

## State of California—Health and Human Services Agency Department of Health Care Services

CalAIM Community Supports Model of Care Template



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February 2023

Due dates to DHCS: February 15, 2023



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#### CalAIM Community Supports Model of Care Template



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#### Overview

In preparation for the implementation of Enhanced Care Management (ECM) and Community Supports, in June 2021, the California Department of Health Care Services (DHCS) released a Model of Care (MOC) Template for Medi-Cal managed care plans (MCPs) to complete and submit to DHCS demonstrating their operational readiness. The original June 2021 MOC Template was then later revised in February 2022 to its current version, the ECM and Community Supports MOC Legacy Template.

DHCS revised the joint ECM and Community Supports MOC Legacy Template to make this **Community Supports MOC** Template, inclusive of all previous questions related to Community Supports. This MOC Template is **only** for Community Supports and does **not** address ECM. Please refer to the separate ECM MOC Addendum(s) for more information.

To demonstrate operational readiness for **new** Community Supports going live on **January 1, 2023, and thereafter,** DHCS is requiring MCPs to complete this Community Supports MOC Template. MCPs must provide a response to each question below. Responses to the questions in the Community Supports MOC should be comprehensive and address Community Supports currently offered by the MCP, as well as any future Community Supports offerings. MCPs must incorporate all previously approved responses, along with any updates to previous responses, in the MOC template. Additionally, MCPs must submit all current Policies and Procedures as requested in the MOC template for both Community Supports currently offered by the MCP and future Community Supports offerings. MCPs should reference the Community Supports MOC Questions Crosswalk when incorporating previously approved responses in the MOC Template.

Some questions specifically prompt the MCP to provide responses by county. Even if not prompted, the MCP should note any variations by county. If details vary substantially between counties, MCPs may submit multiple responses to questions or sections of the MOC Template that are clearly labeled by county.

For questions related to authorizations for Community Supports, including both the adjudication standards and the documentation used for referrals and authorizations, the Prime MCP and their subcontractors must align all standards and Policies and Procedures. This requirement applies to each Community Support commonly offered across a prime and its subcontractors. Subcontractors may still make different decisions than the prime regarding which Community Supports to elect.

#### I. Community Supports Elections and Provider Capacity

All MCPs are strongly encouraged to offer Community Supports. Complete the following section to describe the MCP's strategy for offering Community Supports. MCPs must complete all sections of the MOC, addressing all Community Supports currently offered, as well as Community Supports planned for future implementation.

#### a. Elections

For Community Supports requirements associated with the administration of Community Supports, see <u>ECM/Community Supports MCP Contract</u>: Section 1: Contractor's Responsibility for the Administration of Community Supports.

Indicate which of the DHCS pre-approved Community Supports listed below the MCP plans to provide, indicating which county or counties will be served for each elected Community Support and the start date. Note that the MCP will be required to submit more detailed information outside of the MOC Template on Community Supports offerings, for future rate setting and other purposes.

- 1. Using the supplementary Excel template titled "MOC Excel File Community Supports Final Elections" make your designations. A list of the pre-approved Community Supports is available below for reference.
  - i. Housing Transition Navigation Services;
  - ii. Housing Deposits;
  - iii. Housing Tenancy and Sustaining Services;
  - iv. Short-Term Post-Hospitalization Housing;
  - v. Recuperative Care (Medical Respite);
  - vi. Respite Services:
  - vii. Day Habilitation Programs;
  - viii. Nursing Facility Transition/Diversion to Assisted Living Facilities, such as Residential Care Facilities for the Elderly (RCFEs) and Adult Residential Facilities (ARFs);
  - ix. Community Transition Services/Nursing Facility Transition to a Home;
  - x. Personal Care and Homemaker Services;
  - xi. Environmental Accessibility Adaptations (Home Modifications);
  - xii. Medically-Supportive Food/Meals/Medically Tailored Meals;
  - xiii. Sobering Centers; and
  - xiv. Asthma Remediation.

