

	County of Sacramento Mental Health Division Adult Mental Health Services	Policy No.	04-04
		Issued Date	11-04-08
		Revision Date	
AREA:	TITLE:		
Medical Services	Geographic Managed Care Providers (GMC) Collaboration		
Approved by:	Approved By:		
J. Rodney Kennedy, MFT Program Manager	Sandy Damiano, PhD Chief		

I. POLICY

Adult Mental Health Providers recognize and value the importance of collaboration with a client's primary care provider (PCP) or health care specialist. Roles and responsibilities are established in Geographic Managed Care Provider (GMC) Memorandums of Understanding (MOU) and in the Sacramento County Mental Health Plan (MHP).

II. PROCEDURES

A. GMC Collaboration Rationale:

1. Coordination of medical and mental health care is critical for individuals with persistent mental disorders due to high co-morbidity of significant medical conditions, inadequate diagnosis and treatment of medical problems.
2. California Code of Regulation Title 9 Section regarding Coordination of Physical and Mental Health Care states that individuals requesting specialty Mental Health Services are referred to a primary care provider when the Mental Health Plan determines that the beneficiary's diagnosis would be responsive to physical health care based treatment.
3. Best practice dictates the need for coordination of medical care.

B. GMC MOU:

1. Sacramento County Mental Health Division has established MOUs between the MHP and designated GMC Providers. Established MOUs include:
 - a. Health Net of California, Inc.
 - b. Blue Cross
 - c. Kaiser GMC
 - d. Western Health Advantage
 - e. Molina Healthcare of California
2. The MOU outlines responsibilities for the MHP and the GMC. The GMC will treat members with non-disabling specialty mental health conditions that may be responsive to primary care.

3. The GMC Plan is responsible for member referrals when the member's condition requires Specialty Mental Health Services under the MHP.

C. Mental Health Plan Responsibility:

1. Provide mental health specialty services including medication management for mental health conditions that would not be responsive to physical health care based treatment and those conditions that do not meet the GMC Plan medical necessity criteria.
2. Provide consultation to designated GMC representatives, and meet with them on a quarterly basis.
3. Other responsibilities are delineated in the MHP and the GMC MOUs.

D. New Requests for Services through Adult Access:

1. Adults requesting mental health services must provide Adult Access with information regarding their current Primary Care Provider (PCP). This should include the Provider's name or health plan, last contact with PCP and basic contact information.
2. As described in the GMC MOU, adults who have Medi-Cal and are current members of a GMC Plan must be referred by their PCP to Adult Access for specialty mental health services when their mental health condition exceeds the PCP's scope of practice.
3. Medi-Cal members who are unassigned to a GMC plan but have a PCP will be referred to their PCP and informed of the mental health services that their PCP can provide and educated as to *the importance of health treatment that includes their health and mental health concerns*.
4. Medi-Cal members who are unassigned and do not have a current PCP will be provided with information regarding health care clinics and physicians in their area that currently are accepting new patients. These clients will also be educated as to the PCP's scope of practice *and how their mental health and health conditions are interrelated*.
5. Medi-Cal members who are unassigned and their presentation of mental health needs meet core target criteria will be provided with an appointment slot at one of the Regional Support Teams, per Adult Access policy.

E. Re-Authorization for Specialty Mental Health Services:

1. MH Providers will routinely document with collaborative activities in progress notes, the Adult Re-Assessment & Re-Authorization, the Annual Service Plan, or the Adult Medication Service Plan (AMSP) as indicated.
2. MH Providers will also document information on transfer of care to the PCP or steps toward that plan in progress notes, Annual Service Plan, and/or the discharge summary.

Form Reference:

N/A

IV. REFERENCES	Related Policies & Procedures	State/Federal Codes/Other References
	AMH P&P 04-01 Medication Treatment Algorithms AMH P&P 04-02 Primary Care Consultation Services AMH P&P 04-03 Primary Care Physician Collaboration QM P&P 07-06 Annual Medication Service Plan	State Federal Codes/other California Code of Regulation Title 9 1810.415(d) Memorandum of Understanding Between Sacramento County Division of Mental Health, Mental Health Plan and Geographic Managed Care Health Care Providers
V. CONTACTS	Name	E-mail
	J. Rod Kennedy, MFT, Program Manager Adult Access Team	kennedyR@saccounty.net
VI. SCOPE	<input checked="" type="checkbox"/> Mental Health Staff <input type="checkbox"/> Mental Health Treatment Center <input type="checkbox"/> Specific grant/specialty resource	<input checked="" type="checkbox"/> Adult Contract Providers <input type="checkbox"/> Children's Contract Providers