Medi-Cal Managed Care Plan Medical Director Survey 2015

1. Name:			
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2. Title:			
3. Managed Care Plan	(MCP):		
4. Contact Information:			
4. Contact information.	•	_	
Email Address			
Phone Number			

Medi-Cal Managed Care Plan Medical Director Survey 2015

The purpose of this survey is to collect baseline information for the evaluation of the Drug Medi-Cal Organized Delivery System Waiver.

Since the waiver has not been implemented yet, we understand that some of the activities listed below may not be underway, or that you may need to select "don't know" in some cases. If so, *that is ok*. We are interested in getting a true picture of the current, prewaiver state of the system right now, and hope to repeat this survey in future years to see what changes may occur.

Thank you for your participation!

occurring within your pro	vider networks.										
			Not at				Regularly	Varies widely by county	Don't know		
Screening for alcohol use											
Screening for other drug use											
Brief intervention for individu other drug use	als who screen positive	for alcohol or									
Referral to county system for individuals who need treatment for substance use disorder/s (SUD)		reatment									
2. To the best of your knowledge, for members who need SUD services, please rate how often on average the following activities are currently occurring when members are referred to the county SUD treatment system.											
			Not at				Regularly	Varies widely by county	Don't know		
County shares data needed primary care providers and S											
Tracking of referrals between MCP and SUD treatment system		ent system									
Shared development of care plans by all providers (both special and primary care), caregivers, and members with SUD											
Delineation of case manager MCP and county SUD treatn	•	ween the									
Co-management of patients	with county SUD treatm	ent system									
Effective communication am for exchanges of medical info	• •	procedures									
Navigation support for patier	its and caregivers for SI	JD care									
3. Please rate the extent "Substance use condition emergency room visits, of Disagree Strongly	ns among our mem	bers contrib	oute sul					al care (
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1. To the best of your knowledge, please rate how often on average the following activities are currently

diagnoses?
Yes
No - but planning to within the next year
No - no plans within the next year
On't know
5. Does your managed care plan track the impact of substance use treatment (not including brief intervention) on medical costs?
Yes
No - but planning to within the next year
No - no plans within the next year
On't know
6. As medical director, what feedback do you receive on how well client transfers and information exchange between primary care and SUD is occurring among your providers? (Check all that apply.) None Receive anecdotal information
Receive regular monitoring reports Other (please describe):