

Non-Specialty Mental Health Services Outreach and Education Plan

1. Introduction and Overview

California Senate Bill (SB) 1019 requires GCHP to develop and implement an annual outreach and education plan for members and primary care providers (PCPs) regarding mental and behavioral health services that (1) meets cultural and linguistic appropriateness standards; (2) incorporates best practices in stigma reduction; and (3) provides multiple points of contacts for members to access mental and behavioral health services.

The Gold Coast Health Plan (GCHP) Non-Specialty Mental Health Service (NSMHS): Member Outreach and Education Plan ("the Plan") outlines how GCHP works to increase NSMHS utilization through outreach and education to both members and providers. Informed by stakeholder and tribal partner engagement and aligned with the Population Needs Assessment and NSMHS Utilization Assessment, the NSMHS Outreach & Education Plan incorporates Culturally and Linguistically Appropriate Services (CLAS) standards and best practices in stigma reduction, ensures multiple points of contact for Member access, and includes specific outreach and education for PCPs and other care team and community members.

The Plan includes the following:

- 1. Introduction and Overview
 - a. Medi-Cal Mental Health Services
- 2. NSMHS Outreach and Education Plan Development
 - a. Stakeholder and Tribal Partner Engagement
 - b. Alignment with Population Needs Assessment and NSMHS Utilization Assessment
 - c. National Standards for Culturally and Linguistically Appropriate Services (CLAS) Coordination with Utilization Assessment
 - d. Best Practices in Stigma Reduction
 - e. Multiple Contact Points for Member Access
- 3. Outreach & Engagement: Members



4. Outreach & Engagement: Primary Care Providers

This Plan will be updated annually and revised in alignment with current needs and utilization assessments and according to learnings from the Health Equity and Disparity Reduction Report beginning in 2025.

a. Medi-Cal Mental Health Services

GCHP provides or arranges mental health benefits for specialty and non-specialty mental health services for Medi-Cal members. These benefits include but are not limited to mental health evaluation and treatment, psychotherapy, psychiatric consultation, outpatient residential treatment, and inpatient services. GCHP delegates NSMHS to Carelon Behavioral Health to services for Medi-Cal members, while Ventura County Behavioral Health (VCBH) administers specialty mental health services (SMHS), and substance use treatment. To direct members to the appropriate level of care, GCHP, Carelon, and VCBH screen members using the approved, age-appropriate screening tools from the Department of Health Care Services (DHCS).¹

2. NSMHS Outreach and Education Plan Development

a. Stakeholder and Tribal Partner Engagement

GCHP puts in place interventions to ensure that Medi-Cal members receive timely access to high-quality culturally and linguistically appropriate mental health services. Stakeholder input guides GCHP's outreach and education strategies to increase utilization of NSMHS services and to ensure PCPs and members have current, accurate, and easily accessible information about accessing Medi-Cal mental health services.

GCHP engages key stakeholder groups² to gather and incorporate input from a diversity of member and provider perspectives, including age groups, racial and ethnic community, and other groups experiencing high rates of mental health concerns. Key stakeholders include the Community Advisory Committee (CAC), the Provider Advisory Committee (PAC), the Quality Improvement and Health Equity Committee (QIHEC), the Central Coast Regional Collaborative, Mixteco Indígena Community Organizing Project (MICOP), Partnership for Safe Families, Carelon Behavioral Health, Community Action, Interface, Children and Family Services, and the County Behavioral Health Plan, Ventura County Behavioral Health (VCBH).

¹ APL 22-028 - Adult and Youth Screening and Transition of Care Tools for Medi-Cal Mental Health Services

² GCHP made multiple good-faith outreach efforts, including contact with multiple community-based organizations (CBOs) and tribal partners but did not receive a response as of the date of publication. GCHP will incorporate any future input into future revisions.



Key issues that emerged include members' limited awareness about NSMHS, PCPs lacking knowledge about how to refer to NSMHS, a shortage of linguistically matched providers, insufficient referral tracking tools, lack of warm handoffs to services, difficulty navigating and persisting in a complicated system, and the need to address mental health stigma. While outside the scope of this Plan, stakeholder input also informs our efforts to adapt our health care delivery system to the needs of our members.

b. Alignment with Population Needs Assessment and NSMHS Utilization Assessment

The NSMHS Outreach and Education Plan aligns with the GCHP Population Needs Assessment and the NSMHS Utilization Assessment.

