

SHARP Health Plan



Provider Alert

To: Sharp Health Plan Primary Care & OB/GYN Providers and Office Staff
From: Sharp Health Plan
Date: May 18, 2023
Subject: Maternal Mental Health: SB 1207, Health and Safety Code (Section 1367.625)

Attention Provider Partners,

The Regulation: SB 1207, Health and Safety Code (Section 1367.625)

Implementation Date: July 2023

Description:

The Maternal Mental Health law, as described in the Health and Safety Code (Section 1367.625) requires that a licensed health care practitioner (provider) who provides prenatal or postpartum care for a patient shall ensure that the mother is offered screening or is appropriately screened for maternal mental health conditions. In addition, Health Plans are required to develop a mental health program designed to promote quality and cost-effective outcomes.

Maternal mental health means a mental health condition that occurs during pregnancy or during the postpartum period and includes but is not limited to, postpartum depression.

California Senate Bill (SB) 1207 amends the current law to include the addition of quality measures to encourage screening, diagnosis, treatment, and referral to appropriate mental health services. These quality measures will be monitored by the health plan for compliance and reported. Additionally, the Plan's Maternal Mental Health program guidelines and criteria shall be provided to relevant medical providers, including all contracting obstetric providers.

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SHARP Health Plan

Sharp Health Plan has a maternal mental health program which is designed to assist mothers (prenatal and postpartum) with healthcare needs, including mental health and substance use disorder needs. Assistance includes explanation of health care benefits, making appointments, and providing and connecting with health plan and community resources. Sharp Health Plan offers case management services to members who qualify and includes members with a maternal mental health condition. Referrals will be accepted from any source, including, but not limited to, providers, members, and hospital staff.

What You Can Do:

Providers who have a positive screening can direct mothers to a Sharp Health Plan network behavioral health provider. A referral for behavioral health is not required. In addition, providers can refer mothers to Sharp Health Plan's case management department. A case management referral can be made by completing the Case Management Referral form found in the Forms section of the Sharp Health Plan website, or by calling 1-858-499-8300.


Where Can You Find Updates:

Sharp Health Plan's policy and procedure, [HS-BH-02](#), has been updated on the provider portal and is attached to this alert. To access policies and procedures, please log into your Sharp Connect provider portal account at www.sharphealthplan.com/login and refer to the policies, manuals, & guides link on the portal home page. Additionally, our Provider Operations Manual (POM) for commercial plans has been updated to include verbiage on page 91. You can find the POM online at sharphealthplan.com/pom.

Best regards,

Sharp Health Plan
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| <p>Number: HS-BH-02</p> <p>Title: MATERNAL MENTAL HEALTH CASE MANAGEMENT PROGRAM</p> <p>Division(s): HEALTH SERVICES Department(s):</p> <p>MEDICAL MANAGEMENT</p> <p>Owner (Title): MEDICAL MANAGEMENT LEAD – BEHAVIORAL HEALTH</p> | <p>Product Line (check all that apply):</p> <p><input type="checkbox"/> All</p> <p><input checked="" type="checkbox"/> Group HMO</p> <p><input checked="" type="checkbox"/> Individual HMO</p> <p><input type="checkbox"/> PPO</p> <p><input checked="" type="checkbox"/> POS</p> <p><input type="checkbox"/> Medicare</p> <p><input type="checkbox"/> N/A</p> |
| <p>Relevant Regulatory/Accrediting Agencies/Citations (specify):</p> <p><input type="checkbox"/> CMS:</p> <p><input checked="" type="checkbox"/> DMHC: CA Health and Safety Code 1367.625</p> <p><input checked="" type="checkbox"/> NCQA-HP:</p> <p><input type="checkbox"/> NCQA-WHP:</p> <p><input type="checkbox"/> OTHER:</p> | |
| <p>Approved by: (Signature of VP /CMO)</p>  | <p>Approval date: 03/29/23</p> |

