Implementation of Presumptive Transfer: AB 1299 (Ridley-Thomas)
Timely Access to Specialty Mental Health Services for Children in Foster Care Placed Out-of-County

November 9, 2016
2:00 PM to 4:00 PM
Agenda

• WELCOME AND INTRODUCTIONS

• OVERVIEW OF AB 1299 (Ridley-Thomas, Chapter 603, Statutes 2016): Medi-Cal: specialty mental health services; foster children

• QUESTIONS AND COMMENTS

• DHCS AND CDSS IMPLEMENTATION ACTIVITIES

• QUESTIONS AND COMMENTS

• NEXT STEPS
Presumptive Transfer

Assembly Bill 1299 (Ridley-Thomas, Chapter 603, Statutes 2016) established Presumptive Transfer, a policy to improve the timely and effective provision and payment of specialty mental health services to children in foster care who are placed outside of their counties of jurisdiction by transferring the responsibility for the provision and payment of specialty mental health services to the county of residence.
When Does Presumptive Transfer Apply?

- Presumptive transfer means that absent any exceptions...responsibility for providing or arranging for specialty mental health services shall promptly transfer from the county of original jurisdiction to the county in which the foster child resides. (W & I Code 14717.1 (c))
  - A foster child placed in a county other than the county of original jurisdiction on or after July 1, 2017. (W & I Code 1417.1 (c)(1))
  - A foster youth who resides in a county other than the county of original jurisdiction after June 30, 2017, and is not receiving specialty mental health services consistent with his or her mental health needs, requests transfer of responsibility. (W & I Code 1417.1 (c)(2))
  - A foster child who resided in a county other than the county of original jurisdiction after June 30, 2017, and who continues to reside outside the county of original jurisdiction after December 31, 2017, shall have jurisdiction transferred no later than the child’s first regularly scheduled status review hearing conducted pursuant to Section 366 in the 2018 calendar year unless an exception applies. (W & I Code 1417.1 (c)(2))
Conditions for Presumptive Transfer

On or after July 1, 2017:

• The transfer of the responsibility for the provision and payment of specialty mental health services occurs when:
  – A foster child is placed in a county other than the original county of jurisdiction.
  – The transfer of the responsibility is requested by the county welfare services agency, county probation department, foster caregiver, or any other person authorized to make medical decisions on behalf of the foster child.

• The Mental Health Plan in the county of residence is required to accept an assessment of needed services for the foster child from the county of jurisdiction if one has been completed. (W & I Code 14717.1 (e))

• The Mental Health Plan in the county of residence, upon presumptive transfer, is required to assume responsibility for the authorization and provision of specialty mental health services and payment for services. (W & I Code 14717.1 (f))

• The foster child transferred to the mental health plan in the county of residence shall be considered part of the county of residence caseload for claiming purposes. (W & I Code 14717.1 (f))
Exceptions To Presumptive Transfer

AB 1299 allows a person or agency that is responsible for making health care decisions on behalf of the foster child, in consultation with the child and family team, if one exists, to waive presumptive transfer under specified conditions:

• The transfer would disrupt continuity of care or delay access to services provided to the foster child
• The transfer would interfere with family reunification efforts documented in the individual case plan
• The foster child’s placement in a county other than the county of original jurisdiction is expected to last less than six months
• The foster child’s residence is within 30 minutes of travel time to his or her established specialty mental health services provider in the county of original jurisdiction

(W & I Code 14717.1 (d) (5)(A-D))
Who Can Request an Exception?

- Presumptive transfer can be waived on a case-by-case basis, and when consistent with the medical rights of the children in foster care, if any of the specified exceptions exist. (W & I Code 14717.1 (d)(1))

- An exception request can be made by any of the following: (W & I Code 14717.1 (d)(2))
  - Foster child
  - Person or agency responsible for making mental health care decision on behalf of the foster child
  - The county probation agency or child welfare services agency
  - Any other interested party who owes a legal duty to the child involving the child’s health or welfare
Who Can Request an Exception? Cont.

• A waiver is determined appropriate pursuant to the conditions and exceptions. Determinations are made by the county probation agency or child welfare services agency with the responsibility for the care and placement of the child, in consultation with the child and his or her parent, the child and family team if one exists, and other professionals who serve the child. (W & I Code 14717.1 (d)(3))

• A waiver based upon the exception to presumptive transfer is contingent upon the mental health plan in the county of original jurisdiction demonstrating an existing contract with a specialty mental health care provider, or the ability to enter into contract within 30 days of the waiver decision, and the ability to deliver timely specialty mental health services directly to the foster child. That information shall be documented in the child’s case plan. (W & I Code 14717.1 (d)(6))
Disputes

• The individuals who requested the exception or any other party to the case who disagrees with the determination made by the county agency may request a judicial review prior to the county’s waiver determination becoming final. *(W & I Code 14717.1 (d)(4))*

• The court, based upon the best interest of the child, may confirm or deny the transfer of jurisdiction or application of an exception to the conditions. *(W & I Code 14717.1 (d)(4))*

• Waiver determinations are to be documented in the foster child’s case plan. *(W & I Code 14717.1 (d)(6))*
Establishing Policy and Program Development

Department of Health Care Services in consultation with Department of Social Services will issue guidance with input from the following:

- Advocates, Family and Youth
- Chief Probation Officers of California
- County Behavioral Health Directors Association of California
- County Welfare Directors Association of California
- Provider Representatives
- Stakeholders

(W & I Code 14717.1(b)(1))
Policy and Program Considerations

• Conditions and exceptions are applied consistently statewide giving due consideration to the varying capabilities of small, medium, and large counties.

• Develop a procedure for expedited transfer within 48 hours of placement of the child outside of the county of original jurisdiction. (W & I Code 14717.1(b)(2)(A-F))

  - Assessment and authorization shall occur within 4 business days following the referral to the Mental Health Plan
  - The placing county must communicate to the county of residence Mental Health Plan
Policy and Program Considerations

• Revisit the forms already developed. Consider the need for new forms, and posting forms to Department of Health Care Services website.
  ❖ Authorizations
  ❖ Policies and procedures regarding consent
• Clarify documentation requirements.
• Process by which the request to waive presumptive transfer is made.
• Process by which a party to the case who disagrees with the transfer may request judicial review.
• Issue all-county letters, information notices, or written instructions until regulations are adopted.
Reporting on Children and Youth

- The number and location of youth that have had authorization for payment and provision of specialty mental health services transferred
- County caseload data will need to be adjusted when a child becomes part of the county of residence caseload
- The number and location of youth for whom a waiver to presumptive transfer was submitted
- The exceptions identified in the waivers and determinations made will need to be documented
- The number of disputes that were initiated concerning presumptive transfer determinations
- Specialty Mental Health Services provided
QUESTIONS AND COMMENTS

NEXT STEPS
THANK YOU