The NSMHS Utilization Assessment highlighted trends in mental health utilization, providing evidence to support targeted outreach on available telehealth and outpatient services. GCHP leveraged this information to develop materials to educate members and PCPs about multiple ways to access NSMHS and SMHS and about telehealth and in-person options available for NSMHS. Additionally, GCHP and Carelon partnered to determine new, preferred avenues for communication to members and providers.

GCHP analyzed the Population Needs Assessment Report³ and found that there are key demographics that are not available in our system or are not transmitted to our NSMHS delegate, Carelon Behavioral Health. This necessitates improvement in data collection and reporting to ensure that race, ethnicity, language, sexual orientation, gender identity, and disability status are routinely reported and thus be able to identify populations potentially underutilizing NSMHS. GCHP leadership prioritized data collection for these important data elements in 2025 to inform future NSMHS outreach and education planning.

c. Alignment with the National Culturally and Linguistically Appropriate Services (CLAS) Standards

GCHP is committed to providing effective, equitable, understandable, and respectful quality care and services that are responsive to members: diverse cultural health beliefs and practices, preferred languages, health literacy, and other communication needs. Our Health Education, Cultural and Linguistic Services Department and Community Relations teams partner with local clinics, providers, and hospitals to offer quality health education resources and collaborates with organizations to educate and advocate for our members and community. GCHP conducts readability reviews of all member-facing materials and ensures they meet the reading level set by DHCS. All member-facing materials are available in English and Spanish. GCHP contracts with several language assistance vendors and has qualified translators and interpreters. Members may find

³ The 2023 Population Needs Assessment can be found at: <u>https://www.goldcoasthealthplan.org/health-resources/population-needs-assessment/</u>



information about language assistance services on the GCHP website, in provider offices, the member handbook, newsletters, and through direct mailings.

GCHP members have access to language assistance services, including materials in alternative formats, auxiliary aids, and other services upon request. These services are available to members at no cost⁴. GCHP conducts Spanish bilingual fluency assessments of all employees who are bilingual (English and Spanish) and who have direct contact with members. GCHP contracts with Pacific Interpreters, Inc., also known as LanguageLine Solutions, to conduct the telephonic Spanish bilingual fluency assessment. GCHP highly recommends the use of qualified medical interpreters during health care encounters. Members do not need to use a family member or friend as an interpreter. GCHP offers language assistance services to members who have limited English proficiency and/or other communication needs to facilitate timely access to all health care and services.

Language assistance services include, but are not limited to:

- 1. **Oral interpreting** services from a qualitied interpreter. This includes in-person and virtual interpreting.
- 2. Sign language interpreting for deaf and hearing-impaired members.
- 3. **Translation** of written materials in a preferred language.
- 4. Telephone interpreting 24 hours a day, seven days a week.
- 5. **Alternative format** for Braille, audio format, large print (20-point Arial font), and accessible electronic formats, as well as other auxiliary aids and services for people with disabilities.

To request language assistance services, email <u>CulturalLinguistics@goldchp.org</u> or call **1-805-437-5961**, Monday through Friday, 8 a.m. to 5 p.m. (except holidays). If you use a TTY, call **711.** To learn more visit <u>www.goldcoasthealthplan.org</u>.

d. Best Practices in Stigma Reduction

GCHP is dedicated to educating members and PCPs by consistently sharing accurate and up-to-date information to eliminate myths and stereotypes surrounding mental and behavioral health. By prioritizing the reduction of stigma and misconceptions and using person-first, non-pathologizing language, GCHP's approach promotes emotional health and well-being.

Examples of how GCHP raises awareness of mental health and well-being include:

⁴ Gold Coast Health Plan Language Assistance Service information can be found at: <u>https://www.goldcoasthealthplan.org/for-members/language-assistance-services/</u>





- 1. **Resource Sharing:** GCHP provides members with accurate, up-to-date resources through newsletters, handbooks, health libraries, health education materials, and our website. This content uses inclusive language to educate and normalize mental health.
- 2. **Community Engagement:** GCHP actively participates in community events, health fairs, and health education workshops with a focus on mental health awareness and education.
- 3. **Cultural Competence:** GCHP ensures all messaging is culturally appropriate and resonates with our diverse population, fostering a deeper understanding of mental health issues ultimately leading to improved access and health outcomes.

