

February 8, 2023

## Key Takeaways

During the discussion on the **Member Story**:

- Gold Coast Health Plan (GCHP):
  - Shared the work of GCHP's Postpartum Health Navigator Program together with a local County Hospital partner and told the story of a new mom and her baby who got connected to GCHP's navigator at the hospital on the day of discharge. Through education and multiple follow ups, the mom received information on GCHP's program resources (e.g., free diapers and information on WIC supportive services, infant well care and screenings, etc.), attended her postpartum PCP visit, and completed the Newborn Medi-Cal Enrollment Form.
- DHCS:
  - Highlighted the importance and impact of member engagement and transitional care activities, including follow-up post-discharge, under the PHM Program.
  - Shared the importance of Basic Population Health Management services, including outreaching and engaging Members who have not engaged in care as regularly as recommended.
  - Emphasized that a cross-cutting program like GCHP's Postpartum Health Navigator Program could serve as a promising practice to improve children's preventive care and perinatal outcomes for birthing individuals.

During the discussion on the **Draft Monitoring Approach for Implementation of the PHM Program**:

- DHCS:
  - Solicited input on the draft monitoring approach for implementation of the PHM Program. This draft monitoring approach includes a list of new Key Performance Indicators (KPIs) and existing Medi-Cal Managed Care Accountability Set (MCAS) and Consumer Assessment of Healthcare Providers and Systems (CAHPS) quality measures.
    - MCPs will be required to stratify the KPIs by race, ethnicity and age. MCPs will be required to report KPIs on a quarterly basis at the plan level.

- MCPs must follow the existing quality improvement process to stratify certain quality measures per NCQA by race and ethnicity and submit quality measure data to DHCS at the reporting-unit level on an annual basis. DHCS will aggregate the existing data to be able to review at the plan level.
- Shared that the monitoring process is to gain a holistic perspective on PHM Program implementation at the MCP in each of the PHM monitoring domains and categories. DHCS will review the overall picture revealed by KPI and quality measure data in each PHM monitoring category and the data will serve as a launching pad for further conversation.
- Shared that DHCS will use a standardized enforcement pathway for PHM monitoring, leveraging existing quality improvement and enforcement mechanisms.
- Facilitated detailed feedback from stakeholders on the list of proposed KPIs and quality measures (including future KPIs for consideration), organized both by PHM program areas and populations.
- Stakeholders:
  - Voiced detailed feedback related to KPI definitions and technical specifications, additional measures for consideration, stratification requirements, reporting timelines, CHW workforce/billing code considerations, data sources, data sharing with providers, and cross-system referrals/collaborations.
  - Recommended starting a forum for best practice sharing among MCPs and having indicators on patient engagement in the PHM monitoring approach.
  - Asked for clarifications regarding whether Minimum Performance Levels (MPLs) or benchmarks will be used for PHM monitoring measures.
  - Asked how DHCS will compare MCPs; whether year-over-year improvement targets/goals will be utilized; and whether geographic and workforce variations will be considered when developing targets.
- DHCS:
  - Clarified that DHCS will not have benchmarks or improvement targets for PHM monitoring measures at this time. Rather, DHCS will look at trends over time and MCP performance comparisons.
  - Thanked the audience for the thoughtful feedback and noted that stakeholder comments will be incorporated in the final PHM monitoring version to be released by early Q2 2023.