#### b. Community Supports Provider Capacity

For Community Supports requirements associated with the Community Supports Provider network and capacity, see <u>ECM/Community Supports MCP Contract</u> Section 4: Community Supports Provider Capacity.

- 2. For each elected, pre-approved Community Support, describe the MCP's approach to Community Supports Provider Network development. Descriptions must indicate if the MCP intends to restrict the elected service in any way. Word limit: 500 words per service, per county.
- 3. For each elected, pre-approved Community Support, if the Community Supports Provider network/capacity will not reasonably allow for county-wide provision of Community Supports to all eligible Members in the county at the time of implementation, provide a brief overview of the MCP's approach to expanding Provider network/capacity over a three (3)-year timeframe. Word limit: 500 words per service, per county.

**Note:** If an MCP intends to offer any altered or restricted Community Supports, a three-year plan for expanding Community Supports Provider capacity is required. Three-year plan submissions may intersect with MCP requirements and milestones to receive Community Supports-related performance incentive funding.

Further, when current Community Supports Provider network capacity will not allow for the county-wide provision of Community Supports to all eligible Members at implementation, MCPs are required to document Policies and Procedures for how they will make non-discriminatory Community Supports authorizations (See Question 25). DHCS will review and determine whether to approve these Policies and Procedures, working with MCPs to make modifications as needed.

#### II. Community Supports Implementation Policies and Procedures

#### a. Policies and Procedures

For each question in this section, attach the MCP Policies and Procedures for delivery of Community Supports. Provide the file name of the attachment(s) for the Policies and Procedures and page number(s) within the Policies and Procedures that correspond to the question asked. If the response to this question is included in a response to a different question (e.g., if the MCP developed one (1) Policies and Procedures document for identifying Members for Community Supports and authorizing Members for Community Supports), add a cross-reference in the appropriate table.

MCPs must complete all sections of the MOC, addressing all Community Supports currently offered, as well as Community Supports planned for future implementation.

Unless otherwise specified, DHCS expects responses on the MCP's approach to each elected pre-approved Community Support and any newly proposed Community Support(s).

#### MCP Responsibility for Administration of Community Supports

For Community Supports requirements associated with delivery of Community Supports, see <u>ECM/Community Supports MCP Contract</u> Section 1: Contractor's Responsibility for Administration of Community Supports.

4. Provide Policies and Procedures describing how the Community Support(s) will be provided to eligible Members. Define expected duration and frequency of service for the Community Support(s), minimum qualifications of the Provider(s) delivering the service(s), and any other information relevant to the delivery of the service(s).

MCP Policies and Procedures (List the file names and page numbers):

#### **Community Supports Providers**

For Community Supports requirements associated with eligible Community Supports Providers, see <u>ECM/Community Supports MCP Contract</u> Section 3: Community Supports Providers.

5. Provide Policies and Procedures describing how the MCP will vet the qualifications of Community Supports Providers for whom a state-level Medi-Cal enrollment pathway does not exist.

MCP Policies and Procedures (List the file names and page numbers):

Provide brief additional information, as needed:

- 6. Across all Community Supports (including newly proposed Community Supports), provide the written notices and/or call scripts for informing Members of:
  - i. The transition to Community Supports from other programs
  - ii. Community Supports for which they may be eligible

Submit the template notice(s) and call scripts for review.

MCP Member Notices (List the file names):

#### **Identifying Members for Community Supports**

For Community Supports requirements associated with identifying Members for Community Supports, see <u>ECM/Community Supports MCP Contract</u> Section 6: Identifying Members for Community Supports.

7. For each elected Community Support (including newly proposed Community Supports), provide Policies and Procedures for how the MCP will identify Members for whom the Community Support will be a medically appropriate and cost-effective alternative to a State Plan service or setting, especially for hard to reach populations. Include processes for how the MCP will operationalize a no "wrong-door" policy by accepting requests for Community Supports from Providers, other community-based entities, and Members and their families.

