

# Behavioral Health Services for HPSM members

San Mateo County Board of Supervisors BHRS Study Session

Courtney Sage, LCSW, Director of Behavioral Health

September 9, 2025

# What we will cover

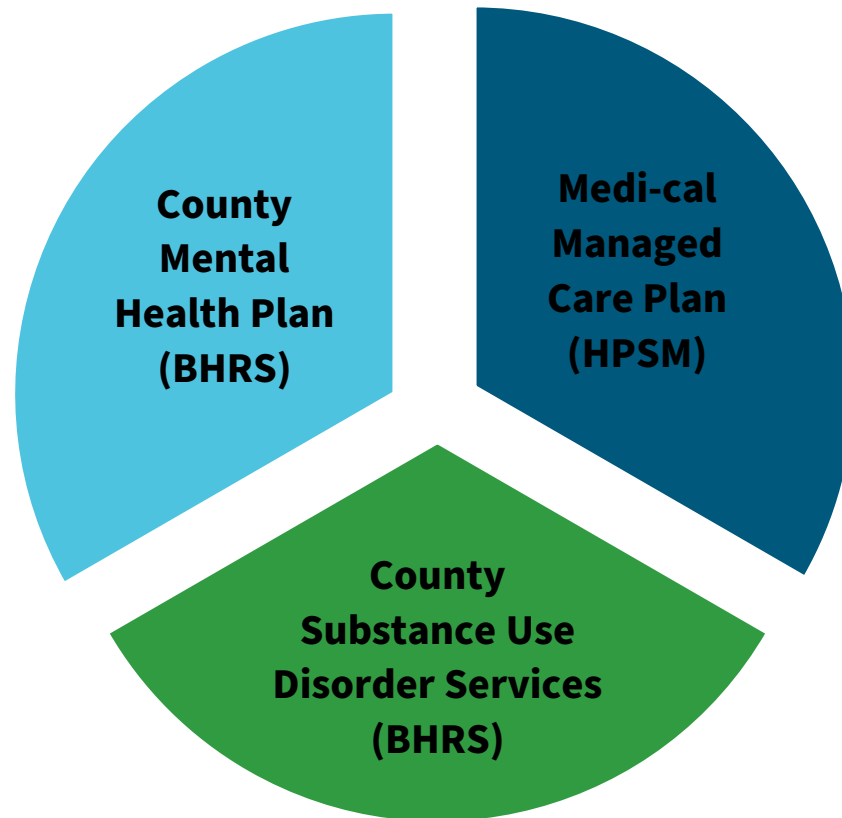


- **Behavioral Health Coverage and Structure in San Mateo County**
- **HPSM's Role, Responsibilities and Approach**
- **How HPSM and BHRS Partner to Meet Our Shared Member Needs**

# Behavioral Health Coverage Structure

Several parties may be involved in the management of the Medi-Cal Behavioral Health Benefit for a member

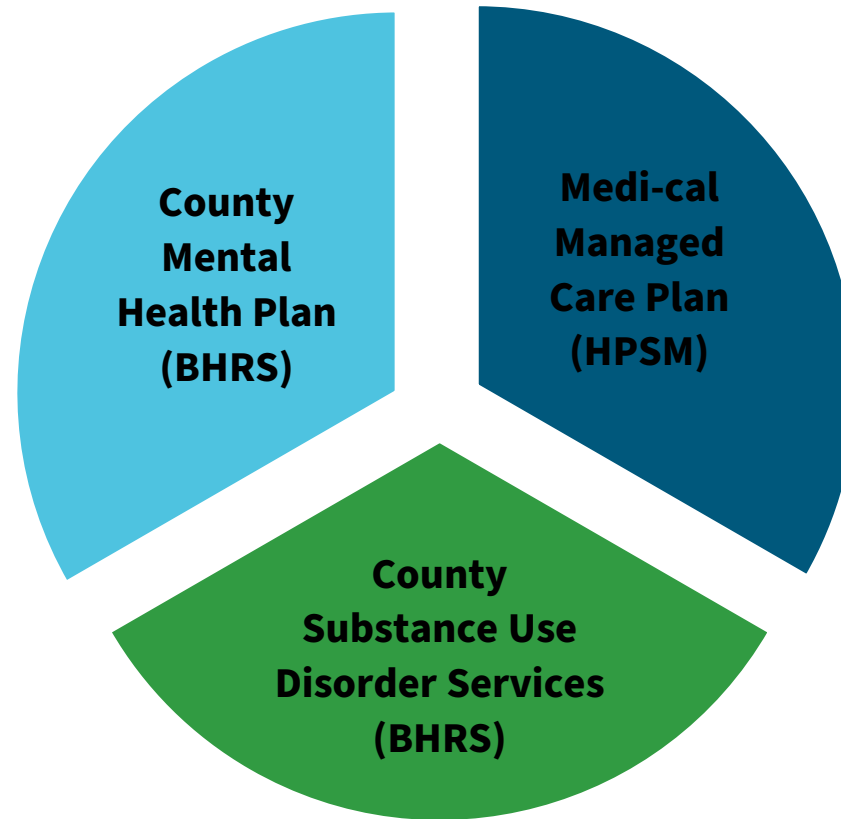
- Managed Care Plan (HPSM)
  - Non-specialty Mental health (NSMH)
  - Applied Behavioral Analysis (under 21 only)
- Mental Health Plan-(BHRS)
  - Specialty Mental Health (SMH)
- Drug Medi-Cal Organized Delivery System(BHRS)
  - Substance use treatment



