Drug Medi-Cal
Organized Delivery System

Cynthia Hudgins
Chief, Quality Monitoring Section
Substance Use Disorder
Program, Policy, and Fiscal Division (SUDPPFD)

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Agenda

• Overview
• Early findings
• Challenges
• Common Deficiencies
• Observations
• Discussion
• **Demonstration**: The act or process of providing evidence for or showing the truth of something

• **Pilot project**: Activity planned as a test or trial
DMC-ODS Impact

40 of CA’s 58 counties have indicated they wish to participate, reaching >97% of CA’s population.
Live Counties - 27

- Riverside
- San Mateo
- San Francisco
- Marin
- Santa Clara
- Contra Costa
- Los Angeles
- Napa
- Santa Cruz
- San Luis Obispo
- San Bernardino
- Imperial
- Monterey
- Orange
- San Diego
- Nevada
- San Joaquin
- Yolo
- Alameda
- Placer
- Santa Barbara
- Ventura
- Merced
- Fresno
- Kern
Current County Status

DMC-ODS
&
State Plan DMC
March 1, 2019

Regional Model
State Plan DMC
Waiver - Live
Waiver - In Process

3/5/2019
The Good News
You Tell Me
QI Committees

Figure 3.21: Percentage of counties with a quality improvement committee that includes SUD participation

<table>
<thead>
<tr>
<th></th>
<th>Live-Waiver Counties</th>
<th>Pre-Implementation Waiver Counties</th>
<th>Non-Waiver Counties</th>
</tr>
</thead>
<tbody>
<tr>
<td>2015</td>
<td>85.7</td>
<td>64.0</td>
<td>42.9</td>
</tr>
<tr>
<td>2017</td>
<td>100</td>
<td>72.0</td>
<td>61.5</td>
</tr>
</tbody>
</table>

Capacity

– Expansion of services
– Availability of qualified providers
– Workforce shortage (workforce was primarily paraprofessional)
– Medical Directors with addiction specialty or experience
Learning Curve

- CFR 42
- Integration of ASAM
- Billing
- Case management
- Out of County residents/Medi-Cal
- Beneficiary transitioning to different facility
Culture Shift

Requires the SUD field to shift from minimal requirements to managed care regulations
Culture Shift, Part 2

Requires Mental Health and SUD professionals to work together on the same team
Deficiencies
Plan Deficiencies

- Beneficiary informing materials do not follow templates
- Complaint investigation reports are not submitted to DHCS
- Provider monitoring is inconsistent
- County-provider monitoring reports are not submitted
- 8049 forms are not submitted
- Provider Medical Director responsibilities are not addressed or monitored
- Required policies are incomplete
- All required services are not being provided
Provider Deficiencies

- Counselors diagnosing
- Medical Directors not engaged in the process
- ASAM not supporting level of care
- Consents missing required elements
- Documentation-treatment plan, narrative progress notes, basis for diagnosis
- No transition from residential to outpatient
- Client activities conducted in non-confidential settings
Observations

- Websites are not user friendly
- Access lines are difficult to find
- Provider directories with tag lines at the end of the document
Resources

• MHSUD Information Notices
  – https://www.dhcs.ca.gov/formsandpubs/Pages/2017-MHSUDS-Information-Notices.aspx

• DMC ODS Webpage

• 2018 DMC-ODS Evaluation Report