

Provider Bulletin

Molina Healthcare of California

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April 11, 2024

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Street Medicine Provider APL 24-001

This is an advisory notification to Molina Healthcare of California (MHC) network providers applicable to the Medi-Cal line of business.

This notification is based on All-Plan Letter (APL) 24-001, which can be found in full on the Department of Health Care Services (DHCS) website at:

dhcs.ca.gov/formsandpubs/Documents/MMCDAPLsandPolicyLetters/APL%202024/APL24-001.pdf.

Background

Street medicine refers to a set of health and social services developed specifically to address the unique needs and circumstances of individuals experiencing unsheltered homelessness, delivered directly to them in their own environment.

The fundamental approach of street medicine is to engage people experiencing unsheltered homelessness exactly where they are and on their own terms to maximally reduce or eliminate barriers to care access and follow-through.

Street medicine directly aligns with California Advancing and Innovating Medi-Cal's (CalAIM) primary goal to identify and manage comprehensive needs through whole person care approaches and social drivers of health.

Street medicine offers an opportunity to provide needed services to individuals who are experiencing unsheltered homelessness by meeting them where they are and utilizing a whole person, patient-centered approach to provide Medically Necessary health care services, as well as address social drivers of health that impede health care access.

Policy

MHC may cover the provision of medical services for their Members experiencing unsheltered homelessness through

Provider Action

Subcontractors and Network Providers must comply with all applicable state and federal laws and regulations, Contract requirements, and other DHCS guidance, including APLs and Policy Letters. MHC may impose Corrective Action Plans (CAPs) or administrative and monetary sanctions for non-compliance.



street medicine providers in the role of the Member's assigned Primary Care Provider (PCP), through a direct contract with MHC, as an Enhanced Care Management (ECM) Provider, as a Community Supports Provider, or as a referring or treating contracted Provider.

Since the utilization of street medicine providers is voluntary for MHC, there is no required effective start date for the operations of a street medicine program.

Street Medicine Provider as a Member's Assigned PCP

Street medicine provider refers to a licensed medical provider (e.g., Doctor of Medicine (MD)/Doctor of Osteopathic Medicine (DO), Physician Assistant (PA), Nurse Practitioner (NP), Certified Nurse Midwife (CNM)) who conducts patient visits outside of the four walls of clinics or hospitals and directly on the street, in environments where unsheltered individuals may be (such as those living in a car, RV, abandoned building, or other outdoor areas).

Additionally, given the unique and specialized nature of street medicine, a supervising Physician must be a practicing street medicine provider, with knowledge of and experience in street medicine clinical guidelines and protocols.

Street medicine Providers, when elected by Members to act as their assigned PCP, are responsible for providing the full array of Primary Care services, including but not limited to, preventive services, and the treatment of acute and chronic conditions. Thus, street medicine Providers who choose to act as a Member's assigned PCP must agree to provide the essential components of the Medical Home in order to provide comprehensive and continuous medical care.

If the street medicine Provider does not have the capability to provide Primary Care services on the street, the street medicine Provider must be affiliated with a brick-and-mortar facility (e.g., primary care medical office, Federally Qualified Health Center (FQHC), clinic, etc.).

Site Review and Medical Record Review Requirements

Street medicine Providers who are serving in an assigned PCP capacity are required to undergo the appropriate level of site review process, which is either a full or a condensed review.

Process for Street Medicine Provider to Become Member's Assigned PCP

If MHC has street medicine Providers willing to serve in a PCP capacity, MHC will inform Members through the Member Handbook that contracted street medicine Providers may be elected to be the Member's assigned PCP so that the Member and the street medicine Provider can discuss whether this arrangement is appropriate.

Provider Enrollment and Credentialing

MHC Network Providers, including street medicine Providers, are required to enroll as a Medi-Cal Provider if there is a state-level enrollment pathway for them to do so. The credentialing requirements outlined in APL 22-013 only apply to street medicine providers with a state-level pathway for Medi-Cal enrollment. If there is not a state-level enrollment pathway, the street medicine provider is not required to meet the credentialing requirements in APL 22-013 in order to become an "in-network" Provider.

Access Requirements

Street medicine Providers elected as a Member's assigned PCP are exempt from PCP time and distance standards as the Member does not have a permanent residential address and the street medicine Provider is meeting the Member at their lived environment.

Street Medicine Provider as an ECM Provider

ECM is delivered primarily by community-based ECM Providers that enter into contract with MHC. MHC may contract with street medicine Providers to become an ECM Provider. A street medicine Provider can be contracted to provide both PCP and ECM services to a Member. ECM is primarily in-person based, and as such, ECM Providers are poised to build trust and facilitate coordinated care management with individuals experiencing unsheltered homelessness.

Street Medicine Providers Serving Solely as Referring or Treating Contracted Provider

The contracted street medicine Provider has the right to decline the additional responsibilities of an assigned PCP, and instead, care for Members in a non-PCP capacity as a referring or treating contracted Provider working with individuals experiencing unsheltered homelessness. To provide care in this capacity, street medicine Providers must have processes in place to work with MHC, the Member's PCP, and ECM Care Manager to ensure the Member has referrals to primary care, Community Supports, behavioral health services, and other social services as needed.

Medi-Cal Eligibility

Street medicine Providers are required to verify the Medi-Cal eligibility of individuals they encounter in the provision of health care services. Medi-Cal eligible individuals will be covered by either the Medi-Cal Fee-for-Service (FFS) or Medi-Cal managed care delivery system.

Billing/Reimbursement

Street medicine Providers rendering services to Medi-Cal eligible individuals are to bill Medi-Cal FFS, or MHC if contracted, based on the eligibility of the individual, for appropriate and applicable services within their scope of practice. Acceptable Place of Service (POS) codes according to DHCS guidance:

- 04 – Homeless Shelter
 - A facility or location whose primary purpose is to provide temporary housing to homeless individuals e.g., emergency shelters, individual or family shelters.
- 15 – Mobile Unit
 - A facility/unit that moves from place to place equipped to provide preventive, screening, diagnostic, and/or treatment services.
- 16 – Temporary Lodging
 - A short-term accommodation such as a hotel, campground, hostel, cruise ship, or resort where the patient receives care, and which is not identified by any other POS code.
- 27 – Outreach Site/Street
 - A non-permanent location on the street or found environment, not described by any other POS code, where health professionals provide preventive, screening, diagnostic, and/or treatment services to unsheltered homeless individuals.

Data Sharing, Reporting and Administration Requirements

Contracted street medicine Providers must comply with all applicable MHC data sharing and reporting requirements in accordance with federal and state laws and the MHC Contract based on provider contracting type.

What if you need assistance?

If you have any questions regarding the notification, please contact your Molina Provider Relations Representative below.

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