# Systems of Care

## Service Examples:

- Medication support
- Case management
- Crisis Services
- Residential
- Inpatient



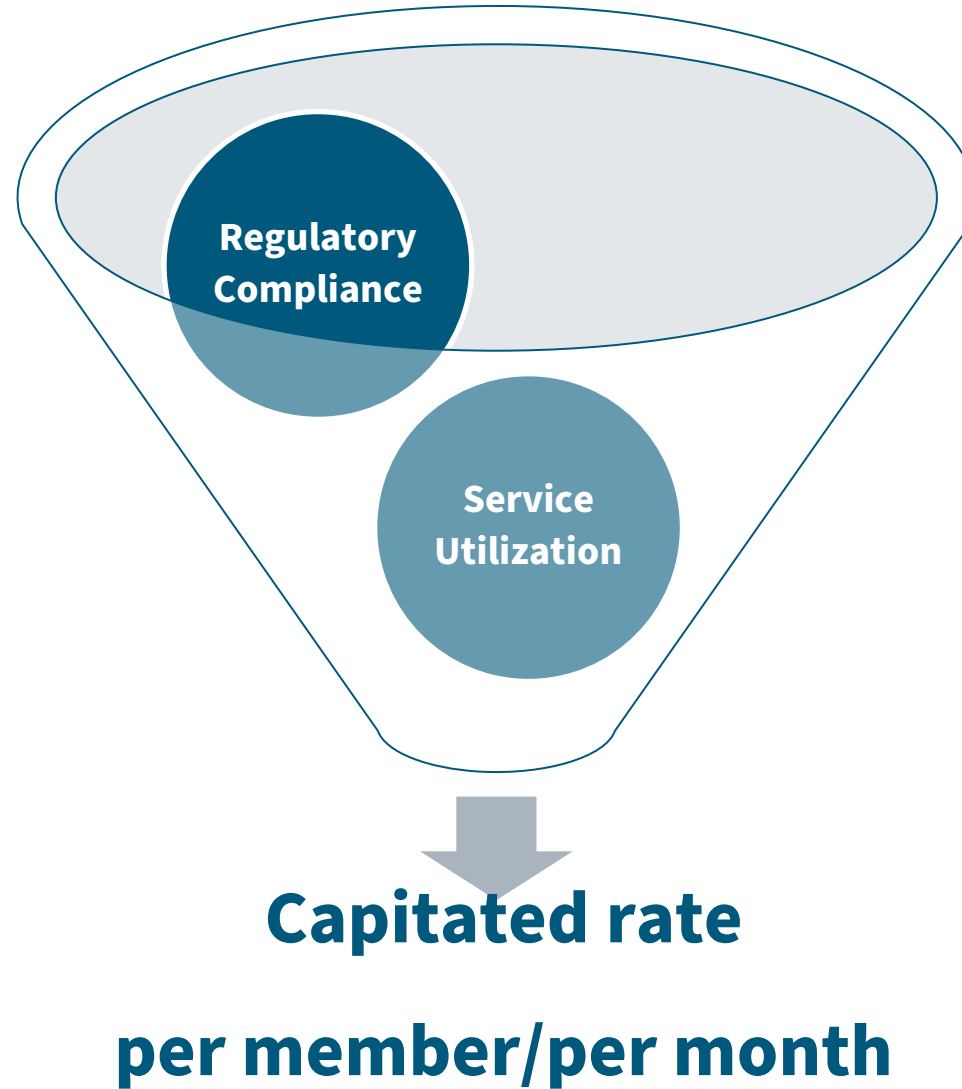
## Service Examples:

