

PAYMENT REFORM COST SURVEY -DRAFT INSTRUCTIONS

- **Cost Survey Period:** Please complete the survey using your actual costs for the most recently finished fiscal year (SFY 2020-21).
- The aim of this survey is to capture the costs specific to outpatient services/staff for mental health and SUD services. If a contractor also provides any services listed below, the contractor should exclude the cost of providing those services when completing the cost survey tool. Please exclude data for contract providers that offer only the following service types:
 - Inpatient psychiatric services, including psychiatric health facility services
 - Adult residential treatment
 - Crisis residential treatment
 - Therapeutic Foster Care
 - Day Treatment or Day Treatment Intensive
 - Crisis Stabilization
 - Residential SUD treatment
 - Withdrawal management
 - NTP/OTP services
- Our aim is to develop a fully loaded hourly rate for each practitioner type. The data will be used to develop procedure-code level rates for reimbursement to county BH plans that are either specific to each practitioner type/category, or that account for a mix of practitioner types using weighted averages. Rates will account for time spent on direct client care as well as time spent on documentation and travel.
- If a contractor provides both Specialty Mental Health Services and Drug Medi-Cal Services, the contract provider will submit a survey completed for Specialty Mental Health Services (SMHS) and a separate survey completed for Drug Medi-Cal (DMC) services or DMC Organized Delivery System (ODS) services. For providers that render both SMHS and DMC or DMC ODS services, FTE should be divided between the two programs, in the same manner used to report staff for network adequacy certification.

Worksheet – Direct Service Staff

Column A – Occupational Category: Column A lists each provider qualified to render specialty mental health or DMC/DMC-ODS services. Please consult Supplement 2 to Attachment 3.1-B of the Medi-Cal State Plan for more information regarding each provider type.

Medical Type Staff

- **Psychiatrist/Contracted Psychiatrist:** Many counties use Locums or other contracting mechanism for psychiatry. Even though this is technically a contract the cost and count of FTEs would be included here.

- Physician Assistant
- Nurse Practitioner
- RN
- LVN
- Pharmacist
- Licensed Psychiatric Technician
- MD (typically in SUD system of care)

Clinical / License Eligible

- Psychologist/Psychologist Intern
- LPHA (MFT, LCSW, LPCC)/ Intern or Waivered LPHA (MFT, LCSW, LPCC)

Non-Clinical

- Occupational Therapist
- Mental Health Rehab Specialist
- Alcohol and Drug Counselor - Registered
- Alcohol and Drug Counselor - Certified
- Peer Recovery Specialist in SUD System of Care
- Other Qualified Providers - Other Designated MH staff that bill Medi-Cal: *This category would factor in all staff not identified in the categories above who are part of the behavioral health system of care. In the mental health system this would include peer employees.*

Provider Leadership/Support Staff: This category is used to reflect indirect administrative only costs. If for example, the provider has an Executive Director who spends 50% of their time providing direct client services and 50% indirect administration, you would enter .5 for the FTE in this section.

- Executive Level staff (Executive Direct/Deputy Director)
- Managers and Supervisors
- Administrative and Clerical Staff
- Medical Assistants

Column B - # FTE:

- For each staff category, please enter the number of FTEs the clinic employed and/or contracted with. One FTE is based upon 2,080 hours for the year.
- If the provider employed someone who provided direct mental health treatment and performed indirect administrative activities, please estimate the proportion of time spent providing mental health treatment.

Column C – Salaries and Benefits:

- For each occupational category, please enter the total salary and benefit costs to employ and/or contract with the FTE reported in Column B.

Column D – Hiring Bonuses and Incentive Payments

If hiring bonuses or other compensation are used to hire or retain staff, please include this total annual spend.

Column E– Total Costs

Sum columns C and D to get the total cost for each occupational category.

Column F - % of Time Spent Providing Direct Patient Care:

For each occupational category, please enter the percentage of time the FTE reported in Column B spent providing Direct Patient Care. Time recorded should NOT include documentation and travel time, only direct patient care time.

Column G- Vacancy Rate- Point in Time

For each staff category show the current point in time vacancy

Organization Name

Enter your organization's name at the bottom of the survey.

Worksheet – Other Costs

Row 1 – Operating Costs: Please enter all operating costs directly assigned to the provision of direct services in Column B.

Row 2 – Indirect Costs: Please enter the indirect costs that the provider allocated to direct services in Column B.