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**Phase-In Methodology
Whole Child Model
November 2018**

Methodology: The Department of Health Care Services (DHCS) proposes a phase-in methodology for the transition of responsibility for current California Children’s Services (CCS) between counties and Medi-Cal managed care health plans (health plans) participating in the Whole Child Model. DHCS considered many factors when determining an approach to the transition including accessing the network overlap between existing CCS providers and health plan providers, the number of counties each health plan operates in, the number of CCS beneficiaries in each county by health plan, whether or not counties already had a single health plan rate across them, whether CCS services are currently carved-in or out of the health plan, and if the CCS Program operates as an independent or dependent county.

Whole Child Model Phase-In Schedule

Phases	
Phase 1 – July 1, 2018	<ul style="list-style-type: none"> ➤ CenCal Health ➤ Central California Alliance for Health ➤ Health Plan of San Mateo
Network Overlap	Medium to Large
Number of Counties	Small
Total Population	Small
CCS Carved-In / Carved-Out	Both
Independent / Dependent	Independent
Phase 2 – No sooner than Jan 1, 2019	<ul style="list-style-type: none"> ➤ Partnership HealthPlan
Network Overlap	Small to Large
Number of Counties	Large
Total Population	Large
CCS Carved-In / Carved-Out	Both
Independent / Dependent	Both
Phase 3 – No sooner than July 1, 2019	<ul style="list-style-type: none"> ➤ CalOptima
Network Overlap	Large
Number of Counties	Small
Total Population	Large
CCS Carved-In / Carved-Out	Carved-Out
Independent / Dependent	Independent

Health Plan and CCS County Information by Phase

Health Plan	County	CCS Transitioning Population**	Independent / Dependent County	CCS Services Carved-In / Carved-Out	Medi-Cal and CCS Network % Overlap ¹
Phase 1 – July 1, 2018					
CenCal	Santa Barbara	1,950	Independent	Carved-In	90-100%
	San Luis Obispo	970	Independent	Carved-Out	90-100%
Central California Alliance for Health	Merced	2,380	Independent	Carved-Out	60-69%
	Monterey	2,910	Independent	Carved-Out	70-79%
	Santa Cruz	1,120	Independent	Carved-Out	80-89%
Health Plan of San Mateo	San Mateo	80	Independent	Carved-In	60%
Phase 2 – No sooner than Jan 1, 2019					
Partnership HealthPlan	Modoc*	40	Dependent	Carved-Out	80-89%
	Lassen*	90	Dependent	Carved-Out	90-100%
	Trinity*	50	Dependent	Carved-Out	90-100%
	Del Norte*	140	Dependent	Carved-Out	90-100%
	Siskiyou*	250	Dependent	Carved-Out	90-100%
	Shasta*	850	Dependent	Carved-Out	90-100%
	Lake*	360	Dependent	Carved-Out	90-100%
	Humboldt*	700	Independent	Carved-Out	90-100%
	Mendocino	390	Independent	Carved-Out	90-100%
	Sonoma	1,620	Independent	Carved-Out	80-89%
	Napa	460	Independent	Carved-In	90-100%
	Marin	610	Independent	Carved-In	80-89%
	Solano	1,060	Independent	Carved-In	90-100%
Yolo	730	Independent	Carved-In	90-100%	
Phase 3 – No sooner than July 1, 2019					
CalOptima	Orange	11,960	Independent	Carved-Out	55-59%

* Note the following Partnership HealthPlan Counties (Modoc, Lassen, Trinity, Del Norte, Siskiyou, Shasta, Humboldt, and Lake) rates are part of the 18 County – Regional Model, one capitation rate is developed for all 18 counties. DHCS would develop the CCS rate in the same county grouping to align with our existing rate structure.

** Source: Management Information System/Decision Support System (MIS/DSS), December 2016 Month of Eligibility.

¹ Medi-Cal and CCS Network % Overlap results as of May 2016