



PROVIDER INFORMATION NOTICE (PIN)

PIN: 20 – 02
TITLE: Mental Health Prevention Services
DATE: May 26, 2020

Los Angeles County
Board of Supervisors

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First District

Mark Ridley-Thomas
Second District

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Fifth District

In accordance with the My Health LA (MHLA) Exhibit M of the Agreement, this Provider Information Notice (PIN) is intended to provide you with details regarding your contractual obligations for providing Mental Health Prevention Services (MHPS) to the MHLA Participants.

MHPS and Screening for MHPS

The Community Partners (CP) may commence providing screening and MHPS to MHLA Participants no sooner than July 1, 2020 following the receipt of an approval letter. The services may include one or more of the allowable services or activities in accordance with Attachment I, Prevention Services Matrix.

Patient Eligibility

CP shall offer and provide MHPS, if applicable and appropriate, to any Participant. CPs will determine whether MHPS is applicable and appropriate based on the screening process including the administration of the Patient Health Questionnaire-9 (PHQ-9). Any Participant can receive MHPS regardless of the scores on the PHQ-9. Any Participant who requests MHPS shall not be denied services.

The following are the guidelines on screening:

- CP shall provide an initial screening of all Participants to determine if MHPS are applicable and appropriate. The initial screening process shall entail administration of the PHQ-9 and a review of the results and any other pertinent information from the Participant and/or Health Professional that may indicate Participant risk factors or the need to build protective factors. The questionnaire/measure is traditionally self-administered, however it may be administered by staff. It can be administered in person or by phone. The results shall be reviewed by staff.
- CP staff may also determine, after the initial screening with PHQ-9, that the Generalized Anxiety Disorder-7 (GAD-7) questionnaire/measure shall be administered to determine appropriate Prevention services.

All Participants who receive MHPS after the initial screening shall be provided follow-up questionnaire(s)/measure(s) quarterly (or more frequently) with either or both the PHQ-9 or the GAD-7 questionnaires/ measures until the end of the DMH-approved curriculum. The choice of which questionnaire(s)/measure(s) shall be determined at the sole discretion of the CP staff.

- All Participants who receive additional MHPS shall also be provided either or both questionnaire(s)/measure(s) at the end of the course/curriculum, if applicable and appropriate.

Population Health Management
1000 S. Fremont Ave.
Bldg. A-9 East, 6th Floor
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My Health LA
Anna Gorman
Director of Community
Partnerships & Programs

To ensure access to high-quality, patient-centered, cost-effective health care to Los Angeles County residents through direct services at DHS facilities and through collaboration with community and university partners.

www.dhs.lacounty.gov



The questionnaire(s)/measure(s) are available here: <https://www.phqscreeners.com/>. In addition, Attachment II describes the MHPS Screening Process.

Data Collection

The CP is required to submit encounter and outcome data by MHLA Participant when MHPS is provided.

- **Encounter Data** – Encounter data will be submitted each time a MHLA Participant is screened and each time a MHLA Participant receives MHPS. The allowable codes associated with MHPS are Healthcare Common Procedure Coding System (HCPCS) Procedure Code H0002 for screening and H2014 for services. Each time a MHLA Participant undergoes the initial screening with PHQ-9, CP shall submit a claim with Procedure Code H0002. Each time a MHLA Participant receives services, CP shall submit a claim with Procedure Code H2014. The encounter data is to be submitted within 60 days in arrears to American Insurance Administrators (AIA) either manually or electronically as part of the MHLA encounter reporting process.
- **Outcome Data** – The outcome data are collected via the use of PHQ-9 and GAD-7 questionnaires/measures. CPs shall report PHQ-9 scores on claims submitted to AIA each time a MHLA Participant undergoes initial screening. CPs shall report PHQ-9 and/or GAD-7 scores on claims submitted to AIA when the questionnaires/measures are administered.

Attachment III is the revised Instructions for Completion of HCFA 1500/CMS 1500 claim form. The PHQ-9 and the GAD-7 scores must now be noted in the Modifier boxes. These revised billing instructions are posted on the MHLA website.

