



*Stakeholder Update Webinar*

# Coordinated Care Initiative

# Agenda

- |               |  |
|---------------|--|
| 12:00 – 12:05 | Welcome and Introductions  |
| 12:05 – 12:25 | Summary of Cal MediConnect to Medicare Medi-Cal Plan Transition and Stakeholder Q&A          |
| 12:25 – 12:35 | June Cal MediConnect (CMC) Dashboard and Stakeholder Q&A                                     |
| 12:35 – 12:50 | Case Study: Community Supports for Seniors and Persons with Disabilities and Stakeholder Q&A |
| 12:50 – 12:55 | Public Health Emergency (PHE) Unwinding  |
| 12:55 – 1:00  | Next Steps   |
| 1:00          | Close  |

# Update: Medicare Medi-Cal Plans in California

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Anastasia Dodson  
Deputy Director  
Office of Medicare Innovation and Integration (OMII)  
Department of Health Care Services (DHCS)

# Medicare Medi-Cal Plans (MMPs) in California

- » Medicare Medi-Cal Plans (MMPs or Medi-Medi Plans) is the California-specific program name for Exclusively Aligned Enrollment Dual Eligible Special Needs Plans (EAE D-SNPs).
- » The program name will be used by DHCS, Health Care Options (HCO), and in beneficiary notices to refer to EAE D-SNPs.
- » Health plans may use their own marketing name, such as in plan-specific member materials.
- » MMPs are like the Cal MediConnect approach:
  - » One entity is responsible for both Medicare and Medi-Cal benefits.
  - » Simplified care coordination.
  - » Allows plans to better integrate benefits, communication to members, and member materials.

# **2023 Cal MediConnect (CMC) to Medicare Medi-Cal Plans (MMPs) Transition**

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# Key Policy Reminders

- » Beneficiary enrollment in a D-SNP (or other Medicare Advantage plan) is voluntary.
- » Medicare beneficiaries may remain in Medicare Fee-for-Service (Original Medicare) and do not need to take any action to remain in Medicare Fee-for-Service.
- » For 2023, beneficiaries already enrolled in Cal MediConnect will automatically be enrolled in the MMP (Medicare D-SNP and Medi-Cal Managed Care Plan, MCP), affiliated with their Cal MediConnect plan – **no action needed by the beneficiary.**
- » Medicare Medi-Cal Plans (MMPs or Medi-Medi Plans) is the California-specific program name for Exclusively Aligned Enrollment Dual Eligible Special Needs Plans (EAE D-SNPs).

# 2023 CMC to MMP Transition

- » On **January 1, 2023**, beneficiaries in CMC plans will be **automatically** transitioned into MMPs and MCPs operated by the same parent company as the CMC plan.
  - » There will be **no gap in coverage**.
  - » Provider networks should be **substantially similar**.
  - » MMP SMAC includes Medicare continuity of care requirements.
- » Health plans have started to communicate now about these upcoming changes with beneficiaries, upon receiving approval from DHCS and CMS.
- » Beneficiaries will begin to receive notices from their CMC plan about the transition **starting in October 2022**.

# MMP Opportunities and Benefits

- » Similar to Cal MediConnect (CMC) approach
- » Integrated Member Materials are permitted by CMS for MMPs
  - » Materials are created and reviewed by DHCS and CMS
- » Benefit Coordination permitted by CMS
  - » Unified plan benefit package integrating covered Medi-Cal and Medicare benefits
  - » Coordinated benefit administration
  - » Unified process/policy for authorizing Durable Medical Equipment (DME)
  - » Enable plan-level integrated appeals
- » Integrated Beneficiary and Provider Communications
- » Simplified Care Coordination



# Questions

» Questions on 2023 CMC to MMP transition?

