Behavioral Health Funding and Rate Development

Behavioral Health Commission

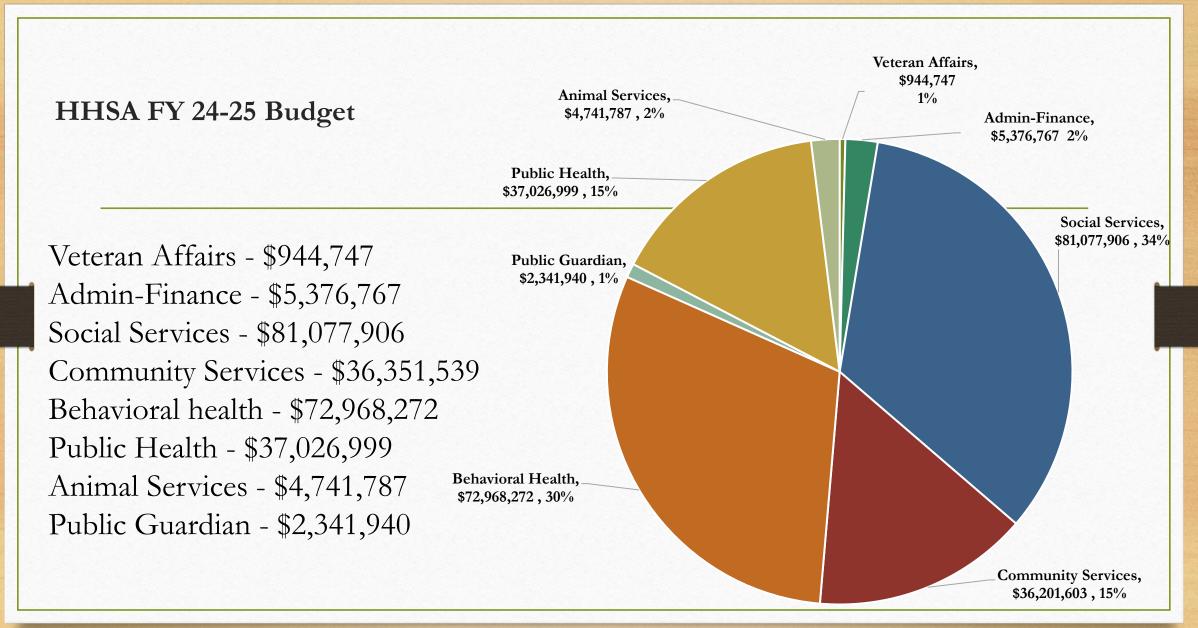
January 15th, 2025

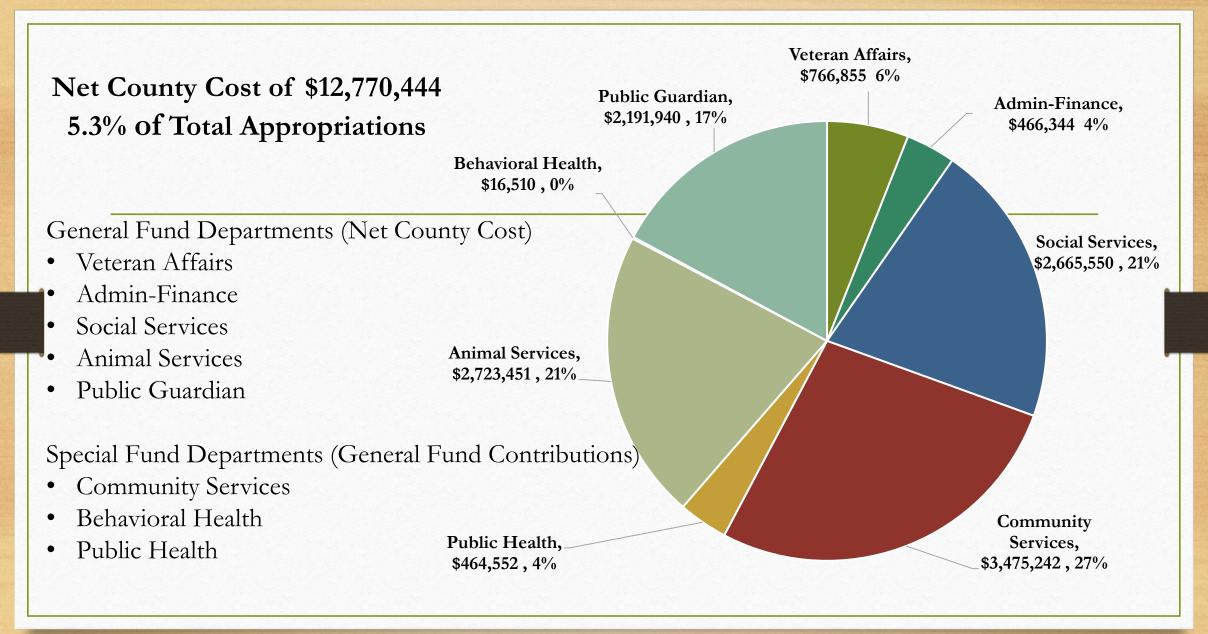
California Public Behavioral Health Systems

