



MEMORANDUM

DATE: July 8, 2011

TO: All Interested Parties

FROM: The Department of Health Care Services and the Department of Mental Health

SUBJECT: Stakeholder Meeting Regarding the Transfer of Medi-Cal Related Specialty Mental Health Services to the Department of Health Care Services

California's Health Budget Trailer Bill for Fiscal Year 2011-12 (Assembly Bill 102) directs the Department of Health Care Services (DHCS) and the Department of Mental Health (DMH) to create a state administrative and programmatic transition plan to guide the transfer of the Medi-Cal specialty mental health and EPSDT Program services to DHCS, effective July 1, 2012. The bill also requires the departments to convene a series of meetings and forums with stakeholders with the intent to inform the creation of the transition plan.

DHCS and DMH will host the first stakeholder meeting on July 12, 2011. We invite your attendance in person, or by telephone, and recommend that you review the attached documents prior to the meeting. DHCS and DMH will place information related to this meeting on their respective websites.

DATE: Tuesday, July 12, 2011
TIME: 10:00 a.m. – 12:00 pm
LOCATION: 1500 Capitol Avenue (corner of 15th and Capitol), Auditorium Sacramento, CA
CALL-IN NUMBER: 1-800-621-8312 Passcode: 7675869 There are a limited number of lines for this meeting; we encourage callers in the same physical location to share a single call-in line.
PARKING: Metered parking is available on most streets. Please see the attached information for nearby parking lots.

No RSVP to this meeting invitation is required.

If you are unable to attend the meeting and wish to submit your comments in writing, please send to: DHCSMHMEDI-CALTRANSFER@DHCS.CA.GOV. Please note, to ensure a transparent process, DHCS will post pertinent written comments on its website.

Please feel free to forward this meeting notice to other interested parties.

Attachments

Parking Near 1500 Capitol Avenue, Sacramento, CA

Allright Parking
1209 L St, Sacramento, CA
(916) 444-5651
0.2 mi NW

Ampco System Parking
1700 K St, Sacramento, CA
(916) 443-2507
0.2 mi E

Ampco System Parking
1100 J St, Sacramento, CA
(916) 443-5453
0.4 mi NW

Ampco System Parking
900 13th St, Sacramento, CA
(916) 441-5213
0.3 mi N

Central Parking Systems
1303 J St, Sacramento, CA
(916) 446-4292
0.3 mi N

Priority Parking Services
830 L St, Sacramento, CA
(916) 492-0100
0.5 mi NW

Priority Parking Services
1117 J St, Sacramento, CA
(916) 441-0223
0.4 mi NW

Standard Parking
801 K St, Sacramento, CA
(916) 446-6965

An additional flat rate lot is located on the corner of L Street and 16th Street.

Metered parking is available on most streets. Please follow link for map & rates.
<http://www.cityofsacramento.org/transportation/parking/onstreetmapslongtermmap.html>

**Excerpt of Assembly Bill 102, related to the transfer of
Medi-Cal Specialty Mental Health Services to the Department of Health Care Services**

Chapter 8.9. Transition of Community-Based Medi-Cal Mental Health.

14700. (a) (1) It is the intent of the Legislature to transfer to the State Department of Health Care Services, no later than July 1, 2012, the state administration of Medi-Cal specialty mental health managed care, the Early and Periodic Screening, Diagnosis, and Treatment (EPSDT) Program, and applicable functions related to federal Medicaid requirements, from the State Department of Mental Health.

(2) It is further the intent of the Legislature for this transfer to occur in an efficient and effective manner, with no unintended interruptions in service delivery to clients and families. This transfer is intended to do all of the following:

(A) Improve access to culturally appropriate community-based mental health services, including a focus on client recovery, social rehabilitation services, and peer support.

(B) Effectively integrate the financing of services, including the receipt of federal funds, to more effectively provide services.

(C) Improve state accountabilities and outcomes.

(D) Provide focused, high-level leadership for behavioral health services within the state administrative structure.

(b) Effective July 1, 2012, the state administrative functions for the operation of Medi-Cal specialty mental health managed care, the EPSDT Program, and applicable functions related to federal Medicaid requirements, that were performed by the State Department of Mental Health shall be transferred to the State Department of Health Care Services. This state administrative transfer shall conform to a state administrative transition plan provided to the fiscal and applicable policy committees of the Legislature as soon as feasible, but no later than October 1, 2011. This state administrative transition plan may also be updated by the Governor and provided to all fiscal and applicable policy committees of the Legislature upon its completion, but no later than May 15, 2012.

(c) All regulations and orders concerning Medi-Cal specialty mental health managed care and the EPSDT Program shall remain in effect and shall be fully enforceable unless and until readopted, amended, or repealed by the State Department of Health Care Services, or until they expire by their own terms.

14701. (a) The State Department of Health Care Services, in collaboration with the State Department of Mental Health and the California Health and Human Services Agency, shall create a state administrative and programmatic transition plan, either as one comprehensive transition plan or separately, to guide the transfer of the Medi-Cal specialty mental health managed care and the EPSDT Program to the State Department of Health Care Services effective July 1, 2012.

(1) Commencing no later than July 15, 2011, the State Department of Health Care Services, together with the State Department of Mental Health, shall convene a series of stakeholder meetings and forums to receive input from clients, family members, providers, counties, and representatives of the Legislature concerning the transition and transfer of Medi-Cal specialty mental health managed care and the EPSDT Program. This consultation shall inform the creation of a state administrative transition plan and a programmatic transition plan that shall include, but is not limited to, the following components:

(A) Plan shall ensure it is developed in a way that continues access and quality of service during and immediately after the transition, preventing any disruption of services to clients and family members, providers and counties and others affected by this transition.

(B) A detailed description of the state administrative functions currently performed by the State Department of Mental Health regarding Medi-Cal specialty mental health managed care and the EPSDT Program.

(C) Explanations of the operational steps, timelines, and key milestones for determining when and how each function or program will be transferred. These explanations shall also be developed for the transition of positions and staff serving Medi-Cal specialty mental health managed care and the EPSDT Program, and how these will relate to, and align with, positions at the State Department of Health Care Services. The State Department of Health Care Services and the California Health and Human Services Agency shall consult with the Department of Personnel Administration in developing this aspect of the transition plan.

(D) A list of any planned or proposed changes or efficiencies in how the functions will be performed, including the anticipated fiscal and programmatic impacts of the changes.

(E) A detailed organization chart that reflects the planned staffing at the State Department of Health Care Services in light of the requirements of subparagraphs (A) through (C) and includes focused, high-level leadership for behavioral health issues.

(F) A description of how stakeholders were included in the various phases of the planning process to formulate the transition plans and a description of how their feedback will be taken into consideration after transition activities are underway.

(2) The State Department of Health Care Services, together with the State Department of Mental Health and the California Health and Human Services Agency, shall convene and consult with stakeholders at least twice following production of a draft of the transition plans and before submission of transition plans to the Legislature. Continued consultation with stakeholders shall occur in accordance with the requirement in subparagraph (F) of paragraph (1).

(3) The State Department of Health Care Services shall provide the transition plans described in paragraph (1) to all fiscal committees and appropriate policy committees of the Legislature no later than October 1, 2011. The transition plans may also be updated by the Governor and provided to all fiscal and applicable policy committees of the Legislature upon its completion, but no later than May 15, 2012.