

Healthcare Integration

A Community Provider/FQHC
Perspective

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Challenges

1. FQHC and the carve out
 - a) Cannot bill Specialty Mental Health or Drug MediCal if FQHC has mental health and substance use treatment in scope of HRSA grant
 - b) Cannot bill for more than one service in a day (e.g. medical visit + psychiatry visit)
2. Residential SUD treatment prohibited by law from providing any medical care.
3. Cross-disciplinary misunderstanding and distrust.

Solutions

1. FQHC and the carve out
 - a) HR360 established separate adjacent location, not in scope to provide specialty behavioral health services
 - b) Support Assemblyperson Wood's AB 858: Ask Governor to sign same day billing legislation

2. Non-medical treatment: Ask Governor to sign AB 848; allows physician to provide services incident to residential SUD treatment.

3. Invest time in cross-training and team building with medical and behavioral health staff.