Welcome

The Webinar Will Begin Shortly.

Before starting, following are a few housekeeping items and tips about how you can participate in this webinar.

- All lines are muted to minimize background noises.
- You can ask questions at any time during the presentation Use the Questions Pane Chat Box.
- Enter your questions then click the Send button.

We will review questions as they come in, and will have a Q&A period periodically throughout the presentation.

Thank you for attending today's webinar.

PHC Provider Education Team





Wellness and Recovery Benefit Provider Round Table

Drug Medi-Cal Organized Delivery System

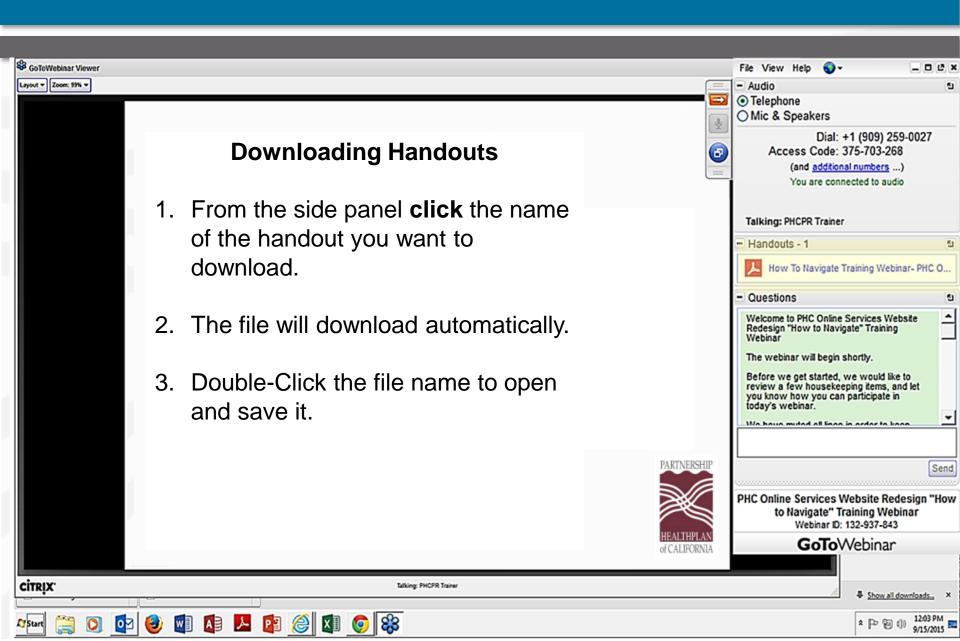
January 7, 2019

Agenda

- Welcome and Housekeeping
- Updates from the Wellness and Recovery Leadership Team
- Training Plan
- Levels of Care in the new W&R benefit



Downloading Handouts



Wellness and Recover Updates

Liz Leslie

Program Manager, Wellness and Recovery Partnership HealthPlan of California





Training Plan

Trainings to Prepare for new Benefit

- -- TENTATIVE provider training schedule --
- January March provider webinars on clinical practices guidelines found in the Intergovernmental Agreement Boilerplate.
- April May in-person trainings on implementing change in programs.
- May June in-person visit to programs
 - Familiarize program with site review tool.
 - Practice interacting with the PHC portal (claims, ASAM, CalOMS, residential TAR, check eligibility.)
- July 1 go-live date





Levels of Care in the new Wellness & Recovery Benefit

Levels of Care – Early Intervention

- Early Intervention ASAM Level 0.5.
- Screening, Brief Intervention, Referral to Treatment (also known as AMSC – Alcohol Misuse Screening and Counseling services.)
- Formal linkages.



Levels of Care – Outpatient Services

- Outpatient Services ASAM Level 1.0
- Up to 9 hours per week of medically necessary services for adults and less than 6 hours per week for adolescents.
- Services may be provided in-person, by telephone, or by telehealth in any appropriate setting in the community.
- For individual and group counseling, one unit of services equals a 15-minute increment.
- For group counseling, one or more therapists treat two or more clients at the same time with a maximum of 12 in the group, focusing on the needs of the individuals served.
- Services include --
 - Intake/assessment
 - Treatment planning
 - Individual and group counseling
 - Family therapy
 - Patient education

- Medication services
- Collateral services
- Crisis intervention
- Discharge planning and coordination



Levels of Care – Intensive Outpatient Services

- Intensive Outpatient Services ASAM Level 2.1
- Between 9 and 19 hours per week of medically necessary services for adults and between 6 and 19 hours per week for adolescents.
- Services may be provided in-person, by telephone, or by telehealth in any appropriate setting in the community.
- For individual and group counseling, one unit of services equals a 15-minute increment.
- For group counseling, one or more therapists treat two or more clients at the same time with a maximum of 12 in the group, focusing on the needs of the individuals served.
- Services include --
 - Intake/assessment
 - Treatment planning
 - Individual and group counseling
 - Family therapy
 - Patient education

- Medication services
- Collateral services
- Crisis intervention
- Discharge planning and coordination



Program Concerns

Policy Considerations –

Intergovernmental Agreement Boilerplate can be found here - https://www.dhcs.ca.gov/provgovpart/Documents/DMC-ODS_Waiver/DMC-ODS_ExhibitA_Attachmentl_Boilerplate.pdf

Questions?



