

County Name	Plan Code	MCP Plan Name (Auto Populates)	Reporting Year	Combined MOU Yes or No	MOU Type	Meeting Attendees	Topic: Care Coordination	Topic: Referrals	Topic: Dispute Resolution	Topic: Strategies to Avoid Duplication of Services	Topic: Collaboration	Topic: Member Engagement	
San Bernardino	306	Inland Empire Health Plan	2025	Yes	SMHS/DMC-ODS	<p><b>MHP:</b> Marina Espinosa, Assistant Director; Sarah Hayes, LCSW, Chief Quality Management Officer; David Block, MD, Associate Medical Director; Alicia Trivison, Senior Program Manager; Kimberlee Van, Administrative Manager; Keith Haigh, BH Informatics Manager; Research and Evaluation; Anthoula Poulakos, PhD, Research and Planning Psychologist; Susan Achuff, MS, LMFT, Program Manager II; Heather Louer, Program Manager I; Joshua Taylor; PsyD, Senior Program Manager; Kassandra Gomez; Olga Elena Granillo, LCSW, Clinical Supervisor-Managed Care Coordination Unit; Marlene Rangel, Social Worker II</p> <p><b>MCP:</b> Leslie Ruiz, County Programs Liaison, Integrated Care; Arlene Ferrer, County Programs Liaison, Integrated Care; Beth Donovan, Quality Manager, Quality Improvement Strategy; Brittany Corsaro, Behavioral Health Specialist, Integrated Care; Carlos Gaytan, Supervisor, Behavioral Health &amp; Care Management, Complex Children &amp; Adolescent Services</p> <p><b>MHP:</b> Sarah Hayes LCSW, Chief Quality Management Officer; Kimberlee Van, Administrative Manager; Alexis Ray, LCSW, Mental Health Clinic Supervisor; Anthoula Poulakos, PhD, Research and Planning Psychologist; Artemio Moran Program Specialist II; Christopher Bailey, Supervising Program Specialist; Olga Elena Granillo, LCSW, Clinical Supervisor -Managed Care Coordination Unit; Grace Cleveland, Staff Analyst II; Heather Louer, Program Manager I; Janet Montes De Oca, Office Assistant III; Joshua Taylor; PsyD, Senior Program Manager; La Mika Lydia, Program Manager I; Kinshasa Hamilton, Compliance Manager</p> <p><b>MCP:</b> Leslie Ruiz, County Programs Liaison, Integrated Care; Anita Holmes, Director of Integrated Care; Arlene Ferrer, County Programs Liaison, Integrated Care; Brian Colmenares, Manager, Behavioral Health &amp; Care Management, Integrated Care; Brittany Corsaro, Behavioral Health Specialist, Integrated Care; Carolyn Bowers</p>	<p><b>Finalized Administrative Risk (FAR) Score:</b> The finalized FAR score is available on the IEHP Portal under Eligibility search results for all IEHP members. Accessing the FAR score can assist in coordination of care for members who are most in need of critical care. Additionally, IEHP membership is segmented into a system that provides data-driven support for the distribution of disease management resources.</p> <p><b>Pharmacy Options in Needs:</b> There was a pharmacy closure in Needles. All prescriptions were transferred to other pharmacies, and moving forward members can use any of the three different pharmacies that are in the alternate areas near them.</p> <p><b>IEHP Community Supports:</b> Reported restructuring, rebranding, and redeployment of Community Supports, both internally and externally, standardizing processes and communication. Community Support Services help address members' related social needs - They help members live healthier lives. Qualified IEHP Members with one or more serious, chronic medical/behavioral conditions who meet Community Support Services criteria are eligible. Criteria for Community Supports is very strict; however, if a member is ECM eligible, they automatically meet the criteria for Community Supports. IEHP recommends SBDBH make the referral and then let IEHP decide internally whether the member meets the eligibility criteria.</p>	<p><b>Medi-Cal Expansion Initiative:</b> Eligible adults started receiving full-scope Medi-Cal effective January 1, 2024, which provides access to all primary preventative care specialists, pharmaceuticals and more. Expansion is for adults ages 26 through 49. This expansion is anticipated to impact MHP (SBDBH) due to members accessing mental health services.</p> <p><b>Universal Screening Tool/Transition Tool (Adults and Youth):</b> For the first quarter of the year, there were a total of 978 screening tools sent to SBDBH. The numbers were consistent each month: January - 311; February - 315; and March - 352. IEHP reported working with their in-network providers to increase these transition of care tools, educate, and train on the process of transitioning to the county.