- Talk Therapy
- Medication support

## Service Examples:

- Outpatient Recovery Services
- Withdrawal management
- Residential

# Managed Care Plan Medi-Cal funding



# HPSM Role, Responsibilities and Approach

# HPSM Lines of Business and Eligibility

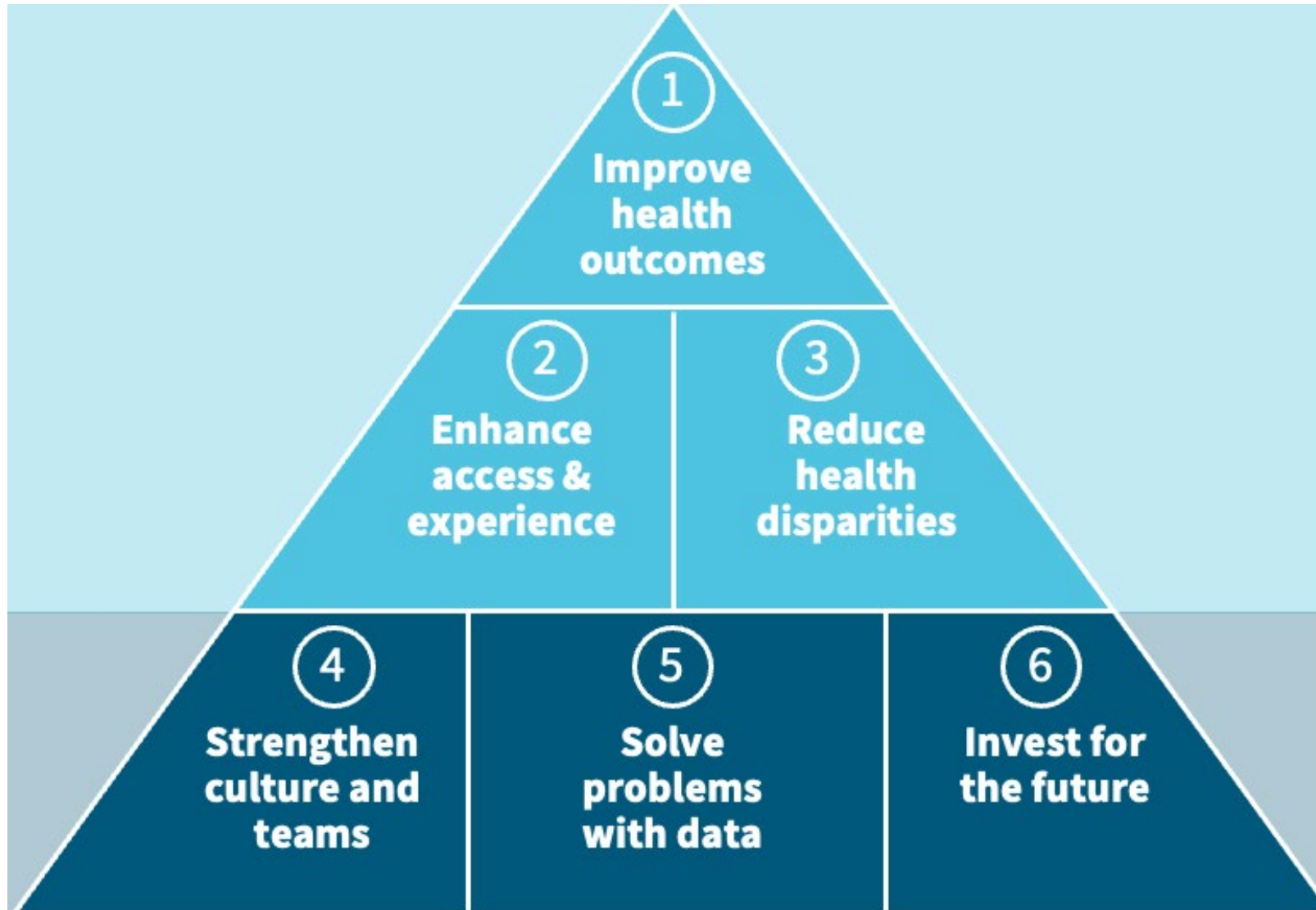


## HPSM Healthcare Programs

|                             |   | Membership*     |
|-----------------------------|---|-----------------|
| <b>Medi-Cal</b>             | California's Medicaid healthcare plan covering medical services for children and adults with limited income and resources                       | <b>140,500+</b> |
| <b>CareAdvantage</b>        | A Dual Eligible Special Needs Plan (D-SNP) providing specialized care and wraparound services to people eligible for both Medicare and Medicaid | <b>8,300+</b>   |
| <b>HealthWorx HMO</b>       | Coverage for In-Home Support Services providers and eligible employees of the City of San Mateo   | <b>1,200+</b>   |
| <b>San Mateo County ACE</b> | Locally funded plan administered by HPSM for low-income adults who do not qualify for other health insurance                                    | <b>1,000+</b>   |

