

# What's next?

ITUP 23rd Annual Conference • February 4-5, 2019

Sacramento Convention Center • 1400 J Street • Sacramento, California 95814



## ITUP 23<sup>rd</sup> Annual Pre-Conference Agenda

### Monday, February 4, 2019 – Pre-Conference

12:30 – 12:40 p.m.

**Welcome and Introduction**

12:40 – 1:30 p.m.

**Improving Medi-Cal Mental Health Services**

Mental health services in California evolved over time into a complex, decentralized system with counties as the primary providers of public mental health services. California adopted the Affordable Care Act (ACA) expansion of mental health services (and substance use disorder treatment services) in Medi-Cal. The state maintained the “carve out” of specialty mental health services, so that counties administer services for severe mental illness while Medi-Cal health plans cover mild-to-moderate conditions. How are counties and health plans working to coordinate physical and mental health services? How have other states organized mental health service delivery? How can the system reduce disparities in mental health diagnosis and treatment among population subgroups?

- **Alfredo Aguirre, LCSW** – Director, Behavioral Health Services, County of San Diego Health and Human Services Agency
- **Logan Kelly, MPH** – Senior Program Officer, Center for Health Care Strategies
- **Kiran Savage-Sangwan, MPA** – Deputy Director, California Pan-Ethnic Health Network
- **Catherine Teare, MPP** – Associate Director, High-Value Care Staff, California Health Care Foundation (Moderator)

1:30 – 1:45 p.m.

**Break**

1:45 – 2:40 p.m.

**Treating Addiction: Building a System of Care**

The Drug Medi-Cal (DMC) program provides medically necessary Substance Use Disorder (SUD) treatment services to Medi-Cal beneficiaries. SUD services are generally “carved out” of Medi-Cal managed care contracts, but health plans are required to screen and assess the need for SUD treatment among Medi-Cal enrollees. Under the terms of a federal Medicaid waiver, California is implementing a pilot to expand SUD benefits and gradually develop a DMC organized delivery system (DMC-ODS), as counties opt-in. What are the early lessons learned? What emerging issues, challenges and opportunities can help shape a client-centered system of care?

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- **John M. Connolly, PhD, MEd** – Interim Division Director, Los Angeles County Department of Public Health, Substance Abuse Prevention and Control Program
- **Rhyan A. Miller, MA** – Deputy Director, Forensics and Substance Abuse Prevention, Riverside University Health System, Behavioral Health Substance Abuse Prevention and Treatment Program
- **Rosemary Veniegas, PhD** – Senior Program Officer, California Community Foundation (Moderator)

2:40 – 3:10 p.m.

#### The Intersection of Criminal Justice and Behavioral Health

Individuals with behavioral health needs remain significantly overrepresented in the criminal justice system. The California Department of Corrections and Rehabilitation reports that, in June 2017, 28% of the in-custody population, or 36,400 individuals, had some type of mental health condition, while 40% had a SUD treatment need. Under the ACA, low-income adults leaving prison are eligible for Medi-Cal, but they must navigate a complex health care system to access services and treatment. Given the health implications, as well as the public safety impact, learn what the state is doing to help reentry individuals enroll in Medi-Cal and access the services they need.

- **Stephanie Welch** – Executive Officer, Council on Criminal Justice and Behavioral Health, California Department of Corrections and Rehabilitation
- **Molly Brassil** – Director, Behavioral Health Policy, Harbage Consulting (Moderator)

3:10 – 3:30 p.m.

#### Wrap-Up