# June CMC Dashboard

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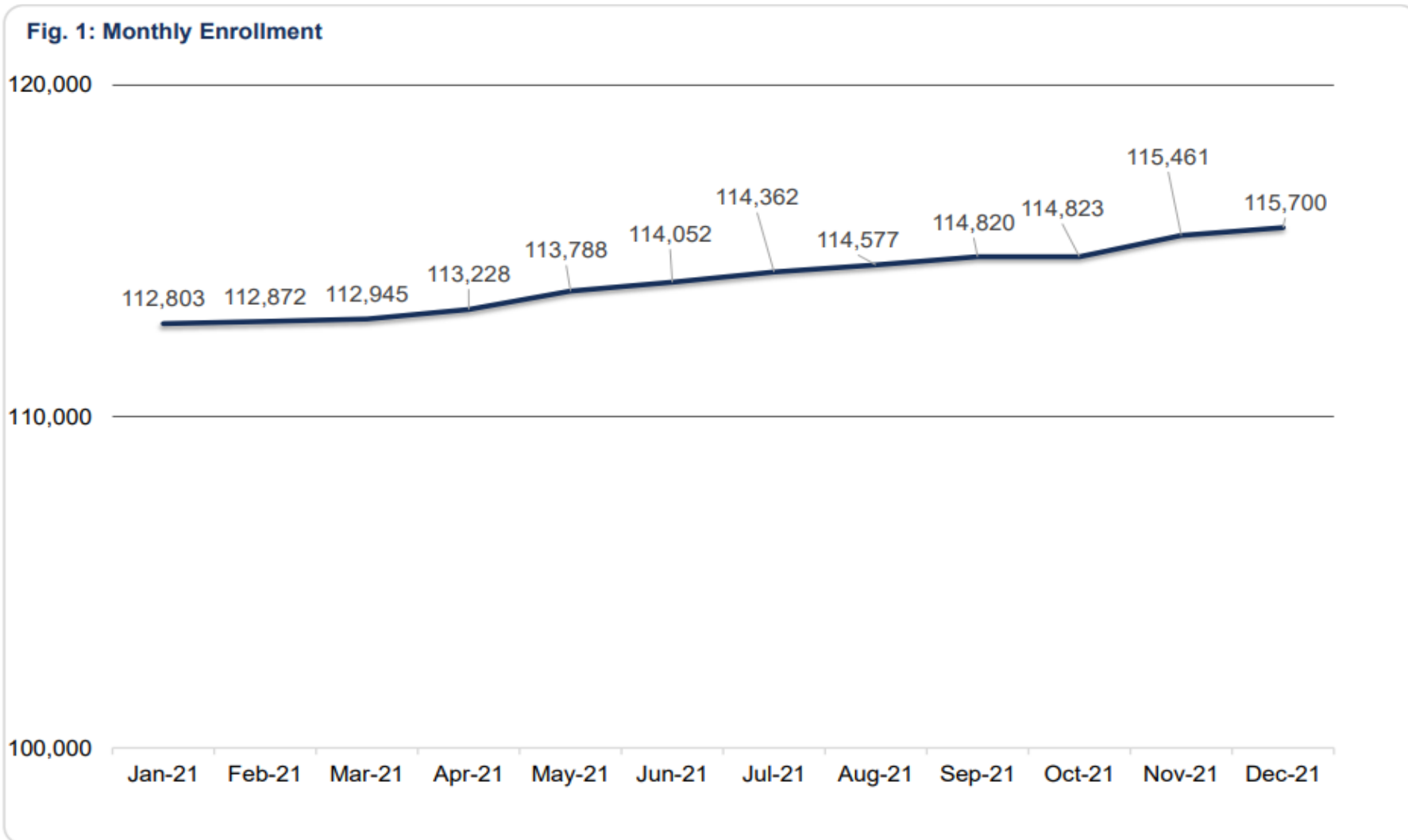
Ken Pham  
Research Data Analyst II  
Department of Health Care Services

# Cal MediConnect (CMC) Dashboard

» The June CMC Dashboard has been posted:

