



Drug Medi-Cal Organized Delivery System – Best Practices for Provider Engagement

Technical Assistance Webinar for Counties
June 7, 2018



Overview of Presentation

- State Updates
- County Presentations:
 - Riverside & Los Angeles
- Questions and Discussion
- Adjourn



State Updates



Best Practices for Provider Engagement

Riverside University Health System – Behavioral Health,
Substance Abuse Prevention & Treatment Program

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Heidi Gomez, SAPT QI Supervisor



It is never too early to engage providers in the planning, development, and implementation of your DMC-ODS Waiver Process.

Riverside County Waiver Timeline

- First fiscal rates approved May 27, 2016
- Implementation Plan approved July 8, 2016
- Went live with DMC-ODS Waiver services beginning February 1, 2017
- Fiscal rates adjusted November of 2017

Riverside County SAPT Provider Network

- 9 County-operated Substance Abuse Clinics
- 18 Contracted Providers
- 60+ Provider Sites
- Providers from within Riverside County and from neighboring counties (San Bernardino and Los Angeles)

Riverside County

- Most providers have long standing relationship with RivCo (10+ years).
- We engaged providers in the process beginning in 2014.
- This allowed for sustainable “buy-in” from providers for the entire project.



Elements of DMC-ODS That Enlisted Provider Input

- Design of call-in center
- Shift of residential bed placement control to County
- Development of ASAM screening tools
- Creating new monitoring tools
- Workforce development and staffing needs under the waiver

Provider Training Provided

- ASAM placement and levels of care
- Case Management and Recovery Services
- EBP Practices and Curriculum (Motivational Interviewing, LIB, Matrix, CBT for PTSD)
- All Provider Meetings every other month
- Rate proposal
- Living “Waiver FAQ” document
- Contract updates through “Provider Bulletins” (similar to Information Notices)

Benefits from Early Provider Involvement

- Providers feel more like partners in the process.
- Providers are more communicative with county and more likely to ask questions.
- QI of providers not adversarial – more like a way to help them succeed.
- Providers committed to an increase of 50% - 75% more treatment slots across the board.

For Questions

- Contact
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Best Practices for Provider Engagement:

Provider Preparedness and Communication Efforts in Los Angeles County

June 7, 2018





START-ODS

SYSTEM TRANSFORMATION TO ADVANCE RECOVERY AND TREATMENT

Los Angeles County's Substance Use Disorder Organized Delivery System

What made this a transformation (besides the STCs)?

- DMC primary payor system-wide, with funding hierarchy for secondary payors (e.g., CalWORKs, SAPT BG)
- All contracted sites must be DMC certified or licensed
- Single benefit package regardless of payor, meaning no more funding source specific contracts
- Cost Reconciliation – Lesser of Costs or Charges

What is the scope of our transformation?

- 147 Network Providers - Contractors
 - Of which 79 provide SUD treatment services
- 573 Service Sites
 - Of which 351 are SUD treatment sites, including 1 County-operated facility (outpatient, residential)
- Contracted Budget: \$320,597,083
 - Includes CalWORKs, GR, AB 109, Block Grant etc.

Supporting Provider Readiness: *Before DMC-ODS Launch*



Buy-In and Accountability: Provider Engagement

- **Develop Implementation Plan: 20-22 Months in Advance**
 - 1 kick-off, 1 wrap-up, and 8 regional sessions, summary, Q&A
- **Define QI & UM Standards: 12-15 Months in Advance**
 - 4 workgroups to draft manual for clinical service delivery
- **Refine Benefit Package: 11-16 Months in Advance**
 - 12 workgroups on each benefit/level of care
- **Regional Executive Briefings: 14 Months in Advance**
 - 4 regional sessions on necessary provider preparations for launch
- **Provider Meetings: 1-7 Months in Advance**
 - Monthly on operationalizing key DMC-ODS topics (mainly 1-way)

Buy-In and Accountability: Training and TA

- **Health Care Reform and Managed Care: 2013-2015**
 - 9 trainings on topics such as newly eligibles, Medi-Cal enrollment, acquiring coverage, care coordination with health plans, DMC, CARF
- **New Clinical Requirements: 2016**
 - 36 trainings on topics such as MAT, ASAM, MI, CBT, continuum of care, documentation, DMC, and business solvency
- **New Business Requirements: January – June 2017**
 - 10 trainings on DMC application process, and projecting service capacity and revenue to ensure business solvency

