

CBHS Policies and Procedures



City and County of San Francisco
Department of Public Health
Community Programs
CBHS

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POLICY/PROCEDURE REGARDING: **Healthy Workers Eligibility for CBHS Services**

Issued By: Jo Robinson, MFT
Director of Community Behavioral Health Services

A handwritten signature in black ink that reads "Jo Robinson".

Manual Number: 3.03-14

References:

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Technical Revision. Replaces 3.03-14 of March 4, 1999

Purpose:

The following are the CBHS services available to San Francisco Health Plan "Healthy Workers" members.

Scope:

As of March 1, 1999, membership in CBHS's San Francisco Mental Health Plan became automatic for San Francisco Health Plan "Healthy Workers" members. These are In-Home-Support-Services (IHSS) workers ages 18 and older, employed by the City and County, who were uninsured previously. Under a new plan offered by the City and County, those individuals who work more than 25 hours a month for at least two months and live or work in San Francisco become eligible for health insurance through the San Francisco Health Plan. *This means that some covered members may not reside in San Francisco but they will be eligible for CBHS services.* Basic benefits provided by the San Francisco Health Plan include health (including mental health and substance abuse) and vision coverage. Individuals pay a low monthly premium, and there are also co-payments for some services. Through a contract with the San Francisco Health Plan, CBHS offers the Mental Health Plan for these individuals.

Mental Health Benefits

Though the San Francisco Health Plan benefit covers only specific services and has limits like all commercial benefits, all services offered by the San Francisco Mental Health plan are available to Healthy Workers members when clinically appropriate.

Healthy Workers members have a limited substance abuse counseling benefit. This is a benefit that is offered by San Francisco CBHS to these members when clinically appropriate. Healthy Workers with a primary diagnosis of substance abuse who do not meet the medical necessity criteria for the San Francisco Mental Health Plan are still eligible for substance counseling. Healthy Workers who require substance abuse counseling should be referred to the Healthy Workers point person at CBHS Behavioral Health Access (BHAC), at (415) 255-3737, if the service is not available on-site at the mental health program. Healthy Workers members have a benefit for acute inpatient detoxification that is covered by their

medical provider, the Community Health Network (CHN). Members who need to access this benefit must be referred through their primary care provider.

Medications may be prescribed by San Francisco Mental Health Plan providers. Healthy Workers seen at CBHS have their prescriptions covered by CBHS (not CHN). These clients can access the CBHS network of pharmacies. Prescriptions are guided by the CBHS formulary, and are paid by CBHS.

Laboratory tests ordered by a mental health professional will be covered by CBHS.

The San Francisco Health Plan has contracted with the Department of Public Health's CHN, including San Francisco General Hospital, to be the preferred health care provider for Healthy Workers members. Likewise, CBHS has contracted with the CHN's Department of Psychiatry to be the preferred provider of psychiatric inpatient and outpatient services to Healthy Workers members. This means that Healthy Workers members will be referred to the Department of Psychiatry if they offer the appropriate service in the preferred language.

Procedures

Healthy Workers members have been instructed to call the San Francisco Mental Health Plan at the CBHS BHAC Number to receive a referral for services. The BHAC Team has a point person for all Healthy Workers referrals. However, newly enrolled Healthy Workers members may be in treatment already in our system of care, or they may choose to walk-in to any one of our clinics.

The procedures that follow govern the way BHAC, other access points, and system of care clinics (both civil service and contract) handle Healthy Workers members.

Identifying Healthy Workers Members:

Providers need to be able to identify Healthy Workers members so that they can assure Healthy Workers have access to their benefits and CBHS can bill correctly for services delivered. There are three ways to identify Healthy Workers members:

1. A new client may self-identify as a Healthy Workers/San Francisco Health Plan beneficiary. They will have an identification card.
2. The San Francisco Health Plan offers an automated verification of coverage system at (415) 547-7810 to verify member eligibility.

Serving Healthy Workers

In order to assure proper billing and reimbursement for services delivered to Healthy Workers, the following steps must be taken:

1. If your current client enrolls in Healthy Workers, update their Financial Eligibility information in the Avatar BHIS and/or complete the new Payor Financial Information form (per CBHS policy #2.03-8) with their healthcare coverage information.

2. Healthy Worker Plan enrollees do not have an UMDAP; but instead, have a \$3 per visit co-pay for outpatient mental health treatment services. Avatar Family Registration screens for financial assessment and UMDAP are not completed. Client's per visit co-payments should be collected per CBHS policy #2.03-18 "Handling Patient Payments at Outpatient and Day Treatment Programs."
3. In the event your clinic does not offer the necessary service, please refer to the BHAC point person for Healthy Workers, who will assure triage to appropriate treatment.
4. All treatment authorizations for Healthy Workers follow the usual CBHS authorization protocols, e.g. for PURQCs, BHAC Central Access for mental health services, consultations, inpatient, and 24-hour services authorization.

Related Member Services

Healthy Workers members will be encouraged to resolve complaints and grievances having to do with our services using CBHS policies and procedures. They may also at any time choose to use the problem resolution process established for them by the San Francisco Health Plan. The San Francisco Health Plan's Member Services staff is available to resolve problems and may be reached at (415) 547-7805.

Questions

1. Provider questions related to the information provided by the Billing Unit, PFIs, co-pays, and patient collections should be directed to the CBHS Billing Unit Director.
2. Provider questions related to appropriate triage and referral of Healthy Workers members should be directed to the Healthy Workers contact person at BHAC.
3. Other provider questions should be addressed to the CBHS program manager assigned to the provider.

Contact Person: Director, CBHS Adult & Older Adult , Systems-of-Care

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