# DRUG MEDI-CAL REFORMS & FINANCING

Federal, State, and County Drug Medi-Cal funding in 2014-2016

		Current Drug Medi-Cal Benefits			Enhanced Drug Medi-Cal Benefits		
S	hare-of-Cost	Feds	State	County	Feds	State	County
Currently Eligible		50%	0%	50%	50%	50%	0%
Newly Eligible		100%	0%	0%	100%	0%	0%

## **Current (Base) Benefits:**

- Narcotic Treatment Program (NTP) Outpatient treatment primarily utilizing methadone.
- Outpatient treatment utilizing the narcotic antagonist Naltrexone.
- Outpatient Drug Free Mostly group counseling and some limited individual counseling.
- Day Care Rehabilitative Intensive outpatient treatment, including group and individual counseling, eligibility for which is limited to pregnant and postpartum women and, as an EPSDT benefit, to children under 21.
- Perinatal Residential Residential treatment provided to pregnant and postpartum women in facilities of 16 beds or less, not including beds occupied by children. (Room & board must be paid for by revenue other than D/MC.)

## **Enhanced Benefits:**

- Outpatient chemical dependency care, including day treatment programs, intensive outpatient treatment programs, individual and group chemical dependency counseling, medical treatment for withdrawal symptoms, methadone maintenance treatment for pregnant members during pregnancy and for 2 months after delivery at a licensed treatment center; and
- Transitional residential recovery services, including chemical dependency treatment in a nonmedical transitional residential recovery setting that provides counseling and support services in a structured environment.

**Note:** Inpatient detoxification, including hospitalization for medical management of withdrawal symptoms, room and board, physician services, drugs, dependency recovery services, education and counseling, will be offered as a Medi-Cal fee-for-service benefit to all eligible patients when medically-necessary, and will no longer be contingent upon other physical health conditions.

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**Currently Eligible (eligible under current rules)**: All who are currently eligible for Medi-Cal, even if not currently enrolled.

## Newly Eligible (eligible under the new rules):

(1) Single, childless adults with incomes below 138% FPL.

- (2) Families with children whose income and/or assets make them currently ineligible for Medi-Cal, but whose income falls below 138% FPL.
- (3) Others?

### **Summary of Provisions:**

- The state's benchmark plan benefits (Kaiser Small Group) will become the **enhanced** benefits for the Medicaid population, and will be added to the State Plan for Drug Medi-Cal beginning January 1, 2014.
- These enhanced benefits will supplement, not replace the current Drug Medi-Cal benefits.
- These benefits, like the current DMC benefits, will be available statewide. There is no county opt-in.
- The enhanced benefits will be an entitlement for *all* Drug Medi-Cal eligibles, not just for the newly-eligible (the expansion population).
- Drug Medi-Cal will remain a carve-out, with all benefits offered through county AOD programs.
- For the *enhanced* benefits, the state will pay the non-federal share of cost for all DMC populations.
- For the *current* benefits, the counties will continue to pay the non-federal share of
  cost for current beneficiaries.

From an email that was sent out from Claire Sallee, MSW:

DHCS Outreach work group has identified three populations with whom they need to communicate to about the DMC Expansion as it relates to MH and SUD services. They broke down the three areas to include the current beneficiaries, the new eligible and the providers.

Their efforts are outlined below.

#### For Beneficiaries:

We've included a "piggyback" notice with a quarterly mailing, called the Jackson vs. Rank Letter, to all current Medi-Cal beneficiaries, describing the MH and SUD services, and giving phone numbers for both DHCS and to get connected to an individual's local Social Services department. The Jackson vs. Rank letter will be mailed out in late November. This captures our "current beneficiaries" population.

We've inserted language about MH and SUD services into the cover letter for the "Welcome to Medi-Cal Packet" that will be mailed out to all current Low-Income Health Population (LIHP) beneficiaries/Path2Health members, both COHS and non-COHS. The Packet is being reviewed by Director Douglas, and will be mailed out in late November. This captures our "newly eligible beneficiaries" population.

We are looking into connecting with other State Departments to see about also "piggybacking" MH and SUD information into their regular communications with possible current eligible beneficiaries and/or newly eligible beneficiaries; for example, does CA Department of Education have a mailer that goes out to families who are receiving the free/reduced lunch program? This effort is in progress.

### For Providers:

We are looking into getting training for newly certified providers on billing. This effort is in progress.

We are drafting a letter to all County Welfare Directors, all County Welfare Administrative Officers, all County Medi-Cal Program Specialists/Liaisons, all County Health Executives, all County Mental Health Directors, and all County Meds Liaisons with an overview of the MH and SUD services. This effort is in progress, and depends upon the timeline of the SPA approval.

We are creating a toolkit that will be sent electronically to all County Offices, containing various means of communication with community-based providers and with beneficiaries about MH and SUD within the context of the Affordable Care Act. Based upon feedback from our county partners on the workgroup, the toolkit will contain the following tools: power point presentation; newspaper ad copy; PSA copy; flyer template; and FAQs. This effort is in progress, with a flexible deadline of late November 2013.

Contact for further information: Claire Sallee, MSW California Department of Health Care Services (916) 324-6526