

Quality Assurance Bulletin

Quality Assurance UnitCounty of Los Angeles – Department of Mental HealthSeptember 30, 2024Lisa H. Wong, Psy.D., Director

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CALAIM JUSTICE-INVOLVED RE-ENTRY INITIATIVE: SPECIALTY MENTAL HEALTH SERVICES WARM LINKAGE SERVICES

The California Department of Health Care Services (DHCS) has partnered with state agencies, counties and community-based organizations to establish the California Advancing and Innovating Medi-Cal (CalAIM) Justice Involved Re-Entry Initiative which is a coordinated reentry process for people leaving incarceration. The initiative's goal is to assist individuals leaving incarceration by connecting them to physical and mental health services prior to release. Through an approved federal Medicaid 1115 demonstration waiver, California is the first state in the nation to offer a targeted set of Medicaid (Medi-Cal) services, hereafter referred to as Justice Involved Re-Entry services, to youth and eligible adults in state prisons, county jails and youth correctional facilities for up to 90 days prior to release.

Under the Justice-Involved Re-Entry Initiative, within the 90 days <u>prior</u> to release, correctional facilities enroll eligible incarcerated Californians in Medi-Cal and provide, or arrange for the provision of, Re-Entry services which includes Medi-Cal mental health services. The correctional facility also refers individuals to the Managed Care Plans for Enhanced Care Management (ECM) and Community Supports and to the County Mental Health Plans (MHP) for Specialty Mental Health Services (SMHS), as needed. SMHS providers may provide a limited set of Justice Involved (JI) Warm Linkage services <u>prior</u> to the individual's release from incarceration.

A limited number of counties within California will go live with Re-Entry services beginning October 1, 2024. Other counties will phase in Re-Entry services over the next two years. The Department of Mental Health (DMH) and its SMHS providers must be ready to accept and provide services for justice-involved referrals from counties as they implement Re-Entry services. The below outlines the requirements for JI Warm Linkage SMHS by DMH and its SMHS providers under the CalAIM Justice-Involved Re-Entry Initiative. Effective October 1, 2024, JI Warm Linkage services only apply to referrals from outside of Los Angeles. Providers within Los Angeles County will be notified when these services are expanded to individuals incarcerated within Los Angeles County.

Referrals to Specialty Mental Health Services from Correctional Facilities

All requests for SMHS from correctional facilities who have implemented Re-Entry services shall be submitted using the DMH Universal Entry referral portal by the correctional facility staff. The Universal Entry referral portal collects critical information needed such as insurance status, justice-related information, and clinical presentation. Treatment information (e.g., medication evaluation) and incarceration information (e.g., forensic history) can also be uploaded using the portal. The portal has a built-in algorithm to determine the most appropriate level of care within DMH (e.g., outpatient services, Full Service Partnership) and provider (e.g., Men's and Women's Re-Entry, Hollywood 2.0). The referral will be transferred to the appropriate level of care and/or provider using the Service Request Tracking System (SRTS) or, in certain situations (e.g., 24 hour facilities), via secure email.

Justice Involved Warm Linkage Services

Upon receipt of a referral from a correctional facility and in accord with DMH Policy <u>302.07</u> and <u>302.14</u>, SMHS providers are expected to contact the referring party as soon as possible to coordinate an appointment that is within five business days from the date of release from incarceration. In certain circumstances, an individual's release may be contingent upon acceptance into a SMHS mental health program. That information will be noted on the referral, and the receiving provider is expected to coordinate closely with the referring party regarding arrangements for the release. In addition, SMHS providers should ensure and/or coordinate transportation to

the appointment, as applicable. As a reminder, Medi-Cal coverage includes the availability of transportation services to in-person visits when other available resources have been reasonably exhausted. To access information about obtaining transportation, please contact the individual's Managed Care Plan's Member Services Department.

In addition to scheduling an appointment upon release, it is expected that providers provide JI Warm Linkage services prior to release. These services should minimally include a professional-to-professional clinical consultation between treating providers within 14 days prior to release (if known) to gather information about clinical presentation and treatment history, discuss anticipated needs upon release, and conduct treatment planning. The professional-to-professional clinical consultation may be provided by any discipline from the referred to treating SMHS provider and shall be arranged with the clinician listed on the referral received. The referred to treating SMHS provider may determine the most appropriate discipline (e.g., case manager, social worker, psychiatrist) for the clinical consultation depending on the clinical information obtained in the referral. In addition to the professional-to-professional clinical consultation, treating SMHS providers may also determine if a brief evaluation with the client and/or other targeted case management services are appropriate prior to release. SMHS providers may not provide treatment services (e.g., therapy or rehabilitation) prior to release as part of the JI Warm Linkage services.

JI Warm Linkage services are billable as SMHS Medi-Cal services. These services may be by telephone, telehealth or in-person. Please refer to the <u>Guide to Procedure Codes</u> for a list of allowable procedure codes for JI Warm Linkage services. In order to bill for services, providers must have an open episode which requires financial screening and consent for services per DMH Policy <u>302.01</u>. Financial screening may utilize information from the referring party. For additional information on financial screening, please contact the Central Business Office. If there is open episode in the Integrated Behavioral Health Information System (IBHIS) for the individual, which indicates the individual had previously consented to services and was aware there was a clinical record created for them, no additional consent is needed and the previously obtained consent may be utilized. If there is no open episode and consent had not previously been obtained, then consent should be obtained by the correctional facility and provided to the SMHS provider prior to opening an episode for the individual being referred. Upon release and prior to receipt of a diagnostic assessment and treatment services, the SMHS should obtain their own consent for services. If the individual does express disagreement or does not provide consent but is in need of services (including conditional release), SMHS providers shall accept the referral and outreach and engagement services (i.e., COS) until some form of consent can be obtained.

Please note: It is understood that JI Warm Linkage Services will not be possible in situations when the individual is released from incarceration unexpectedly or the incarceration is a short stay. Providers in receipt of a referral in these circumstances should minimally ensure an appointment is provided upon release.

If DMH directly-operated or contracted providers have questions related to this Bulletin, please contact the QA Policy & Technical Development team at <u>QAPolicy@dmh.lacounty.gov</u>.