MCP Policies and Procedures (List the file names and page numbers):

Provide brief additional information, as needed:

#### <u>Authorizing Members for Community Supports and Communication of</u> Authorization Status

For Community Supports requirements associated with authorizing Members for Community Supports and communication of authorization status, see <a href="ECM/CommunitySupports">ECM/CommunitySupports MCP Contract</a> Section 7: Authorizing Members for Community Supports and Communication of Authorization Status.

8. Provide Policies and Procedures on how the MCP will authorize each elected Community Support for eligible Members in a medically appropriate, equitable, and non-discriminatory manner. Policies and Procedures must explicitly address the MCP's approach to monitoring and evaluating Community Supports authorizations to ensure they are equitable and non-discriminatory. Policies and Procedures must also address what immediate actions the MCP will take if evaluation findings identify instances where service authorizations have had an inequitable effect.

#### MCP Policies and Procedures (List the file names and page numbers):

#### Provide brief additional information, as needed:

- 9. Provide Policies and Procedures describing the MCP's approach for automatically authorizing newly enrolled MCP Members who were receiving Community Supports through their previous Medi-Cal managed care plan (Note: this request only applies for Community Supports that do not include "once in a lifetime" restrictions):
  - Describe the MCP's process for automatically authorizing Member initiated requests that the MCP receives directly from the Member, family or Authorized Representative (AR);
  - ii. Describe the MCP's process of engaging with the previous MCP, the Member and/or Community Supports Provider to mitigate any gaps in care:
  - iii. Describe the MCP's process of reviewing historical utilization data using a 90 day look-back period to identify Members who have received Community Supports.

Note this policy does not apply if the Member's new MCP is not providing the Community Support service which the Member had received through their prior MCP.

MCP Policies and Procedures (List the file names and page numbers):

10. Provide Policies and Procedures on how the MCP will discontinue, or deauthorize, each elected Community Support for Members who either no longer qualify for, or no longer require, Community Supports services.

MCP Policies and Procedures (List the file names and page numbers):

Provide brief additional information, as needed:

11. Provide Policies and Procedures for situations that may be appropriate for expedited authorization of a Community Support (e.g., for sobering center visits where a 48-hour+ authorization timeline would preclude effective use of the service). The following Community Supports are inherently time sensitive and are subject to expedited authorization: Recuperative Care, Short Term Post Hospitalization Housing, Sobering Centers, and Medically Tailored Meals when offered post-acute care.

MCP Policies and Procedures (List the file names and page numbers):

Provide brief additional information, as needed:

12. Provide Policies and Procedures describing the methodology the MCP will use to evaluate whether an elected Community Support is a cost-effective alternative to a State Plan service or setting.<sup>2</sup>

MCP Policies and Procedures (List the file names and page numbers):

<sup>&</sup>lt;sup>1</sup> MCPs are encouraged to work with Community Supports Providers to define a process and appropriate circumstances for presumptive authorization or pre-authorization of Community Supports whereby select Community Supports Providers would be able to directly authorize an Community Supports, potentially only for a limited period of time, under specified circumstances when a delay would be harmful to the beneficiary or inconsistent with efficiency and cost-effectiveness.

<sup>&</sup>lt;sup>2</sup> Monitoring for cost-effectiveness can be conducted on an individual or population-level basis.

#### **Referring Members to Community Supports**

For Community Supports requirements associated with referring Members to authorized Community Supports, see <u>ECM/Community Supports MCP Contract</u> Section 8: Referring Members to Community Supports Providers for Community Supports.

13. Provide Policies and Procedures for how the MCP will refer Members to authorized Community Supports. Describe how the MCP will ensure appropriate timelines from the point of authorization to referral to Community Supports. For Members enrolled in ECM, address how the MCP will work with the ECM Provider to coordinate the referral.

MCP Policies and Procedures (List the file names and page numbers):

#### Provide brief additional information, as needed:

14. Provide Policies and Procedures describing how the MCP will ensure each Member authorized to receive a particular Community Support 1) agrees to the receipt of that Community Support and 2) how authorization will be obtained for data sharing when required by federal law (Note: MCPs are not obligated to obtain authorization for data sharing when not required by federal law). Indicate which entity (i.e., the MCP or the Community Supports Provider) will obtain Member agreement and data sharing authorization.