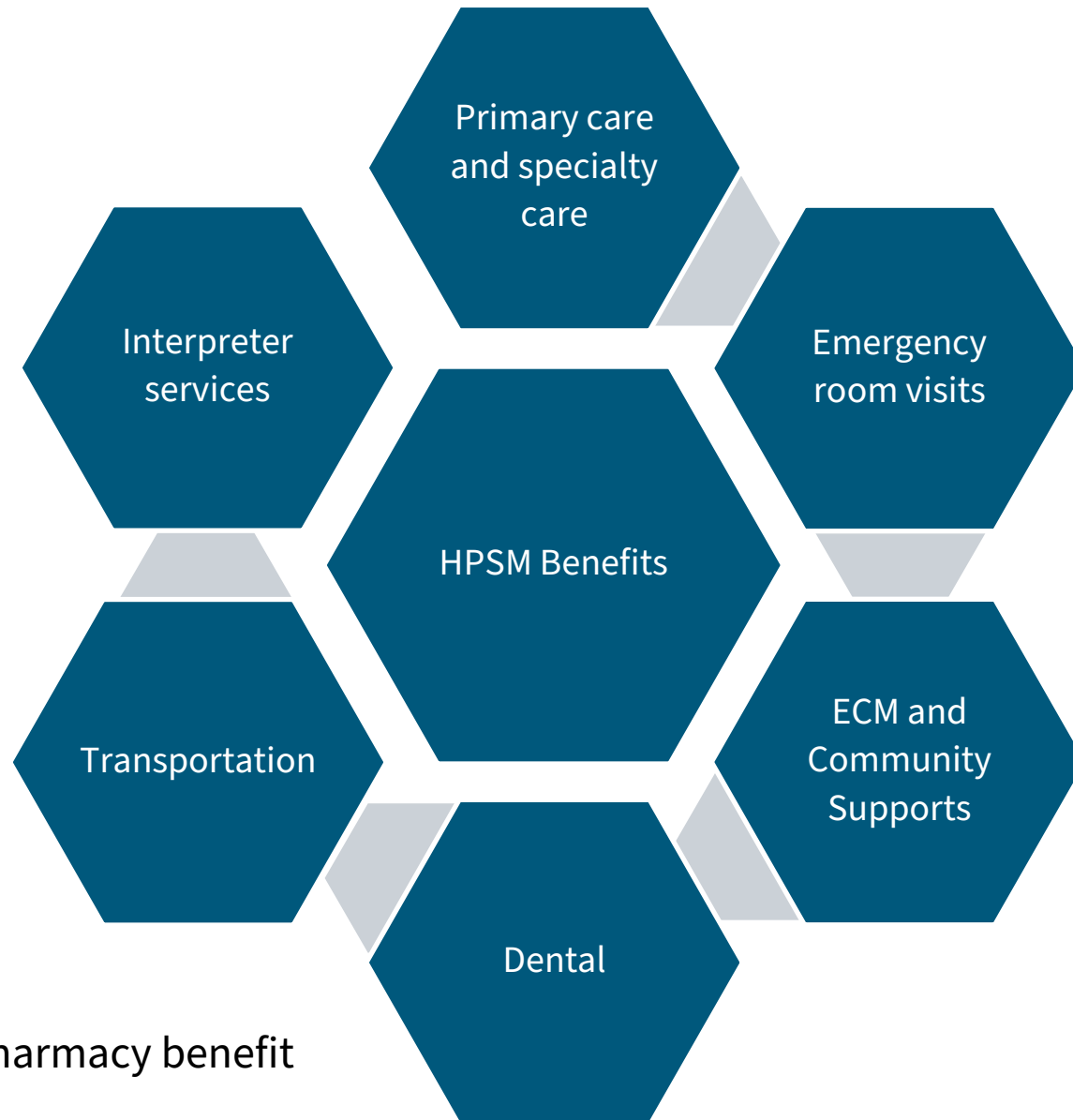
\* As of 2/4/25

# HPSM Strategic plan





# Other benefits and services for HPSM member:



\*DHCS manages the pharmacy benefit

# Non-Specialty Mental Health (NSMH)-July 2025

## Member requests (NSMH)

**394** average members per month-2025

**99%** members matched within regulatory timelines-July 2025

## Network Access

**300+** Mental health Providers in the network

**135+** Individual and groups serving HPSM members

## Appointment availability

**2** Provider groups have **76** patient openings for medication support

**10** Provider groups have **557** patient openings for therapy



# How we measure access

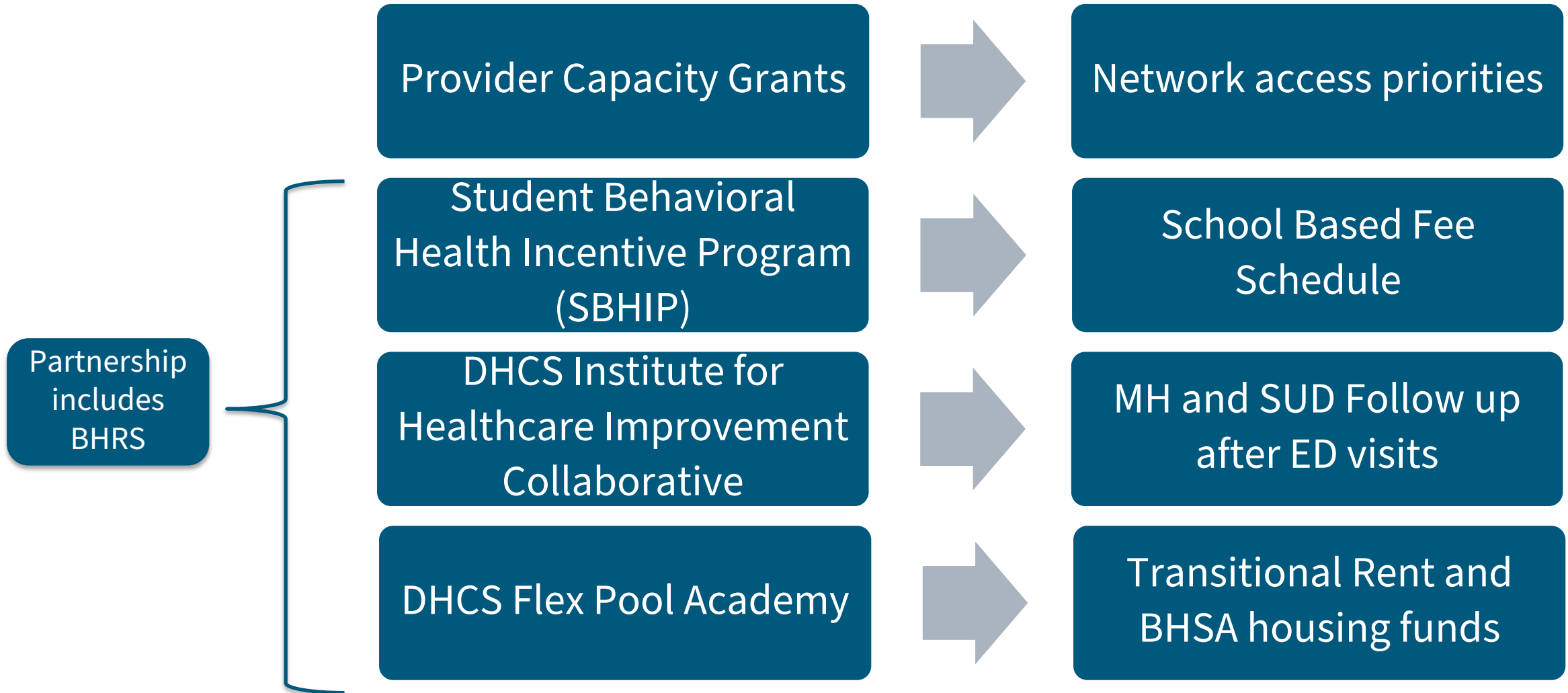
X Axis: HPSM Member Access Priority

| Access Category                    | Examples   |
|------------------------------------|--|
| <b>Contract Sufficiency</b>        | <ul style="list-style-type: none"> <li>• Geographic Access</li> <li>• Provider Ratios</li> </ul>                                     |
| <b>Real World Availability</b>     | <ul style="list-style-type: none"> <li>• Grievances</li> <li>• Appointment Availability</li> <li>• Single Case Agreements</li> </ul> |
| <b>Population Needs Assessment</b> | <ul style="list-style-type: none"> <li>• HPSM Population Needs Assessment</li> </ul>   |
| <b>Voices of the Community</b>     | <ul style="list-style-type: none"> <li>• Qualitative Feedback from members, providers, community partners and staff.</li> </ul>      |

**In Brief:** When determining network priorities.....

- We collect and analyze relevant access category data.
- We then use a framework to prioritize efforts that takes into consideration reach, impact, confidence, effort and voices of the community.

