

MEMORANDUM

DATE	April 10, 2017
TO	Board of Psychology
FROM	<i>Cherise Burns</i> Cherise Burns Central Services Manager
SUBJECT	Agenda Item #4(b)(1)(B)(11) – AB 470 (Arambula) Medi-Cal: Specialty Mental Health Services: Performance Outcome Dashboard

Background:

This bill would require the Department of Health Care Services (DHCS) to develop a performance outcome system for specialty mental health services provided to eligible Medi-Cal beneficiaries. This bill would also require DHCS, in collaboration with the California Health and Human Services Agency, to create a plan for a performance outcome system for specialty mental health services and would require DHCS to convene a stakeholder advisory committee to help create a plan for a performance outcomes system for specialty mental health services. Additionally, the bill would require the department to consider specified objectives, such as high-quality and accessible specialty mental health services for eligible adults. Lastly, the bill would require DHCS to provide quarterly updates on the performance outcome system post those updates on DHCS's web-site.

Location: Assembly Committee on Appropriations

Status: 04/04/2017 Passed Assembly Committee on Health and re-referred to Assembly Committee on Appropriations

Votes: 04/04/2017 Assembly Committee on Health (14-1-0)

Action Requested:

No action is required at this time. Staff will continue to watch AB 470 (Arambula) for potential impacts on statewide access to mental health services and reductions in mental health disparities for vulnerable consumers.



AB-470 Medi-Cal: specialty mental health services: performance outcome dashboard. (2017-2018)

SECTION 1. Section 14719 is added to the Welfare and Institutions Code, to read:

14719. (a) It is the intent of the Legislature to develop a performance outcome dashboard for specialty mental health services that will reduce mental health disparities, improve outcomes at the individual and system levels, and inform fiscal decisionmaking related to the purchase of services.

(b) Consistent with the Special Terms and Conditions of the Medi-Cal Specialty Mental Health Services Waiver, as approved pursuant to Section 1915(b) of the Social Security Act (42 U.S.C. Sec. 1396n(b)), the State Department of Health Care Services, in collaboration with the California Health and Human Services Agency, shall create a performance outcome dashboard for specialty mental health services provided to eligible Medi-Cal beneficiaries.

(1) Commencing no later than January 15, 2018, and quarterly thereafter, the department shall convene a stakeholder advisory committee comprised of representatives of providers, consumer advocates, consumers, family members, counties, and the Legislature. This consultation shall inform the creation of the performance outcome dashboard for specialty mental health services.

(2) In developing the performance outcome dashboard for specialty mental health services, the department shall consider the following objectives, among others:

(A) High-quality and accessible specialty mental health services for eligible adults, consistent with federal law.

(B) Information that improves practice at the individual, program, and system levels.

(C) Minimization of costs by building upon existing resources to the fullest extent possible.

(D) Reliable data that are collected and analyzed in a timely fashion.

(E) Elimination or reduction of mental health disparities and strategies for addressing the social determinants of mental health.

(3) The performance outcome dashboard for specialty mental health services shall consider evidence-based models for performance outcome systems, federal requirements, including the Special Terms and Conditions of the Medi-Cal Specialty Mental Health Services Waiver, as approved pursuant to Section 1915(b) of the Social Security Act (42 U.S.C. Sec. 1396n(b)), the review by the External Quality Review Organization (EQRO), and the Medicaid Managed Care Quality Rating System, and timelines for implementation at the provider, county, and state levels.

(4) At a minimum, the performance outcome dashboard for specialty mental health services shall include both statewide and plan-specific data in the following areas:

(A) Mental health disparities.

(B) Measurement of timely access to services, including waiting time to assessment and waiting time to first appointment.

(C) Language capacity and access.

(D) Quality indicators, including beneficiary experience and clinical outcomes.

(E) Utilization and penetration rates.

(5) (A) Data required pursuant to paragraph (4) shall be disaggregated by age, sex, gender identity, race, ethnicity, primary language, sexual orientation, ZIP Code, and any other factors for which there is peer-reviewed evidence of mental health disparities.

(B) The department shall not report any demographic data under paragraph (4) or this paragraph that would permit identification of individuals.

(6) (A) The department shall provide the performance outcome performance outcome dashboard for specialty mental health services described in this section to all fiscal committees and appropriate policy committees of the Legislature no later than December 31, 2018.

(B) Commencing January 1, 2019, the department shall provide quarterly updates to the performance outcome dashboard for specialty mental health and shall post the updated report on the department's Internet Web site.

(7) Commencing January 1, 2019, the department shall consult with the stakeholder advisory committee specified in paragraph (1) to do both of the following:

(A) Incorporate additional components into the performance outcome dashboard, including, but not limited to, components concerning the reduction of mental health disparities, timely access to services, language access, and quality and utilization measures, relating to mental health services obtained through Medi-Cal managed care plans.

(B) Make recommendations for statewide quality improvement and efforts to reduce mental health disparities based on information reported in the performance outcome dashboard.

(8) Notwithstanding Chapter 3.5 (commencing with Section 11340) of Part 1 of Division 3 of Title 2 of the Government Code, the department may implement, interpret, or make specific this subdivision by means of all-county letters, plan letters, plan or provider bulletins, or similar instructions, without taking regulatory action.