Payment

CPs will receive a Supplemental Behavioral Health MGF in the amount of \$3.30 for all enrolled Participants who have had a qualifying primary care visit in the prior 24 months. The County will recoup payment of the Supplemental Behavioral Health MGF for Participants who are later denied based on eligibility audits.

MHPS Sites

The CPs may provide MHPS to MHLA Participants at all its approved MHLA sites listed in Exhibit J, MHLA Site Profile (and any revisions thereto). MHPS cannot be provided at non-County approved clinic sites.

While many of the MHPS are to be provided as individual, face-to-face services, CP has the option of providing some MHPS telephonically or in a group setting in accordance to Attachment I, Prevention Services Matrix (and any revisions thereto).

The CP shall immediately notify the Director of Community Partnerships and Programs if a clinic is temporarily unable to provide MHPS due to unavailability of MHPS trained staff (See Training Requirements) and shall work with the County to obtain training for additional staff.

Training Requirements

A minimum of one (1) staff trained in MHPS shall be made available to provide MHPS to Participants at each approved clinic site during hours of operation. The services may be provided by telephone from

another site and/or services may be scheduled. CP shall assign a mental health lead staff, preferably a clinical provider, to provide guidance to the MHPS staff and to communicate with County about MHPS.

The lead staff member must complete training. If there are changes to the lead staff, CP must notify Anna Gorman, MPH, Director of Community Partnerships, at AGorman@dhs.lacounty.gov.

CP may not allow any staff to provide MHPS without undergoing training in MHPS. However, those staff only providing Screening with questionnaires/measures PHQ-9 and GAD-7 to Participants are not required to meet the MHPS training requirements. CP staff administering questionnaires/measures PHQ-9 and GAD-7 and who are reviewing and evaluating the results shall have a working knowledge of these questionnaires/measures. CP staff who do not have a working knowledge of the PHQ-9 and GAD-7 questionnaires/measures are highly recommended to view the following DMH presentation on how to administer, use, review and evaluate results.

[DMH MHLA Prevention PHQ-9](#)

[DMH MHLA Prevention GAD-7](#)

Prior to providing MHPS, CP shall ensure all staff providing MHPS are trained in a Prevention Program Practice(s) as identified in Attachment I, Prevention Services Matrix (and any revisions thereto).

CP shall receive training through a DMH-approved curriculum, either provided by County or a County-contractor, under a Prevention Practice identified in Attachment I, Prevention Services Matrix (and any revisions thereto). The first two approved curriculums are: Trauma-Informed Care for Community Partner Clinics and Stress Management Skills for Community Partner Clinics. CPs also can get trained in Psychological First Aid or Skills for Psychological Recovery. The training videos and curriculum documents are available on the MHLA website.

CP also may opt to submit a training curriculum(s), which shall first be deemed by DMH as an acceptable curriculum under the Prevention Practice entitled, Prolonged Engagement, as identified in Attachment I, Prevention Services Matrix (and any revisions thereto), before such curriculum can be utilized under this Prevention Program. Acceptable curriculum(s) may include, but are not limited to subject matter such as anger management, stress management, behavioral activation, coping strategies, effective communication, emotional regulation, and grief and loss. CP will not be reimbursed for any training.

For CP staff that had prior training in a particular Prevention Practice, but in which the CP staff had not applied that knowledge recently with one or more Participants, is highly recommended to take a refresher course. CP staff who have been trained in a DMH-approved curriculum may train other CP staff on that very same curriculum (train-the-trainer), however, the CP trainer must provide an attestation that they are adhering to the curriculum/course as it was originally developed/intended. In such instances, attendees of this training must meet the same standard as cited above and submit sign-in sheets, certificates of completion, and/or signed attestations.

Any staff who meet the MHPS training requirements shall be eligible to provide MHPS. CP must have multilingual staff that is proportionate to the percentage of multilingual Participants served.