# Partnerships and Special Projects



How HPSM and BHRS partner to meet our shared member needs

# Behavioral Health in the Medi-Cal system

## Managed Care Plan (HPSM)

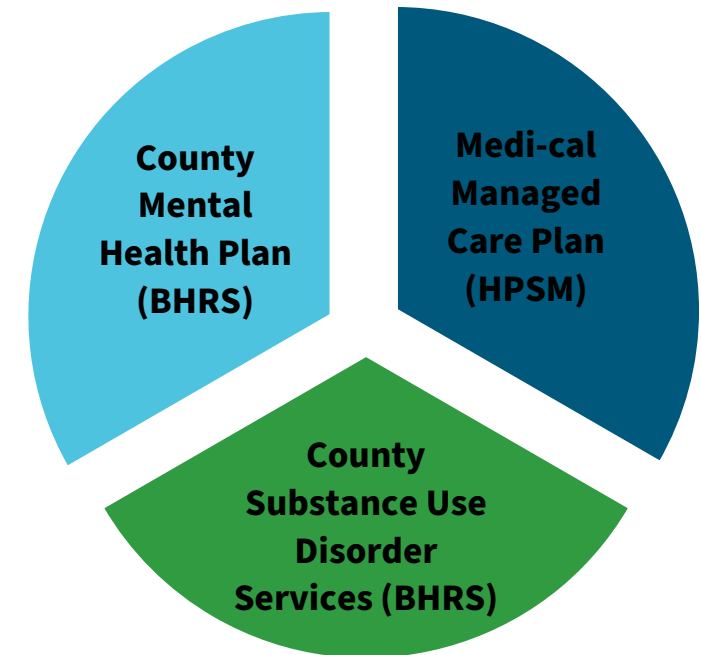
- Non-specialty Mental health (NSMH)-**17,365 (12.4%)**
- BHT/ABA (under 21 only)- **Approx. 400**

## Mental Health Plan (BHRS)

- Specialty Mental Health (SMH)-**11,015 (8%)**

## Drug Medi-Cal Organized Delivery System)( BHRS)

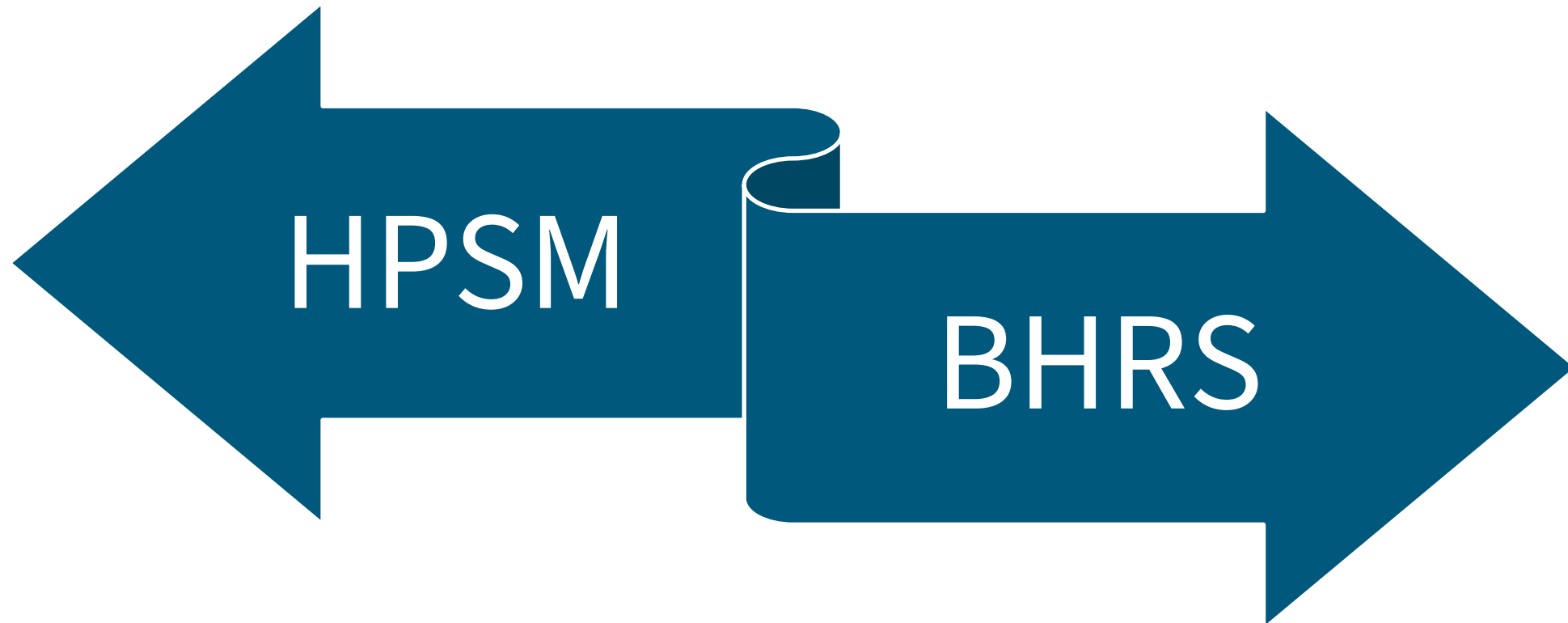
- Substance use treatment -**1,271 (2025)**