Levels of Care – Residential Treatment Services

- Low Intensity Residential—ASAM Level 3.1 24-hour program with available trained staff; at least 5 hours of clinical service per week and preparation for outpatient treatment.
- High Intensity Residential—ASAM Level 3.5 24-hour program with available trained staff; stabilization of imminent danger and preparation for outpatient treatment.
- The length of residential services range from 1 to 90 days for adults and 1 to 30 days for adolescents based on medical necessity. Longer lengths of stay based on medical necessity are available. A maximum of two residential stays per 365 days is available per client.
- Residential treatment services require pre-authorization.
- Services include --
 - Intake/assessment
 - Treatment planning
 - Individual and group counseling
 - Family therapy
 - Patient education

- Safeguarding medications
- Collateral services
- Crisis intervention
- Transportation
- Discharge planning and coordination



Levels of Care – Withdrawal Management

- Clinically Managed Residential Withdrawal Management ASAM Level 3.2 WM (Social Model detox.)
- Other WM levels of care include outpatient (ASAM Levels 1 and 2 WM) which occurs in NTPs and primary care; and inpatient (ASAM Levels 3.7 and 4 – WM and VID) which occurs in a general acute hospital, CDRH, and free-standing psychiatric facility.
- WM services are provided, when determined medically necessary, by a Medical Director or LPHA, and in accordance with an individualized treatment plan. Each beneficiary shall reside at the facility if receiving 3.2 - WM services and will be monitored during the detoxification process.
- Services include --
 - Intake
 - Observation
 - Medication services
 - Discharge services



Program Concerns

Policy Considerations –

Intergovernmental Agreement Boilerplate can be found here -

https://www.dhcs.ca.gov/provgovpart/Documents/

DMC-ODS_Waiver/DMC-

ODS_ExhibitA_Attachmentl_Boilerplate.pdf

- Homework
 - IGA pages 64 68
- Questions?



Levels of Care – Opioid/Narcotic Treatment Program Services

- Services shall be provided in accordance with an individualized beneficiary plan determined by a licensed and/or certified prescriber.
- Covered medications under the DMC formulary include methadone, buprenorphine, naloxone, and disufiram.
- Clients shall receive between 50 and 200 minutes of counseling per calendar month with a therapist or counselor, and, when medically necessary, additional counseling services may be provided.
- Services include ---
 - Intake/assessment
 - Treatment planning
 - Individual and group counseling
 - Patient education
 - Medication services

- Collateral services
- Crisis intervention
- Medical psychotherapy
- Discharge services



Other Services – Case Management

- Case management services assist a beneficiary to access needed medical, educational, social, prevocational, vocational, rehabilitative, and other community services.
- Case management services may be provided face-to-face, by telephone, or by telehealth with the beneficiary and may be provided anywhere in the community.
- One unit of services equals a 15-minute increment.
- Case management services may be provided either by persons specifically designated as case managers or by Provider staff in the course of their delivery of treatment. Services may be provided by a LPHA or certified counselor.
- Services include --
 - Comprehensive and periodic assessments.
 - Transition to higher or lower levels of care.
 - Communication, coordination, referral and other activities.

- Monitoring of service delivery.
- Monitoring of client progress.
- Patient advocacy and/or referrals to physical or mental health.



Other Services – Recovery Services

- Recovery services are available after a course of treatment has been completed based on medical necessity. Providers can offer recovery services when the beneficiary is triggered, when the beneficiary has relapsed, or as a preventative measure to prevent relapse.
- Services may be provided in-person, by telephone, or by telehealth in any appropriate setting in the community.
- One unit of services equals a 15-minute increment.
- Peer-to-peer services may be provided with an approved implementation plan. This will be developed in Year Two.
- Services include --
 - Individual/group counseling
 - Recovery Monitoring recovery coaching, monitoring via telephone and internet.
 - Substance abuse assistance/relapse prevention
 - Education and job skills

- Family support
- Support groups linkages
- Linkages to housing assistance, transportation, case management, individual services coordination.



Other Services – Physician Consultation

 Just a word about physician consultation –
PHC will provide physician consultation services, but may do so outside the DMC benefit structure.



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Questions?



Contact Us

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Care Coordination

CareCoordination@partnershiphp.org

Provider Learning Portal

http://www.partnershiphp.org/Providers/Medi-Cal/Pages/ProviderEducationTrainingMaterials.aspx



Save the Dates

Upcoming Webinars Wellness and Recovery Benefit

February 4, 2019 March 4, 2019





Questions?