

### POLICY NOTICE

- ❖ Policy Being Summarized  
NYCU #38 - CalAIM  
Updates on SMH Criteria
- ❖ Policy effective date:  
January 1, 2022
- ❖ Policy created by:  
Bulletins and News,  
Department Of Behavioral  
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### CalAIM Updates on SMH Criteria

#### BACKGROUND:

The California Department of Health Care Services (DHCS) is innovating and transforming the Medi-Cal delivery system. CalAIM is moving Medi-Cal towards a population health approach that prioritizes prevention and whole person care. The goal is to extend supports and services beyond hospital and health care settings directly into California communities. The state's vision is to meet people where they are in life, address social drivers of health, and break down the walls of health care. CalAIM will offer Medi-Cal enrollees coordinated and equitable access to services and address their *physical, behavioral, developmental, dental and long-term care needs*, throughout their lives, from birth to a dignified end of life. This transformation aligns Medi-Cal into a system that is standardized, simplified and focused on helping enrollees live healthier lives. Success requires the investment and sustained commitment of a broad network of health partners, including plans, providers, and community-based organizations.

Since 2019, state-wide committees have addressed CalAIM transition policy and planning specific to the Behavioral Health Delivery System. These committees focused on: Policy improvements for Specialty Mental Health Services (SMHS) and the Drug Medi-Cal Organized Delivery System (DMC-ODS), Updated Reasons for Recoupment, Drug Medi-Cal ASAM Level of Care Determination, Behavioral Health Documentation Redesign, Co-Occurring Treatment, No Wrong Door, Standardized Screening Tools, Administrative Integration of SMH and SUD services, and Behavioral Health Payment Reform. [BH CalAIM Webpage](#) With input from County Directors and other stakeholders, a few Behavioral Health Information Notices have already been published by DHCS. These provide direction to counties as we prepare to share guidance and updates to our Fresno County behavioral health system of care.

#### POLICY CHANGE:

New policy regarding a Medi-Cal beneficiary's access to SMHS and medical necessity is described in [BHIN 21-073 Criteria for beneficiary access to Specialty Mental Health Services \(SMHS\), medical necessity and other coverage requirements](#), and is summarized below. These changes are effective January 1, 2022:

*Medi-Cal Beneficiaries (Persons-served under the Mental Health Plan) age 21 or older shall meet **both of the following** criteria below:*

- (1) The person-served has **one or both** of the following:
  - a. Significant impairment, where impairment is defined as distress, disability, or dysfunction in social, occupational, or other important activities.
  - b. A reasonable probability of significant deterioration in an important area of life functioning.

#### AND

- (2) The person's condition as described in paragraph (1) is due to **either of the following**:

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- a. A diagnosed mental health disorder, according to the criteria of the current editions of the Diagnostic and Statistical Manual of Mental Disorders and the International Statistical Classification of Diseases and Related Health Problems.
- b. A suspected mental disorder that has not yet been diagnosed.

*Persons-served under 21 years of age shall meet **either of the following** criteria, **(1) or (2)** below:*

- (1) The person-served has a condition placing them at high risk for a mental health disorder due to experience of trauma evidenced by any of the following: scoring in the high-risk range under a trauma screening tool approved by the DHCS, involvement in the child welfare system, juvenile justice involvement, or experiencing homelessness. While DHCS is in the process of approving a standardized tool, Counties may use standardized screening tools such as PEARLS for person up to the age of 19 or ACES for persons age 18 or older.

**OR**

- (2) The person-served meets both of the following requirements in **a) and b)**, below:

- a. The person-served has at least one of the following:
  - i. A significant impairment
  - ii. A reasonable probability of significant deterioration in an important area of life functioning
  - iii. A reasonable probability of not progressing developmentally as appropriate.
  - iv. A need for specialty mental health services, regardless of presence of impairment, that are not included within the mental health benefits that a Medi-Cal managed care plan (CalViva Health or Anthem Blue Cross) is required to provide.

**AND**

- b. The person's condition as described in subparagraph (2) above is due to one of the following:
  - i. A diagnosed mental health disorder, according to the criteria of the current editions of the Diagnostic and Statistical Manual of Mental Disorders and the International Statistical Classification of Diseases and Related Health Problems.
  - ii. A suspected mental health disorder that has not yet been diagnosed.
  - iii. Significant trauma placing the beneficiary at risk of a future mental health condition, based on the assessment of a licensed mental health professional.

If a person-served under age 21 meets the criteria as described in (1) above, the person meets criteria to access SMHS; it is not necessary to establish that they also meet the criteria in (2) above.

Therefore, as of January 1, 2022 it will no longer be necessary to refer to the Fresno County DBH published list of "included" diagnoses when claiming and enrolling a person-served to SMHS. Instead, the practitioner must document a diagnosed mental health disorder and medical necessity as described above. The portion of BHIN 20-043 that limits SMHS to a list of DHCS included ICD-10 diagnoses is superseded by this BHIN 21-073, effective January 1, 2022, except for psychiatric inpatient hospital and psychiatric health facility services, which will be addressed in forthcoming guidance.

### *Additional SMH Coverage Requirements and Clarifications:*

This criteria for a person to access the SMHS delivery system (except for psychiatric inpatient hospital and psychiatric health facility services) set forth above shall not be construed to exclude coverage for, or reimbursement of, a clinically

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appropriate and covered mental health prevention, screening, assessment, treatment, or recovery service under any of the following circumstances:

- Services were provided prior to determining a diagnosis, including clinically appropriate and covered services provided during the assessment process.
- The prevention, screening, assessment, treatment, or recovery service was not included in an individual treatment plan.
- The beneficiary has a co-occurring substance use disorder.

Therefore, as of January 1, 2022 covered SMHS can be provided during the assessment period and can still be claimed even when not included in the treatment plan/plan of care. NOTE: Some SMHS may still require an individual plan of care, such as Targeted Case Management (42 C.F.R. § 440.169.) More guidance on this is forthcoming.

Per Welfare and Institutions Code section 14184.402(f)(1)(A), a mental health diagnosis is not a prerequisite for access to covered SMHS. This does not eliminate the requirement that all Medi-Cal claims include a CMS approved ICD-10 diagnosis code. In cases where services are provided due to a suspected mental health disorder that has not yet been diagnosed or due to trauma as noted above, options are available in the CMS approved ICD-10 diagnosis code list. For example, these include codes for *“Other specified”* and *“Unspecified” disorders,* or *“Factors influencing health status and contact with health services”* (i.e., Z codes). These codes are available in Avatar for clinical documentation and Medi-Cal billing purposes.

The Fresno County Mental Health Plan will update pertinent guiding documents, forms and manuals to align with these updates from DHCS. Please reference the embedded link to BHIN 21-073 for definitions of involvement with child welfare, homelessness, and juvenile justice.

Consult your supervisor and/or usual points of contact, such as your Contract Analyst, Provider Relations Specialist, or the DBH Compliance mailbox (DBHCompliance@fresnocountyca.gov) if you have questions.