

**Department of Health Care Services
California Children's Services
Advisory Group
Technical Workgroup Descriptions
July 17, 2015**

Workgroup 1 - Care Coordination, Medical Homes, and Provider Access
(Meets every other month or as needed)

The care coordination, medical homes, and provider access technical workgroup will be responsible for providing the California Children's Services (CCS) Program Advisory Group (AG) and the Department of Health Care Services (DHCS) with technical consultation with regard to the subject matter areas identified above that will support effective and efficient implementation of the redesign of the CCS program. Such technical support may include the examination and interpretation of data reports provided by the date technical workgroup, examination of existing literature and reports, and discussions with individuals and organizations knowledgeable about the CCS Program.

Implementation of health homes and increasing care coordination between all partners is an essential component of the CCS Program redesign. This includes not only improving communication and coordination between primary and specialty care providers, but also dental, mental and behavioral health, the school-based Medical Therapy Program (MTP), physical and occupational therapy, regional centers, home and community-based health care services, pharmacy and durable medical equipment (DME), transition to adult care, etc.

In addition to care coordination, ensuring adequate provider networks is also crucial to maintaining the partnership arrangement between the State, counties, and care providers. Over the years, the CCS Program has established standards for all pediatric specialty and sub-specialty care across the State that will be maintained in any organized delivery system developed through the redesign process. Additional work will be needed to explore further potential for expanding the CCS Program network of providers, consider ways to address geographic disparities in access and provider shortages, look at managed care access standards, and consider provider credentialing and access standards for an organized delivery system under CCS Program redesign.

The final list of topics will be identified and prioritized by the workgroup members, but suggested areas for exploration may include:

Care Coordination

- Electronic Health Records: Current capacities, baseline needs for optimal performance and interoperability across domains.
- MTP: Details of how the CCS Program currently operates, health home components, program eligibility and variations from the CCS Program eligibility, level of coordination with local county CCS programs, health systems, health plans, and ensuring that the MTP is included in any redesigned CCS Program organized delivery system.
- Self-management services and education, and gaps in availability for the CCS Program enrollees.
- Assessment of county health systems and health plans' current use of "patient navigators/advocates" and care coordinators, as well as necessary background/ qualifications for navigators and care coordinators.
- Parent/caregiver perspective on issues of systems navigation, medication management, and in-home resources to identify areas of need and potential for improvement.
- Development of standards for case managers.
- Transition to adult care.
- Palliative care.
- Specific areas of need for CCS State-Only children, with regard to providing a "health home" in the absence of Medi-Cal or other sufficient primary care coverage.
- Special consideration for the unique needs of small "dependent" counties.

Provider Access

- Provider paneling, current certification criteria (for hospitals, individual providers, and special care centers) and potential for expansion.
- Setting and maintaining standards of care and provider networks across the State and development of requirements for health plans and evaluating and maintaining those standards.
- Access to specialty providers in rural counties, and potential for scheduling multiple same-day appointments for long-distance travel or providing additional travel resources to families/caregivers.
- Potential for incorporating telemedicine and home-based health care into enrollees' care plan for care maintenance.

2015 Meeting Dates

This technical workgroup will meet every other month or as needed. Tentative meeting dates for 2015 include:

- August 12, 2015, Wednesday 9:00 am-12:00 pm
- November 4, 2015, Wednesday 9:00 am-12:00 pm

(Future dates TBD)

Workgroup 2 - Data and Performance Measures

(Meets every other month or as needed)

The Data and Performance Measures Workgroup will be responsible for supporting the data needs of the CCS Program's AG and of other technical workgroups (TWG) relative to their specific topic area. Additionally, this workgroup will continually reassess and make necessary changes to an evaluation baseline of the CCS Program.

The Data and Performance Measures TWG will be responsible for providing the AG with descriptive data regarding all aspects of the CCS Program. For example: cost utilization data for diagnostic and treatment services; utilization data by provider type; utilization data by diagnosis; analysis by region; administrative costs; and, to the extent possible, data regarding other services provided to CCS Program-eligible children such as MTP, behavioral health, in-home supportive services (IHSS) costs, etc. The Data TWG will also provide descriptive data requested from other TWGs as well as provide analysis of specific data areas requested by TWGs determined to be necessary for them to complete their work. The Data TWG will also assess potential for further data development in the future, based on unmet information needs they or other TWGs identify.

