

*Stakeholder Advisory Committee*

# Coordinated Care Initiative Update

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SARAH BROOKS  
DEPUTY DIRECTOR, HEALTH CARE DELIVERY SYSTEMS  
CALIFORNIA DEPARTMENT OF HEALTH CARE SERVICES

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# 2017-18 Budget Proposal

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When created, the Coordinated Care Initiative (CCI) contained a provision requiring the Department of Finance to determine if the CCI program is cost effective each January, and if not, the program would be discontinued the following year.

The Budget estimates that CCI will not be cost effective, thereby triggering a process that ceases all statutory provisions related to CCI as of January 1, 2018. Until then, DHCS is taking this opportunity to restructure parts of the program to make it cost effective.

# 2017-18 Budget Proposal

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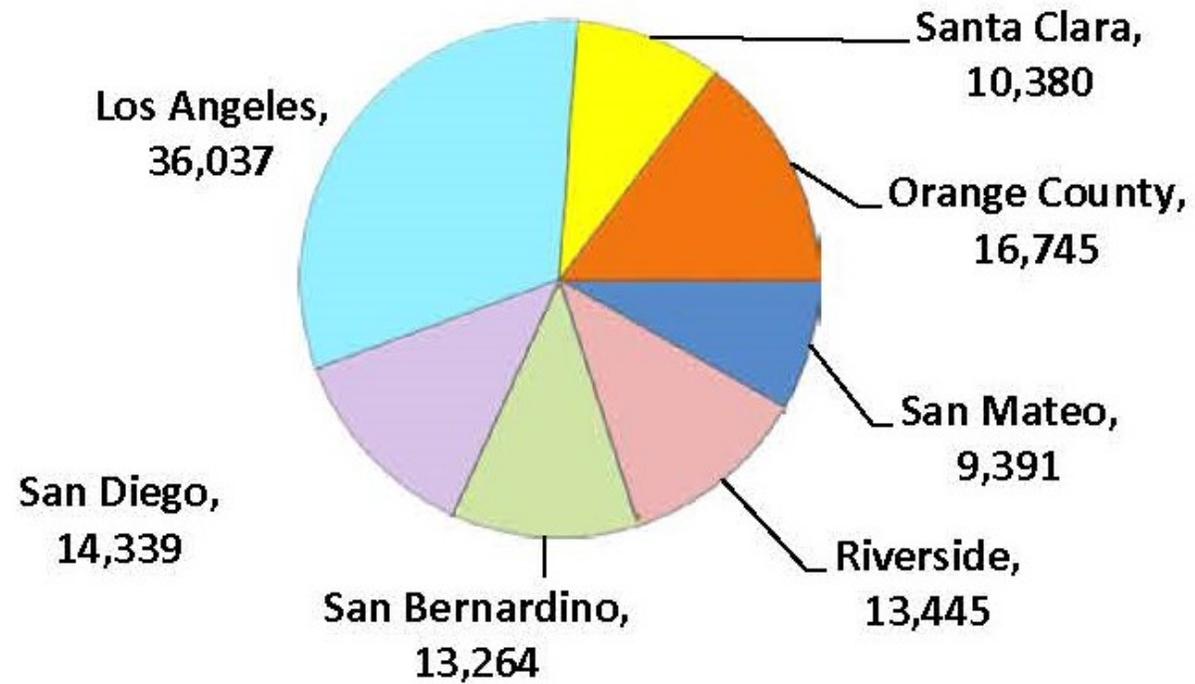
The Budget proposes to extend core elements of the CCI program for two years, such as Cal MediConnect, mandatory enrollment of dual-eligibles, and integrating long-term services and supports (except IHSS) into managed care.

