

2024 Medi-Cal Managed Care Plan (MCP)—Local Health Jurisdiction (LHJ) Collaboration Worksheet

Overview

On January 1, 2023, the California Department of Health Care Services (DHCS) launched the Population Health Management (PHM) Program, which is a cornerstone of California Advancing and Innovating Medi-Cal (CalAIM). To support the success of the PHM Program and broader transformation efforts, per [APL 23-021](#), DHCS has modified MCPs' previous Population Needs Assessment requirements to include a central requirement that MCPs collaborate meaningfully with LHJs on their current or next cycle of Community Health Assessments (CHAs)/Community Health Improvement Plans (CHIPs), with initiation efforts on the part of the MCP beginning by January 1, 2024.

DHCS and the California Department of Public Health (DPH) are collaborating to create a regulatory environment that supports effective and efficient joint work on CHAs/CHIPs between LHJs and MCPs. Thus, aligned with forthcoming CDPH guidance, the cycles for LHJs' CHA/CHIP development will become standardized across California starting in 2028.

- Between 2024 and 2027, LHJs' CHAs/CHIPs will remain on different cycles. MCPs will be required to work with each LHJ on its CHA/CHIP according to the guidance below. Some LHJs will be expected to complete a CHA, others a CHIP, and others a full CHA/CHIP cycle within this three-year window.
- Starting in 2028, all LHJs will be expected to be on the same three-year cycle, with the first LHJ CHA to be completed in December 2028 and the first CHIP to be completed by June 30, 2029.

A constructive working relationship between the MCP(s) and each LHJ operating in the MCP's service area is foundational for collaboration on CHA/CHIPs. **The purpose of this Worksheet is to serve as a collaboration tool for MCPs to work and build relationships with LHJs and other MCPs in the same county early in the CHA/CHIP process. While DHCS requires this Worksheet be completed by August 1, 2024, the Worksheet will not be submitted to DHCS.** DHCS is interested in supporting and understanding the progress of MCP-LHJ collaboration and will request to review the Worksheet of a few select MCPs. In addition, MCPs will be asked to share some of their reflections, as recorded in this Worksheet, at a future Technical Assistance session. MCPs will also be requested to share some of the findings reported in this Worksheet in their PHM Strategy Deliverable, which will be submitted to DHCS in October 2024.

Directions

MCPs should work closely with LHJs in their service areas when completing this worksheet. MCPs should complete one worksheet for every LHJ CHA and/or CHIP process they are participating in in the service areas where the MCP operates (i.e., if the MCP operates in one county, it will need to fill out only one worksheet; but if it operates in three counties, it will need to fill out the worksheet three times—one for each county it serves).

In California, most of the 61 LHJs operate at the county level, with three operating at the city level. Please see CDPH's [list](#) of all LHJs in California.

Each Prime MCP¹ should complete this worksheet for the service area(s) it will cover, ensuring that any populations served by Subcontracted MCPs² are included in the responses and ensuring input from all Subcontracted MCPs, as appropriate. For MCPs operating in LHJ service areas (counties/cities) where there are multiple MCPs, all MCPs in that service area must collaborate to complete a single shared MCP-LHJ collaboration worksheet.

Attestation

Please attest to the following statement (if the MCP cannot attest to the statement, please leave blank). The MCP and LHJ(s) attest that they have collaborated to complete this worksheet.

MCP(s) Signature(s) _____ Date _____

LHJ Director or Designee Signature _____ Date _____

Worksheet

For questions and additional information, please email PHMSection@dhcs.ca.gov (Subject line: Questions re: 2023 MCP-LHJ Collaboration Worksheet). MCPs should review Section II of the [PHM Policy Guide](#) to inform development of responses to this worksheet.

MCP(s) name(s):

Contact information for MCP(s) leads collaborating on LHJ CHA/CHIP:

LHJ service area (county/city):

Contact information for LHJ leads collaborating with MCP(s) on LHJ CHA/CHIP:

1. Overview Questions

- a) *Submission timeline:* What is the anticipated timeline for the LHJ's CHA and/or CHIP between 2024 and 2027? Note: In this time frame, an LHJ may be working on only a CHA, only a CHIP, or a CHA and a CHIP.

- b) *Major 2024 milestones:* What are the key milestones/goals, identified at this point, for the CHA and/or CHIP being developed between 2024 and 2027 (e.g., identify stakeholders to participate in CHA/CHIP governance structure, publish CHA/CHIP)?

