	County of Sacramento Department of Health Services Behavioral Health Services Policy and Procedure	Policy Issuer (Unit/Program)	BHS-SAC
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Title: Behavioral Health Services – Screening and Coordination **(BHS-SAC)**		Functional Area: **Services**	
Approved By: *Signed version available upon request.* Lori Miller, LCSW Division Manager Tory Ross, LMFT Program Manager			

Background/Context:

The Behavioral Health Services – Screening and Coordination (BHS-SAC) Team provides eligible members seeking substance use and mental health services through the Sacramento County Behavioral Health Plan (BHP) with a centralized method to connect to specialty mental health services (SMHS) and/or Drug Medi-Cal Organized Delivery System (DMC-ODS) substance use disorder (SUD) treatment services. Members will receive telephone triage, screening, linkage to the appropriate mental health or substance use provider, and targeted case management if a referral to the Managed Care Plan is indicated.

Definitions:

Specialty Mental Health Services (SMHS): Specialty Mental Health Services (SMHS) are provided to Medi-Cal members through the County Behavioral Health Plan (BHP). Services include but not limited to: Assessment, Plan Development, Recovery Services, Therapy Services, Collateral, Medication Support Services, Targeted Case Management, Crisis Intervention, Intensive Care Coordination, Intensive Home-Based Services, and Therapeutic Behavioral Services.

Substance Use Disorder (SUD): Recurrent use of alcohol and/or drugs that causes clinically significant impairment, including health problems, disability, and failure to meet major responsibilities at work, school or home.

Brief Questionnaire for Initial Placement (BQuIP): The BQuIP is a fast and free web-based tool that relies on electronic algorithms to help inform the initial placement decision-making process based on limited information. It is designed to generate preliminary recommendations for initial placement for individuals seeking treatment for substance use disorders (SUDs).

Early and Periodic Screening, Diagnostic, and Treatment (EPSDT): A program that provides free specialty mental health services to children under age 21 who are enrolled in Medi-Cal. In addition to the SMHS services listed above, youth are eligible for intensive care coordination and Intensive Home-Based Services.

Inquiry: Term used in the County electronic health record (EHR), currently SmartCare, which is a request for mental health or substance use treatment services. Please refer to our PP 02-03 'Urgent Inquiry Requests' for definitions and submission procedures for urgent and emergent inquiries.

Targeted Case Management (TCM) is a **Medi-Cal benefit** that helps eligible individuals gain access to the medical, behavioral health, educational, social, and community services they need. Rather than providing treatment itself, TCM focuses on **assessing needs, coordinating services, making referrals, and monitoring whether those services are meeting the person's needs.**

Behavioral Health Plan (BHP): County Operated programs and Sacramento County contracted providers responsible for serving adult Medi-Cal members with moderate to severe distress in mental, emotional, or behavioral wellness that meet the medical necessity criteria, and youth who are eligible under the Early and Periodic Screening, Diagnosis and Treatment (EPSDT)* benefit.

DMC-ODS: On July 19, 2019, SUPT began implementing DMC-ODS as a new way of delivering health care services for Medi-Cal eligible individuals with SUDs. DMC-ODS services are provided through the County BHP. Critical elements of the DMC-ODS include providing a continuum of care modeled after the American Society of Addiction Medicine (ASAM) criteria for substance use treatment services, increased local control and accountability, evidence-based practices in substance use treatment and increased coordination for care. Services include, but are not limited to Outpatient (OP), Intensive Outpatient (IOP), Medication Assisted Treatment (MAT), Narcotic Treatment Program (NTP), Withdrawal Management (WM), and Residential Treatment services. Substance use services are provided to Medi-Cal eligible members through the County Drug Medi-Cal Organized Delivery System. (DMC-ODS).

The SUPT contracted providers are community-based organizations that deliver substance use treatment services. DMC-ODS programs are overseen by the California Department of Health Care Services. Programs are required to be licensed and certified following the Drug Medi-Cal (DMC) requirements, and they operate in compliance with all applicable laws and regulations.