Other changes under the Budget include:

- In-Home Support Services (IHSS) funding
- Multipurpose Senior Services Program (MSSP) transition
- Universal Assessment Tool

# Cal MediConnect Enrollment

**Total Active Enrollments Effective December 1, 2016  
By County**



**Total Active Enrollments  
113,601**

# Streamlined Enrollment

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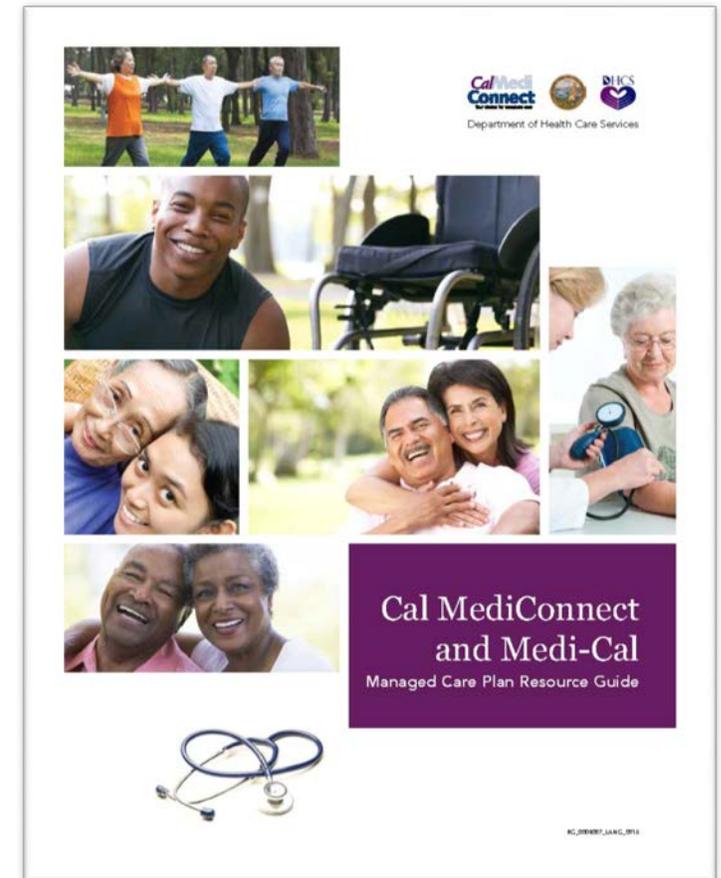
- Streamlined enrollment (which allows Cal MediConnect health plans to submit enrollment changes to DHCS on behalf of their Managed Long-Term Services and Supports (MLTSS) members) began the week of August 22, 2016.
- As of the end of December, we have seen approximately 1,950 streamlined enrollment request since the inception of the program.
- DHCS will continue to monitor the process and release data when available.

# MLTSS Enrollment

Cal MediConnect/MLTSS resource guide and choice book was mailed to about 63,000 eligible beneficiaries in November and December.

Mailings will continue as beneficiaries become newly eligible, either by having Medicare and gaining Medi-Cal eligibility or by moving into a CCI county.

Beneficiaries are still in the process of choosing or being assigned (default) a plan. As of the end of December, we have seen approximately 15,000 defaults to Medi-Cal plans and 11,300 choices. Of these choices 2,700 have been to join a CMC plan.



# Increase Access to LTSS

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- DHCS has convened a workgroup to develop standardized Health Risk Assessment (HRA) referral questions for LTSS.
- The workgroup is composed of 20 participants from a variety of stakeholder groups including health plans, advocacy groups, and MSSP organizations.
- The workgroup has met 5 times to discuss the draft proposed questions as well as identify relevant risk factors that trigger LTSS referrals.
- They are currently working to finalize 10 questions that will best meet the needs of the beneficiaries.
- These questions will then undergo literacy review prior to being released.

# Other Updates

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## **Best Practices Meetings**

- DHCS holds monthly meetings with Cal MediConnect plans to share best practices and ensure all plans are performing to the highest standard.
- Upcoming topics include Targeting Care Coordination for High Risk Members and Outreach to Communities of Diverse Backgrounds.

## **CalDuals Website Workgroup**

- This fall, DHCS convened a workgroup to update and refresh the CalDuals.org website.
- The updated website will be launched in March.

## **Beneficiary Toolkit now available in 13 threshold languages**

# Resources and Contact Information

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For more information on the CCI – including enrollment, quality data, and toolkits – visit [www.calduals.org](http://www.calduals.org).

You can send any questions or comments to [info@CalDuals.org](mailto:info@CalDuals.org).