¹ A Prime MCP is an MCP that directly contracts with DHCS to provide Medi-Cal services to members within the county or counties specified in their contract.

² A Subcontracted MCP is an MCP that contracts with the Prime MCP to assume full or partial risk of a portion of the Prime MCP's membership.

- c) *Priority areas*: What are the main priority areas of the CHA and/or CHIP, as identified at this point (e.g., focus on maternal health, child health, behavioral health)?
- d) *Meetings*: What are the key LHJ CHA and/or CHIP meetings, as identified at this point, between 2024 and 2027?

2. Data Sharing

- a) What are the priority areas for data sharing, as identified by the MCP(s) and the LHJ? *Please see [PHM Policy Guide](#) for example priority areas.*
- b) Specifically, what types of data are the MCP(s) sharing with the LHJ (e.g., claim, utilization, encounter, quality, Healthcare Effectiveness Data and Information Set (HEDIS), demographic)? *Please see [PHM Policy Guide](#) for what types of data may be shared. MCPs and LHJs should consider what types of data should be deidentified/disaggregated when sharing.*
- c) For what purpose will the data be shared?
- d) When will the data be shared?
- e) In what format will the data be shared (e.g., Excel spreadsheet, data report)?
- f) Will the data be disaggregated/deidentified? If not, is a Memorandum of Understanding (MOU) needed for the purpose of sharing member-level data? If yes, does the current MOU between MCPs and LHJs include this activity?

3. MCP Resources

- a) *Total resource contribution*: What is the total value (in dollars) of the anticipated contributions that will be made by the MCP(s) in terms of both in-kind staffing and funding?
 - 1) If there are multiple MCPs in a jurisdiction, please specify how much each MCP plans to contribute (in terms of funding and in-kind staffing) to the LHJ.
- b) *Funding*: Is (are) the MCP(s) planning to provide funding to support implementation of the LHJ's CHA/CHIP?
 - 1) If yes, please describe what activities the MCP(s) plan to fund. *Please see [PHM Policy Guide](#) for permissible activities to fund.*
 - 2) When will the MCP(s) provide funding to the LHJ?

- c) *In-kind staffing*: Is (are) the MCP(s) planning to provide in-kind staffing to support implementation of the LHJ's CHA/CHIP? Please see [PHM Policy Guide](#) for expectations on MCP in-kind staffing contributions.
- 1) If yes, please describe what types of in-kind staffing will be provided.
 - 2) If yes, when will the MCP(s) provide in-kind staffing to the LHJ?
 - 3) Please describe the background of in-kind staff.

4. Stakeholder Engagement

- a) *Participation in CHA/CHIP meetings, as requested*. Please describe how many and which meetings MCP staff are attending between 2024 and 2027, as identified at this point.
- 1) If there are multiple MCPs operating in a jurisdiction, please describe how the MCPs are working together to ensure MCP representation at these meetings.
 - 2) If MCP staff are not attending any meetings, please explain why.
- b) *Participation in LHJ CHA/CHIP governance structures, as requested*. Please describe how MCP staff are serving in LHJ CHA/CHIP governance structures between 2024 and 2027, as identified at this point.
- 1) If there are multiple MCPs operating in a jurisdiction, please describe how the MCPs are working together to ensure MCP representation in the LHJ governance structure.
 - 2) If MCPs are not serving in the LHJ CHA/CHIP governance structure, please explain why.
- c) *Role of MCP Community Advisory Committee (CAC)*: Please describe the role of the CAC as it relates to the participation of the MCP(s) in the LHJ's CHA/CHIP process. Specifically:
- 1) How is the MCP reporting its involvement to its CACs?
 - 2) What type of advice/input, if any, has (have) the MCP(s) received at this point on the LHJ's CHA/CHIP findings?
 - 3) At this point, have there been any discussions on how MCP CACs could be involved in the MCP's CHA/CHIP processes? If so, please describe.

5. Bright Spots, Challenges, and Other Observations

- a) *Bright spots*: Please describe any bright spots that have emerged from participating in the LHJ CHA/CHIP process up until this point.
- b) *Challenges*: Please describe any challenges that have emerged from participating in the LHJ CHA/CHIP process up until this point, as well as any additional supports that may be needed.
- c) *Other observations*: Please provide any observations that have not been otherwise captured by this worksheet.