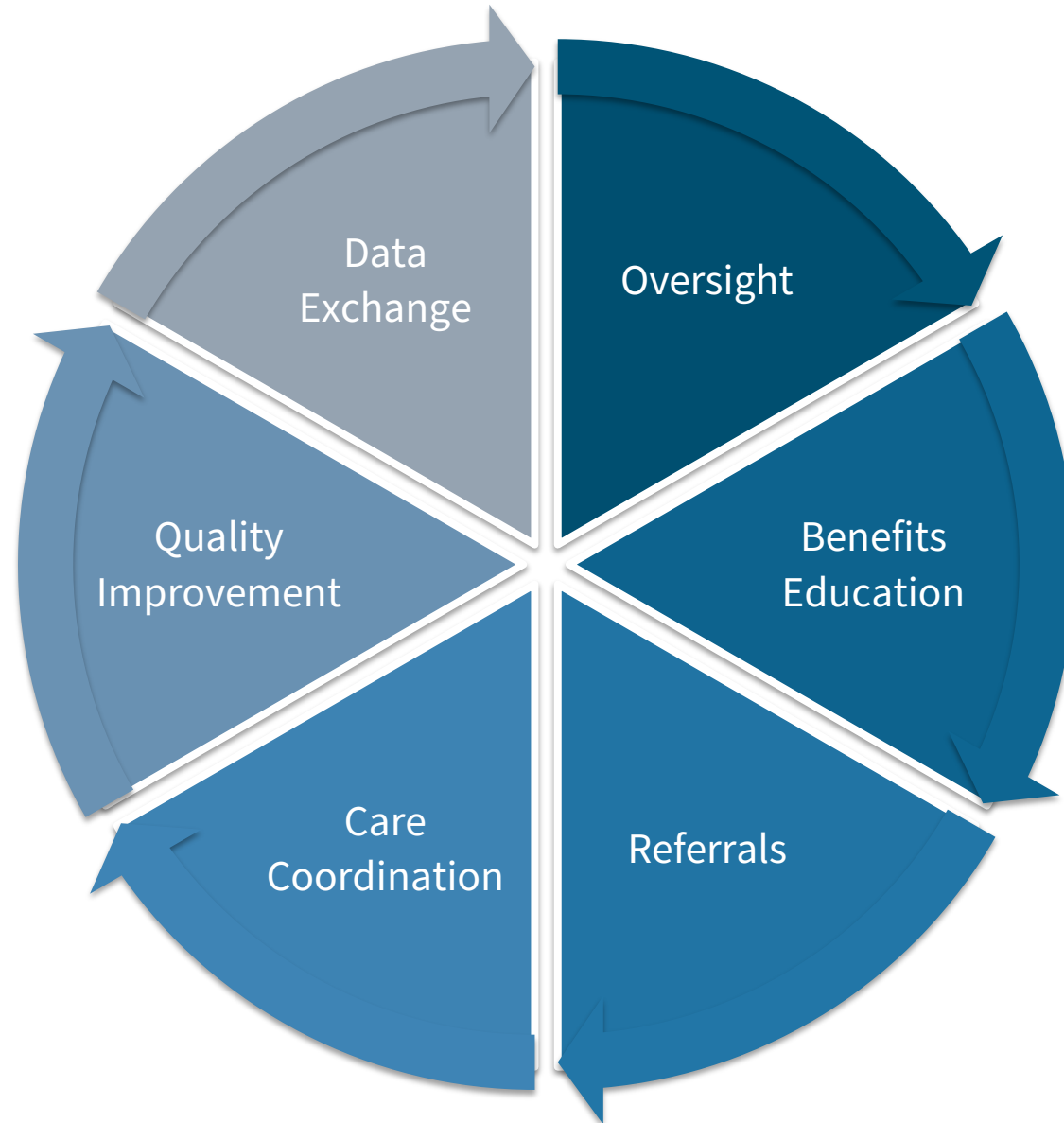
A shared line for members to access all BH services