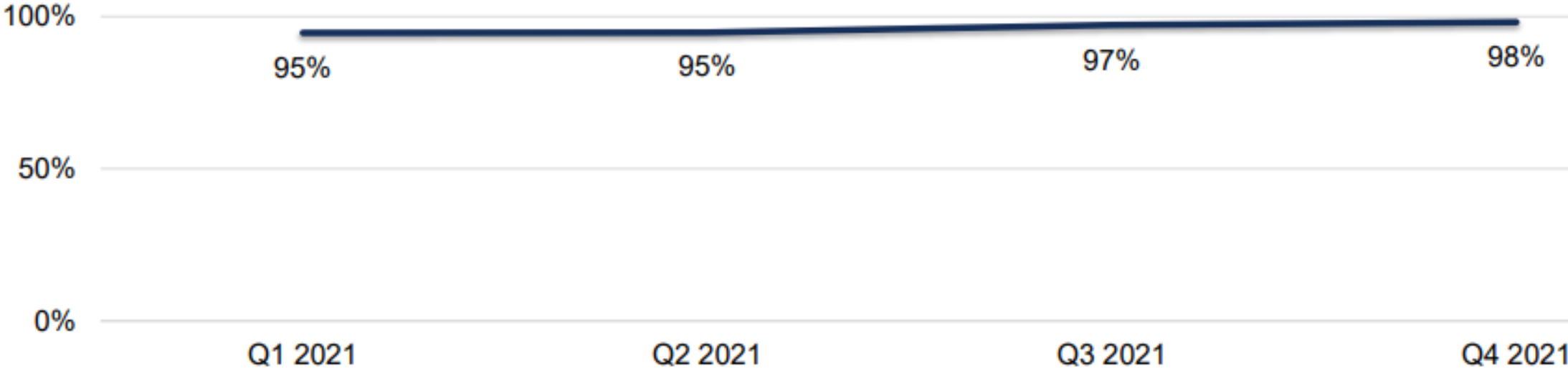
<https://www.dhcs.ca.gov/Documents/CMCDB-June-2022.pdf>

# CMC Dashboard: Enrollment from January 2021 to December 2021

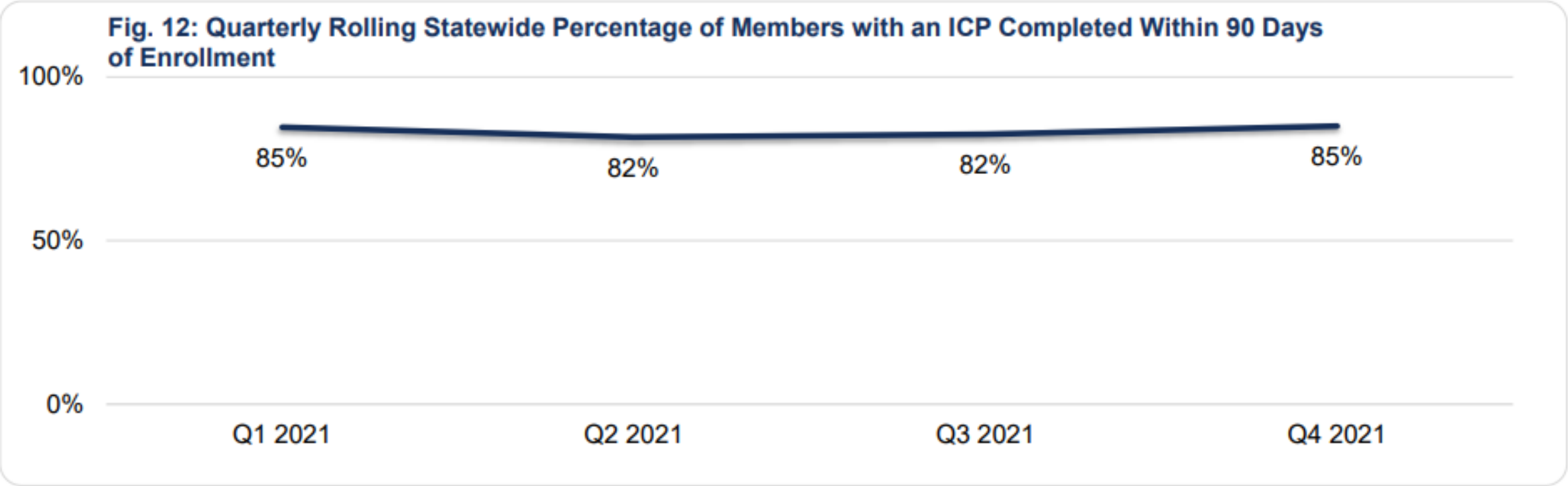


# CMC Dashboard: Care Coordination from Q1 2021 to Q4 2021

**Fig. 8: Quarterly Rolling Statewide Percentage of Members Willing to Participate and who the Plan was able to Locate with an Assessment Completed Within 90 Days of Enrollment**

