



START-ODS

SYSTEM TRANSFORMATION TO ADVANCE RECOVERY AND TREATMENT

Los Angeles County's Substance Use Disorder Organized Delivery System

IMPLEMENTING NEW PROGRAMMATIC STANDARDS AND SERVICES

May 4, 2017

***Los Angeles County Department of Public Health
Substance Abuse Prevention and Control (SAPC)***



AGENDA

- **Welcome Remarks**
- **Medi-Cal Eligibility and Enrollment Process**
 - Medi-Cal Overview
 - Medi-Cal Application Process
 - Q and A
- **Standards and Expectations for Adult and Youth Services**
 - Client Engagement and Navigation Services (CENS)
 - Case Management
 - Field-Based Services
 - Recovery Support Services
 - Youth-Specific Standards and Expectations
 - Early and Periodic Screening, Diagnostic and Treatment (EPSDT)
- **New Contract/Funding Structure**
- **Transition Planning to the New System Structure**
- **Panel Discussion/Q and A**
- **Introduction of the New Department of Public Health Director**
- **Message to Providers**



Welcome Remarks

*John Connolly, Ph.D., M.S.Ed.
SAPC Interim Deputy Director*





Medi-Cal Eligibility and Enrollment Process

Luis Ontiveros, DPSS Medi-Cal and IHHS Program Division
Marina Cooper, DPSS Bureau of Workforce Services
Sergio Andrade, DPSS Eligibility Systems Division



Medi-Cal Program

Elizabeth Morris, HSA III In-Charge
Medi-Cal/IHSS Program Division
Bureau of Program and Policy

Presented by Luis Ontiveros

- Medi-Cal is the name for the Federal Medicaid Program in California.
- Medi-Cal is a public health insurance program that provides health care coverage for individuals with limited income and resources.
- As part of Health Care Reform, the goal is to increase the enrollment of uninsured individuals:
 - ✓ Outreach at non-traditional sites (hospitals, clinics, schools, the Health and Nutrition Mobile Office, etc.).
 - ✓ Partnership with other county departments, and community agencies.

Who can receive Medi-Cal?

- Children under 19 years of age
- Adults 19-64 years of age
- Parents/Caretaker Relatives
- Pregnant women
- Persons in skilled nursing facilities
- Seniors 65 and older
- Disabled Individuals (Meeting Social Security Administration disability criteria)

MAGI MEDI-CAL

- Single childless adults (19-64)
 - Children (under age 19)
 - Pregnant Women
 - Parent/Caretaker Relatives
- ✓ Eligibility is determined based on corresponding Federal Poverty Level (FPL) for a specified MAGI population, and is calculated based on rules from the Internal Revenue Service.
 - ✓ Deprivation requirement is no longer considered, and resources are exempt from the eligibility determination.

NON-MAGI MEDI-CAL

- Aged (65 or over), Blind, or Disabled
- Long Term Care
- Foster Care/Former Foster Care Children
- Supplemental Security Income (SSI)
- Medicare Savings Program
- Medically Needy (MN)
- Sneed
- Home and Community Based Waiver
- 250% Working Disabled Program
- Pickle Program
- Minor Consent

Requirements for Medi-Cal Eligibility

Residency

- The person must be a California resident.

Citizenship and Immigration Status

- U.S. citizens or non-citizens with satisfactory immigration status may receive full-scope coverage.
- Non-citizens without satisfactory immigration status may receive coverage limited to emergency, skilled nursing and pregnancy-related care.

Note: Due to the implementation of Senate Bill (SB) 75 in May 2016, all children under 19 years of age are eligible to full-scope Medi-Cal (MC) regardless of immigration status.

Requirements for Medi-Cal Eligibility (Continued)

Resources

- The person's principal residence is not counted in determining resources and eligibility.
- Resources must not exceed the limits based on family size. For example, resources for an family of four may not exceed the limit of \$3,300.

The resource test *only applies* to eligibility determinations for the following populations:

- Aged
- Blind
- Disabled
- Long-Term Care

How to Apply for Medi-Cal

- **On-line via Your Benefits Now (YBN)** by logging on to <https://www.dpssbenefits.lacounty.gov>.
- Request an application **by calling** the Los Angeles County Customer Service Center **(866) 613-3777**
- **Visit us** at <http://dpss.lacounty.gov> and click on Health Care for a Medi-Cal application.
- **In person** at any Department of Public Social Services (DPSS) District Office or outreach site.
- Through **Covered California** at CoveredCA.com, or by calling **(800) 300-1506**.