- County Behavioral Health Services: broadly responsible for Medi-Cal and emergency services
 - Mental Health Plan: Specialty Mental Health (Medi-Cal) and Mental Health Services Act funding (supported by 1991 and 2011 Realignment, and local funding)
 - Drug Medi-Cal Organized Delivery System: substance use disorder (SUD) treatment services established 2015 as an "opt in" for County systems (adopted in El Dorado County in 2019)
 - Public Guardian: Lanterman Petris-Short conservatorship, Probate conservatorship, and client asset management (mostly locally funded)
- Medi-Cal Managed Care Plans: Responsible for mild-moderate benefits, primary care needs of beneficiaries with Medi-Cal
- Private Insurance Plans: under the Affordable Care Act are responsible for "parity" in behavioral health benefits

El Dorado County Behavioral Health Funding

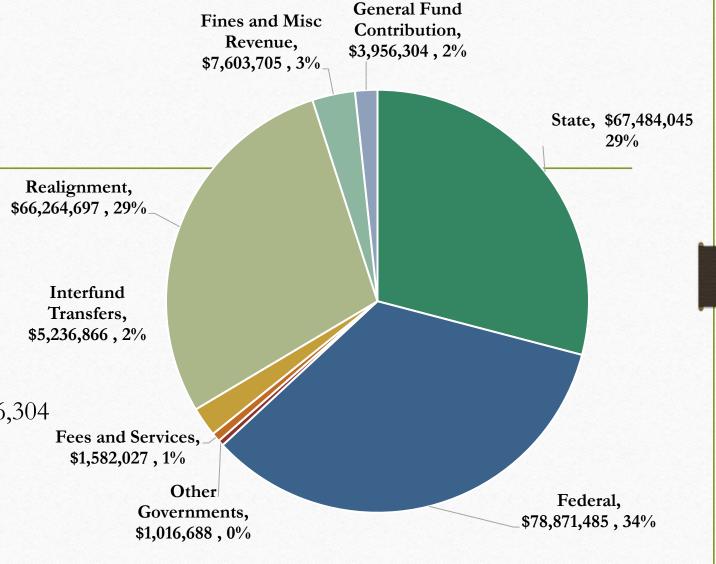
- County Behavioral Health is supported through many different funding streams, each with their own obligations and rules.
- This presentation is not intended as an exhaustive list of all aspects of publicly funded Behavioral Health services, but an overview as it relates to rate development for contract providers in the Specialty Mental Health System.

