SECTION VI – THE BENEFICIARY SERVICES PROGRAM AND REQUIREMENTS FOR PROVIDING MEDI-CAL BENEFICIARY MATERIALS TO CLIENTS

MEDI-CAL BENEFICIARY MATERIALS

Under California Code of Regulations (CCR), Title 9, Chapter 11, the Local Mental Health Plan (LMHP) and its network providers are required to provide beneficiaries with a booklet and Provider Directory upon request and when a beneficiary first receives a specialty mental health service.

The LMHP has developed user-friendly Medi-Cal beneficiary materials that provide a general understanding of services offered. All Medi-Cal beneficiary materials listed below must be posted in prominent locations where Medi-Cal beneficiaries obtain outpatient specialty mental health services, which includes the waiting areas of a network provider's place of service.

The LMHP has made an effort to ensure that the cultural and linguistic needs of the diverse populations served throughout the LMHP are met by developing Medi-Cal beneficiary materials in the LMHP's threshold languages which are: Arab, Armenian, Cambodian, Chinese Simplified, Chinese Traditional, English, Farsi, Korean, Russian, Spanish, Tagalog, and Vietnamese. The Medi-Cal beneficiary materials available in the LMHP's threshold languages are:

- **Guide to Medi-Cal Mental Health Services:** Booklet informs Medi-Cal beneficiaries on how to access and obtain routine and emergency specialty mental health services;
- Grievance/Appeal Procedures: Pamphlet describes the beneficiary problem resolution process for filing a grievance;
- **Beneficiary Grievance/Appeal Form:** Form provides Medi-Cal beneficiaries the opportunity to register written dissatisfaction about any aspect of services offered by the LMHP; and
- Local Mental Health Plan Poster: A poster designed to provide Medi-Cal beneficiaries simple and user-friendly information while upholding Title 9, California Code of Regulations. The FFS Network Provider should post the Beneficiary Poster in prominent locations and/or waiting areas where Medi-Cal beneficiaries obtain outpatient specialty mental health services.

To obtain copies of the Medi-Cal beneficiary materials identified above, including the Local Mental Health Poster, you may contact The Patients' Rights Office at:

Department of Mental Health Patients' Rights Office 510 S. Vermont Ave, 21 st Floor Los Angeles, CA 90020 (213) 738-4888

Orders to the Patients Rights' Office must be on the organization's letterhead. Materials will only be delivered to a street address, not a P.O. Box. Requests may also be faxed to (213) 330-0285.

Medi-Cal beneficiary materials in all LMHP's threshold languages are available to download from the Department of Mental Health's Internet website, http://dmh.lacounty.gov. Please go to the Patients' Rights Office link on the website to access and print these materials.

For further assistance, the Patient's Rights Office can be reached at (213) 738-4888 or (800) 700-9996. Information is also available on the Patient's Rights Office website at: http://dmh.lacounty.gov/patient_rights.asp.

THE BENEFICIARY SERVICES PROGRAM

The Beneficiary Services Program in the Patients' Rights Office assists beneficiaries in filing and resolving an informal complaint, a formal grievance and State Fair Hearings on any aspect of their specialty mental health services under the Local Mental Health Plan. Advocates record, investigate and coordinate resolution of complaints and grievances filed by beneficiaries. Further, the Beneficiary Services Program provides beneficiaries representation at State Fair Hearings conducted by the Department of Social Services. Beneficiary Services may be reached at (213) 738-4949.

BENEFICIARY INFORMATION

The following services are available:

- Provide information to Medi-Cal beneficiaries and/or their representatives regarding the LMHP and services offered.
- Inform Medi-Cal beneficiaries of their rights under California Code of Regulations, Title 9, Chapter 11, including the right to:
 - Use the Beneficiary Problem Resolution Process at any time;
 - Authorize another person to act on his/her behalf;
 - Protection of confidentiality at all times;
 - Request a State Fair Hearing after the appeal process of the LMHP has been exhausted; and
 - A beneficiary is not subject to discrimination or any other penalty for filing a grievance, appeal, or expedited appeal.
- Assist Medi-Cal beneficiaries with comprehension of issues related to Notices of Adverse Benefit Determinations.
- Develop, prepare and distribute Medi-Cal beneficiary materials.
- Provide information on the Health Insurance Portability and Accountability Act (HIPAA) investigate and resolve DMH HIPAA complaints.

BENEFICIARY ASSISTANCE

- Assist in the problem resolution process for grievances/appeals filed with the LMHP about access to service and service delivery issues.
- Record, investigate, and coordinate resolution of grievances filed by Medi-Cal beneficiaries with the LMHP.
- Provide referrals to emergency shelter and transitional housing via 211 and ACCESS at: https://www.211la.org & https://dmh.lacounty.gov/get-help-now
- Represent Medi-Cal beneficiaries at State Fair Hearings upon request.

• Ensure that Medi-Cal Beneficiaries can access all services in their primary language and in a culturally appropriate manner.