Medi-Cal Managed Care Plan (MCP): Has a current executed Memorandum of Understanding (MOU) with Sacramento County Behavioral Health Services (BHS). The MCP is responsible for serving adult Medi-Cal members with low to moderate distress in mental, emotional, or behavioral wellness that meet the medical necessity criteria as well as youth who are eligible under the EPSDT benefit.
The youth screening tools will make the determination if EPSDT linkage should be through the MCP or MHP.

Non-Specialty Mental Health Services (NSMHS): are delivered via MCP delivery systems. These services are provided to members 21 years and over with mild-to-moderate distress or mild-to-moderate affliction of mental, emotional, or behavioral wellness resulting from mental health disorders. NSMHS may be provided to members under age 21, to the extent otherwise eligible for services through EPSDT, regardless

of level of distress or affliction or the presence of a diagnosis, and members of any age with potential mental health conditions not yet diagnosed.

Senate Bill (SB) 785: Requires that children and youth in the Kinship Guardianship Assistance Program (Kin-GAP), and Adoption Assistance Program (AAP) receive SMHS based on their strengths and needs, and consistent with EPSDT requirements. The bill clarifies responsibility for treatment authorizations and transfers the responsibility for the provision of services to the county of residence while keeping the financial responsibility to authorize and pay for services with the county of original jurisdiction.

"The provisions of SB 785, including its Service Authorization Request (SAR) provisions, are no longer necessary or required for foster children or youth under the conditions of presumptive transfer, or under a waiver of presumptive transfer. However, for children and youth who receive assistance under Kin-GAP and AAP, the county of original jurisdiction continues to retain responsibility for authorizing and reauthorizing SMHS."

AB 1051: Modifies the conditions and requirements for presumptive transfer to occur when a child or youth in foster care is placed in certain out-of-county residential settings. Effective July 1, 2024, when a child or youth is placed outside of their county of original jurisdiction into a community treatment facility (CTF), group home (GH), or short-term residential therapeutic program (STRTP), or admitted to a children's crisis residential program (CCRP), the responsibility to provide or arrange and pay for SMHS shall remain with the MHP in the county of original jurisdiction unless specific circumstances exist.

Purpose:

To detail eligibility and to describe the services provided by the BHS-SAC Team and other entry points for BHS in Sacramento County.

Details:

A. Eligibility

I. Members must meet the criteria for medical necessity including mental health or substance use disorder.

II. Members under 21 years of age may receive mental health or substance use services by either a County Operated BHS program or a Sacramento County contracted BHS provider to provide mental health or substance use services. Members 18 to 21 years of age may be served either through a Children's or Adult system provider but are still considered eligible for EPSDT services.

III. Members shall be enrolled in the Sacramento County Medi-Cal health plan except for the following:

a. Members eligible for certain Behavioral Health Services Act (BHSA), grant or other specially funded programs.

b. Members who meet criteria for presumptive transfer.

c. Members who will move to or start their Medi-Cal in Sacramento County within the next 30 days. *[1]

d. Members who do not have health insurance and who are not eligible for other health care such as Medicaid, Medicare, or private insurance.

e. Members who meet Medical Necessity and mental health distress criteria per PP-BHS-QM- 01-07 Determination for Medical Necessity and BHS-SAC to SMHS. Determination for Medical Necessity and Target, AB 1051 Population (saccounty.gov)Members must reside in Sacramento County except foster youth placed out of the County who meet out of County criteria per SB 785 AB 1051, and AB 1299. See PP-BHS-MH-BHS-SAC-02-05 Out of County Service Requests for Medi-Cal for more details for youth placed out of county.

