

## **November 20 Stakeholder Advisory Committee: Rural Managed Care Expansion Update**

On September 1, 2013, more than 110,000 beneficiaries transitioned to Medi-Cal managed care in eight northern counties: Del Norte, Humboldt, Lake, Lassen, Modoc, Shasta, Siskiyou and Trinity, where they are beneficiaries of Partnership HealthPlan of California (PHC) under the County Organized Health System (COHS) Model. On November 1, 2013, DHCS completed the expansion of Medi-Cal managed care in the remaining 20 California counties, including the 18 Regional Model counties of Alpine, Amador, Butte, Calaveras, Colusa, El Dorado, Glenn, Inyo, Mariposa, Mono, Nevada, Placer, Plumas, Sierra, Sutter, Tehama, Tuolumne, and Yuba; the Imperial Model; and the San Benito Model. The available health plans in the 20 counties, depending upon the county, are Anthem Blue Cross (Anthem), California Health and Wellness Plan (CHWP), Kaiser Permanente (Kaiser) and Molina Healthcare of California (Molina). In the Regional Model, California Health and Wellness Plan has 66,541 new beneficiaries and Anthem has 56,824. In the San Benito Model, Anthem has 5,456 new beneficiaries, with only 1,419 choosing to remain in Fee-For-Service Medi-Cal. In the Imperial Model, CHWP has 29,797 new beneficiaries and Molina 9,193. Kaiser also has 1,429 new Medi-Cal beneficiaries who were transitioned during the final Healthy Families' phase.

The Medi-Cal Managed Care Division (MMCD) is currently monitoring the rural expansion for enrollment, Primary Care Provider (PCP) assignment, call center reporting of access to care and continuity of care (at the plan level and within MMCD), and grievances. Of the over 100,000 beneficiaries transitioned into Medi-Cal managed care for the rural expansion, approximately 90 percent were assigned a PCP within 30 days of enrollment. Beneficiaries not assigned to a PCP within 30 days were those with special needs and were assigned to a PCP within 60 days of enrollment. Less than 5 percent of beneficiaries requested a change of PCP within the first two months. Of the over 24,000 calls received by the health plans, less than 1 percent reported either continuity of care or access to care concerns. Of the approximately 6,000 calls received by MMCD, less than 3 percent were related to the rural expansion. Of those calls, the majority of calls were regarding education and PCP assignment, less than 1 percent were related to care or PCP concerns. Thus far, monitoring has not reflected significant concerns for rural expansion beneficiaries transitioning to Medi-Cal managed care.