



Update on Phase II and III Mental Health/Substance Abuse Evaluation

Background

Given the low utilization of mental health and substance abuse services in the Healthy Families Program (HFP), the Managed Risk Medical Insurance Board (MRMIB) is conducting a three-phased evaluation of the delivery of these services in the HFP.

Phase I consisted of an evaluation of the provision of services to children with a Serious Emotional Disturbance (SED) by county mental health programs. Services to children with a SED are “carved out” of the services provided by HFP plans. The focus of the evaluation was to determine whether HFP subscribers were receiving adequate treatment for SED conditions and whether there was adequate coordination of SED services between the HFP plans and the county programs. Phase I was completed in November 2006 and the final report, with recommendations, can be found on the MRMIB website at: <http://www.mrmib.ca.gov/MRMIB/HFP/MentalHlthRpt06.pdf>.

The purpose of Phases II and III is to evaluate the mental health and substance abuse services (with special emphasis on co-occurring disorders) provided by the HFP health plans.

MRMIB awarded the Phase II and III Mental Health/Substance Abuse Evaluation to Macias Consulting Group (MCG). The contract was executed in December 2007.

Scope of the Evaluation

1. The following questions will be addressed by the evaluation:
 - a. To what extent do HFP subscribers use the mental health and substance abuse services of participating HFP health plans?
 - b. To what extent are HFP subscribers receiving timely and adequate mental health and substance abuse treatment?
 - c. To what extent do health plans use standardized child/adolescent mental health and/or substance abuse screening and assessment tools?
 - d. To what extent do the demographic characteristics of HFP families present barriers to these families: a) seeking mental health and substance abuse services or b) receiving adequate mental health and substance abuse services?
 - e. To what extent do coordination challenges between HFP, health plans, and counties result in barriers to subscribers seeking or receiving satisfactory mental health and substance abuse services?

- f. How can the mental health and substance abuse services offered through HFP be improved?

2. Evaluation Components

a. Data analysis

i. Health Plans

- ✓ MCG will obtain encounter and claims data on mental health and substance abuse services provided by the HFP plans.
- ✓ MCG sent a letter to the HFP health plans on March 26, 2008 requesting certain data and documents including:
 - Member demographic and encounter data for FY 2006 (July 1, 2006 through June 30, 2007)
 - Plan interpreter services as they relate to the provision of mental health and substance abuse services
 - Grievance and complaint data regarding mental health and substance abuse services

ii. Counties

- ✓ Five counties have been selected for the study:
 - Los Angeles
 - Riverside
 - Orange
 - Fresno
 - Santa Clara
- MCG sent a letter on March 25, 2008 to the five counties requesting the data on the number of SED referrals from HFP health plans for FY 2006

b. Document Review

i. Health Plans

- ✓ MCG will review the following health plan documents:
 - List of assessment and screening tools used by the health plans
 - Written policies and procedures that pertain to mental health and substance abuse, including those that pertain to coordination between the plans and the counties for SED

ii. Counties

- ✓ MCG will review the following county documents:
 - Written policies and procedures that pertain to coordination between the plans and the counties for SED
 - List of assessment and screening tools used for HFP SED conditions

c. Site Visits and Interviews

i. Site Visits

- ✓ MCG will conduct a site visit with each of the twenty-three (23) HFP health plans and five county mental health departments.

ii. Interviews

✓ Health Plans

- Based on the review of the encounter and claims data and other documents, MCG will interview health plan officials regarding the provision of mental health and substance abuse services to HFP members. The interviews will include questions regarding:
 - ◆ Details on mental health and/or substance abuse services received by members, member diagnoses, and treatment outcomes
 - ◆ Process by which a plan refers a child to treatment
 - ◆ Length of time from referral to treatment
 - ◆ Coordination challenges between health plans, in-network mental health/substance abuse service providers and physical health care providers
 - ◆ Coordination between health plans, in-network and sub-contractor providers, and county mental health departments
 - ◆ Screening and assessment tools used by the plan

✓ Counties

- MCG will interview county officials from the 5 counties regarding:
 - ◆ Timeliness of HFP SED referrals and treatment
 - ◆ Coordination between the health plans and county regarding SED referrals
 - ◆ Screening and assessment tools used by the county

d. Chart Reviews

- i. MCG will use the data provided by the HFP health plans to randomly select member case files for review. MCG will review seven case files from each plan to verify diagnosis codes and fifteen case files from each plan to assess the timeliness of mental health and/or substance abuse treatment.

e. Focus Groups

- i. MCG will conduct focus groups with the parents or caregivers of HFP enrollees receiving mental health and substance abuse services in the five counties selected for the evaluation. MCG will use the focus groups to determine what barriers, if any, prevent HFP families from seeking or receiving mental health services and how the delivery of these services could be improved through minimizing or alleviating such barriers. MCG anticipates holding the focus groups in early 2009.

✓ Health Plans

- HFP health plans will contact all families who have members utilizing mental health and/or substance abuse services to solicit their participation in the focus groups. MCG will select a random sample for the focus groups from the families who indicate they are willing to participate.

✓ Counties

- MCG will ask the counties to identify and secure a location to hold the focus groups.

3. MRMIB and MCG Communication with the Health Plans and Counties

- a. MCG provided information to the health plans and counties about the study and the type of data and documents needed by MCG during the mental health quarterly workgroup meetings on June 14, 2007 and February 29, 2008.
- b. MRMIB staff informed the health plans about MCG requesting encounter and claims data for the Phase II and III study at a health plan seminar held on January 31, 2008.
- c. MRMIB staff sent an e-mail message to the health plans on March 7, 2008 notifying the plans that MCG would be requesting encounter and claims data and various documents.
- d. MRMIB staff has met and will continue to meet with the County Mental Health Directors Association (CMHDA) to discuss the study and to address any issues the counties might have regarding the study.