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- Imperial
- Riverside/San Bernardino
- Los Angeles
- Orange
- Sacramento
- San Diego

LINES OF BUSINESS:

- Molina Medi-Cal Managed Care
- Molina Medicare Options Plus
- Molina Dual Options Cal MediConnect Plan (Medicare-Medicaid Plan)
- Molina Marketplace (Covered CA)

PROVIDER TYPES:

- Medical Group/ IPA/MSO**

Primary Care

- IPA/MSO
- Directs

Specialists

- Directs
- IPA

 Hospitals**Ancillary**

- CBAS
- SNF/LTC
- DME
- Home Health
- Other

FOR QUESTIONS CALL**PROVIDER SERVICES:**

(888) 562-5442, Extension:

Los Angeles/Orange Counties

X123017

Riverside/San Bernardino Counties

X120613

Sacramento County

X125682

San Diego County

X121735

Imperial County

X125682

Alcohol Misuse: Screening and Behavioral Counseling Interventions in Primary Care in the COVID-19 Environment (APL 18-014)

This is an advisory notification to Molina Healthcare of California (MHC) network providers regarding MHC's obligations to provide Alcohol Misuse: Screening and Behavioral Counseling Interventions in Primary Care, also known as Alcohol Misuse Screening and Counseling (AMSC), services for MCP members ages 18 and older who misuse alcohol, especially now during the COVID-19 pandemic.

COVID-19 increases the likelihood for an individual to experience stress and anxiety which directly impacts an individual's ability to cope – especially for individuals trying to maintain sobriety. As a result, individuals may increase the use of alcohol as a method of coping with stressful circumstances.

It is more important than ever that our providers assess for alcohol use among adults, youth and young adults as research has found post quarantine outcomes leading to PTSD, Depression, and Alcohol Use.

This notification is based on the current **All Plan Letter (APL) 18-014, Alcohol Misuse: Screening and Behavioral Counseling Interventions In Primary Care**, which can be found in full on the DHCS website at:

<http://www.dhcs.ca.gov/formsandpubs/Pages/AllPlanLetters.aspx>.

BACKGROUND:

In May 2013, the United States Preventive Services Task Force (USPSTF) updated its alcohol screening recommendation. The USPSTF recommends that clinicians screen adults ages 18 years or older for alcohol misuse. Members engaged in risky or hazardous drinking shall be provided with brief behavioral counseling interventions to reduce alcohol misuse and/or referral to mental health and/or alcohol use disorder services, as medically necessary.

Existing policy requires primary care providers (PCPs) to screen members as part of routine care. For adults, PCPs must offer an Individual Health Education Behavioral Assessment (IHEBA) or other approved tool (i.e., Staying Healthy Assessment – SHA) within 120 days after enrollment and every three years, with annual reviews of the member's answers. The IHEBA must include an alcohol-screening question recommended by the USPSTF.

Final Rule Requirement:

The Final Rule applied certain requirements from the Mental Health Parity and Addiction Equity Act of 2008 (Pub. L. 110-343, enacted on October 3, 2008) to coverage offered by Medicaid Managed Care Organizations. This included the addition of Subpart K – Parity in Mental Health and Substance Use Disorder Benefits to the Code of Federal Regulations (CFR). The general parity requirement

(Title 42 CFR §438.910(b)) stipulates that treatment limitations for mental health benefits may not be more restrictive than the predominant treatment limitations applied to medical or surgical benefits. MHC must be in compliance with the Mental Health Parity rule on October 2, 2017, as required by Title 42 CFR §438.930.

As a result of the Mental Health Parity (CMS-2333-F), the AMSC training requirements for providers have been revised. MHC policies and procedures reflect that providers in primary care settings must offer and document AMSC services according to requirements that are found in the Medi-Cal Provider Manual and the most current DHCS APL.

Requirements:

- MHC is required to cover and pay for an expanded alcohol screening for members 18 years of age and older who answer “yes” to the alcohol question in the SHA/IHEBA (considered a “pre-screen” in the current APL), or at any time the PCP identifies a potential alcohol misuse problem.
- MHC shall cover and pay for behavioral counseling intervention(s) for members who screen positively for risky or hazardous alcohol use or a potential alcohol use disorder.
- Provider Requirements:
 - Primary care providers (PCPs) may offer AMSC in the primary care setting as long as they meet the following requirements:
 - AMSC services may be provided by a licensed health care provider or staff working under the supervision of a licensed health care provider, including but not limited to, the following:
 - Licensed Physician
 - Physician Assistant
 - Nurse Practitioner
 - Psychologist
 - At least one supervising licensed provider per clinic or practice may take four hours of AMSC training after initiating AMSC services. The training is not required; however, it is recommended.
- Alcohol Misuse Screening:
 - When a member answers “yes” to the SHA/IHEBA alcohol pre-screen question, MHC must ensure that the PCP offers the member an expanded, validated alcohol screening questionnaire.
 - MHC must allow each member at least one expanded screening, using a validated screening tool, every year.
 - MHC must ensure that PCPs maintain documentation of the SHA/IHEBA and the expanded screening.
- Behavioral Counseling Interventions for Alcohol Misuse:
 - Providers must offer behavioral counseling intervention(s) to those members that a provider identifies as having risky or hazardous alcohol use when a member responds affirmatively to the alcohol question in the SHA/IHEBA, provides responses on the expanded screening that indicate hazardous use, or when otherwise identified.
 - MHC must allow each member at least three behavioral counseling intervention sessions per year. Providers may combine these sessions in one or two visits or administer the sessions as three separate visits. Additional behavioral counseling interventions can be provided if medical necessity has been determined by the member’s provider.
- Referral to Mental Health and/or Alcohol Use Disorder Services:
 - Providers must refer members who, upon screening and evaluation, meet criteria for an alcohol use disorder as defined by the Diagnostic and Statistical Manual of Mental Disorders (DSM) or whose diagnosis is uncertain, for further evaluation and treatment to

the County Department for alcohol and substance use disorder treatment services or DHCS-certified treatment program.

Please note that MHC is subject to State regulatory audits and is responsible for ensuring downstream compliance with State program initiatives and requirements. As such, PCPs and Independent Physician Associations (IPAs) must ensure that internal operations are consistent and compliant with these requirements. MHC may conduct periodic audits and request copies of applicable policies and procedures and/or documentation that demonstrates compliance within your organization. Failure to submit any requested documents may result in a Corrective Action Plan.

QUESTIONS

If you have any questions regarding the notification, please contact your Molina Provider Services Representative at (888) 562-5442. Please refer to the extensions on page one.