DEPARTMENT OF PUBLIC SOCIAL SERVICES

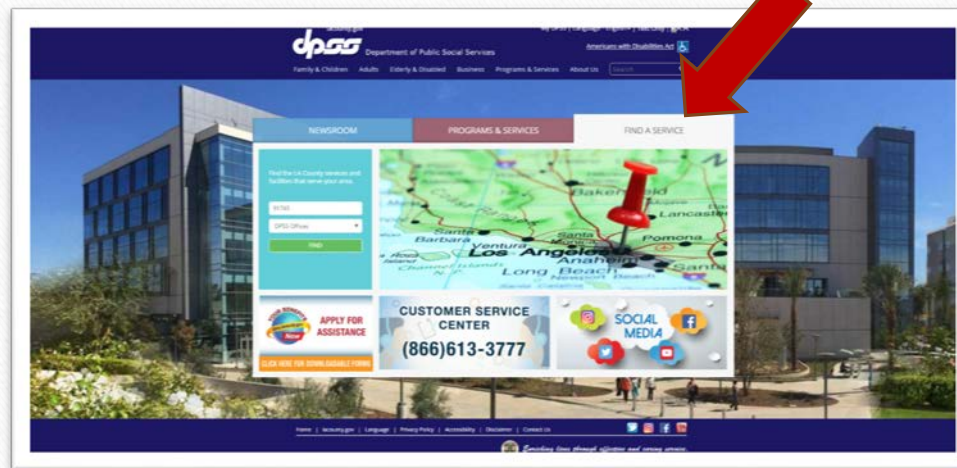


DPSS OFFICES



- DPSS Provides services throughout Los Angeles County via 35 offices that cover from Lancaster to Long Beach.
 - GR Services: GR Offices primarily provide temporary cash aid to indigent adults and certain sponsored legal immigrant families who are ineligible for federal or State programs.
 - CalWORKs (CW) Services: CW Offices primarily provide temporary financial assistance and employment focused services to families with minor children.
 - All offices take Medi-Cal applications and provide Medi-Cal Services.

DPSS OFFICES



The DPSS website provides applicants the feasibility of finding the DPSS office closest to them based on zip code.

<http://dpss.lacounty.gov/nps/portal/dpss>

DPSS OFFICES



Generally offices provide services for constituents who reside in the service area for the office.

However, the department does have a “No Wrong Door Policy” which provides participants the option to be serviced at the office of their choice.

The goal of the department is to ensure that our applicants receive the benefits to which they are entitled to in an accurate and timely manner.

CUSTOMER SERVICE CENTERS (CSC)



DPSS has three customer service centers that serve as a single point of contact for Participants that have questions about their case or programs offered by the Department. The CSC's are designed to optimize and enhance the quality and timeliness of service to program beneficiaries.

Toll Free Number: (866) 613-3777

Hours of Operation Monday through Friday, excluding holidays

From 7:30 a.m. until 5:30 p.m.

Medi-Cal Application Processing

- All offices within DPSS have intake workers whose responsibility is to determine eligibility.
- Intake workers process cases that come in from various application channels. Included are:
 - Walk -in
 - Mail-in
 - CalHEERS
 - YBN
- Processing of Medi-Cal Applications is to be completed within 45 days of application regardless of the application channel.
- Medi-Cal applications do not require a face-to-face interview, therefore if all the information is received with the application this will expedite processing.

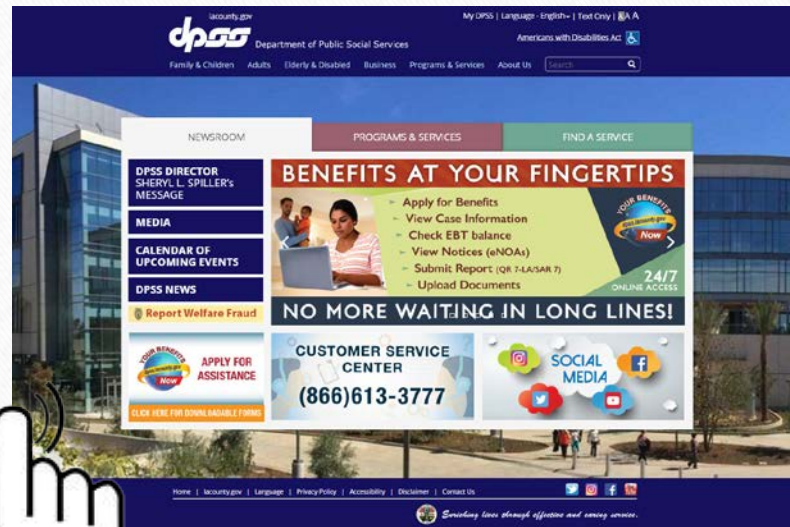
YOUR BENEFITS NOW (YBN)

YourBenefitsNow! is a website for Los Angeles County Residents to apply for and to view their benefits online.

