

Legislation Details (With Text)

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Туре:	Agenda Item		Status:	Approved
File created:	5/17/2022		In control:	Board of Supervisors
On agenda:	7/26/2022		Final action:	7/26/2022
Title:	 Make findings provided by Cali and that the wor Dorado County (and/or Governm 2) Approve and -exceed amount 3) Authorize the relating to Agree including amend 	commending the Board: I Health Quality Improvement Program services authority (CaIMHSA) are in the public's best interest ernmental entities or agencies in accordance with El 030, El Dorado County Charter, Section 210(b)(6), icipation Agreement 6642 with CaIMHSA, with a not-to active upon final execution through June 30, 2024; and behavioral Health, to execute further documents proval by County Counsel and Risk Management, e maximum dollar amount or term of the Agreement.		

Sponsors:

Indexes:

Code sections:

Attachments: 1. A - 6642 Approved CRS, 2. B - Agreement 6642, 3. Executed Agreement 6642

Date	Ver.	Action By	Action	Result
7/26/2022	1	Board of Supervisors	Approved	Pass

Health and Human Services Agency (HHSA) recommending the Board:

1) Make findings that the provision of Behavioral Health Quality Improvement Program services provided by California Mental Health Services Authority (CalMHSA) are in the public's best interest and that the work is with or among another governmental entities or agencies in accordance with El Dorado County Ordinance Code, Chapter 3.13.030, El Dorado County Charter, Section 210(b)(6), and/or Government Code Section 31000;

2) Approve and authorize the Chair to sign Participation Agreement 6642 with CalMHSA, with a notto-exceed amount of \$383,420 and for a term effective upon final execution through June 30, 2024; and

3) Authorize the HHSA Director, or Director of Behavioral Health, to execute further documents relating to Agreement 6642, contingent upon approval by County Counsel and Risk Management, including amendments which do not increase the maximum dollar amount or term of the Agreement.

FUNDING: 60% California Advancing and Innovating Medi-Cal grant, 10% 2011 Realignment and 30% State Mental Health Services Act.

DISCUSSION / BACKGROUND:

The State Department of Health Care Services (DHCS) is developing efforts with the intent to innovate and transform the Medi-Cal delivery system. California Advancing and Innovating Medi-Cal (CalAIM) is moving Medi-Cal towards a population health approach that prioritizes prevention and

whole person care. The state's goal is to extend supports and services beyond hospitals and health care settings directly into California communities, with a vision of meeting people where they are in life, addressing social drivers of health, and breaking down care silos. Once fully rolled out, CalAIM seeks to offer Medi-Cal enrollees coordinated access to services that address their physical, behavioral, developmental, dental, and long-term care needs, throughout their lives, from birth to a dignified end of life.

Specific to Behavioral Health efforts within CalAIM, DHCS CalAIM Behavioral Health Quality Improvement Program (BH-QIP) is an incentive payment program intended to support Mental Health Plans (MHP), Drug Medi-Cal (DMC) State Plans and Drug Medi-Cal Organized Delivery Systems (DMC-ODS), hereafter referred to as participating entities, as they prepare for changes in the CalAIM initiative and other approved statewide administration priorities. Each participating entity earns CalAIM BH-QIP incentive payments by achieving certain milestones as outlined below. For Fiscal Year (FY) 2021-22, Senate Bill (SB) 129 (Chapter 69; Statutes of 2021), authorized \$21,750,000 in State General Fund dollars for the CalAIM BH-QIP, with \$86 million authorized over the course of program. El Dorado County's incentive allocation is \$694,823, beginning July 1, 2021, through December 31, 2023 (File ID: 21-1313 and 22-0410). The CalAIM BH-QIP Implementation Plan (IP) is divided into three sections, each addressing one of three goals: payment reform, behavioral health policy changes, and bi-directional data exchange between systems of care. The IP must have key deliverables and action steps that will be completed by June 30, 2023, and reported in the September 2023 reporting period in order to receive the incentive allocation.

The Health and Human Services Agency (HHSA) Behavioral Health Division's responsibilities in BH-QIP CalAIM is focused on implementation of payment reform, behavioral health policy changes, and bi-directional data exchange between systems of care for the purpose of improving quality and behavioral health outcomes and care coordination for Medi-Cal beneficiaries. These responsibilities are required by the State.

