Enhanced Care Management (ECM)

ECM and ILOS Implementation Timeline
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ECM Populations of Focus

Revised ECM Populations of Focus: Terminology Change

- **To promote health equity**, adhering to the guiding principle of using person-centered language whenever possible, **"Populations of Focus" instead of "Target populations"** will be used to describe the Members who are eligible to receive ECM.

ECM Populations of Focus: Summary

Adults	Children/Youth up to 21
1) Individuals and families experiencing Homelessness;	
2) High Utilizers;	2) High utilizers;
3) Adults with Serious Mental Illness (SMI) / Substance Use Disorder (SUD);	3) SED, identified to be at Clinical High Risk (CHR) for psychosis or experiencing a First Episode of Psychosis;
4) Incarcerated and Transitioning to the Community;	
5) At risk for Institutionalization and Eligible for LTC;	5) Enrolled in CCS / CCS Whole Child Model (WCM) with Additional Needs beyond CCS;
6) Nursing facility Residents Transitioning to the Community.	6) Involved in Child Welfare (including those with a history of involvement, and foster care up to 26).

= Detail provided in these materials

= Details are forthcoming; DHCS will launch further stakeholder work to define these Populations of Focus

ECM Population of Focus #1:
Individuals and Families Experiencing Homelessness

Individuals and families who:

(1) are experiencing homelessness[1]

AND

(2) have at least one complex physical, behavioral, or developmental health need with inability to successfully self-manage, for whom coordination of services would likely result in improved health outcomes **and/or** decreased utilization of high-cost services.

1. See next slide for definition.

Homelessness Definition

Homelessness is Defined As[1]

- An individual or family who lacks adequate nighttime residence
- An individual or family with a primary residence that is a public or private place not designed for or ordinarily used for habitation
- An individual or family living in a shelter
- An individual exiting an institution to homelessness[2]
- An individual or family who will imminently lose housing in next **30 days**[3]
- Unaccompanied youth and homeless families and children and youth defined as homeless under other Federal statutes
- Victims fleeing domestic violence

1. This definition is based on the HUD definition of homelessness with modifications as noted below.
2. If exiting an institution, individuals are considered homeless if they were homeless immediately prior to entering that institutional stay, regardless of the length of the institutionalization.
3. The timeframe for an individual or family who will imminently lose housing has been extended from 14 (HUD definition) to 30 days.

ECM Population of Focus #2:
Adult High Utilizers

Adults with:

(1) **<u>5 or more</u>** emergency room visits in a six month period that could have been avoided with appropriate outpatient care or improved treatment adherence;

AND/OR

(2) **<u>3 or more</u>** unplanned hospital and/or short-term skilled nursing facility stays in a six month period that could have been avoided with appropriate outpatient care or improved treatment adherence.

MCPs may also authorize ECM for other individuals with a pattern of very high utilization that could have been avoided with appropriate care or improved treatment adherence.

ECM Population of Focus #3:
Adults with Serious Mental Illness / Substance Use Disorder

Adults who:

(1) **meet the eligibility criteria** for participation in or obtaining services through:

- The County Specialty Mental Health (SMH) System **AND/OR**
- The Drug Medi-Cal Organization Delivery System (DMC-ODS) **OR** the Drug Medi-Cal (DMC) program.

AND

(2) are actively experiencing at least one complex social factor influencing their health (e.g., lack of access to food, lack of access to stable housing, inability to work or engage in the community, history of ACEs, former foster youth, history of recent contacts with law enforcement related to mental health and/or substance use symptoms or associated behaviors);

AND

(3) **meet one or more of the following criteria:**

- High risk for institutionalization, overdose and/or suicide;
- Use crisis services, emergency rooms, urgent care, or inpatient stays as the <u>sole</u> source of care;
- Two or more ED visits <u>or</u> two or more hospitalizations due to SMI or SUD in the past 12 months;
- Pregnant and post-partum women (12 months from delivery).

