



November 3, 2011

Dear Department of Health Care Services:

Community Health Group is a not-for-profit health plan currently serving approximately 136,000 members in San Diego County. We have been dedicated to coordinating quality health care services in a culturally competent manner to Medi-Cal, Healthy Families and Medicare Special Needs Plan members for nearly 30 years.

Upon review of the Department of Health Care Services (DHCS) California's Duals Demonstration: Background and Process Overview, Community Health Group respectively offers the following comments:

- In Geographic Managed Care (GMC) counties member choice is imperative and the very basis of the GMC model. For this reason it lends itself to an inclusive Request for Solutions (RFS) process rather than an exclusive Request for Proposal (RFP). The openness of a RFS allows for collaboration between State, County, Plan, Provider and Stakeholder partners. Including all partners in the process seems to lend itself to a stronger plan with the appropriate participants (players) necessary to achieve the goals of the pilot program.
- To ensure proper membership and sound rates, the majority of the dual eligible recipients should be mandatorily enrolled into managed care. We recognize it may make sense to exempt some subset of the dually eligible population (due to specific needs) such as the developmentally disabled.
- Site-selection criteria must be reasonable without adding unnecessary administrative burdens to health plans who have already demonstrated proficiency in managing this population either through voluntary enrollment or a Medicare Special Needs Program. During a time where State and Federal funding is being reduced, the site-selection criteria must ensure that quality health care services are provided, exceptional customer service is received (provided) and care coordination is achieved to meet the goals of the pilot program. Site-selection criteria should take into consideration the county model, delivery model and current Medi-Cal membership population and their needs.
- Rates must be adequate to cover the additional services included in the pilot program. Adequate funding levels must be allocated to ensure that plans are able to provide the added benefits. Fee-for-service data and utilization must be made available to plans by county to ensure plans can determine their ability to absorb and effectively manage the full scope of services outlined in the pilots.

We applaud DHCS' effort to solicit input from stakeholders and the careful consideration of how best to move forward with the pilot programs. Thank you for the opportunity to provide input and look forward to future meetings to further discuss your vision for this very important population.

Mil Gracias,

A handwritten signature in black ink, appearing to read "Norma Diaz", is written over the typed name and title.

Norma Diaz
Chief Executive Officer