- I. **PURPOSE:** This Policy and Procedure establishes Sharp Health Plan’s (Plan) guidelines for the maternal mental health case management program.
- II. **POLICY:** It is the policy of the Plan to adhere to the California regulatory requirements to provide a maternal mental health program designed to promote quality and cost-effective outcomes. The Plan’s Maternal Mental Health Case Management Program is designed to assist mothers (prenatal, postpartum, and interpregnancy) with needs, such as understanding health care benefits, making appointments, and providing health plan and community resources. The Plan offers case management services to members who qualify, which includes members with a maternal mental health condition. Referrals are accepted from any source, including, but not limited to, treating providers (OB/GYN, PCP), members, and/or a facility utilization reviewer/case manager. The program guidelines and criteria will be made available upon request to medical providers. The Plan provides communication and materials to providers to ensure knowledge and compliance with the regulatory standards.
- III. **DEFINITIONS:**
 - A. **Maternal Mental Health Condition:** A mental health condition that occurs during pregnancy, the postpartum period, or interpregnancy and includes, but is not limited to, postpartum depression.
 - B. **Health and Safety Code 1367.625:** By July 1, 2019, a licensed health care practitioner who provides prenatal or postpartum care for a patient shall ensure that the mother is offered screening or is appropriately screened for maternal mental health conditions.

By July 1, 2019, a health care service plan shall develop a maternal mental health program designed to promote quality and cost-effective outcomes. The program shall be developed consistent with sound clinical principles and processes. The program guidelines and criteria shall be made available upon request to medical providers, including a contracting obstetric provider.

CA SB 1207, which takes effect July 1, 2023, amends the current regulation to include the addition of quality measures to encourage screening, diagnosis, treatment, and referral to appropriate mental health services. Refer to the QI Program Description which addresses these quality measures.

IV. PROCEDURE:

- A. The Plan accepts referrals for the Maternal Mental Health Case Management Program for members who are identified as having a maternal mental health condition.
- B. The Plan RN or LCSW Case Manager (CM) will notify the referral source of receipt of referral within one business day.
- C. The Plan RN or LCSW CM will reach out to the member by telephone within five business days of receipt of referral.
- D. If the member is not reached after three phone call attempts, the Unable to Contact letter will be mailed to the member. The letter explains the reason for outreach and provides a direct telephone number to the CM.
- E. If the member is reached by phone, the CM will offer case management services.
 1. If the member agrees, the CM will engage the member in complex case management program.
 - a) The complex case management program includes, but is not limited to, additional assessment, identification of social determinants of health needs, identification of goals and barriers, and ongoing monthly follow-up to track and evaluate progress (See Complex Case Management Process Desk Top Procedure).
 2. If the member declines case management services:
 - a) Assist member with making appointment with behavioral health provider(s).
 - b) Provide other resources as appropriate, such as postpartum support groups, financial, and legal.
- F. Providers are educated through various methods. The Maternal Mental Health Case Management program is presented to the Primary Medical Groups during the Joint Operating Committees. Information on the program as well as how to refer members are made available on the Plan Provider website as well as in the Provider Operations Manual. Education includes both the requirement to screen perinatal patients for maternal mental health conditions as well as how to refer to the Plan's Maternal Mental Health Case Management Program.
- G. Members are made aware of the Maternal Mental Health Case Management Program through

the Plan website. The Plan accepts member self-referrals.

V. ATTACHMENTS:

A. None

VI. REFERENCES:

A. CA Health & Safety Code § 1367.625

B. CA AB 2193 and CA SB 1207

C. QI Program Description

VII. TAGS: Maternal Mental Health, Mental Health Parity, Health Services, Medical Management

VIII. REVISION HISTORY:

| Date | Modification (Reviewed and/or Revised) |
|------------|--|
| 06/29/2019 | Original Document / Approved by QMC |
| 06/24/2020 | Reviewed / Approved by QMC |
| 3/30/2022 | Reviewed / Approved by QMC |
| 12/21/2022 | Reviewed / Approved by QMC |
| 3/29/2023 | Revised to comply with SB 1207 to include quality measures for ensuring compliance |