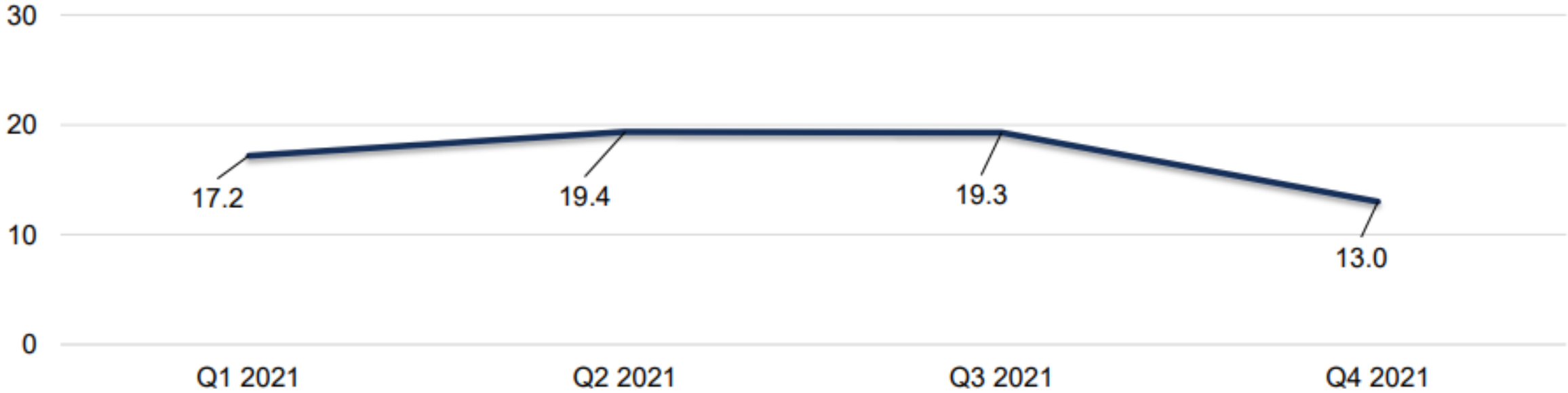


# CMC Dashboard: Individualized Care Plan from Q1 2021 to Q4 2021



# CMC Dashboard: Behavioral Health Emergency Room Utilization from Q1 2021 to Q4 2021

Fig. 24: Quarterly Rolling Statewide Average Count of Emergency Room Behavioral Health Services Utilization per 10,000 Member Months



# Background: CalAIM Community Supports

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Shel Wong  
Staff Services Manager, MCQMD  
Department of Health Care Services



# What are Community Supports?

- » Community Supports are medically appropriate, cost-effective services that MCPs and CMC plans can offer in lieu of traditional Medi-Cal benefits (such as admissions to a hospital or skilled nursing facility).
- » Community Supports are not Medi-Cal benefits and are **optional for the MCP and CMC plan to offer and for the member to accept.**
- » Focus is on addressing combined medical and social determinants of health needs and avoiding higher levels of care and associated costs.

# Community Supports Under CalAIM

- » Community Supports build on the design and learnings from California's **Whole Person Care Pilots (WPC)** and **Health Homes Program (HHP)**
- » Under Community Supports, MCPs and CMC plans are encouraged to contract with local Community Based Organizations (CBOs) to provide Community Supports

# Community Supports Services

DHCS has pre-approved **fourteen (14) Community Supports** that MCPs and CMC plans may offer.

- Housing transition navigation services
- Housing deposits
- Housing tenancy and sustaining services
- Short-term post-hospitalization housing
- Recuperative care (medical respite)
- Respite services
- Day habilitation programs
- Nursing facility transition/diversion to assisted living facilities, such as residential care facilities for elderly (RCFE) and adult residential facilities (ARF)
- Community transition services/nursing facility transition to a home
- Personal care and homemaker services
- Environmental accessibility adaptations (home modifications)
- Meals/medically tailored meals
- Sobering centers
- Asthma remediation

MCPs and CMC plans may also **submit proposals to offer additional Community Supports** that are not on this menu, subject to DHCS approval.

# Who is Eligible for Community Supports?

- » Each Community Support has specific eligibility criteria linked to each service (see the [Community Supports Policy Guide](#) for the eligibility criteria).
- » Members in CMC plans/Medi-Cal Managed Care may be eligible for Community Supports, which are voluntary to the enrollee. This includes dual eligible beneficiaries.
- » The availability of Community Supports will vary based on the CMC plan/MCP and the County.