MCP Policies and Procedures (List the file names and page numbers):

#### b. Data System Requirements and Data Sharing to Support Community Supports

For Community Supports data system and sharing requirements, see <u>ECM/Community</u> <u>Supports MCP Contract</u> Section 9: Data System Requirements and Data Sharing to Support Community Supports.

For the questions in this section requiring Policies and Procedures, provide the file name of the attachment(s) for the Policies and Procedures and page number(s) within the Policies and Procedures that correspond to the question asked.

- 15. Describe the IT infrastructure the MCP has in place today and identify gaps and updates that will be necessary in order to support Community Supports, including the capabilities to:
  - Consume and use claims and encounter data, as well as other data types listed in <u>ECM/Community Supports MCP Contract</u> Section 6: Identifying Members for Community Supports, among other sections, to identify Members who would benefit from Community Supports;
  - ii. Assign Members to Community Supports Providers;
  - iii. Manage records of Members receiving Community Supports including Member data sharing authorizations disclosing Personally Identifiable Information between MCP and Community Supports Provider and other Providers, and among Community Supports Providers and family member(s) and/or support person(s) when required by federal law, whether obtained by a Community Supports Provider or by the MCP;
  - iv. Securely share data with Community Supports Providers and other Providers in support of Community Supports;
  - v. Receive and process Community Supports Provider claims, encounters, and invoices, as applicable, and transmit valid encounters to DHCS;
  - vi. Receive and process supplemental reports from Community Supports Providers;
  - vii. Send Community Supports supplemental and Quarterly Implementation Monitoring reports to DHCS; and
  - viii. Open, track, and manage referrals to Community Supports Providers, including closed loop referral capabilities.

MCP Policies and Procedures (List the file names and page numbers):

- 16. Provide Policies and Procedures describing how the MCP intends to share each of the data elements that the ECM and Community Supports Contract requires MCPs to share with Community Supports Providers, i.e.:
  - . Member assignment files.
  - ii. Encounter and claims data.
  - iii. Physical, behavioral, administrative, and SDOH data (e.g., HMIS data).
  - iv. Reports of performance on quality measures/metrics, as requested.

MCP Policies and Procedures (List the file names and page numbers):

#### Provide brief additional information, as needed:

#### **Oversight of Community Supports**

For Community Supports requirements associated with overseeing Community Supports, see <u>ECM/Community Supports MCP Contract</u> Section 13: DHCS Oversight of Community Supports.

17. Provide Policies and Procedures for how the MCP will monitor the utilization of and/or outcomes resulting from the provision of the Community Supports. Include any activities, reports, and analyses the MCP will use to understand the impact of Community Supports delivery for these purposes.

MCP Policies and Procedures (List the file names and page numbers):

#### **Payment of Community Supports Providers**

For Community Supports requirements associated with payment for Community Supports, see <u>ECM/Community Supports MCP Contract</u> Section 12: Payment of Community Supports Providers.

18. Provide Policies and Procedures for how the MCP will ensure payment to Community Supports Providers is timely. Include expected time-frames for payment and a description of any circumstances in which a payment to a Community Supports Provider for a service provided should be expedited.

MCP Policies and Procedures (List the file names and page numbers):

Provide brief additional information, as needed:

#### **Future Plans to Elect Community Supports**

19. Provide a brief summary of any additional Community Supports the MCP is aiming to elect in future months and years, and the anticipated timeline for launch of these Community Supports. (*Non-binding and for planning purposes only*).

#### c. Proposing Additional Community Supports

20. If the MCP wishes to request DHCS approval of Community Supports outside of the pre-approved Community Supports, provide details on the following for each proposed service. MCPs must also fill out Questions 4 - 19 for any newly proposed Community Supports.

