

State of California—Health and Human Services Agency Department of Health Care Services



Phase-In Methodology Whole-Child Model January 2017

Methodology: The Department of Health Care Services (DHCS) proposes a phase-in methodology for the transition of responsibility for current California Children's Services (CCS) between counties and Medi-Cal managed care health plans (health plans) participating in the Whole-Child Model. DHCS considered many factors when determining an approach to the transition including accessing the network overlap between existing CCS Program providers and health plan providers the number of counties each health plan operates in, the number of CCS Program beneficiaries in each county by health plan, whether or not counties already had a single health plan rate across them, whether CCS Program services are currently carved-in or out of the health plan, and if the CCS Program operates as an independent or dependent county.

Proposed Whole-Child Model Phase-In Schedule

Phases			
Phase 1 – No sooner than July 1, 2018	 ➤ CenCal Health ➤ Central California Alliance for Health ➤ Health Plan of San Mateo 		
Network Overlap		Medium to Large	
Number of Counties	Small		
Total Population	Small		
CCS Carved-In / Carved-0	Both		
Independent / Dependent		Independent	
Phase 2 – No sooner than Jan 1, 2019	▶ Partnership HealthPlan▶ CalOptima		
Network Overlap	Small to Large		
Number of Counties	Large		
Total Population	Large		
CCS Carved-In / Carved-0	Both		
Independent / Dependent	Both		

Health Plan and CCS County Information by Phase

Health Plan	County	CCS Transitioning Population**	Independent / Dependent County	CCS Services Carved-In / Carved-Out	Medi-Cal and CCS Network % Overlap		
Phase 1 – No sooner than July 1, 2018							
CenCal	Santa Barbara	1950	Independent	Carved-In	90-100%		
	San Luis Obispo	970	Independent	Carved-Out	90-100%		
Central California Alliance for Health	Merced	2,380	Independent	Carved-Out	60-69%		
	Monterey	2910	Independent	Carved-Out	70-79%		
	Santa Cruz	1,120	Independent	Carved-Out	80-89%		
Health Plan of San Mateo	San Mateo	80	Independent	Carved-In	60%		
Phase 2 – No sooner than January 1, 2019							
Partnership HealthPlan	Modoc*	40	Dependent	Carved-Out	80-89%		
	Lassen*	90	Dependent	Carved-Out	90-100%		
	Trinity*	50	Dependent	Carved-Out	90-100%		
	Del Norte*	140	Dependent	Carved-Out	90-100%		
	Siskiyou*	250	Dependent	Carved-Out	90-100%		
	Shasta*	850	Dependent	Carved-Out	90-100%		
	Lake*	360	Dependent	Carved-Out	90-100%		
	Humboldt*	700	Independent	Carved-Out	90-100%		
	Mendocino	390	Independent	Carved-Out	90-100%		
	Sonoma	1620	Independent	Carved-Out	80-89%		
	Napa	460	Independent	Carved-In	90-100%		
	Marin	610	Independent	Carved-In	80-89%		
	Solano	1060	Independent	Carved-In	90-100%		
	Yolo	730	Independent	Carved-In	90-100%		
CalOptima	Orange	11,960	Independent	Carved-Out	55-59%		

^{*} Note the following Partnership HealthPlan Counties (Modoc, Lassen, Trinity, Del Norte, Siskiyou, Shasta, Humboldt, and Lake) rates are part of the 18 County – Regional Model, one capitation rate is developed for all 18 counties. DHCS would develop the CCS rate in the same county grouping to align with our existing rate structure.

^{**} Source: Management Information System/Decision Support System (MIS/DSS), December 2016 Month of Eligibility.