# Community Supports Offered by CMC Plans

- » Some of the Community Supports currently being offered by CMC Plans include:
  - » 10 CMC Plans:
    - » Housing Transition/Navigation, Housing Tenancy & Sustaining Services, Housing Deposits
  - » 9 CMC Plans:
    - » Recuperative Care (Medical Respite), Medically Supportive Food/ Meals/ Medically Tailored Meals
  - » 7 CMC Plans:
    - » Personal Care and Homemaker Services, Sobering Centers
  - » 6 CMC Plans:
    - » Respite Services, Community Transition Services/Nursing Facility Transition to a Home, Environmental Accessibility Adaptations, Asthma Remediation
  - » 4-5 CMC Plans:
    - » Short-Term Post Hospitalization Housing, Nursing Facility Transition/ Diversion, Day Habilitation Programs
- » For more information on what Community Supports your plan may offer, please contact your CMC Plan.

# Community Supports Providers

- » Community Supports providers **deliver critical medical and social services**, such as housing navigation, recuperative care, medically-tailored meals, or community transitions, which are not typically funded by Medi-Cal.
- » Examples of the types of Community Supports providers CMC plans/MCPs may choose to contract with include but are not limited to:
  - » Community based organizations (CBOs); home health or respite agencies; home delivered meals providers; and affordable housing and supportive housing providers

# More Information

- » [CalAIM Enhanced Care Management, Community Supports, and Incentive Payment Program Initiatives Website](#)
- » [Community Supports Explainer](#)
- » [Community Supports Policy Guide](#)
- » [CalAIM ECM and Community Supports FAQ](#)
- » [Community Supports Selection by MCP and County](#)





# Community Support Services

**Tracee Roque**  
**Manager, Community Supports**

# Community Supports

Cost effective alternatives to services or settings available through the Medicaid plan.



## IEHP began offering the following Community Supports services in **January 2022**

- Housing Deposits
- Housing Transition Navigation Services
- Housing Tenancy and Sustaining Services
- Short-Term Post Hospitalization Housing
- Recuperative Care
- Community Transition Services/Nursing Facility Transition to a Home
- Sobering Centers
- Environmental Accessibility Adaptions
- Meals/Medically Tailored Meals or Medically Supportive Meals
- Asthma Remediation
- Nursing Facility Transition/Diversion to Assisted Living Facilities, such as Residential Care Facilities for the Elderly (RCFEs) & Adult Residential Facilities (ARFs)

Please visit the link to learn more about the services: <https://www.iehp.org/en/providers/special-programs?target=CSS>

**An additional 3 services will be offered in 2023:  
Respite Care, Day Habilitation, Personal Care & Homemaker services**

# Community Support Services & IEHP Members



Offered throughout San Bernardino & Riverside Counties, with 2 exceptions:

**Sobering Centers (RIV only)**

**Community Transitions (SB only)**

*We are currently working with our county entities & other CBOs to fill these gaps.*

DHCS launched the initiative , California Advancing & Innovating Medi-Cal (CalAIM) in an effort to improve the quality of life and health outcomes of Medi-Cal beneficiaries. A key feature of CalAIM is the introduction to a menu of new services (Community Supports) which can substitute for covered Medi-Cal services.



Community Supports are available for all lines of business (Medi-Cal, CalMedi Connect & Medi-Medi Members). IEHP Members may self refer for services.



