



Medi-Cal Healthier CA for All

Medi-Cal Children's Health Advisory Panel
January 30, 2020



Overview

DHCS has developed a comprehensive and ambitious framework for the upcoming waiver renewals that encompasses a broader delivery system, and program and payment reform across the Medi-Cal program, called Medi-Cal Healthier CA for All.

Includes initiatives and reforms for:

- Medi-Cal Managed Care
- Behavioral Health
- Dental
- Other County Programs and Services



Overview

- Medi-Cal has significantly expanded and changed over the last ten years
- Depending on the needs of the beneficiary, some may need to access six or more separate delivery systems
- As one would expect, need for care coordination increases with greater system fragmentation, greater clinical complexity, and/or decreased patient capacity for coordinating their own care.



Overview

- Offers solutions to reinforce the stability of the Medi-Cal program and allows the critical successes of waiver demonstrations such as Whole Person Care, the Coordinated Care Initiative, public hospital system delivery transformation, and the coordination and delivery of quality care to continue and be expanded.
- Seeks to build upon past successes and improve the entire continuum of care across Medi-Cal, ensuring the system more appropriately manages patients over time through a comprehensive array of health and social services spanning all levels of intensity of care, from birth to end of life.



Overview

Advances several key priorities of the Newsom Administration by leveraging Medi-Cal as a tool to help address many of the complex challenges facing California's most vulnerable residents, such as:

- homelessness,
- increasing behavioral health care access,
- children with complex medical conditions,
- growing number of justice-involved populations who have significant clinical needs, and
- growing aging population.



Goals

This initiative has three primary goals:

- Identify and manage member risk and need through Whole Person Care approaches and addressing social determinants of health;
- Move Medi-Cal to a more consistent and seamless system by reducing complexity and increasing flexibility; and
- Improve quality outcomes and drive delivery system transformation through value-based initiatives, modernization of systems and payment reform.



Identify and Manage Member Risk and Need

The following proposals fall under this goal as well as incorporate the third goal of improved quality outcomes:

- Population Health Management
- Enhanced Care Management
- Mandatory Medi-Cal Application & Behavioral Health Coordination
- In Lieu of Services and Incentives
- Mental Health IMD Waiver (SMI/SED)
- Full Integration Plans
- Long-Term Plan for Foster Care



Population Health Management

Medi-Cal managed care plans shall develop and maintain a patient-centered population health strategy, which is a cohesive plan of action for addressing member needs across the continuum of care based on data driven risk stratification, predictive analytics, and standardized assessment processes.

The plan shall include, at a minimum, a description of how it will:

- Keep all members healthy by focusing on preventive and wellness services;
- Identify and assess member risks and needs on an ongoing basis;
- Manage member safety and outcomes during transitions, across delivery systems or settings, through effective care coordination; and
- Identify and mitigate social determinants of health and reduce health disparities or inequities.



Enhanced Care Management

- DHCS proposes to establish a new, statewide enhanced care management benefit effective January 1, 2021.
- An enhanced care management benefit would provide a whole-person approach to care that addresses the clinical and non-clinical needs of high-need Medi-Cal beneficiaries.
- Enhanced care management is a collaborative and interdisciplinary approach to providing intensive and comprehensive care management services to individuals.
- The proposed benefit builds on the current Health Homes Program and Whole Person Care pilots and transitions those pilots to this new statewide benefit to provide a broader platform to build on positive outcomes from those programs.



Enhanced Care Management

Target populations include, but are not limited to:

- High utilizers with frequent hospital or emergency room visits/admissions;
- Individuals at risk for institutionalization with Serious Mental Illness, children with Serious Emotional Disturbance or Substance Use Disorder with co-occurring chronic health conditions;
- Individuals at risk for institutionalization, eligible for long-term care;
- Nursing facility residents who want to transition to the community;
- Children or youth with complex physical, behavioral, developmental and oral health needs (i.e. California Children Services, foster care, youth with Clinical High Risk syndrome or first episode of psychosis);
- Individuals transitioning from incarceration; and
- Individuals experiencing chronic homelessness or at risk of becoming homeless.



In Lieu of Services

- Medi-Cal managed care plans will integrate in lieu of services into their population health management plans – often in combination with the new enhanced care management benefit.
- In lieu of services may be focused on addressing combined medical and social determinants of health needs and avoiding higher levels of care.
- For example, in lieu of services might be provided as a substitute for, or to avoid, hospital or nursing facility admissions, discharge delays, and emergency department use.



In Lieu of Services

DHCS is proposing to cover the following distinct services as in lieu of service under Medi-Cal managed care. Details regarding each proposed set of services are provided in Appendix D of the proposal.

- Housing Transition/Navigation Services
- Housing Deposits
- Housing Tenancy and Sustaining Services
- Short-Term Post-Hospitalization Housing
- Recuperative Care (Medical Respite)
- Respite
- Day Habilitation Programs
- Nursing Facility Transition/Diversion to Assisted Living Facilities
- Nursing Facility Transition to a Home
- Personal Care (beyond In-Home Supportive Services) and Homemaker Services
- Environmental Accessibility Adaptations (Home Modifications)
- Meals/Medically Tailored Meals
- Sobering Centers



Moving Medi-Cal to a Consistent and Seamless System

The following proposals fall under this goal as well as incorporate the third goal of improved quality outcomes:

- Standardize the Managed Care Benefit
- Standardize Managed Care Enrollment
- Transition to Statewide Managed Long-Term Services and Supports (MLTSS)
- NCQA Accreditation of Medi-Cal Managed Care Plans
- Regional Rates for Medi-Cal Managed Care
- Behavioral Health Proposals
 - Payment Reform
 - Revisions to Medical Necessity
 - Administrative Integration Statewide
 - Regional Contracting
 - SUD Managed Care Renewal (DMC-ODS)
- Future of Dental Transformation Initiative Reforms
- Enhancing County Oversight and Monitoring
- Improving Beneficiary Contact and Demographic Information



Stay Informed

Please [subscribe](#) to DHCS' stakeholder email service to receive updates.

Listen-in on all workgroup meetings and attend the SAC and BH-SAC meetings.

For any other comments, questions, or concerns, please contact CalAIM@dhcs.ca.gov.



Discussion

