMC-ODS plan, they can follow a process to Opt-In to being a service provider without DMC certification. The Opt-In process is an application the IHCP submits to DHCS and informs their local county DMC-ODS plan of their Opt-In package.

Reimbursement: Services are eligible for the AIR reimbursement rate for all AI members. The reimbursement is the same for non-AI if they are a contracted DMC-ODS provider. County DMC-ODS reimburses for the delivery of services.



Archway Groundbreaking – BHCIP Round 3



Walk-on items

- SB 43
 - What are counties considering for locked facilities for SUD only clients?
- Sobering Centers
 - Is there discussion for inclusion within counties?
 - Have any providers expressed interest?
 - What involvement (if any) has local law enforcement had?
- Interest in combining MH & SUD Quarterly MOU meetings?
- Others?