</p> <p><b>Improved Referral Submission Process:</b> IEHP Community Supports (CS) reported an Improved Referral Submission Process for Members to receive Community Support Services. The new process is simplified to allow the requestor to refer someone to community support.</p>	<p>No disputes occurred during the quarter and thus not discussed during the quarterly Joint Operations Meeting (JOM).</p> <p>Based on the results of this annual MOU review, SBDBH will dialogue with IEHP about adding this as a regular agenda item for the quarterly JOM meetings.</p> <p>Dispute resolution process has been discussed in ongoing MOU Policy &amp; Procedure collaboration meetings that occurred 1x/month throughout this MOU reporting period.</p>	<p>No disputes occurred during the quarter and thus not discussed during the quarterly Joint Operations Meeting (JOM).</p> <p>Based on the results of this annual MOU review, SBDBH will dialogue with IEHP about adding this as a regular agenda item for the quarterly JOM meetings.</p> <p>Dispute resolution process has been discussed in ongoing MOU Policy &amp; Procedure collaboration meetings that occurred 1x/month throughout this MOU reporting period.</p>	<p><b>Screening Tool and Transition of Care (TOC):</b> End-of-month Screening Tool and Transition of Care (TOC) reports were exchanged between SBDBH's Access Unit (Screening Tools), Managed Care Coordination Unit (Transition of Care Tools) and IEHP. This exchange helps reduce potential duplication of services. Aggregate data on Screening Tools and TOC's are presented as a regular agenda item in the quarterly JOM meetings.</p> <p><b>Screening Tool and Transition of Care (TOC):</b> End-of-month Screening Tool and Transition of Care (TOC) reports were exchanged between SBDBH's Access Unit (Screening Tools), Managed Care Coordination Unit (Transition of Care Tools) and IEHP. This exchange helps reduce potential duplication of services and ensure members are receiving non-specialty mental health services and/or Specialty Mental Health Services as appropriate based on their individual needs. Aggregate data on Screening Tools and TOC's are presented as a regular agenda item in the quarterly JOM meetings.</p>	<p><b>Monthly Equity, Diversity, Inclusion, &amp; Access Series:</b> IEHP announced that it is launching a monthly equity, diversity, and inclusion access series that their partners can participate in.</p> <p><b>Quality Improvement - DHCS Behavioral Health Collaborative:</b> IEHP applied for the DHCS Collaborative with SBDBH. The application was accepted and IEHP will assign representatives from its Quality Team and Quality Improvement Team.</p> <p><b>Enhanced Care Management:</b> IEHP Transportation Grievance Process was discussed.</p>	<p><b>Finalized Administrative Risk (FAR) Score:</b> The finalized FAR score is available on the IEHP Portal under Eligibility search results for all IEHP Members. The FAR score offers a statistically valid, case-mix methodology to offer a unique approach to measuring morbidity, improving accuracy in identifying members into one (1) of three (3) risk levels: High Risk, Rising Risk and Low Risk, and to forecast health care utilization. Accessing the FAR score can assist in coordination of care for members who are most in need of critical care. Additionally, IEHP membership is segmented into a system that provides data-driven support for the distribution of disease management resources.</p> <p><b>Managed Care Coordination Unit (MCCU):</b> SBDBH has established an ongoing dialogue with IEHP to ensure members needs are being met. The Managed Care Coordination Unit (MCCU) collaborates with the IEHP liaisons to address any specific members who have not been successfully connected, or who have complex care needs. SBDBH-MCCU staff facilitate connection to providers within our network. As this work is ongoing, in between quarterly meetings, it has not been extensively discussed during the meetings.</p> <p>Based on the results of this annual MOU review, SBDBH will dialogue with IEHP about adding this as a regular agenda item for the quarterly JOM meetings.</p>

