



FACT SHEET

Medi-Cal Explained: Administration of Non-Specialty Mental Health Services

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IN CALIFORNIA, nearly all people insured through Medi-Cal are enrolled in a managed care plan. Medi-Cal managed care plans are responsible for physical health care services and a limited set of mental health services for children and adults.¹ For example, an adult with a mild or moderate depression or anxiety diagnosis would receive treatment services through their managed care plan. These are known as “non-specialty mental health services” or NSMHS. NSMHS services include:

- Mental health evaluation and treatment, including individual, group, and family psychotherapy
- Psychological and neuropsychological testing, when clinically indicated to evaluate a mental health condition
- Outpatient services for the purposes of monitoring drug therapy
- Psychiatric consultation
- Outpatient laboratory, drugs, supplies, and supplements

NSMHS also include some new and expanded services such as dyadic services for families (preventive behavioral health services for youth and/or their caregivers), family therapy, and psychiatric collaborative care management (a team-based model for treating anxiety and depression).

The specialty behavioral health system, operated by county governments (typically through county behavioral health departments or the equivalent), is responsible for providing “specialty” mental health and almost all substance use disorder (SUD) services. The range of specialty mental health services is much broader than NSMHS and includes crisis intervention and stabilization, day treatment, residential and inpatient treatment, medication support, and psychiatric services, among many others. Populations that may use specialty behavioral health services include adults who experience significant distress or impairment due to their mental health conditions, children or youth whose needs may be more complex because of their conditions or life circumstances, and people of all ages who need specialty SUD treatment.²

Medi-Cal has implemented a “No Wrong Door Policy” for behavioral health services. This policy is designed to ensure that Medi-Cal enrollees receive timely behavioral health services regardless of whether they initially seek care through the specialty

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or non-specialty delivery system. The policy aims to maintain continuity of care for recipients and allows for the possibility that an individual might receive care simultaneously through both the specialty and non-specialty mental health delivery systems.³

Medi-Cal managed care plans cover NSMHS in one of two ways:

- “In-house,” wherein the plans contract directly with behavioral care providers and manage all aspects of providing NSMHS to their members

- Through contracts with specialized behavioral health care plans, which maintain networks of behavioral health providers to deliver these services for the plans’ members. The two behavioral health care plans used by Medi-Cal managed care plans are Carelon Behavioral Health and MHN.

Table 1 lists all the 2024 Medi-Cal managed care plans and indicates how they cover NSMHS.

Table 1. 2024 Medi-Cal Managed Care Plans and Their Arrangements for Non-Specialty Mental Health Services

2024 Medi-Cal Managed Care Plan	NSMHS Arrangement
Alameda Alliance for Health	In-House
Anthem Blue Cross	Carelon Behavioral Health
Blue Shield of California Promise Health Plan	In-House
CalOptima	In-House
CalViva Health	MHN
CenCal Health	In-House
Central California Alliance for Health	Carelon Behavioral Health
Community Health Group	In-House
Community Health Plan of Imperial Valley	MHN
Contra Costa Health Plan	In-House
Gold Coast Health Plan	Carelon Behavioral Health
Health Plan of San Joaquin	Carelon Behavioral Health
Health Plan of San Mateo	In-House
Health Net	MHN
Inland Empire Health Plan	In-House
Kaiser Permanente	In-House
Kern Health Systems	In-House
L.A. Care Health Plan	Carelon Behavioral Health
Molina Healthcare	In-House
Partnership Health Plan	Carelon Behavioral Health
San Francisco Health Plan	Carelon Behavioral Health
Santa Clara Family Health Plan	In-House

Source: Author’s review and analysis of 2023 DHCS Medi-Cal documents and interviews with Medi-Cal managed care key informants.

Endnotes

1. California Department of Health Care Services, "All Plan Letter 22-006: [Medi-Cal Managed Care Plan Responsibilities for Non-Specialty Mental Health Services](#)," April 8, 2022.
2. California Department of Health Care Services, "Behavioral Health Information Notice (BHIN) No: 21-073: [Criteria for Beneficiary Access to Specialty Mental Health Services \(SMHS\), Medical Necessity and Other Coverage Requirements](#)," December 10, 2021.
3. California Department of Health Care Services, "Behavioral Health Information Notice 22-011: [No Wrong Door for Mental Health Services Policy](#)," March 31, 2022.

About the Author

Ralph Silber, MPH, is an independent consultant with more than forty years of experience in the community health center movement and an affiliate with El Cambio Consulting. He previously served as the CEO of the Alameda Health Consortium and the Community Health Center Network, a Medi-Cal managed care organization.

El Cambio Consulting provides strategic guidance, analysis, and management consulting to safety net health care organizations in California that are rooted in their communities and committed to improving health outcomes through perseverance and innovation. This includes community health centers, county public health agencies and departments, Medi-Cal managed care plans, social service providers and the foundations and associations that support their work.

Medi-Cal Explained is an ongoing series on Medi-Cal for those who are new to the program, as well as those who need a refresher. To see other publications in this series, visit www.chcf.org/MC-explained.