IV. Eligible members may request an assessment directly from an MHP or SUPT Contracted Service provider. (Note: This does not apply to the Residential Treatment or Withdrawal Management Contracted Providers). Alternatively, members can contact the BHS-SAC Team or their MCP to receive a screening for mental health or substance use treatment services. If applicable, the following direct services may be provided by the MHP or SUPT Contracted providers:

B. Services Provided

I. Mental Health or Substance Use Services:

BHS delegates authority to the providers to "ensure that all members have access to the right care, in the right place, at the right time," as outlined by the Department of Health Care Services (DHCS) "No Wrong Door" BHIN 22-011 No Wrong Door for Mental Health Services Policy (dhcs.ca.gov). Available direct contact services can be located at BHS-SAC-Team-Brochure-English.pdf

If a member contacts a provider directly, providers shall promote linkage to services and streamline the experience for the member by doing the following:

- Redirect individuals who have private insurance to their insurance carrier.
- Provide the requesting individual with the contact information to the appropriate provider and support them by coordinating with the preferred provider if a member does not meet the target population for services (e.g., an adult over 21 that walks-in to a child provider requesting services for themself), or if a provider is not accepting new members.

[1] * Members who will start services in Sacramento County are expected to enroll in Medi-Cal within 30 days and remain on Medi Cal for the duration of services.

- Complete a mental health Assessment or a substance use ASAM Assessment for all eligible Medi-Cal members or individuals with no insurance. A referral to or a screening by the BHS-SAC Team or their MCP is not necessary.

- Accommodate and offer the earliest available appointment if the provider is unable to assess when the member walks into their clinic.

- If a provider is on reprieve and not accepting new members, providers shall inform the member and offer an updated Provider list for the member to choose from, which consists of providers that are accepting new members. Steps should be taken to offer support to the member's chosen provider site. Upon acceptance of the new member, the referring provider will take the following steps to coordinate linkage:

  1. Create an Inquiry in SmartCare
  2. Assign the Inquiry to the person associated with the chosen provider site.
  3. The receiving provider will initiate and enter the Timely Access Data Tool (TADT), which will be completed by the chosen provider site. Timely Access Policy & Procedure

C. BHS-SAC Team Services:

The BHS-SAC Team screens and refers members for linkage to either SMHS, non-SMHS, substance use treatment services (e.g., OP, IOP, MAT, NTP, WM or Residential Treatment services). The paragraph below outlines the various processes of submitting an inquiry to the BHS-SAC Team. The BHS-SAC Team will provide information regarding language accommodation to assist with the inquiry.

Requesting Services: Members, their designee, or other interested parties may:

- Call 916-875-1055; or CA Relay Services 711 or;

- Submit an inquiry through the BHS-SAC Team online service portal (https://mentalhealthservicerequest.saccounty.gov/); or

Send a fax 916-875-1190. Faxed requests should include a completed referral form that can be found here: BHS-SAC-Service-Request-Form.pdf

- All inpatient psychiatric hospital referrals must be faxed to the BHS-SAC Team. BHS-SACFax@saccounty.gov. Please note that to receive a timely response, inquiries must include basic information about the member and referring party (first and last name, date of birth, working contact phone number, and agency information for referring party).

Members: Adult-and-Child-Mental-Health-Provider-Open-Assessment-Hours.pdf or GI-BHS-SUPT-Open-Assessment-Hours.pdf to bypass contacting BHS-SAC may

drop in to providers who are open to taking new referrals, which can be found at these links: Adult-and-Child-Mental-Health-Provider-Open-Assessment-Hours.pdf or GI-BHS-SUPT-Open-Assessment-Hours.pdf

Urgent or Crisis Calls: At the beginning of the call, all callers are asked if they are currently experiencing a mental health crisis or substance use crisis. If a caller identifies that a crisis is occurring, the following protocol takes place:

Crisis Calls:

- The call will be transferred to a BHS-SAC clinician who is trained to manage a mental health or substance use crisis. The clinical team member will continue to assess, attempt to de-escalate, and create a safety plan, until the mental health or substance use crisis is resolved.

- If the mental health or substance use crisis cannot be resolved, the call is upgraded to an emergent situation, and a determination will be made on behalf of the caller to either call 988 or 911.