GCHP will continue to provide accessible, reliable, and evidence-based resources for members and primary care physicians, contributing to the well-being of our community and promoting support for mental health equity.

e. Multiple Contact Points for Member Access

There are multiple ways members may access mental/behavioral health services. GCHP ensures Medi-Cal members can access the right care in the right place and time through a "no wrong door⁵" approach.

GCHP does not require a referral or prior authorization for NSMHS and complies with all No Wrong Door requirements (APL 22-005) to streamline members' access to mental/behavioral health care throughout the NSMHS and SMHS systems of care.

Members may access NSMHS in some of the following ways:

- 1. Search for a provider through the Carelon <u>Provider Directory.</u>
- 2. Contact in-network providers directly for care, treatment, and services.
- 3. Call Carelon Case Management line at 1-800-228-1286 (TTY: 1-800-735-2929). Hours: Monday-Friday, 8:30 a.m. to 5 p.m.
- 4. Call **Carelon Customer Service at 1-855-765-9702** (TTY: **1-800-735-2929**). Hours: Monday-Friday, 8 a.m. to 5 p.m.
- 5. Call **GCHP Member Services at 1-888-301-1228** (TTY: **711**). Hours: Monday-Friday, 8 a.m. to 5 p.m.
- 6. Call the number on the back of their GCHP membership card.
- 7. Access information about available Medi-Cal behavioral health services on the GCHP website at <u>https://www.goldcoasthealthplan.org/for-members/health-and-wellness-services/mental-health-services/</u>.

Referrals are never required; however, care team members such as case managers,

⁵ APL 22-005 - No Wrong Door for Mental Health Services



PCPs, and others may refer members to NSMHS using the PCP Referral Form.

3. Outreach and Education: Members

GCHP's outreach and education plan for members, informed by stakeholder feedback, increases NSMHS utilization by ensuring our members are aware of available mental health resources and how to access NSMHS and SMHS. Outreach and education methods follow.

Methods	Description	
Educational Presentations / Meetings and Materials	Virtual presentations and meetings through Zoom, Teams or similar platforms; HealthWise educational materials provided to members by Health Education.	
In-Person Workshops and Events, Meetings, and Health Fairs	GCHP hosts various types of events and meetings in the community that include information about mental health and wellbeing, the NSMHS benefit and services and how to access NSMHS, SMHS, and substance use disorder (SUD) treatment.	
Mental Health Services Web Page	GCHP provides information about NSMHS, SMHS, SUD treatment, including a description of services and benefits and contact information to access services.	
Traditional and Social Media	GCHP utilizes both traditional and social media platforms such as radio, television, and Facebook to distribute information about mental health and wellbeing and NSMHS in English and in Spanish.	
Newsletter	A regular member e-newsletter provides educational information about mental health and wellbeing, substance use, the NSMHS benefit and services, and accessing NSMHS.	
Health Education and Referrals to Resources for Mental Health and Wellbeing	Health Education provides education about mental health and wellbeing using inclusive and non-pathologizing language, addresses misconceptions about mental health/illness and substance use/misuse. Health Education also provides linkage to community resources that promote Member agency such as the National Association on Mental Illness (NAMI).	
Outreach Partners/Stakeholders	 GCHP outreaches and educates our community partners and provides educational materials, including (but not limited to): State, Regional & Local Community-Based Organizations Statewide Associations Tribal Partners K-12 & Higher Education Institutions 	



www.goldcoasthealthplan.org

٠	Local Civic Organizations
•	Local collaboratives
•	Local and State Government Agencies

4. Outreach and Education: Primary Care Providers

GCHP's outreach and education plan for PCPs, informed by stakeholder feedback, addresses gaps in utilization by ensuring PCPs are aware of available mental health resources and have the tools to effectively refer members for NSMHS and SMHS. Outreach and education methods follow.

Methods	Description
Virtual Webinars and Meetings	Virtual educational events and meetings through Teams during new provider onboarding and Joint Operation Meetings.
In-Person Presentations, and Meetings	GCHP hosts in-person educational presentations with providers, including PCPs.
Gold Coast Health Plan Provider Training Website	GCHP makes educational materials and training about NSMHS available to providers through a GCHP website and through a Provider Portal.
Memorandums	A regular provider Memorandum provides information about NSMHS, including how members may access care, treatment, and services and how providers can refer.
Carelon PCP Training Resource	PCP Resource Guide for Non-Specialty Mental Health Services, Mental Health Services flyer
Outreach to GCHP Providers	GCHP distributes NSMHS educational materials during outreach to GCHP Providers.