Currently YBN supports CalWORKs CalFresh and Medi-Cal Applications.



YBN Application Demo



<https://www.dpssbenefits.lacounty.gov/ybn/Index.html>



Provider Questions



Standards and Expectations for Adult and Youth Services

*Yanira Lima, M.P.A., M.H.M.
Timothy Dueñas, M.P.A.
SAPC Systems of Care Branch*





CLIENT ENGAGEMENT AND NAVIGATION SERVICES

- Beginning July 1, 2017, the Community Assessment Services Center (CASC) will become the Client Engagement and Navigation Services (CENS).
- CENS will be co-located at various government and community facilities:
 - Los Angeles Superior Courts
 - Probation Department (e.g., Assembly Bill 109 HUBS)
 - Sheriff's Department (e.g., Pitchess Detention Center and Century Regional Detention Center)
 - Department of Health Services Psychiatric Urgent Care Centers (UCC)



CLIENT ENGAGEMENT AND NAVIGATION SERVICES (CENS)

- CENS will target populations who meet medical necessity for SUD services, including individuals who are criminal-justice-involved, uninsured, homeless, and/or have a co-occurring disorder.
- CENS will be responsible for the following activities:
 - Client Outreach and Engagement
 - Client Eligibility and Enrollment
 - Client Education
 - Client Screening, Appointment Scheduling, Reminders and Follow-up
 - Service Navigation, Ancillary Referrals and Linkages, Documentation and Reporting
 - Agency and Community Education



CASE MANAGEMENT

- A coordinated approach to the delivery of health (e.g., physical and mental health, substance use) and social services (e.g., housing, vocational assistance, financial assistance)
- Services include: regular assessment and reassessment to determine need for continued services at appropriate levels of care (LOC), transitions in LOC, treatment plan development and updates, coordination of referrals, monitoring progress in services, patient advocacy, and as necessary, serving as a single point of contact both for the patient and multiple service providers.
- More intensive case management will be required for populations with special needs (e.g., HIV/AIDS, mental illness, homeless, criminal justice)



CASE MANAGEMENT

- Tailored approach: assessment of needs and individualized treatment plan
- May be provided throughout the treatment process and into post-discharge recovery services
- Must be provided at DMC-certified sites or at SAPC-approved field-based locations
- May be provided by an experienced registered counselor, a certified counselor, or an LPHA
- May be provided face-to-face, by telephone, or by telehealth



FIELD-BASED SERVICES

- New under START-ODS: Field Based Services (FBS) will become a delivery method for outpatient counseling services.
- Goal of FBS is to provide services for patients in non-traditional SUD settings as a method to promote treatment engagement and retention.
- Additionally, FBS will allow services to hard to reach populations (i.e. homeless, sex offenders, medical fragile)



FIELD-BASED SERVICES

- Beginning June 2017, DPH-SAPC will accept work plan applications for agencies that propose to provide outpatient treatment or intensive outpatient treatment services via FBS.
- DPH-SAPC will review and approve appropriate work plans that aim to serve hard-to-reach populations into treatment services.
- DPH-SAPC anticipates first round of approved FBS site locations to roll out by the first quarter of FY 2017-2018.



RECOVERY SUPPORT SERVICES

- Recovery Support Services (RSS) provides non-clinical support services designed to aid patients remain and stay engaged in the recovery process thereby reducing the likelihood of relapse.
- RSS is accessed after the patient completes their course of SUD treatment in outpatient, intensive outpatient, residential treatment, opioid treatment program, and withdrawal management services.
- Patients can be introduced to RSS while in treatment and can access RSS during the transfer/transition planning process following treatment.



RECOVERY SUPPORT SERVICES

RSS Target Population and Eligibility:

- Open to adult and youth patients who have completed their course of SUD treatment and are in recovery, have relapsed, or used as a preventative measure to prevent relapse.
- Recently incarcerated individuals, or those soon to be released from custody, who completed SUD treatment while in-custody.

Service Delivery of RSS:

- Face-to-face in a contracted DMC-certified treatment facility
- By telephone

Participation in RSS is voluntary.