Urgent Calls:

- The BHS-SAC staff will offer direct contact options for a face-to-face assessment at the Mental Health Urgent Care Clinic (MHUCC) within 48 hours for all calls assessed as urgent. After the individual has been stabilized at the MHUCC, the caller will be linked to a mental health or substance use provider at the location where the member chooses to receive services, and who is accepting new members that week.

Not Urgent/Routine Calls: When a caller is not experiencing a mental health or substance use crisis, they will be given the choice to wait on the line for the next available BHS-SAC clinician or self-refer to a mental health or substance use treatment provider in the Behavioral Health Plan service provider network.

- If the caller opts to self-refer, they will be offered information including the names of providers taking new members, drop-in options, preferred location, and contact information for callers to follow up at their convenience. Callers will be prompted to reference the webpage for the latest updated list of locations accepting new members. If the caller has no access to the internet, the caller may request a copy of the list of locations accepting new members.
- Additionally, callers may contact the BHS-SAC Team if they change their mind about self-referring and/or for further assistance.

Processing Inquiries:

Incoming Verbal, Written, or Electronic Inquiries: Inquiries created by or sent to the BHS-SAC Team will be screened and designated as urgent or non-urgent, entered into the EHR, and assigned to a BHS-SAC Team member. All phone inquiries will be processed immediately by the BHS-SAC Team member. All

electronic inquiries (email, faxed or online portal) will be followed up within three business days. If phone contact is not made after two attempts a BHS-SAC Team member will send a Notice of Adverse Benefit Determination (NOABD) letter PP-BHS-QM-02-01-Notice-of-Adverse-Benefit-Determination.pdf indicating closure of the inquiry within 10 business days of receiving the initial inquiry.

a. **Not Urgent or Routine Inquiries**: All inquiries will be considered routine unless they have priority indicators, as shown below. Routine inquiries will be processed in the order received. BHS-SAC Team members are expected to initiate a response to all newly assigned inquiries no later than three business days after receiving the inquiry.

b. **Not Urgent but Priority Inquiries:** Inquiries that have been designated as priority will be processed first. A BHS-SAC Team member will make every effort to link priority inquiries within three business days of receipt of the inquiry. The BHS-SAC Team members will use their clinical judgement and make every effort to process a disposition no later than the end of the business day. Priority referrals received after 4 p.m. may be processed the following business day.

The following list of mental health priority indicators includes but is not limited to*:

- Referrals from Intake Stabilization Unit (ISU).
- Referrals from a psychiatric inpatient unit.
- Referrals from Child Welfare and Probation for dependent youth.
- Members involved in juvenile justice system.
- Members experiencing current suicidal or homicidal ideation that are not designated urgent at the point of contact.
- Members at imminent risk of placement or housing loss due to a mental illness.
- Members experiencing homelessness.
- Members dealing with recent trauma.
- Pregnancy.
- Clinical judgment*

SUPT Priority Populations Inquiries

SUPT contracted service providers follow the Federal and Sacramento County SUPT service priorities when admitting members into treatment or placing members on wait lists for future services:

- Federal priority categories in order of consideration
  1. Pregnant and Intravenous Drug Users
  2. Pregnant
  3. Intravenous Drug Users
  4. All others
- Sacramento County SUPT priority categories
  - Members involved with Child Protective Services (CPS)
  - HIV positive members. (*Note: HIV positive status is not*

specified in the documentation for purpose of maintaining confidentiality)

- Multi systems users:
  - Mental Health
  - Probation or Parole
  - Court involvement

*The list of priority indicators is not all-inclusive, consequently, clinical judgment will be utilized when designating a service request as routine or priority.

c. Standardization of Screenings (Adult/Youth/Transition of Care Tools/BQuIP):

To ensure that all members receive the appropriate level of mental health and substance use services, the BHS-SAC Team utilizes the Adult and Youth Screening Tools for Medi-Cal Mental Health Services mandated screening tools provided by DHCS, as well as the Brief Questionnaire for Initial Placement (BQuIP) screening tool and the Transition of Care Tool (TOC) for those needing to transition care to another provider.

