

County of San Bernardino
Department of Behavioral Health

268 West Hospitality Lane • San Bernardino, CA 92415
Phone (909) 382-3133 • Fax (909) 382-3105



LIHP Application County Comparison
Summary of Findings
April 15, 2011

In preparation for the full implementation of the Patient Affordable Care Act in 2014, California Counties were given the option of creating systems of care that will facilitate the transition into Healthcare Coverage for their residents. The following Summary of Findings were obtained from the applications submitted to Department of Health Care Services (DHCS) on February 14, 2011. In addition, a comprehensive grid has been compiled providing a comparison of each County application. Please note that due to the differences in each county, not all counties included the same kind of information in their applications. Therefore, parallels were made with similar information and may not be representative of each counties true intent. Please consider this report and the affiliated grid an informational tool—questions related to specific counties may be made to the contact included on the application submitted to (DHCS).

Entities submitting applications to implement a Low Income Health Plan: 23 Counties, 1 City, 1 Rural Health Board

- All 10 of the Counties that were awarded Coverage Initiative Demonstration Grants submitted applications

Mental Health Services

- Carved Out Indicated in Application: 16 Counties
- Mental Health Services included in the “network of care”: 9

Substance Abuse Services

- Substance abuse services included as a benefit: 8 Counties
- To be determined: 2 Counties
- No Substance Abuse services included: 15 Counties

Counties that are planning to provide expanded mental health benefits above the minimum required: 16

- To be determined: 3
- Some counties did not provide information detailing mental health benefits.

Counties planning on implementing some form of Cost sharing: 12

- Several of the Counties submitted cost sharing tables

Counties that provided a description of their operational model integrating Mental Health, Primary Care, and Substance Abuse: 7

Several of the Counties submitting applications based their design model on the assumption that enrollees in the MCE will become Medi-Cal beneficiaries and are using their established Medi-Cal programs as the starting point for their programs. One of the Counties plans to provide minimum mental health benefits to enrollees that do not meet medical necessity for Specialty Mental Health Services (SMHS).