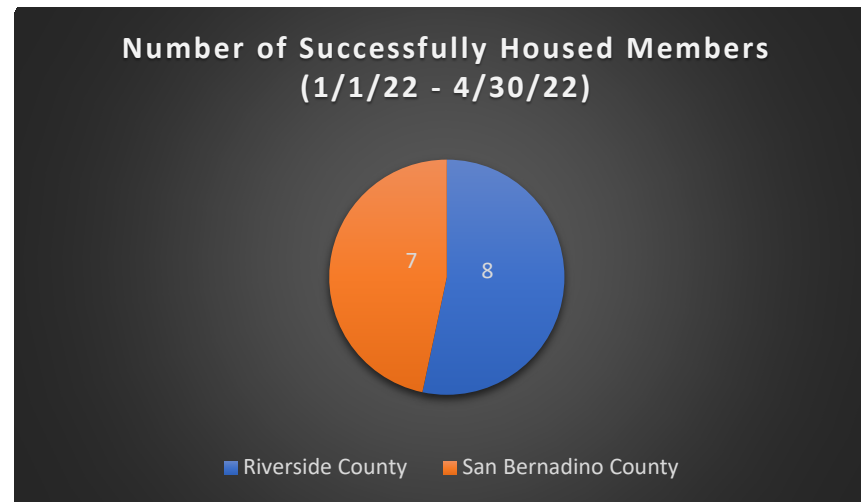
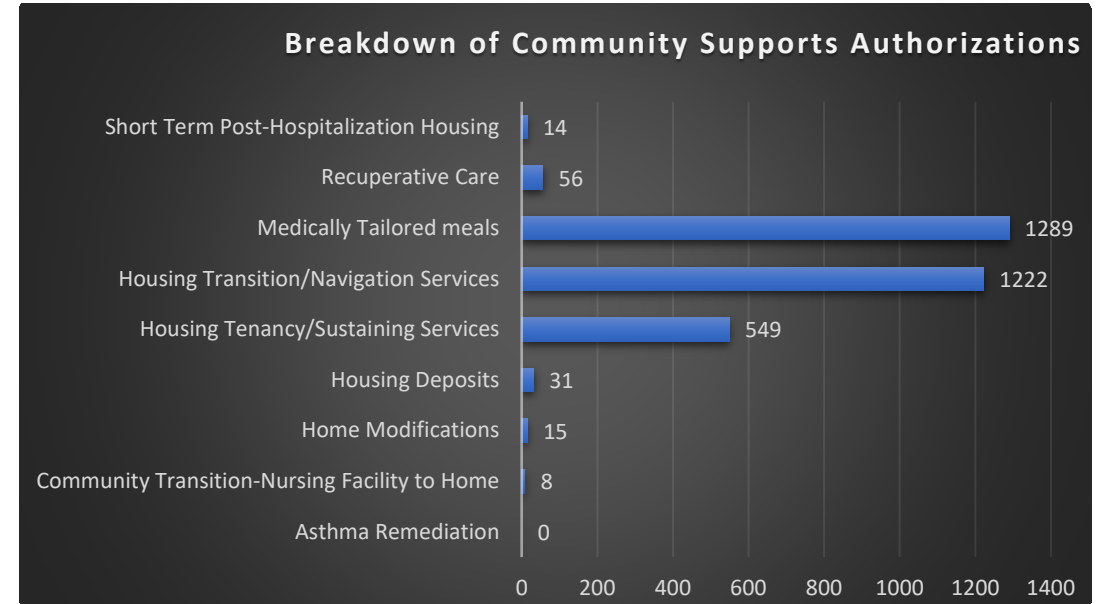
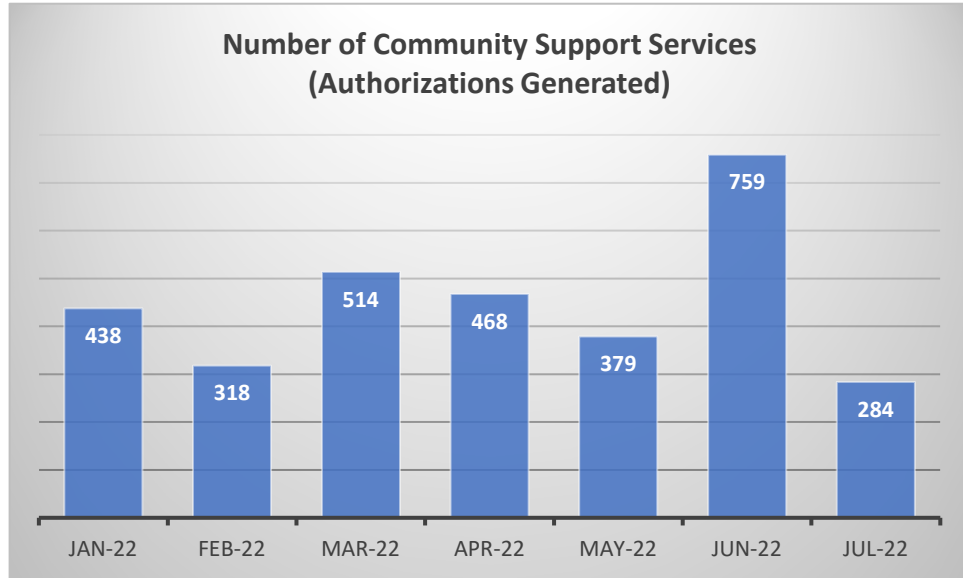
Members assigned PCP, Specialist, and/or Behavioral Health Provider can refer Members for Community Support Services.