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Many SBDBH members may access the Community Based Adult Services (CBAS) centers which are adult day health centers where members can go for assistance with activities of daily living. There is a mental health component to it as well and they have different modalities of therapies.</p> <p><b>New Tobacco Cessation Program:</b> There is a new Tobacco Cessation Program through the health education department. This is a new series and once all appropriate SBDBH staff have access to the Provider Portal they will be able to refer members to these services.</p> <p><b>Medically Tailored Meals Pilot:</b> IEHP Community Supports is working on a project that will focus on the Hispanic/Latino population with diabetes.</p>	<p><b>Universal Screening Tool/Transition Tool:</b> IEHP is now receiving a monthly report with member specific information from the SBDBH Access Unit to help ensure that all members have been successfully connected to a provider. Data was pulled from those reports to show the percentage of members that were Screening, Assessment &amp; Referral Center (SARC) eligible, as well as the percentage of members that were SARC eligible, and accepted into the SARC. Similarly, there is data related to overall call successes and hand-off acceptances for those members.</p> <p>IEHP is working on a report that shows when the member was referred and using encounter data throughout time to verify when they were linked and seen for therapy and psychiatry. If they are not showing that they've been linked and attended, IEHP has come up with a process to outreach to link member or assist with any barriers identified.</p>	<p>No disputes occurred during the quarter and thus not discussed during the quarterly Joint Operations Meeting (JOM).</p> <p>Based on the results of this annual MOU review, SBDBH will dialogue with IEHP about adding this as a regular agenda item for the quarterly JOM meetings.</p> <p>Dispute resolution process has been discussed in ongoing MOU Policy &amp; Procedure collaboration meetings that occurred 1x/month throughout this MOU reporting period.</p>	<p><b>Provider Portal:</b> Project to confirm that the appropriate SBDBH staff have access to submit BH screening and transition of care tools in the IEHP Provider Portal. IEHP to facilitate Provider Portal training for SBDBH.</p> <p><b>Eating Disorder Collaborative:</b> SBDBH now has two clinical therapists and are in the process of getting group and individual therapy going for some complex ED members. SBDBH is close to onboarding a contract that will bring on multiple dietitians who would be hired by SBDBH to work specifically with the complex eating disorder population.</p> <p>The information obtained through the labs helps SBDBH with its value-based metrics and sets.</p> <p><b>Provider Portal:</b> From a Quality Management standpoint, there are specific HEDIS measures related to labs, which makes it hard to get a SBDBH client to go to a lab. SBDBH pulls from labs and vitals that might be in Electronic Health Record (EHR) and inputs data into Care Director for a more complete picture of the member.</p>	<p><b>Managed Care Coordination Unit (MCCU):</b> DBH has established an ongoing dialogue with IEHP to ensure members' needs are being met. The Managed Care Coordination Unit (MCCU) collaborates with the IEHP liaisons to address any specific members who have not been successfully connected, or who have complex care needs. SBDBH-MCCU staff facilitate connection to providers within our network, as well as link our individual clinics/ providers to IEHP providers or liaisons as needed to address specific member needs or barriers to accessing or benefiting from services. As this work is ongoing in between quarterly meetings it has not been extensively discussed during the meetings.</p> <p>Based on the results of this annual MOU review, SBDBH will dialogue with IEHP about discussing overall themes during quarterly JOM meetings. Issues or barriers are generally addressed as soon as identified and DBH/IEHP do not wait for the next quarterly JOM to</p>
San Bernardino	356	Molina Healthcare of California Partner Plan, Inc.	2025	Yes	SMHS/DMC-ODS	<p><b>MHP:</b> Marina Espinosa, Assistant Director; Sarah Hayes, LCSW, Chief Quality Management Officer; Timothy Hogen, PhD, Deputy Director, OP Clinics and Youth Services; Elena Granillo, LCSW, Clinical Supervisor-Managed Care Coordination Unit; Keith Haigh, BH Informatics Manager, Research and Evaluation; Heather Louer, Program Manager I; Joshua Taylor, PsyD, Senior Program Manager; Kim Carson, LMFT, Health Systems Analyst III, Research and Evaluation; Kimberlee Van, Administrative Manager; Dahlia Avila, Clinical Therapist I; Kassandra Gomez</p> <p><b>MCP:</b> Elizabeth Whitteker, DBH, LCSW, Manager, Behavioral Health; Laurence Gonzaga, MA, Program Manager, Behavioral Health; Janelyn Martin, Dir, Case Management, RIV/SB/SD; Betsy Roberts, RDN, MBA, Manager, Health Care Services, RIV/SB; Gabriela Huerta, MA, Supervisor, Case Management, Children; Kennisha Gray, Program Coordinator, Government Contracts; <i>Health Element, BH, Public Care</i></p> <p>SBDBH has established an ongoing dialogue with Molina to ensure members needs are being met. The Managed Care Coordination Unit (MCCU) collaborates with the Molina liaisons to address any specific members who have not been successfully connected, or who have complex care needs. SBDBH-MCCU staff facilitate connection to providers within our network. As this work is ongoing in between quarterly meetings it has not been extensively discussed during the meetings.</p> <p>Based on the results of this annual MOU review, SBDBH will dialogue with Molina about ensuring overall themes from care coordination efforts are more fully reviewed during the quarterly meetings and documented in the minutes.</p>	<p>Molina and SBDBH exchange end-of-month reports to identify Screening Tools and Transition of Care (TOC) Tools that were sent/ received by each party. Individual issues regarding specific members is addressed outside of the quarterly meeting to ensure members are being connected to care quickly.</p>	<p>No disputes occurred during the quarter and thus not discussed during the quarterly Joint Operations Meeting (JOM).</p> <p>Based on the results of this annual MOU review, Department of Behavioral Health will dialogue with Molina about adding this as a regular agenda item for the quarterly JOM meetings.</p> <p>Dispute resolution has been discussed in ongoing MOU Policy &amp; Procedure collaboration meetings that occurred 1x/month throughout this MOU reporting period. Both parties are in agreement on process, should a dispute occur in the future.</p>	<p>End-of-month Screening Tool and Transition of Care (TOC) reports were exchanged between SBDBH's Access Unit (Screening Tools), Managed Care Coordination Unit (Transition of Care Tools) and Molina. This exchange helps reduce potential duplication of services.</p>	<p><b>Policies &amp; Procedures Workgroup:</b> Sarah Hayes appointed lead on the Policies &amp; Procedures workgroup to facilitate process with the MCPs.</p> <p><b>HEDIS Measures:</b> Follow-Up After Emergency Department Visit for Mental Illness (FUM) and Follow-Up After Emergency Department Visit for Alcohol and Other Drug Dependence (FUA) - Molina continues to send daily FUM/FUA related discharge data to SBDBH. POD data is also sent on a weekly basis.</p> <p>SBDBH has established an ongoing dialogue with Molina to ensure members needs are being met. The Managed Care Coordination Unit (MCCU) collaborates with the Molina liaisons to address any specific members who have not been successfully connected, or who have complex care needs. SBDBH-MCCU staff facilitate connection to providers within our network. As this work is ongoing in between quarterly meetings it has not been extensively discussed during the meetings.</p> <p>Based on the results of this annual MOU review, SBDBH will dialogue with Molina about adding this as a regular agenda item for the quarterly JOM meetings.</p>	