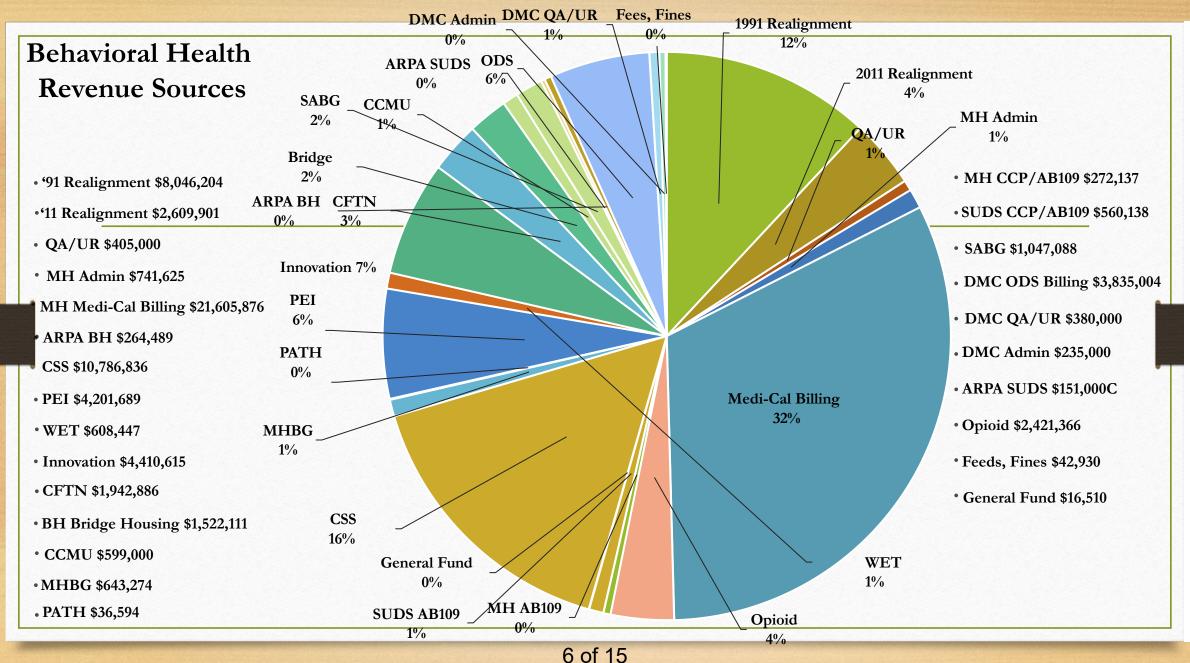




HHSA Revenue Sources \$232,015,817

- State \$67,484,045
- Federal \$78,871,485
- Realignment \$66,264,697
- Fines and Misc. \$7,603,705
- Interfund Transfers \$5,236,866
- General Fund Contributions \$3,956,304
- Fees and Services \$1,582,027
- Other Governments \$1,016,688





"Payment Reform" and Medi-Cal Reimbursement

- Changes from a "cost reimbursed" to a "health care revenue/inter-governmental transfer" (IGT) model of County (and by extension provider) payment.
- Payment is now taxonomy (professional discipline) dependent, different taxonomy codes get different reimbursement
- Travel and documentation time were "rolled up" into reimbursement rate by DHCS (this was formerly reimbursed at a per minute rate)
- County Behavioral Health systems are obligated to provide all mandated benefits whether reimbursed by this model or not

"Payment Reform" and Medi-Cal Reimbursement

- These rates no longer "cost settle" as a result of the shift to an IGT model, neither the County nor contracted providers are obligated to "pay back" for payments in excess of cost.
- The funding is explicitly intended to support service delivery and innovation across the Mental Health Plan system of care.
- Rate development resulted in different reimbursements between County jurisdictions (with higher and lower rates for the same service when you cross a County line).
- County Behavioral Health is obligated to procure providers or deliver services themselves to meet beneficiary benefits and network adequacy independently from this payment reform rate process.

"Realignment Only" Required Services Fiscal Year 2023-2024

Adult Residential Treatment	\$353,467
Board & Care with Patch	\$460,256
• Declaration of Competence	\$2,500
Inpatient Hospital	\$948,099
Mental Health Rehab Center	\$1,467,356
Skilled Nursing Facility w/ Special Treatment Program	\$193,587
Total Services Realignment Funded	\$3,425,265

Health Care Revenue

- Intended to support the operation of the system by the MHP, including those required aspects that are not reimbursed by Medi-Cal
- This is distinct from the Managed Care Plan operations which are provider reimbursements for covered benefits (as a rule MCPs do not reimburse non-covered benefits)
- Is a transition and change from the historic "cost based" reimbursement for providers

Rate Development Process

- Data driven analysis of rate, encounter frequency, encounter duration, and engagement success
- Comparison to other "like" Counties (small and mid sized in the region)
- Competitive procurement process and contract negotiation with selected providers
- Fiscal analysis of system impact to maintain required network of care

Specialty Mental Health Provider Rates Pre Payment Reform

		July 2022- June 2023				
Taxononmy	Billing Unit	Average Rate of Providers				
Psychiatrist/MD	15 Minutes	\$ 91.35				
Psychiatrist/MD (Group Rate)	15 Minutes	\$ 91.35				
Registered Nurse (RN)	15 Minutes	\$ 91.35				
Registered Nurse (RN) (Group Rate)	15 Minutes	\$ 91.35				
Psychiatric Technician (LPT)	15 Minutes	\$ 91.35				
Psychiatric Technician (LPT) (Group Rate)	15 Minutes	\$ 91.35				
Licensed Practitioner of the Healing Arts (LPHA)	15 Minutes	\$ 42.81				
Licensed Practitioner of the Healing Arts (LPHA) (Group	15 Minutes	\$ 42.81				
Mental Health Rehab Specialist (MHRS)	15 Minutes	\$ 42.81				
Mental Health Rehab Specialist (MHRS) (Group Rate)	15 Minutes	\$ 42.81				
Other Qualified Providers (Other)	15 Minutes	\$ 42.81				
Other Qualified Providers (Other) (Group Rate)	15 Minutes	\$ 42.81				