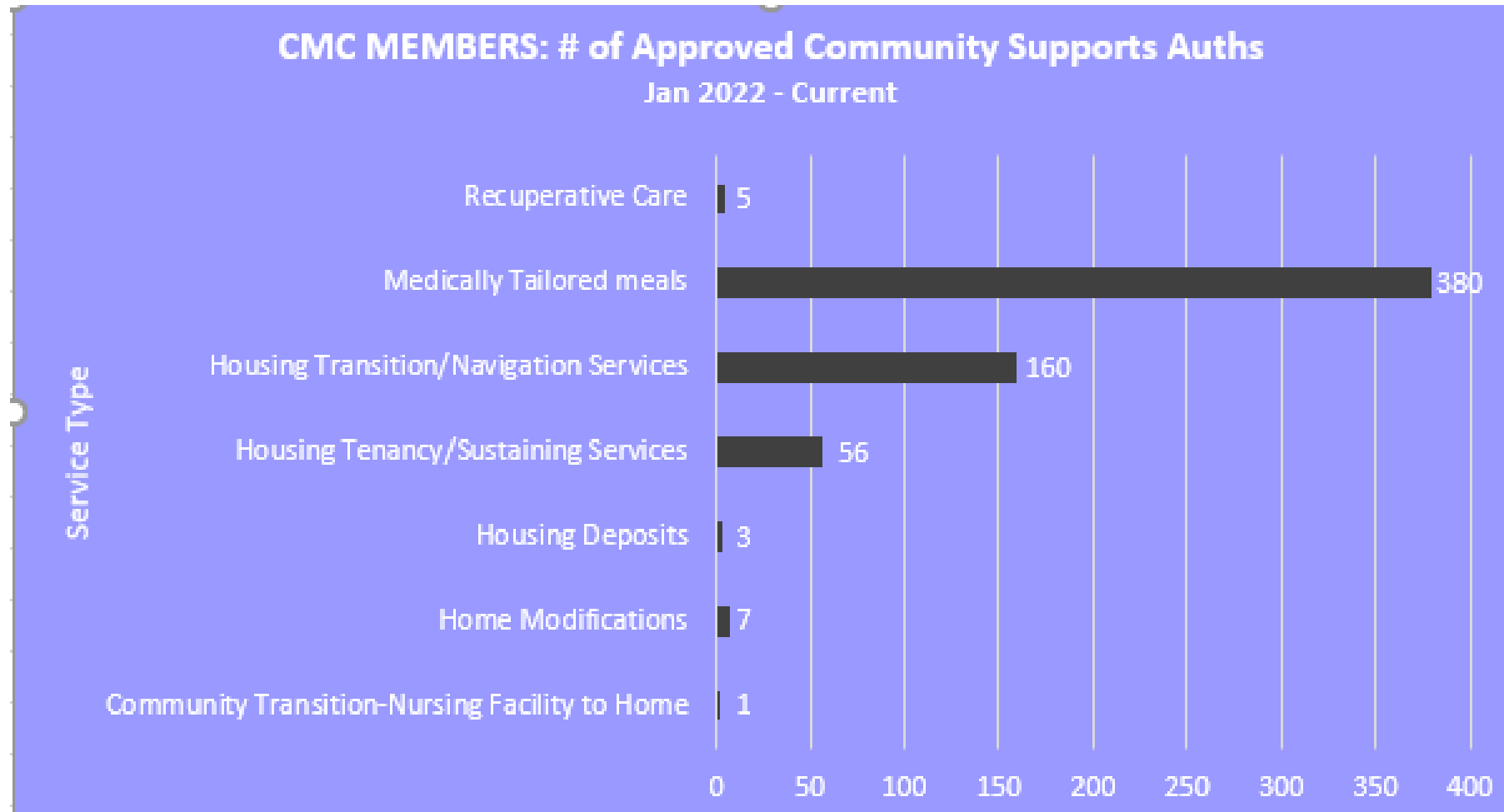
For Members enrolled in Enhanced Care Management Providers (previously known as Health Homes) care teams may also assist with connecting Members to Community Supports.