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**MHP:** Sarah Hayes, LCSW, Chief Quality Management Officer; Susan Achuff, MS, LMFT, Program Manager II; Dahlia Avila, Clinical Therapist I; Amber Carpenter, Deputy Director; Allison Cunningham, Senior Program Manager; Kassandra Gomez; Olga Elena Granillo, LCSW, Clinical Supervisor-Managed Care Coordination Unit; Matty Grounds, Program Manager II; Keith Haigh, BH Informatics Manager, Research and Evaluation; Kinshasa Hamilton, Compliance Manager; Luisa Limon, Program Manager I; Heather Louer, Program Manager I; Kimberlee Van, Administrative Manager; Maribel Vega, Clinical Therapist II

**MCP:** Randy Nater, LCSW, Director, Behavioral Health; Deborah Brockett; Janelle Clignett, RN, Peds Case Manager; Laurence Gonzaga, MA, Program Manager, Behavioral Health; Kennisha Gray, Program Coordinator, Government Contracts; Gabriela Huerta, MA, Supervisor, Case Management, Children; Patrice Jenkins; ~~Rafaela Roberts, RDN, MHA, Manager~~

Quarterly Joint Operations Meeting (JOM) occurred on November 4, 2024, however the official meeting minutes have yet to be approved, as they will be reviewed at the next quarterly meeting.

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Dispute resolution has been discussed in ongoing MOU Policy & Procedure collaboration meetings that occurred 1x/month throughout this MOU reporting period.

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