**The Access number, 800-686-0101, is on the back of all HPSM membership cards**



# Partnership Structure





# Highlighting Success



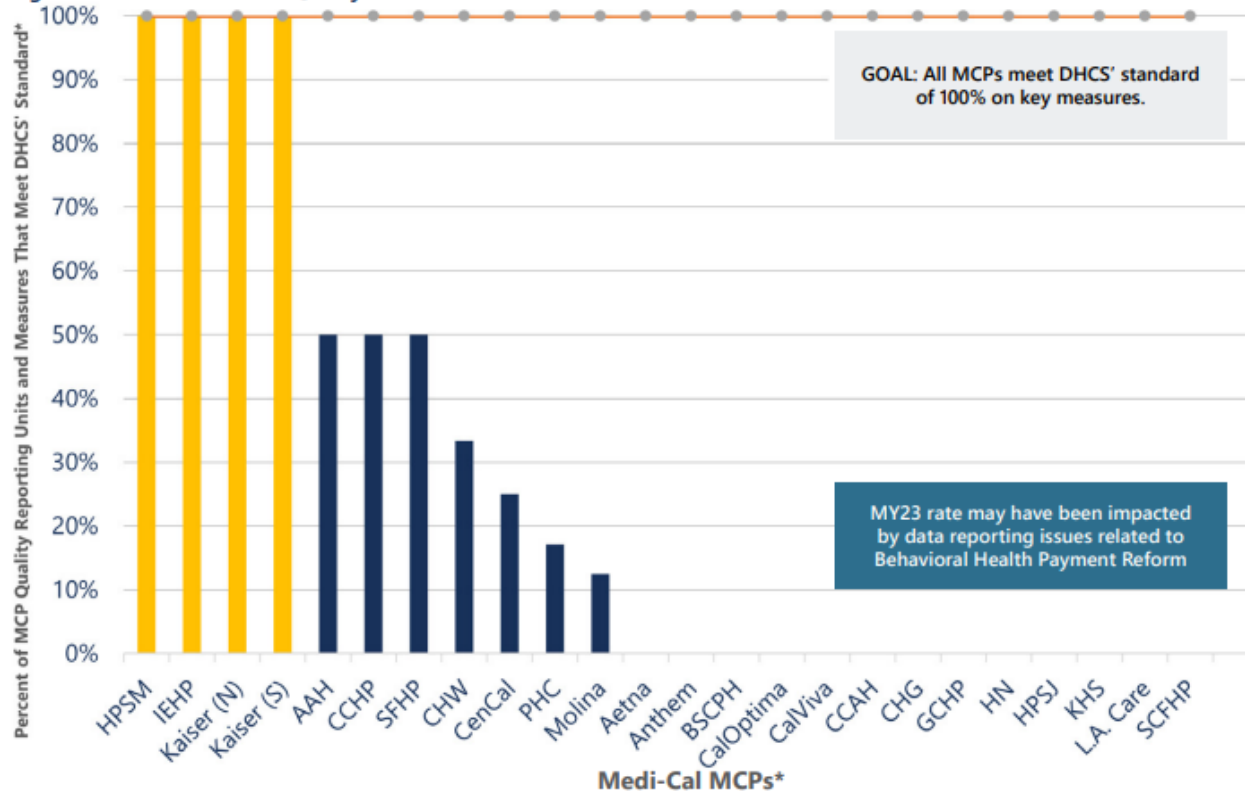
## BEHAVIORAL HEALTH: HOW DO MEDI-CAL MCPs COMPARE IN QUALITY?

There are **two key measures** in the Behavioral Health Domain.

1. Follow-Up After Emergency Department Visit for Mental Illness (FUM-30)
2. Follow-Up After Emergency Department Visit for Alcohol and Other Drug Abuse or Dependence (FUA-30)

To assess overall quality, DHCS evaluated whether MCP Quality Reporting Units for each MCP meet or exceed DHCS' standard for each key measure. Figure 9 shows the percentage of MCP Quality Reporting Units within each MCP that successfully meet these standards across all key measures for Behavioral Health.

**Figure 9: Behavioral Health Quality**



\*DHCS' standard is based on national averages or median benchmarks for Medicaid plans. See Appendix for a list of MCP Quality Reporting Units.

### HPSM, IEHP, Kaiser NorCal, and Kaiser SoCal

met or exceeded  
DHCS' standard for all  
behavioral health measures

### 17% of all MCPs

met or exceeded DHCS'  
standard for all measures

**Overall quality in Behavioral Health decreased compared to last year (from 58% to 48% of MCP Quality Reporting Units meeting the DHCS standard).**

**Opportunities for improvement include enhancing care coordination and data collection across delivery systems.**

Thank you