# Community Supports Services Data



# Community Supports Services Data & CMC Members



# How to Refer a Patient/Member for Community Supports Services



- You may visit the below link to access “how to refer” for Community Supports <file:///C:/Users/i4147/AppData/Local/Temp/20220225%20-%20UPDATE%20-%20Community%20Supports%20Referral%20Process-1.pdf>

## KEY CONTACTS

**TRACEE ROQUE – MANAGER, COMMUNITY SUPPORTS (909) 296-3616 [Roque-t@iehp.org](mailto:Roque-t@iehp.org)**

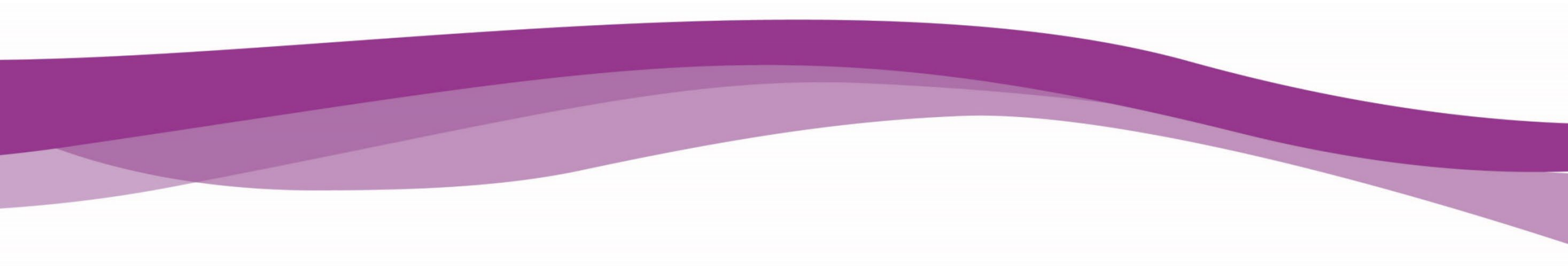
**ANITA HOLMES, LCSW - DIRECTOR OF INTEGRATED CARE (909) 296-3689 [Holmes-a@iehp.org](mailto:Holmes-a@iehp.org)**



# Questions

» Questions on Community Supports?

# Public Health Emergency (PHE) Unwinding





# Public Health Emergency (PHE) Unwinding

- » **The COVID-19 PHE will end soon and millions of Medi-Cal beneficiaries may lose their coverage.**
- » **Top Goal of DHCS:** Minimize beneficiary burden and promote continuity of coverage for our beneficiaries.
- » **How you can help:**
  - Become a **DHCS Coverage Ambassador**
  - Download the Outreach Toolkit on the [DHCS Coverage Ambassador webpage](#)
  - [Join the DHCS Coverage Ambassador mailing list](#) to receive updated toolkits as they become available

# DHCS PHE Unwind Communications Strategy

- » **Phase One: Encourage Beneficiaries to Update Contact Information**
  - Launch immediately
  - Multi-channel communication campaign to encourage beneficiaries to update contact information with county offices.
  - Flyers in provider/clinic offices, social media, call scripts, website banners
  
- » **Phase Two: Watch for Renewal Packets in the mail. Remember to update your contact information!**
  - **Launch 60 days prior to COVID-19 PHE termination.**
  - Remind beneficiaries to watch for renewal packets in the mail and update contact information with county office if they have not done so yet.

# Next Steps

- » For more information on the Coordinated Care Initiative (CCI) – including enrollment, quality data, and toolkits please see the [Coordinated Care Initiative Overview webpage](#). You can send any questions or comments to [info@CalDuals.org](mailto:info@CalDuals.org).
- » Next Managed Long-Term Services and Supports (MLTSS) & Duals Integration Stakeholder Workgroup Meeting: **Thursday, August 18<sup>th</sup> at 10 a.m.**