HHSA has determined that California Mental Health Services Authority (CalMHSA) offers the background, experience, and expertise in CalAIM, as CalMHSA employs CalAIM support experts, contracted by DHCS, to assist counties with BH-QIP milestones. CalMHSA will be contractually required, by DHCS, to fulfill this role while working closely with the California Behavioral Health Directors Association (CBHDA). CalMHSA has developed training and user specific documentation guides, policy and procedures, Current Procedural Terminology (CPT) payment reform crosswalks, and is conducting weekly webinars and Q&A support for counties. In addition, a larger CalMHSA project is to develop a California specific electronic health record to meet the CalAIM changes in the Behavioral Health service delivery, reporting and billing functions. California's approach to Medicaid is complex and unique in its design, making it a challenge for electronic health record providers to develop programming to meet requirements.

This Participation Agreement 6642 will allow EI Dorado County HHSA to benefit from CaIMHSA's contractual role and expertise in assisting counties to meet DHCS BH-QIP requirements. CaIMHSA will provide the following projects to support County Behavioral Health Plans in meeting select Milestones required to complete CaIAIM BH-QIP deliverables under the following categories:

- Payment Reform CalMHSA will work with Participant to draft updated subcontracted MHP and DMC-ODS provider boilerplate language to incorporate new code set(s) and claiming requirements.
- Policy Changes CalMHSA will conduct a landscape analysis of documentation audit practices and draft an updated Utilization Management protocol to comply with best practices

and updated documentation audit standards.

- Data Exchange CalMHSA will collaborate with Participants to receive and analyze Managed Care Plan (MCP) data for the July 2022 - July 2023 measurement period. CalMHSA will analyze the data to establish Participant baseline performance on Follow-up After Emergency Department Visit for Mental Illness (FUM), Follow-up After Emergency Department Visit for Alcohol and Other Drug Abuse or Dependence (FUA), and Pharmacotherapy for Opioid Use Disorder (POD).
- Data Exchange Using Participant baseline data analysis as described above, CalMHSA will support Participant in developing and implementing Performance Improvement Projects (PIP) identifying, implementing, and tracking interventions to improve performance related to required measures. These PIPs will be designed to conform to the California External Quality Review Organization (CalEQRO) PIP requirements.
- · BH-QIP Project Management General BHQIP Implementation Support.
- · Clinical Services Clinical Training and Policy Changes Implementation Support.

In accordance with Board of Supervisors Procurement Policy C-17, Section 7.11, the contractor selection process for service contracts in excess of \$100,000 must include a review of the scope of services and contractor's professional qualifications by a group of individuals (including at least one representative from outside the department requesting the services) qualified to judge the contractor's ability to perform the services. HHSA has documentation on file that such a review was performed for Participation Agreement 6642 with CaIMHSA.

ALTERNATIVES:

Should the Board decline to approve this recommendation, HHSA would be forced to try to implement required milestones to meet the CalAIM and BH-QIP deliverables within its current and limited staffing. In this scenario, HHSA would anticipate the County falling behind all other California Counties in preparation for CalAIM BH-QIP as they are being guided by CalMHSA through their DHCS agreement. This would likely result in not receiving the milestone allocation of \$694,823 and could impact service quality and levels locally in our CalAIM program.

PRIOR BOARD ACTION:

1) 08/31/2021, 21-1313, HHSA DHCS BHIN 21-044 CalAIM Start-Up Funds 2) 03/22/2022, 22-0410, HHSA DHCS CalAIM BH-QIP Incentive Funding

OTHER DEPARTMENT / AGENCY INVOLVEMENT:

Approved by County Counsel, Human Resources, Information Technologies, and Risk Management. The Auditor-Controller was notified.

CAO RECOMMENDATION:

Approve as recommended.

FINANCIAL IMPACT:

HHSA is requesting this contract to support CalAIM BH-QIP to meet the milestones required to receive the incentive funding and prepare for CalAIM implementation. El Dorado County's BH-QIP allocation is \$694,823. If HHSA is unable to meet the milestones, Behavioral Health will be unable to

claim the BH-QIP funding. This would also have an impact on service quality and levels in CalAIM and it would likely increase odds of realignment funding being spent for services, as opposed to Medi -Cal reimbursement for services through CalAIM. There is no impact to County General Fund and there are sufficient allocations in the FY 2022-23 Budget and will be included in future budgets through the duration of the agreement.

CLERK OF THE BOARD FOLLOW UP ACTIONS

1) Clerk of the Board to obtain signature of Chair on one (1) original Participation Agreement 6642.

STRATEGIC PLAN COMPONENT:

County Strategic Goal: "Healthy Communities, Improved Health, Well-being, and Self-sufficiency of El Dorado County communities, residents, and visitors."

CONTACT

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