



Care Coordination in Medi-Cal Managed Care

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Framing the Issue

Currently, DHCS does not have a comprehensive set of care coordination standards but only broad contractual requirements and/or statutes guiding care coordination practices in Medi-Cal Managed Care.

As you would expect, the level of care coordination need increases with greater system fragmentation, greater clinical complexity, and/or decreased patient capacity to coordinate their own care.



Framing the Issue



Goal of Care Coordination Project

Through internal and external stakeholder engagement, DHCS will work to implement a core set of standards and expectations for Medi-Cal managed care health plans (MCPs) and their partners, regarding appropriate care coordination activities and requirements. Additionally, this work will inform standards for other delivery systems as well.



Mechanics of Care Coordination

We will look at the full spectrum

- Screenings
- Health Assessments
- Case Management and Care Management
- Data
- Transitions in Care
- Communication
- Governance
- Training
- Monitoring through meaningful metrics



Road Map

Framing the Issue

• Jan – July 2018

Advisory
Committee

• Aug – Oct 2018

Proposal

• Nov 2018 – Feb 2019

Implementation
Planning

• Mar 2019 – June 2020

Implementation

• Ongoing, starting in July 2020



Framing the Issue

- Evaluate existing statute, regulations, contract language, policy letters, and health assessments regarding Care Coordination through a systemic assessment
- National perspective and best practices, etc.
- Evaluate current care coordination practices through onsite visits and key informant interviews – plans, counties, providers, etc.
- Create an internal DHCS Care Coordination workgroup
- Document key coordination and transition points, factors that influence better care coordination and factors that have a negative impact on care coordination



Advisory Committee

- Create a short term Care Coordination advisory committee to discuss findings of the department and formulate recommendations
- Workgroup would be comprised of: MCPs, counties and MHPs, providers, sister departments and internal DHCS stakeholders



Proposal

- Draft a concept paper with roadmap for enhancing care coordination
- Re-engage Advisory Committee to vet proposal
- 30-day Public Comment Period



Implementation Planning

- Internal DHCS staff training
- MCP training(s) and/or webinar(s)
- Waiver renewal planning
- Statute changes, if necessary
- Contract changes and updated policies and procedures through contract deliverable process
- All Plan Letters (APLs)/ Duals Plan Letters (DPLs)
- Technical Assistance Guides (TAGs) and Clinical Implementation Support Guides (CISG)
- Monitoring and compliance plan
- Quality metrics





Questions?