Training Verification Process

Prior to providing MHPS, CP must submit proof of staff training to the MHLA and receive approval. The approval will include a date when CP can begin providing MHPS. That proof includes either a certificate signed by the trainer, a sign-in sheet, a confirmation of attendance through the training site/training video or signed attestations (Attachment IV). Contractor shall retain the original copies at their site location. Training PIN

records are subject to audit by DMH and may be reviewed by MHLA at any time. If CP staff received training from other trained CP staff, they still shall submit proof of training.

The evidence of training must be completed online with a DMH curriculum or be submitted to:

Anna Gorman, MPH
Director of Community Partnerships and Programs
Department of Health Services
1000 S. Fremont Avenue, Building A-9 East, 6th Floor
Alhambra, California 91803
Email address: mhlamentalhealth@dhs.lacounty.gov

Payment of the Supplemental Behavioral Health MGF shall not begin until CP's staff training has occurred and verified by MHLA and CP has received the approval start date.

Medical Records Documentation

CP shall document a note in the medical record for each of the MHPS provided. Documentation related to MHPS are subject to review by DMH. The documentation should include the elements as described in Attachment V – Medical Record Documentation. Sample notes are available on the MHLA website. The prevention services should not be documented as treatment.

Original questionnaires/measures (PHQ-9 and GAD-7) shall be maintained in the medical record.

Performance Improvement

CP shall participate in County activities to improve performance and quality across MHPS. This may include performance and quality improvement meetings with County, peer review meetings, the review and development of new policies and procedures as it relates to MHPS, and the provision of information, as needed.

Performance-Based Criteria

CP shall be required to meet the following performance-based criteria noted in the table below.

CRITERIA	DATA COLLECTION METHOD	PERFORMANCE TARGETS
Language Parity	<ul style="list-style-type: none">Staff roster indicating language capacity	<ul style="list-style-type: none">Multilingual staff that is proportionate to the percentage of multilingual participants served.
Training	<ul style="list-style-type: none">Training Certificate and/or Sign-in sheets	<ul style="list-style-type: none">100% of staff providing MHPS are trained.
Data Submission	<ul style="list-style-type: none">DMH receipt of baseline and quarterly outcome data for participants served, demographic information and encounter data.	<ul style="list-style-type: none">100% of participants served with a MHPS will have this information collected.

Referrals

At any point during the screening process or during the provision of services, CP may determine that a MHLA Participant needs treatment instead of prevention services.

If CP believes the Participant may meet criteria for specialty mental health services, the Participant can be referred to DMH through the Access hotline at 1-800-854-7771. The line operates 24 hours a day, seven days a week as an entry point for these mental health services in L.A. County.

If CP determines the Participant does not meet criteria for specialty mental health services but may require treatment for lower level mental health care, the CP can provide free or low-cost treatment to Participants outside of the scope of the MHPS.

Audit/Compliance Review

The County has the right to audit or perform compliance reviews on any and all fiscal, administrative and service delivery aspects of CP's performance related to MHPS. Those reviews will include analysis of utilization, and results of outcome measures. DMH will conduct periodic site reviews, using the MHLA-Behavioral Health Expansion Site Visit Tool in Attachment VI. CP shall allow County representatives access to all financial reports, medical records, and reports pertaining to this Agreement.

If County determines during the course of its audit/compliance reviews that the criteria in the above table, and/or has not met other MHPS required elements including, but not limited to appropriate documentation of these services, the Contractor shall be required to complete an Acceptable Quality Improvement Plan (QIP) to address the area(s) of deficiency within a period determined by County. An Acceptable QIP is a quality improvement plan that sets forth the actions reasonably designed to fix the deficiency, a time line for the execution of each action in the QIP, a designation of the staff responsible for performing or overseeing the performance of each action in the QIP, and a system for monitoring to assure that the deficiency does not reoccur. Generally, the QIP should provide for the correction of the deficiency before the date the QIP is due.

If you have any questions, please contact me or your Program Advocate.

Anna Gorman

Anna Gorman
Director of Community Partnerships and Programs

Attachments –

- I. Prevention Services Matrix
- II. MHPS Screening Process
- III. Instructions for Completion of HCFA 1500/CMS 1500 claim form
- IV. Training Attestation
- V. Medical Record Documentation
- VI. Behavioral Health Expansion Site Visit Tool