ECM Population of Focus #4:
Adults & Children/Youth Transitioning from Incarceration

Individuals who:

(1) Are transitioning from incarceration or transitioned from incarceration within the last 12 months

AND

(2) have at least one of the following conditions[1]:
- Chronic mental illness
- Substance Use Disorder (SUD)
- Chronic disease (e.g., hepatitis C, diabetes)
- Intellectual or developmental disability
- Traumatic brain injury
- HIV
- Pregnancy

1. This list of criteria is aligned with the eligibility criteria for pre-release coverage in California's 1115 Demonstration Amendment and Renewal Application (pg. 37).
https://www.dhcs.ca.gov/provgovpart/Documents/CalAIM-1115-Waiver-Renewal-Application.pdf

ECM Population of Focus #5:
Adults At Risk for Institutionalization & Eligible for Long-Term Care

Individuals at risk for institutionalization who are eligible for Long-Term Care services who, in the absence of services and supports would otherwise require care for 90 consecutive days or more in an inpatient nursing facility (NF). Individuals must be able to live safely in the community with wraparound supports.

ECM Population of Focus #6:
Nursing Facility Residents Who Want to Transition to the Community

Nursing facility residents who are strong candidates for successful transition back to the community and have a desire to do so.

ECM and ILOS Implementation Timeline

ECM and ILOS Implementation Timeline: <u>Whole Person Care</u> (WPC) Pilot Counties

Date	
Jan 1, 2022	• Statewide launch of ILOS • Transition and automatically authorize all Members enrolled in a WPC Pilot who are identified by the WPC Lead Entity as belonging to a Population of Focus[1]; • ECM goes live for the following ECM Populations of Focus: ○ *Individuals & Families Experiencing Homelessness;* ○ *High Utilizer Adults;* ○ *Adults with SMI/SUD;* ○ *Adults & Children/Youth Transitioning from Incarceration.[2]*
Jan 1, 2023	• ECM goes live for the following ECM Populations of Focus[3]: ○ *Individuals Transitioning from Incarceration (adults and children/youth);* ○ *Members Eligible for LTC and at risk of Institutionalization;* ○ *Nursing Home Residents Transitioning to the Community.*
July 1, 2023	• ECM goes live for all other *Children and Youth[4].*

1. Includes children and youth currently served by HHP or WPC.
2. In WPC Pilot counties only, where the services provided in the Pilot are consistent with those described in the ECM Contract.
3 - 4. MCPs may begin offering ECM to these Populations of Focus earlier than the indicated start dates; however, rates will not be adjusted to reflect these Populations of Focus until the indicated start dates.

ECM and ILOS Implementation Timeline: Health Home Program (HHP) Counties

Date	

Jan 1, 2022	• Statewide launch of ILOS
	
	• Transition and automatically authorize ECM for all Members of ECM Populations of Focus who are enrolled in or are in the process of being enrolled in HHP[1];
	• ECM goes live for the following ECM Populations of Focus:
	     o *Individuals & Families Experiencing Homelessness;*
	     o *High Utilizer Adults;*
	     o *Adults with SMI/SUD.*

Jan 1, 2023	• ECM goes live for the following ECM Populations of Focus[2]:
	     o *Individuals Transitioning from Incarceration (adults and children/youth);*
	     o *Members Eligible for LTC and at risk of Institutionalization;*
	     o *Nursing Home Residents Transitioning to the Community.*

July 1, 2023	• ECM goes live for all other *Children and Youth*[3].

1. Includes children and youth currently served by HHP or WPC.
2 - 3. MCPs may begin offering ECM to these Populations of Focus earlier than the indicated dates; however, rates will not be adjusted to reflect these Populations of Focus until the indicated start dates.