Additionally, the Data and Performance Measures TWG will take the lead in establishing a set of performance measures for the CCS Program. The TWG will 1) decide what data are needed to establish this baseline and consistent evaluation of progress, 2) determine if the data are readily available, and if they are, 3) consult the literature on benchmark outcomes to design a plan to track the CCS Program's progress toward such goals overtime.

The final list of topics will be identified and prioritized by workgroup members, but suggested areas for exploration include:

Data

- Identifying and prioritizing specific data needs in issue areas determined by AG workgroups.
- Accessing and including denied and unpaid claims in the aggregate CCS Program claims data to better understand variations in eligible diagnoses and claims authorizations across local county CCS programs.
- Assess potential for future development of a provider-sourced data warehouse (similar to Cincinnati Children's Hospital's [i2b2](#)) for the CCS Program providers to share de-identified data and compare and track outcomes over time.
- Analyze potential for cost containment based on utilization of services.
- Make projections about potential impacts on cost and utilization of any prospective changes to the CCS Program proposed by other technical workgroups.

Performance Measure

- Establish a baseline from which to assess need for quality improvement.
- Establish benchmark outcomes, modeled on existing standards (for example, the California Perinatal Quality Care Collaborative [CPQCC]).
- Goal-setting and metrics for measuring progress toward those goals over time.
- Potential for interpreting data, identifying deficiencies, and translating to systems- and facility-level quality improvement projects.
- Conduct a literature review on measures for assessing cultural competence and patient experience of care; devise recommendations for incentivizing health plans for meeting patient-centered quality of care metrics.
- Facilitate a focus group with parents/caregivers of the CCS Program enrollees to understand the patients' definition of "quality care" and their experiences in the existing CCS Program.
- Exploration of other states' attempts to achieve the "triple aim" of health reform - improving quality, efficiency, and outcomes - in their programs for children and youth with special health care needs (CYSHCN), in comparison with California and across counties.

2015 Meeting Dates

This technical workgroup will meet every other month or as needed. Tentative meeting dates for 2015 include:

- September 9, 2015, Wednesday 9:00 am-12:00 pm
- November 18, 2015, Wednesday 9:00 am-12:00 pm

(Future dates TBD)

Workgroup 3 - Eligible Conditions

(Meets quarterly or as needed)

The role of this technical workgroup will include an initial system-level scan of how medical eligibility is determined by the CCS Program's Medical Directors and staff across counties to look at patterns in eligibility determination. The TWG should also rely on the work of other organizations such as the Children's Regional Integrated Service System (CRISS), as they have put considerable effort into standardizing the medical eligibility process across counties. The overarching goal of this TWG will be to make recommendations to the AG and ultimately to the DHCS to bring the CCS Program medical criteria up-to-speed with the needs of California's CYSHCN population, the evidence-base for accounting for medical complexity and acuity of need, and the Affordable Care Act's trend toward expanding access to health care across the country.

The final list of topics will be identified and prioritized by the TWG members, but suggested areas for exploration include:

- Researching standardized validated assessment/eligibility determination tools in specific counties and other states and their potential for State-wide applicability.
- Exploration of the current CCS Program case mix and denied eligibility claims in comparison to current eligibility criteria, to establish if such criteria meet the needs of California's CYSHCN population. If relevant, development of new eligibility guidelines.
- Consideration of a caseload stratification methodology to ensure that enrollees' level of care coordination and oversight adjusts to changing needs as children age.
- Inclusion of prenatal and neonatal screening protocols for more rigorous case finding.

2015 Meeting Dates

This technical workgroup will meet every other month or as needed. Tentative meeting dates for 2015 include:

- September 23, 2015, Wednesday 9:00 am-12:00 pm
- December 9, 2015, Wednesday 9:00 am-12:00 pm

(Future dates TBD)