

# Bay Area Stakeholders Collaborative

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Advisory Board  
March 20, 2015



ALAMEDA COUNTY  
PUBLIC HEALTH  
DEPARTMENT

# Goals of the Stakeholders Group

- Increase family and provider satisfaction
- Improve outcomes
- Reduce costs

# CCS Program Functions: Unique and Indispensable Elements

- Architecture of pediatric specialty care
- Standard Setting
- Fiscally disinterested decisions
- Family centered case management/care coordination
- Unobstructed access to the CCS provider network

# Common Elements in all Options

- Partner with families at all levels
- Ensure whole child focus
- Administrative regionalization
- Improve care coordination
- Organized delivery system

## Option 1: CCS+

- CCS program remains, with improvements
  - Regionalization
  - Case manage primary and specialty care
  - Intensive care coordination
  - Transition planning

# CCS+: Alameda County Interventions

- Intensive Care Coordination (ICC)
- Family Participation ( Family Navigation and Family Advisory Committee)
- Transition Services
- Enhanced Medical Home Support

## Option 2: CCS Collaborative

- Creation of a CCS administrative entity
- TPA supported by the member counties
- Comprehensive payment reforms
- Distribution of risk at multiple levels

## Option 3: Children's Hospital based Accountable Care Organization (ACO)

- Contract directly with DHCS
- Build capacity slowly
- Develop/identify best practices in care coordination
- Assume risk
- Shift most clients from CCS to ACO

# Recommendations to DHCS

- Implement CCS+
- Move the program towards the CCS Collaborative or the CCS ACO model
- Extend the CCS carve out
- Stage transitions carefully
- Robust evaluation of re-design
- Savings from efficiencies are reinvested back

# Questions?

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