YOUTH-SPECIFIC STANDARDS AND EXPECTATIONS

- Substance abuse among youth is generally the result of multiple factors including:
 - 1) biological predisposition toward substance use and other problem behaviors;
 - 2) psychological factors such as depression or distress; and
 - 3) social factors such as family, community, and peer relationships.
- Youth need programs that address their developmental issues, provide comprehensive and integrated services, involve families, and allow youth to remain in the most appropriate but least restrictive setting, so they can be served within the context of their families, classroom and community.



YOUTH-SPECIFIC STANDARDS AND EXPECTATIONS

- In general, the ASAM level of care criteria tends to place youth in more intensive levels of care than their adult counterparts.
- In addition to formal treatment, the continuum of care for youth and their families should include pre-treatment options (mentoring, brief interventions, harm reduction, etc.), relapse prevention (either before, during, or after formal treatment), and aftercare services.



Understanding EPSDT as an Entitlement Program

*Timothy Dueñas, M.P.A.
SAPC Youth System of Care*





EARLY AND PERIODIC SCREENING, DIAGNOSTIC AND TREATMENT (EPSDT)

Comprehensive SUD services available for youth (12-17 yrs. old) and young adult (18-20 yrs. old) under DMC-ODS

TO MEET MEDICAL NECESSITY CRITERIA:

- Have at least one diagnosis from the current Diagnostic and Statistical Manual (DSM) of Mental Disorders for Substance-Related Disorders (with the exception of Tobacco-Related Disorders and Non-Substance-related disorders), and meet the ASAM Criteria for necessary services

OR

- Be assessed to be “at-risk” for developing a SUD



EARLY AND PERIODIC SCREENING, DIAGNOSTIC AND TREATMENT (EPSDT)

Youth “At-Risk” Definition:

- Youth or young adults under the age of 21 may be determined to be “at-risk” if they meet the following criteria:
 - If the substance use does NOT meet the minimum criteria for a substance use disorder (with the exception of Tobacco-Related Disorders and Non-Substance-Related Disorders);
- AND**
- Determined to be at-risk of developing a substance use disorder based on reports of experimental or early-phase substance use, associated biopsychosocial risk factors, and information gathered from the full ASAM assessment and At-Risk Determination Tool.



New Contract/ Funding Structure

*Daniel Deniz, M.P.A.
SAPC Contract Services Division*





REPURPOSING OF FUNDS

- DMC-eligible patients must be treated at DMC-certified sites
 - Vast percentage of current patients are DMG-eligible and will need to be treated via a DMC Contract.
- DMC will not reimburse all mandated services
 - Room and board, extended residential stay, etc.
 - The County must provide matching funds.
 - GPS, GR, CalWORKs, and other County funds will be used to fund non-DMC-covered services and costs.

The County will leverage non-DMC funds to pay for expanded services and higher rates.



HOW WILL FUNDS BE INCORPORATED INTO CONTRACTS?

- Specific Services to be Provided, Exhibit I
 - Lists all modalities
 - Provides program requirements
 - Includes requirements based on patient's eligibility and funding guidelines
 - LACPRS will be changed to capture all required information
- Bulletins
 - Amends contracts to allow for the provisions of STARTFODS
 - More efficient and effective
 - Will be distributed and posted on SAPC Website



SPECIFIC SERVICES TO BE PROVIDED, EXHIBIT I

Modality	Specific Services to be Provided
START-ODS Levels of Care Effective July 1, 2017	
Outpatient Services ASAM Level 1.0	<p>A. Conduct intake and client assessment/diagnosis, including documentation of admission requirements, and medical and psychosocial histories and medical and psychosocial histories, to be reviewed by the physician. Client assessment shall include: Signed consent for treatment and admission into the program; Completion of a health status questionnaire; Evidence that the client meets the criteria for medical necessity as defined in SAPC Bulletin XXXX; Medical history shall include client and family history of illness, a list of common health related problems (e.g. high blood pressure, diabetes, stroke, etc.), identification of mental illness; and Substance abuse history shall include current and past drug(s) used, as well as last use, frequency of use, and age of first use for each drug Admission documentation must be placed in clients file within forty-eight (48) hours of intake.</p> <p>B. Treatment plan updates shall describe the client’s progress with each treatment plan goals and objectives.</p> <p>C. Progress notes shall reference the particular problem identified and progress toward goals in the treatment plan. Progress notes must in the format as described in SAPC Quality Improvement and Utilization Manual.</p> <p>D. Progress notes shall clearly identify session as individual, group or collateral.</p> <p>E. There shall be a notation in the client chart whenever there is a change in primary counselors.</p> <p>F. Documentation of missed appointments shall be recorded in the client’s chart.</p> <p>Additionally, patients eligible for the following programs, must meet the these additional program requirements:</p> <p>General Relief</p> <p>A. Provide access to education and vocational counseling and training resources.</p>