Buy-In and Accountability: Capacity Building Initiative

- **New funding, and review process, to enable providers to:**
 - **Build Organizational Capacity to Thrive under DMC-ODS**
 - Organizational Leadership and Planning (e.g., Board development)
 - Strategic Relationships (e.g., restructuring, new partnerships)
 - Internal Operations/Management (e.g., CARF, CLAS)
 - Technology Infrastructure Development (e.g., computers, website)
 - Workforce Development (e.g., recruit LPHAs, training)
 - **Strengthen Residential Infrastructure to Improve Environment for Patients and Increase Bed Capacity**
 - General Repair and Improvements (e.g., furniture, appliances)
 - Health and Safety (e.g., emergency systems)
 - ADA Accessibility (e.g., wheelchair accessible bathrooms, ramps)

Supporting Provider Engagement: *Post DMC-ODS Launch – Year 1*



Buy-In and Accountability: Technical Readiness Review

- **County Multi-Disciplinary Team (MDT):**
 - Clinical and QI/UM
 - Contract Monitoring
 - Finance
 - Strategic Planning
 - Systems of Care (Adult/Youth)
- **2-Hour Session with County MDT and Provider Leadership**
 - Held at the Network Provider's Site
 - 2-Part Session: Clinical/Programs and Finance/Contracts
 - Technical Assistance Focused – Q&A vs. Compliance

Buy-In and Accountability: Provider Engagement

- **START-ODS TA Calls: Every Other Week**
 - Responses to submitted questions (optional attendance)
- **Provider Meetings: Monthly**
 - Operationalizing key DMC-ODS topics (now 2-way, extensive Q&A)
- **Benefit-Specific Meetings: Monthly or Bi-Monthly**
 - Recovery Bridge Housing, Co-Located Navigation Service, 24/7 Call-Line
- **Population-Specific Meetings: Bi-Monthly or Quarterly**
 - Address key groups such as youth, perinatal, criminal justice, homeless
- **Regional Reflection Sessions: 4 Sessions, 1-Time**
 - Learn from providers about year-one, and recommendations for year-two

Buy-In and Accountability: Training and TA

- **Clinical Skills and Tools: 54 Sessions**
 - Adult/Youth: ASAM, CBT, COD, DSM-5, MAT, MI, treatment plan
 - Youth: COD, EBPs, medical necessity, recovery models, family services
- **Business Development: 24 Sessions**
 - Capacity management, projecting capacity and revenue, utilization management and revenue, streamlining workflows, first impressions
- **Learning Collaborative: 2 Series, 6-Months Each**
 - Learn to describe, visualize, and assess changing business needs to implement a plan to thrive in the new managed care environment
 - In-person training, and in-person/phone coaching

Buy-In and Accountability: Communicating Requirements



- **Website**
 - All contract related documents posted, categorized by patient/provider
- **Bulletins**
 - Authority approved by Board of Supervisors: Bulletin = Contract
 - Enables quick contract updates to respond to policy changes
- **Provider Manual**
 - Part of the DMC Contract
 - Ability to revise (currently 4 updates have been made)
 - Provider One-Stop Shop: Clinical, programmatic, contract management, and financial requirements

Provider Engagement Leads to a Stronger System of Care Especially when Enhancements are Extensive

- **Major LAC-Specific Changes Year One**
 - Single Benefit Package and One Contract
 - DMC Certification is Required – Payor of First Resort
 - Leverage Non-DMC Funds and Federal Match, New Benefits
 - Use of County's EHR or Agency-Purchased/Interoperable EHR
 - ...and the new DMC-ODS and 42 CFR Part 438 requirements
- **Potential LAC Enhancements Year Two**
 - Population-Specific Service Criteria
 - Staffing Standards

COLLABORATION CONTINUES!



Thank You!

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Questions and Discussion

*For optimal sound quality, please ensure that you are dialed-in using your phone and that you have inputted your **audio PIN**.*





DMC-ODS Resources

- For additional information, please see the DMC-ODS Resources section of the DHCS Website: http://www.dhcs.ca.gov/provgovpart/Pages/DMC_ODS_Resources.aspx
- For questions, please contact dmcodswaiver@dhcs.ca.gov



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