

AMENDED IN ASSEMBLY MAY 28, 2015

AMENDED IN ASSEMBLY APRIL 13, 2015

CALIFORNIA LEGISLATURE—2015–16 REGULAR SESSION

ASSEMBLY BILL

No. 1018

**Introduced by Assembly Member Cooper
(Coauthor: Assembly Member Dodd)**

February 26, 2015

An act to add *and repeal* Section 14727 to the Welfare and Institutions Code, relating to Medi-Cal.

LEGISLATIVE COUNSEL'S DIGEST

AB 1018, as amended, Cooper. Medi-Cal: Early and Periodic Screening, Diagnosis, and Treatment (EPSDT).

Existing law provides for the Medi-Cal program, which is administered by the State Department of Health Care Services, under which qualified low-income individuals receive health care services. The Medi-Cal program is, in part, governed and funded by federal Medicaid Program provisions. Existing law provides that Early and Periodic Screening, Diagnosis, and Treatment (EPSDT) *services* for any individual under 21 years of age is covered under Medi-Cal consistent with the requirements of federal law. Under federal law, EPSDT services include screening services, vision services, dental services, hearing services, and other necessary services to correct or ameliorate defects and physical and mental illnesses and conditions discovered by the screening services, whether or not the services are covered under the state plan. *Existing federal law, the Individuals with Disabilities Education Act, requires that a free appropriate public*

education be made available to individuals with exceptional needs, and be tailored to their individual needs.

~~This bill would require the department to permit county mental health plans to contract with local educational agencies (LEAs), as defined, to provide services for Medi-Cal eligible pupils under EPSDT. The bill would also require the department to permit an LEA to make claims for federal financial participation directly to the department for EPSDT services provided by the LEA or that the LEA has contracted for. The bill would also require the department to examine methodologies for increasing LEA participation in the Medi-Cal program so that schools can meet the educationally related health care needs of their pupils.~~

This bill would require the State Department of Health Care Services and the Department of Education to convene a joint task force to examine the delivery of mental health services to children eligible for EPSDT services and for services pursuant to the federal Individuals with Disabilities Education Act, and to consider specified subjects. The bill would require the task force to hold at least 2 public meetings by October 1, 2016, and to submit a report to the Legislature covering key findings and recommendations for further action, if any.

Vote: majority. Appropriation: no. Fiscal committee: yes.
State-mandated local program: no.

The people of the State of California do enact as follows:

1 SECTION 1. Section 14727 is added to the Welfare and
2 Institutions Code, to read:
3 14727. (a) *The Legislature finds that it is in the state's interest*
4 *to ensure delivery of mental health services to children in*
5 *California is coordinated, accessible, and cost-effective.*
6 (b) *The State Department of Health Care Services and the State*
7 *Department of Education shall convene a joint task force to*
8 *examine the delivery of mental health services to children eligible*
9 *for Early and Periodic Screening, Diagnosis, and Treatment*
10 *services and for services pursuant to the federal Individuals with*
11 *Disabilities Education Act (20 U.S.C. Sec. 1400 et seq.). The goal*
12 *of the task force shall be to ensure children are provided accessible*
13 *and coordinated care that is compliant with state and federal law,*
14 *in a way that is maximally cost-effective for the state. The task*
15 *force shall consider all of the following:*

1 (1) Whether current technical assistance and guidance to county
2 mental health plans and schools is sufficient to optimize service
3 delivery and overall cost-effectiveness of service delivery.

4 (2) Whether current funding arrangements for services available
5 through the Early and Periodic Screening, Diagnosis, and
6 Treatment Program and pursuant to the federal Individuals with
7 Disabilities Education Act maximize federal funding to the state
8 for provision of these services.

9 (3) Issuing best practice guidelines for how special education
10 local plan areas and county mental health plans can work together
11 to optimize access to federal financial participation for eligible
12 services in both systems.

13 (4) How disputes over responsibility for service delivery is, and
14 should be, resolved in cases where children are dually eligible for
15 Early Periodic Screening, Diagnosis, and Treatment services and
16 services pursuant to the federal Individuals with Disabilities
17 Education Act.

18 (c) The task force shall solicit information from relevant
19 stakeholders. By October 1, 2016, the task force shall hold at least
20 two public meetings. By January 1, 2017, the task force shall report
21 to the Legislature a summary of key findings and recommendations
22 for further action, if any.

23 (d) (1) A report to be submitted pursuant to subdivision (c)
24 shall be submitted in compliance with Section 9795 of the
25 Government Code.

26 (2) Pursuant to Section 9795 of the Government Code, this
27 section is repealed on January 1, 2021.

28 ~~SECTION 1. Section 14727 is added to the Welfare and~~
29 ~~Institutions Code, to read:~~

30 ~~14727. (a) (1) The department shall permit county mental~~
31 ~~health plans to contract with local educational agencies (LEAs) to~~
32 ~~provide services for Medi-Cal eligible pupils under Early and~~
33 ~~Periodic Screening, Diagnosis, and Treatment (EPSDT).~~

34 ~~(2) (A) Subject to subparagraph (B), if an LEA does not have~~
35 ~~a contract with the county mental health plan, the department shall~~
36 ~~permit an LEA to make claims for federal financial participation~~
37 ~~directly to the department for EPSDT services provided by the~~
38 ~~LEA or that the LEA has contracted for. Unless otherwise~~
39 ~~precluded by federal law, an LEA shall be reimbursed for all~~
40 ~~eligible EPSDT services provided under this section.~~

~~(B) To receive federal financial participation under this paragraph, the LEA shall pay the nonfederal share of EPSDT expenditures and shall certify its public expenditures for EPSDT services to the department.~~

~~(b) (1) Services that a county mental health plan may contract with an LEA for, or that an LEA may receive federal financial participation for, under this section include, but are not limited to, any of the following:~~

~~(A) Mental health assessments.~~

~~(B) Targeted case management services.~~

~~(C) Behavioral services.~~

~~(D) Mental health, social work, and counseling services.~~

~~(E) Individual and group services.~~

~~(F) Crisis intervention.~~

~~(G) Day treatment.~~

~~(H) Residential treatment.~~

~~(I) Medication support services.~~

~~(2) The Legislature does not intend for this section to authorize an LEA or a county mental health plan to knowingly provide, or submit a claim for, duplicated EPSDT services.~~

~~(c) The department shall examine methodologies for increasing LEA participation in the Medi-Cal program so that schools can meet the educationally related health care needs of their pupils, which shall include simplifying the claiming processes for Medi-Cal billing to the extent possible.~~

~~(d) For purposes of this section, "local educational agency" has the same meaning as that term is defined in Section 56026.3 of the Education Code.~~

~~(e) This section shall be implemented to the extent permitted by federal law. The department shall seek any necessary state plan amendments or waiver amendments to implement this section and shall undertake all necessary activities to obtain federal financial participation for reimbursable services provided by LEAs or contracted for by LEAs under this section.~~