**Proposed Community Support** 

- Service Name
- Service Description (including State Plan service(s) to be avoided)
- Proposed HCPCS Code(s)
- Expected Start Date
- Target Area(s) for Availability of Community Support
- Eligible Population(s)
- Expected Utilization (over 12 months)
- 21. In addition, provide information demonstrating the cost-effectiveness of the proposed Community Support(s), addressing each item below.

**Computing Comparable State Plan Service(s) Cost** (Provide a table using the following headers)

State Plan Service Name	State Plan Service Identifying	 Average Number of Users per	Number of	Average Service Unit Cost
	HCPCS Code		User per 12- Month Period	

### **Table Computing Cost of New Community Supports** (Provide a table using the following headers)

Community	Community	Unit of	Number of	Average	Average
Support	Support	Service	Expected	Number of	Community
Name/	Identifying	Definition	Users per	Units of	Support
Description	HCPCS		12-Month	Service	Unit Cost
	Code		Period	Expected per	
				User per 12-	
				Month	
				Period	

#### **Tracking Community Supports Expenditures**

22. Describe the MCP's ability to track Community Supports expenditures. DHCS will require MCPs to report on these expenditures (reporting requirements under development). This information will help inform DHCS and its actuaries in their work developing prospective managed care capitation rates. If possible, include a description of claim type(s), provider codes/taxonomies, and any other data elements that DHCS and its actuaries will find helpful in assessing the implications for rates of the Community Supports. This information will also be used for the purpose of medical loss ratio (MLR) reporting in accordance with 42 CFR Section 438.8.

MCP Policies and Procedures	(List the file names	and page	numbers):
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#### **Other Information**

23. Please include any other information useful to DHCS in its consideration of the MCP's request to provide the proposed Community Supports.

#### III. Community Supports Provider Capacity Policies and Procedures

MCPs must complete all sections of the MOC, addressing all Community Supports currently offered, as well as Community Supports planned for future implementation.

For Community Supports requirements associated with Community Supports Provider capacity, see <u>ECM/Community Supports MCP Contract</u> Section 4: Community Supports Provider Capacity.

24. For each elected Community Support (including newly proposed Community Supports), provide Policies and Procedures describing to what extent the Community Support will be offered. If a Community Support has been restricted, including any geographic and/or eligibility restrictions, the submission should detail how the MCP intends to expand capacity over the next three (3) years. DHCS will review and determine whether to approve these Policies and Procedures, working with MCPs to make modifications as needed.

MCP Policies and Procedures (List the file names and page numbers):

Provide brief additional information, as needed:

25. For each elected Community Support, provide Policies and Procedures for determining which Members receive the Community Support when capacity is limited, and how these Policies and Procedures are non-discriminatory and equitably applied. Describe how the MCP will manage Provider shortages and ensure the timely provision of Community Supports in accordance with the Contract without resorting to waiting lists.

MCP Policies and Procedures (List the file names and page numbers):

- 26. Using the supplementary Excel file titled "MOC Excel File Community Supports Provider Capacity," list the MCP's contracted Community Supports Providers by county. For each DHCS pre-authorized Community Support that the MCP is currently offering or will offer, information requested includes the following (including for newly proposed Community Supports):
  - i. Community Supports Provider Organization Name<sup>3</sup>
  - ii. National Provider Identifier (NPI) number, if applicable;
  - iii. Provider Type
  - iv. Community Supports to Be Offered
  - v. Counties in Which the Provider Will Operate as a Community Supports Provider (if elected Community Supports is not going to be offered county-wide, indicate the targeted service area of each Community Supports Provider)
  - vi. Community Supports Provider Capacity at Time of Implementation (number of Members)
- 27. Submit Community Supports Provider contract boilerplate: Attach the MCP's planned Community Supports Provider contract that the MCP will use for contracting with its Community Supports Providers. Please provide a crosswalk for the location of each of the DHCS required provisions within the ECM and Community Supports Standard Provider Terms and Conditions (including for newly proposed Community Supports. The MCP is not required to include Community Supports Provider rates in this submission.

<sup>&</sup>lt;sup>3</sup> Or Individual Provider, if not part of an Organization