



# Contra Costa Health Plan

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## Dual RFI Response Summary

*Improving Care through Integrated Medicare and Medical Delivery Models*

Stakeholder Meeting  
August 30, 2011



# Organization Background

- 37 year experience as first county operated HMO in USA.
- As division of County Health Services Department integrates care with Regional Medical Center, clinics, mental health, substance abuse services and public health.
- Serves over 100,000 members.
- Provides 24/7 Advice Nurse services and case management.



## Existing Problems this Proposal Addresses

- Lack of access to adequate home and community based services results in unnecessary / inappropriate ER visits, hospital admissions, and SNF placements.
- Currently, as a two plan county we are not able to offset cost of home and community based services from reductions in skilled nursing utilization.



# Overview: Proposed Integrated Care Plan

- Will service up to an additional 21,000 duals residing throughout the county.
- Will expand two existing provider networks
  1. County Regional Medical Center and Neighborhood Clinics
  2. Community Physician Network
- Will expand MOUs, vendor agreements, and contracts for a broad range of long term services and supports.
- If ultimately deemed financially feasible, Contra Costa County will assume financial risk for a duals pilot.



# Key Points: Proposed Integrated Care Model

- Long Term Care Integration Plan was developed in multi-year partnership with County Aging and Adult Services and Community Stakeholders such as MSSP, IHSS, and ADHC.
- Member-centered Care Management Model.
- Interdisciplinary medical / social assessment will build on existing case management health risk assessments and will take into account the needs / preferences of member, caregiver, and family.
- Care planning will identify appropriate long term services and supports to maximize personal independence and reduce reliance on ER, hospital, and skilled nursing.



# Specific Care Integration Challenges

- **Mental and Behavioral Health Care:**

In partnership with our County Ambulatory Primary Care and County Mental Health Services, duals will be able to receive integrated, collaborative care at County Clinics as well as contracted providers.

- **Long Term Care:** Ongoing state budget and benefit reductions (e.g., ADHC) threaten the continuity of care infrastructure of home and community based services to prevent unnecessary institutionalization.



# Measures for Success

- Reduced utilization by duals of emergency, hospital, and skilled nursing care.
- Improved health measurement indicators regarding chronic disease and chronic conditions for the dual population.



## Information Needed from CMS and the State

- Will mandatory or automatic enrollment of duals be permitted?
- Will payment rates for the pilots be based on actuarially determined risk adjustments as determined by health risk assessments?
- To respond to an RFP we need cost, utilization, and demographic data from Medi-Cal, Medicare, and IHSS for duals residing in the county.
- Will funding be available to cover pre-implementation and start-up costs of the selected pilots?