Specialty Mental Health Provider Rates Post Payment Reform

Taxononmy	Billing Unit	Average Rate of Providers		
		Average Male of Floviders	Average Rate of Providers	% Rate Increase
Psychiatrist/MD	15 Mins.	\$ 226.80	\$ 244.61	8%
Psychiatrist/MD (Group Rate)	15 Mins.	\$ 50.40	\$ 54.36	8%
Registered Nurse (RN)	15 Mins.	\$ 92.14	\$ 99.35	8%
Registered Nurse (RN) (Group Rate)	15 Mins.	\$ 20.48	\$ 22.08	8%
Psychiatric Technician (LPT)	15 Mins.	\$ 41.55	\$ 44.74	8%
Psychiatric Technician (LPT) (Group Rate)	15 Mins.	\$ 9.23	\$ 9.94	8%
Licensed Practitioner of the Healing Arts (LPHA)	15 Mins.	\$ 60.90	\$ 63.66	5%
Licensed Practitioner of the Healing Arts (LPHA) (Group	15 Mins.	\$ 13.53	\$ 14.15	5%
Mental Health Rehab Specialist (MHRS)	15 Mins.	\$ 44.40	\$ 47.89	8%
Mental Health Rehab Specialist (MHRS) (Group Rate)	15 Mins.	\$ 9.87	\$ 10.64	8%
Certified Peer Support Specialist (Peer)	15 Mins.	\$ 46.64	\$ 50.29	8%
Certified Peer Support Specialist (Peer) (Group Rate)	15 Mins.	\$ 10.36	\$ 11.17	8%
Other Qualified Providers (Other)	15 Mins.	\$ 44.40	\$ 47.89	8%
Other Qualified Providers (Other) (Group Rate)	15 Mins.	\$ 9.87	\$ 10.64	8%
Family Psychotherapy (with patient present) -	15 Mins.	\$ 756.00	\$ 815.37	8%
Family Psychotherapy (with patient present) - LPHA	15 Mins.	\$ 206.00	\$ 212.21	3%
New Patient Evaluation - Psychiatrist/MD	15-29 Mins.	\$ 332.64	\$ 358.76	8%
New Patient Evaluation - Psychiatrist/MD	30-44 Mins.	\$ 559.44	\$ 603.37	8%
New Patient Evaluation - Psychiatrist/MD	45-59 Mins.	\$ 786.24	\$ 847.98	8%
New Patient Evaluation - Psychiatrist/MD	60-74 Mins.	\$ 1,013.04	\$ 1,092.59	8%
Established Patient Evaluation - Psychiatrist/MD	10-19 Mins.	\$ 226.80	\$ 244.61	8%
Established Patient Evaluation - Psychiatrist/MD	20-29 Mins.	\$ 378.00	\$ 407.68	8%
Established Patient Evaluation - Psychiatrist/MD	30-39 Mins.	\$ 529.20	\$ 570.76	8%
Established Patient Evaluation - Psychiatrist/MD	40-54 Mins.	\$ 710.64	\$ 766.44	8%
Interpretation Services	15 Mins.	\$ 30.00	\$ 30.92	3%
Interactive Complexity	Flat Rate	\$ 16.50	\$ 18.32	11%

Specialty Mental Health Provider "NTE"

July 2022 - June 2023 Contracted NTEs										
	New Morning		Sierra Child		Stanford Sierra		Summitview Child		Summitview Child and	
Description	Youth	& Family	aı	nd Family	You	th and Families	and Fan	nily - STRTP	Famil	y - Non-STRTP
Total NTE	\$	368,987	\$	1,780,492	\$	291,695	\$	1,200,000	\$	1,096,567
Monthly Breakdown	\$	30,749	\$	148,374	\$	24,308	\$	100,000	\$	91,381
July 2023 - December 2024 Contracted NTE										
	New I	Morning	Sie	rra Child &	St	tanford Sierra	Summit	view Child &	Sumr	nitview Child &
	Youth	& Family		Family	Yo	uth & Families	Famil	y - STRTP	Famil	y - Non-STRTP
Total NTE	\$	775,008	\$	3,282,053	\$	2,015,004	\$	2,325,000	\$	2,092,500
Monthly Breakdown	\$	43,056	\$	182,336	\$	111,945	\$	129,167	\$	116,250
January 2025 - June 2026 Contracted NTE										
	New Morning		Sierra Child & Stanford Sierra		Summitview Child &		: Summitview Child &			
Description	Youth	& Family		Family	Yo	uth & Families	Famil	y - STRTP	Famil	y - Non-STRTP
Total NTE	\$	795,000	\$	3,339,000	\$	2,067,000	\$	2,385,000	\$	2,146,500
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Monthly Breakdown	\$	44,167	\$	185,500	\$	114,833	\$	132,500	\$	119,250
% NTE Increase per Month when compared to Pre-Payment Reform		30.38%		20.01%		78.83%		24.53%		23.37%

Payment Incentives

- Add payment incentive categories and amounts
 - Looking at key outcomes related to quality of service in our role overseeing the MHP
 - High Fidelity Wraparound
 - Preferred Language
 - Positive Treatment Outcomes
 - These align with our values as a system of care