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| Health Care Agency Behavioral Health Services Policies and Procedures | Section Name: | Care and Treatment |
| | Sub Section: | CalOptima |
| | Section Number: | 01.04.03 |
| | Policy Status: | <input type="checkbox"/> New <input checked="" type="checkbox"/> Revised |

| | SIGNATURE | DATE APPROVED |
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| Director of Operations Behavioral Health Services | <u>Signature on File</u> | <u>10/19/18</u> |

SUBJECT: OneCare/OneCare Connect Coordination of Care with CalOptima

PURPOSE:

To facilitate the coordination of medical and behavioral health care; the provision of all medically necessary covered services; and the identification and referral of eligible members to Long Term Services and Supports and community based services and benefits for OneCare/OneCare Connect and who are referred by CalOptima, and who are receiving Medi-Cal Specialty Mental Health services through the County of Orange.

POLICY:

Behavioral Health Services (BHS) staff shall follow agreed-upon policies and procedures for coordinating care with CalOptima for services provided to persons with CalOptima OneCare/OneCare Connect coverage.

SCOPE:

All Orange County Behavioral Health Services (BHS) clinicians who are providing Specialty Mental Health Services (SMHS) to persons with CalOptima OneCare/OneCare Connect coverage and who are referred by CalOptima.

DEFINITIONS:

CalOptima – The entity which is the single county operated health plan for Medi-Cal managed care in Orange County. CalOptima provides for Medi-Cal covered physical health care services and for mental health services to beneficiaries whose mental health related impairment is in the mild to moderate range.

OneCare – A Medicare Advantage (MA) plan operated by CalOptima providing managed care services exclusively to members with dual Medicare and Medi-Cal coverage. When BHS provides Medicare eligible services to these consumers, CalOptima is billed and pays for the Medicare portion rather than billing to Medicare.

OneCare Connect – A joint federal/state Demonstration Program for persons who are dually eligible for benefits under both Medicare and Medi-Cal. The Demonstration Program will provide covered services and coordinate member-centered care. BHS is contracted with CalOptima to

participate in the Demonstration Program. When BHS provides Medicare eligible services to these consumers, CalOptima is billed and pays for the Medicare portion rather than billing to Medicare.

REFERENCES:

BHS P&P 01.04.01 CalOptima OneCare/OneCare Connect Referrals

BHS P&P 01.04.02 CalOptima OneCare/OneCare Connect Client Assessment for Specialty Mental Health Services

BHS P&P 05.02.01 BHS and CalOptima OneCare/OneCare Connect Information Exchange

Cal Optima Dual's Policy CMC.6033 Behavioral Health Assessment, Referral, Coordination and Information Sharing for OneCare Connect Members

Title IX, California Code of Regulations (CCR) Sections 1820.205, 1830.205 and 1830.210

PROCEDURES:

- I. Referral to BHS shall be received from CalOptima when CalOptima's internal process identifies beneficiaries who may be in need of Medi-Cal Specialty Mental Health Services (SMHS). (See BHS P&P 01.04.01 CalOptima OneCare/OneCare Connect Referrals for details of the referral process).
- II. BHS shall assess clients referred to determine whether or not they meet the criteria for SMHS in accordance with Title IX, California Code of Regulations (CCR) Sections 1820.205, 1830.205 and 1830.210.
- III. BHS shall refer clients who are not eligible for SMHS services back to CalOptima (see BHS P&P 01.04.01 CalOptima OneCare/OneCare Connect Referrals).
- IV. If the client is found to qualify for SMHS, BHS shall provide SMHS in accordance with Title IX, California Code of Regulations (CCR) Sections 1820.205, 1830.205 and 1830.210.
 - A. BHS will coordinate with CalOptima when needed while the client is receiving SMHS.
 - B. When determined by BHS to be necessary, BHS shall provide or arrange for emergency behavioral health services and county-wide behavioral health evaluations which are available for all Medi-Cal recipients. The team(s) providing these services also provide(s) post-crisis follow-up services and coordination with the client's existing BHS treatment team.
 - C. CalOptima has responsibility to pay for a client's emergency and non-emergency medical transportation when necessary for the client to access SMHS except when

- a client is transported from an acute inpatient psychiatric facility to another acute inpatient psychiatric facility or other twenty-four (24) hour facility.
- D. CalOptima has responsibility to pay for all covered psychotropic drugs provided to a client by a Specialty Mental Health Provider except when the client is admitted to an acute inpatient psychiatric facility.
- V. During the time the client is in treatment with BHS, BHS staff shall participate with CalOptima in Interdisciplinary Care Team (ICT) conferences in accordance with *CalOptima Dual's Policy CMC.6033 Behavioral Health Assessment, Referral, Coordination and Information Sharing for OneCare Connect Members*. This includes annually, with transitions in care, and when there are changes in the client's health status.
- VI. BHS Plan Coordinator (PC) assigned to provide treatment:
- A. Provides treatment to client as determined is medically necessary.
- B. Follows-up with the CalOptima Interdisciplinary Care Team (ICT) as spelled out in this P&P.
- C. If at any time the assigned PC determines that it is appropriate for the client to move to another program within the Mental Health Plan, the PC shall:
1. Provide a "warm hand off" to the appropriate treatment team, maintaining contact with the client and providing follow up until the transition is completed.
 2. Specify to the receiving treatment team that this is a referral under the CalOptima OneCare/OneCare Connect program and that care coordination with CalOptima's Managed Behavioral Healthcare Organization (MBHO) has special requirements as spelled out in this P&P.
 3. Notify CalOptima's MBHO of BHS' determination, including the name and contact information for the assigned PC/clinician at the treating program.
- VII. When BHS determines that the client no longer requires SMHS, BHS staff shall ensure access to a safe and timely transition back to CalOptima, in accordance with *CalOptima Dual's Policy CMC.6033 Behavioral Health Assessment, Referral, Coordination and Information Sharing for OneCare Connect Members*.
- VIII. BHS shall participate with CalOptima in Interagency Meetings to review the care coordination process and identify opportunities for improvement, as applicable, and implement interventions to improve performance.
- IX. BHS shall maintain the privacy of Protected Health Information (PHI), in compliance with all federal and state laws when using or disclosing PHI for treatment, payment, and health care operation, including applying minimum necessary standards when applicable in accordance with any and all County of Orange policies and procedures.

- X. BHS shall obtain written authorization from the client prior to the use or disclosure of PHI for purposes other than Treatment, Payment, and Health Care Operations in accordance with any and all County of Orange policies and procedures and/or when required by state or federal laws or regulations.