ECM and ILOS Implementation Timeline: Counties with Neither WPC or HHP

Date	
Jan 1, 2022	• Statewide launch of ILOS
July 1, 2022	• ECM goes live for the following ECM Populations of Focus: o *Individuals & Families Experiencing Homelessness;* o *High Utilizer Adults;* o *Adults with SMI/SUD.* • Each MCP must show in its MOC how it will grow its network capacity to serve each Population of Focus over the first 12 months of implementation (July 2022- July 2023).
Jan 1, 2023	• ECM goes live for the following ECM Populations of Focus[1]: o *Individuals Transitioning from Incarceration (adults and children/youth);* o *Members Eligible for LTC and at risk of Institutionalization;* o *Nursing Home Residents Transitioning to the Community.*
July 1, 2023	• ECM goes live for all other *Children and Youth.*[2]

1 - 2. MCPs may begin offering ECM to these Populations of Focus earlier than the indicated start dates; however, rates will not be adjusted to reflect these Populations of Focus until the indicated start dates.

ECM Overlap with Other Programs & Exclusions

ECM Overlaps/Exclusions

- DHCS examined other programs with an existing element of care management / care coordination to determine approaches to program coordination and nonduplication across programs.

- 3 potential approaches to ECM coordination/nonduplication:

1. ECM as a "wrap"	MCP Members can be enrolled in ECM and the other program. ECM enhances and/or coordinates across the case/care management available in the other program. MCP must ensure nonduplication of services between ECM and the other program.
2. Either ECM or the other program	MCP Members can be enrolled in ECM or in the other program, <u>not in both</u> at the same time.
3. Excluded from ECM	Medi-Cal beneficiaries enrolled in the other program are excluded from ECM.

- Additional information will be available in the ECM Program Guide to be published in June.

1915(c) Waiver Programs

Multipurpose Senior Services Program (MSSP)
Assisted Living Waiver (ALW)
Home and Community-Based Alternatives (HCBA) Waiver
HIV/AIDS Waiver
HCBS Waiver for Individuals with Developmental Disabilities (DD)
Self-Determination Program for Individuals with I/DD

MCP Members can be enrolled in ECM or in the waiver programs, not in both at the same time.

Programs <u>Carved Out </u>of Managed Care

California Children's Services (CCS)
County-based Targeted Case Management (TCM)
Specialty Mental Health (SMHS) TCM
SMHS Intensive Care Coordination for children (ICC)
Drug Medi-Cal Organized Delivery Systems (DMC-ODS)

MCP Members can be enrolled in these programs and ECM. ECM can enhance the services in these programs and/or coordinate across the case/care management available in these programs. MCP must ensure non duplication of services between ECM and the other program.

Programs Carved Into Managed Care

CCS Whole Child Model
Community Based Adult Services (CBAS)

→ MCP Members can be enrolled in these programs and ECM. ECM can enhance the services in these programs and/or coordinate across the case/care management available in these programs. MCP must ensure non duplication of services between ECM and the other program.

Basic Case Management
Complex Case Management

→ MCP Members can be enrolled in ECM or in these programs, not in both at the same time.

Coverage for MCP Members Dually Eligible for Medicare and Medicaid

Cal MediConnect
Fully Integrated Dual Eligible Special Needs Plans (FIDE-SNPs)
Program for All Inclusive Care for the Elderly (PACE)

➤ Medi-Cal beneficiaries enrolled in these programs are excluded from ECM.

Dual Eligible Special Needs Plans (D-SNPs)
D-SNP look-alike plans
Other Medicare Advantage Plans
Medicare FFS

➤ Dually eligible MCP Members can receive ECM if they meet ECM Population of Focus criteria. MCPs are encouraged to work with Medicare to coordinate care.

Other Programs

AIDS Healthcare Foundation Plans

→ MCP Members can be enrolled in this program and ECM. ECM can enhance and/or coordinate across the case/care management available in the other program. MCP must ensure non duplication of services between ECM and the other program.

California Community Transitions (CCT) Money Follows the Person (MFTP)

→ MCP Members are enrolled in ECM or in this program, not in both at the same time.

Family Mosaic Project Services

→ Medi-Cal beneficiaries enrolled in these programs are excluded from ECM.