Transition Planning to the New System Structure

*Daniel Deniz, M.P.A.
SAPC Contract Services Division*





PATIENT ELIGIBILITY: DMC-CERTIFIED PROVIDERS

- Develop eligibility protocol to verify (at admission and throughout treatment) benefits.
- DMC/MHLA: Enroll patients into programs/facilities that are DMC-certified.
- County of Residence: As of July 1, 2017, only individuals whose Medi-Cal benefits are assigned to Los Angeles County, or My Health LA participants, can be served under SAPC contracts. Non-County residents will need to complete treatment by July 1, 2017 or transition to other program/s. The State, however, allows for 1 year to transition OTP patients.



PATIENT ELIGIBILITY

- All residential treatment patients receiving services as of July 1, 2017 will receive an authorization (Youth: 30 days; Adult: 60 days) for ASAM Level 3.1 at the rate of \$145.71 per day. ASAM level 3.3 or 3.5 will require additional approval by SAPC.
 - A Bulletin describing this process will be released shortly.
- DMC patients must not be charged any fees/dues.
 - Waitlist fees
 - Co-Payments



NON-DMC-CERTIFIED PROVIDERS

- If terminating contract or transferring patients:
 - Contact SAPC Contract Services Division to make immediate and appropriate plans to transfer/refer all patients to other DMC sites for continuing service in accordance with the patients' needs
- Continue to pursue DMC certification and a Master Agreement
 - Contact SAPC upon issuance



START-ODS TREATMENT REQUIREMENTS

Greater Opportunities, Greater Responsibilities

- Contract Requirements
 - DMC Certification
 - Master Agreement
- Group Sizes/Durations
 - Size: 2-12
 - Duration: 45-90 minutes
- Hours of Operation
 - 5 days a week
 - One weekend day
 - Two evenings
- Sage
 - Certified Electronic Health Record system is required
 - Required monthly validation
- Authorizations
 - Residential: Within 24 hours
 - Outpatient: Every 6 months
- Staffing Requirements
 - LPHAs & Medical Necessity
 - Role of Medical Director
 - 8 hours onsite, per site
 - Counseling Staff



START-ODS: ACTION STEPS

- Enroll Eligible Patients into Medi-Cal
 - <https://www.dpssbenefits.lacounty.gov/ybn/SignInPage.html>
- Attend Monthly Provider Meetings
 - Change of location to allow for greater attendance
 - Invite/relay info to appropriate staff
 - START -ODS Website:
<http://publichealth.lacounty.gov/sapc/HealthCare/HealthCareReform.htm>
- Monthly Monitoring
 - Alert SAPC of organizational changes
 - Update contact information
- Trainings
 - Development/staffing plan



START-ODS: STAY ENGAGED

- Network with other providers
 - Share resources
 - Best practices
- Monthly Provider Meetings
 - Beginning July 2017, meetings will be held in larger areas
 - Schedules will be distributed shortly
- Beginning June 2017: Provider Training Meetings
 - Operationalizing START-ODS Trainings
 - Dates and topics to be announced



START-ODS: STAY ENGAGED

- Respond by the Deadlines
 - Surveys collect vital data
 - Sage, SBAT, SASH
 - PROVIDER DIRECTORY SURVEY:
[https://www.surveymonkey.com/r/Provider Directory Survey](https://www.surveymonkey.com/r/Provider_Directory_Survey)
- Provide Feedback
 - Bulletins
 - Program-related documents



Announcements





Next Meetings and Releases

- Staffing Guidelines Stakeholder Workgroup Meeting
 - Thu, March 11, 2017, 1 PM - 3:30 PM, Room 8050
- Provider Manual Comments
 - Target Release: Fri, May 19, 2017
 - Sent via SAPC's Provider Listserve
- CENS Narrative, Co-Location List, Map
 - Target Release: June 2017



SAPC Panel – Provider Questions





Introduction of the New Department of Public Health Director

Wesley Ford, M.A., M.P.H
SAPC Director





Message to Providers

*Dr. Barbara Ferrer, Ph.D., M.P.H., M.Ed.
DPH Director*





Thank you!

**Next START-ODS Provider Meeting:
Thursday, June 1, 2017, 1:00 PM – 3:30 PM**

SAPC Website: www.publichealth.lacounty.gov/sapc

START-ODS Webpage: <http://publichealth.lacounty.gov/sapc/HealthCare/HealthCareReform.htm>

START-ODS EMAIL LISTSERV: SUDTransformation@ph.lacounty.gov