The Adult and Youth Screening Tools are administered to all members who are not currently receiving mental health services. Please refer to the following for further information on these tools:PP-BHS-MH-BHS-SAC-02-08-Screening-and-Transition-of-Care-Tools(saccounty.gov).
https://dhs.saccounty.gov/BHS/Documents/BHS-Policies-and-Procedures/PP-BHS-MH-Access-02-08-Screening-and-Transition-of-Care-Tools.pdf

The BHS-SAC Team will provide linkage according to the results of the screening tools.

The Brief Questionnaire Initial Placement screening tool is administered to all adult members who are currently not receiving substance use services. Please refer to the following for further information on this tool. The Brief Questionnaire for Initial Placement. The BQUIP is not approved by DHCS for youth aged 17 and under. Therefore, a full ASAM assessment must be conducted by the Specialty Program Team to determine the appropriate level of care.

D. **Program Hours of Operation**

I. BHS-SAC Team staff are available Monday through Friday, during the hours of 8:00 a.m. to 4:45 p.m., for triage, screenings, and linkage to services.

II. Any individual can call 988 for crisis intervention support or call (888-881-4881 or CA Relay Services (711) for triage between 4:45 p.m. and 8:00 a.m., on County holidays, and weekends. After hours services are addressed in County policy PP- BHS-MH-BHS-SAC-02-01-Mental-Health-Plans-After-Hours-Response.pdf (saccounty.gov)

E. Service-Related Issue Resolution

I. If a caller is dissatisfied with any aspect of the interaction with the BHS-SAC Team, the caller will be referred to the BHS-SAC Team Mental Health Program Coordinator (MHPC) and/or the Health Program Manager (HPM).

At any time, a member may contact Quality Management Problem Resolution at 916-875-6009 or call CA Relay Service 711. Details about Problem Resolution can be found in this County policy PP-BHS-QM-03-01-Problem-Resolution and PP-BHS-MH-BHS-SAC-02-07-Provision-of-Second-Opinions.pdf (saccounty.gov).

Related Policies:

https://dhs.saccounty.gov/BHS/Documents/BHS-Policies-and-Procedures/PP-BHS-SUPT-01-01-SUPT-Overview.pdf
https://dhs.saccounty.gov/BHS/Documents/BHS-Policies-and-Procedures/PP-BHS-SUPT-03-01-DMC-ODS-Overview.pdf
PP-BHS-MH-BHS-SAC-02-01-Mental-Health-Plan-After-Hours-Response
PP-BHS-QM-03-01-Problem-Resolution
PP-BHS-MH-BHS-SAC-02-05 Out of County Service Requests for Medi-Cal
PP-BHS-MH-BHS-SAC-02-06-Notices of Action
PP-BHS-MH-BHS-SAC-02-08-Screening-and-Transition-of-Care-Tools (saccounty.gov)
PP-BHS-QM 01-07 Determination for Medical Necessity and Target Population
PP-BHS-MH-BHS-SAC-02-07 Second Opinion
BHIN 22-065

Related Forms:

Mental Health BHS-SAC Service Request Form:
https://dhs.saccounty.gov/BHS/Documents/Provider-Forms/MH-Forms/Service-Request-Form.pdf
Adult Screening Tool for Medi-Cal Mental Health Services
Youth Screening Tool for Medi-Cal Mental Health Services
Transition of Care Tool for Medi-Cal Mental Health Services (Adult and Youth)
The Brief Questionnaire for Initial Placement
BHS-SAC-Service-Request-Form.pdf

Distribution:

Enter X	DL Name	Enter X	DL Name
X	Behavioral Health Staff	X	Behavioral Health Contracted Providers
X	Intranet	X	Internet

Contact Information: BHS-DHS@saccounty.gov