CLINICAL ASSISTANCE

- Assist Medi-Cal beneficiaries in accessing specialty mental health services available through the LMHP, which can include accessing care, changing providers, requesting a second opinion when indicated, and understanding and exercising their rights.
- Serve as liaison between Medi-Cal beneficiaries and network providers during the grievance process and when requested.
- Provide outpatient clinic referrals to Medi-Cal beneficiaries and assist with coordination of transfers. Refer to: https://dmh.lacounty.gov/get-help-now
- Provide assistance to Medi-Cal beneficiaries who receive notification of their network provider contract termination with the LMHP. Refer to: https://dmh.lacounty.gov/get-help-now

STATISTICAL REPORTING/SYSTEM CHANGE

- Collect and provide statistical information regarding Medi-Cal beneficiary grievances/appeals and the beneficiary problem resolution process.
- Make system change recommendations to the Director of Mental Health and Executive Management Team.
- Make corrective action recommendations to directly operated and network providers.
- Develop policies and procedures to enhance the quality of services to Medi-Cal beneficiaries.

TRAINING AND EDUCATION

- Provide community outreach and education to Medi-Cal beneficiaries and community stakeholders about Medi-Cal beneficiary protection-related issues and State regulations affecting specialty mental health service delivery.
- Provide on-site educational presentations to network providers regarding the Medi-Cal beneficiary resolution process.
- Provide consultation and recommendations to bureaus and other community stakeholders regarding Medi-Cal beneficiary protection-related issues as stipulated under CCR, Title 9, Chapter 11.
- Educate network providers on landlord/tenant law.

PATIENTS' RIGHTS

Local Mental Health Plan (LMHP) network providers shall comply with applicable laws and regulations relating to patients' rights, including but not limited to Welfare and Institutions Code 5325, California Code of Regulations, Tittle 9, § 860 through 868 and Code of Federal Regulations (CFR), Title 42, § 438.100. The following patients' rights provisions shall be taken into account when providing services, including the right to:

 Receive information about the services, treatment options, and alternatives offered by the LMHP in a form that is easily accessible, easy to read. Such information shall be

accessible in all identified threshold languages and shall appropriately accommodate persons with special needs, such as a visual impairment or reading difficulty. Beneficiaries have the right to free language assistance services. This includes information about:

- > The individual's rights and responsibilities
- Available services
- Available practitioners and providers
- Other obligations of the LMHP
- Requirements of the LMHP's contract with the state in the areas of:
 - Available services;
 - Assurance of adequate capacity and services;
 - Coordination and continuity of care;
 - Coverage;
 - Authorization of service;
 - Title 42 Code of Federal Regulation (CFR) Section 438.10, which describes information requirements; and
 - Health care services in accordance with Title 42 CFR and Sections 438.206 through 438.210.
- Receive a copy of the LMHP Guide to Medi-Cal Mental Health Services and participating provider lists;
- Be treated with personal respect, recognition of their dignity, and right to privacy;
- Receive services in a safe environment;
- Receive, free of charge, language assistance (including beneficiaries who have Limited English Proficiency and/or are Deaf or Hearing Impaired) and upon request, culturalspecific providers and services;
- Participate with practitioners and providers in making decisions about their mental health care, including the right to refuse treatment;
- Participate in candid discussions of appropriate medical necessary treatment options for their condition;
- Voice complaints about the LMHP or the care it provides, as well as file grievances and appeals with the LACDMH Patients' Rights Office (PRO) in accordance with LACDMH Policy No. 200.04, Beneficiary Problem Resolution Process;
 - ➤ If the individual is enrolled in a Health Maintenance Organization (HMO) that is separate from Medi-Cal, the grievance and appeal process must go through that HMO.
- Make recommendations regarding the LMHP's beneficiary rights and responsibility policy;

 Be free from any form of restraint or seclusion used as a means of coercion, discipline, convenience, punishment, or retaliation as specified in federal rules about the use of restraints and seclusion in facilities such as hospitals, nursing facilities, and psychiatric residential treatment facilities where one stays overnight for treatment;

- Request and receive a copy of their medical records and request for amendment(s) or correction(s); consistent with LACDMH Policy No. 501.01, Clients' Right to Access Protected Health Information (PHI), LACDMH Policy No. 501.04, Client Rights to Request Confidential Communication of Protected Health Information; and LACDMH Policy No. 501.06, Client Rights to Amend Mental Health Information.
- Receive a second opinion by a licensed mental health professional, other than a psychiatric technician or a licensed vocational nurse, employed by, contracting with, or otherwise made available by the LMHP when the LMHP or its providers determine that the medical necessity criteria in CCR Title 9 Chapter 11 § 1830.205(b)(1), (b)(2), or (b)(3)(C) and §1830.210(a) have not been met and that the beneficiary is, therefore, not entitled to any specialty mental health services from the LMHP;
 - ➤ The LMHP shall determine whether the second opinion requires a face-to-face encounter with the beneficiary.
 - > The second opinion shall be provided at no cost to the beneficiary.
 - Receive timely access to mental health services regardless if the mental health need is routine, urgent, or an emergency psychiatric condition; and
- Participate in efforts to promote the delivery of services in a culturally competent and linguistically appropriate manner. These include services for those persons with Limited English Proficiency and/or are Deaf or Hearing Impaired, and have diverse cultural and ethnic backgrounds.