Stakeholder Update Webinar

Coordinated Care Initiative

CALIFORNIA DEPARTMENT OF HEALTH CARE SERVICES

JUNE 11, 2020

Agenda

- DHCS Updates

- 2020 Flu Season Preparation

- CMC Plan Responses to COVID-19

- Questions

DHCS Updates

- COVID-19 Response

- CMC Dashboard

- CalAIM

- State Budget

- Long-Term Care At Home Benefit

- ESRD Enrollment

- 2021 D-SNP Updates

COVID-19 Response: DHCS Priorities

- Access to care
  - Monitoring network access and facility closures
  - Access flexibilities permitted by CMS
  - Guidance to plans and providers
- Communication & Outreach
  - Reduce health disparities through targeted outreach and communication
  - Provider outreach regarding the importance of immunizations and preventative care
  - Direct outreach to vulnerable populations by managed care plans and counties (e.g. individuals ages 65+)

COVID-19 Response

- The COVID-19 pandemic and the federal and state declarations of emergency triggered the availability of Medicaid flexibilities.

- Additionally, the President signed major federal legislation, including the Families First Coronavirus Response Act (FFCRA) and the Coronavirus Aid, Relief, and Economic Security (CARES) Act that provide increased federal funding in Medicaid and creates new options for states to address the COVID-19 pandemic.

COVID-19 Response

DHCS requested dozens of Medi-Cal flexibilities from CMS in response to the COVID-19 emergency. CMS approved select items March 23 and May 8. Some requests are still pending. All approved requests are effective March 1, 2020 through the end of the emergency period.

- 1135 Waiver Requests (3 letters)
- 1115 Waiver Requests (1 letter)
- Appendix K (5 programs)
- Disaster State Plan Amendment (1)

CMS has also issued blanket guidance for all states in addition to state-specific responses to these requests.

COVID-19 Response

Medi-Cal Flexibilities Granted by CMS

– Expand use of telehealth/telephonic

– Limit in-person visits

– Cover COVID-19 testing/treatment with no cost-sharing

– Streamline provider enrollment process

– State Fair Hearings

– Benefit Flexibilities

– Payment Rates

– Service Authorization

– Alternative Settings

COVID-19 Response

- **Disaster SPA**
  - Expanding presumptive eligibility (PE) to cover the uninsured.
  - Allowing Hospital PE for certain eligibility groups to two PE periods within a 12 month period
  - Removing certain limits on the number of prescriptions allowed and extending the maximum allowed length of prescriptions.

- **Eligibility Changes:** Delay processing annual redeterminations and delay discontinuances and negative actions.

- **Governor's Executive Order:** Extend timeframe for managed care beneficiary risk assessments

COVID-19 Response:
Cal MediConnect Plans

- DHCS and CMS provide flexibility for plans to serve members during COVID-19
  - CMS Medicare guidance on telehealth, etc
  - CMS provided guidance on DHCS All Plan Letters that apply to CMC plans
  - Expedited approval of COVID-19 related member communications (mail, text, robocall, email)
  - Postpone and delay monitoring activities where in-person visits are required, to reduce burden on provider offices

COVID-19 Response: CBAS

- CDA and DHCS collaborated to establish CBAS Temporary Alternative Services (TAS): a short-term, modified service delivery approach during the COVID-19 pandemic.
- Under CBAS TAS, CBAS centers:
  - Are still eligible for their existing per diem rate if at least one service is provided to a participant or caregiver – the service can be via telehealth, telephonic, or virtual communication
  - Must conduct COVID-19 wellness check and risk assessment at least weekly
- Initial face-to-face interview not required; plans have flexibility to conduct eligibility determinations by phone and extend eligibility redeterminations as clinically appropriate

COVID-19 Resources

- [CA COVID-19 webpage](#)
- [DHCS COVID-19 webpage](#)
- [California Department of Public Health](#)
- [Centers for Disease Control and Prevention](#)

CMC Dashboard

- June 2020 Dashboard to be posted

- To access CMC Performance Dashboards please visit: https://www.dhcs.ca.gov/Pages/Cal_MediConnectDashboard.aspx

CalAIM Timeline Updates

- Long-term care carve-in to managed care will not be implemented 1/1/2021

- ECM/ILOS will not be implemented 1/1/2021

- MSSP carve-out is no longer planned for 1/1/2021

- DHCS and the Administration remain committed to advancing CalAIM and will re-engage with MCPs and stakeholders later this year

- DHCS is discussing extension of California's existing 1115 waiver with CMS, and will provide updates when available

- 1915(b) Specialty Mental Health waiver extended 6 months

- DHCS continues to plan for transition to statewide Managed Long-Term Services and Supports (MLTSS) and Dual Special Needs Program (D-SNP) framework.

State Budget Update

- Historic deficit due to COVID Recession

- Many difficult reductions included in May Revision

- Priority to maintain Medi-Cal eligibility

- Managed Care Rate Adjustments

- Proposition 56

- Proposed elimination and modification of Medi-Cal Optional Benefits, including MSSP and CBAS, no sooner than July 1, 2020

- Program requirements remain in place as they are today until program changes are finalized

Long-Term Care at Home Benefit

- DHCS will beginning development of a new Medi-Cal benefit.

- New model of care is intended to help address the coronavirus pandemic, and provide eligible consumers with a coordinated and bundled set of home and community services to help vulnerable adults statewide stay healthy at home.

- Benefit will include: 1) Individual, Person Centered Assessment; 2) Transition Services; 3) Care Management; and 4) Home and Community Based Services.

- Benefit is intended to support home care for individuals transferring from hospitals to home, from skilled nursing facilities to home or to prevent a skilled nursing facility stay.

Long-Term Care At Home Benefit

- Coordinating with multiple groups and agencies, including the Master Plan for Aging Long-Term Services and Supports Subcommittee

- Upcoming Stakeholder meetings in June and July

- DHCS will seek approval from the federal Centers for Medicare & Medicaid Services for this benefit, and is intending to implement this model by early 2021.

- For more information, visit DHCS website, or email LTCatHome@dhcs.ca.gov.

ESRD Enrollment

- 2021 Final Rule for Medicare Advantage allows Medicare beneficiaries with a diagnosis of end stage renal disease (ESRD) to enroll into a Medicare Advantage plan beginning in 2021.

- DHCS is considering expanding Cal MediConnect (CMC) enrollment eligibility to allow beneficiaries with a diagnosis of ESRD to opt-in, maintaining alignment with Medicare Advantage rules.

- Currently beneficiaries with a diagnosis of ESRD in five CCI counties may not enroll in CMC; however, in San Mateo and Orange counties beneficiaries with ESRD may enroll. Beneficiaries that develop ESRD while enrolled in any CCI county may remain enrolled.

2021 D-SNP Updates

- 2021 State Medicaid Agency Contracts (SMACs) with D-SNPs are being updated to reflect CMS information sharing requirements.

- DHCS has shifted to a new policy, where D-SNPs will send hospital and SNF admissions data for all duals to the state in 2021 on a monthly basis, to be used to develop more robust information sharing policies for future years.

2020 Flu Season Preparation

Vaccination Disparity Between Medicare Beneficiaries and Dually Eligible Individuals Nationally

Medicare Fee-For-Service National Influenza Virus Vaccine (% per year)
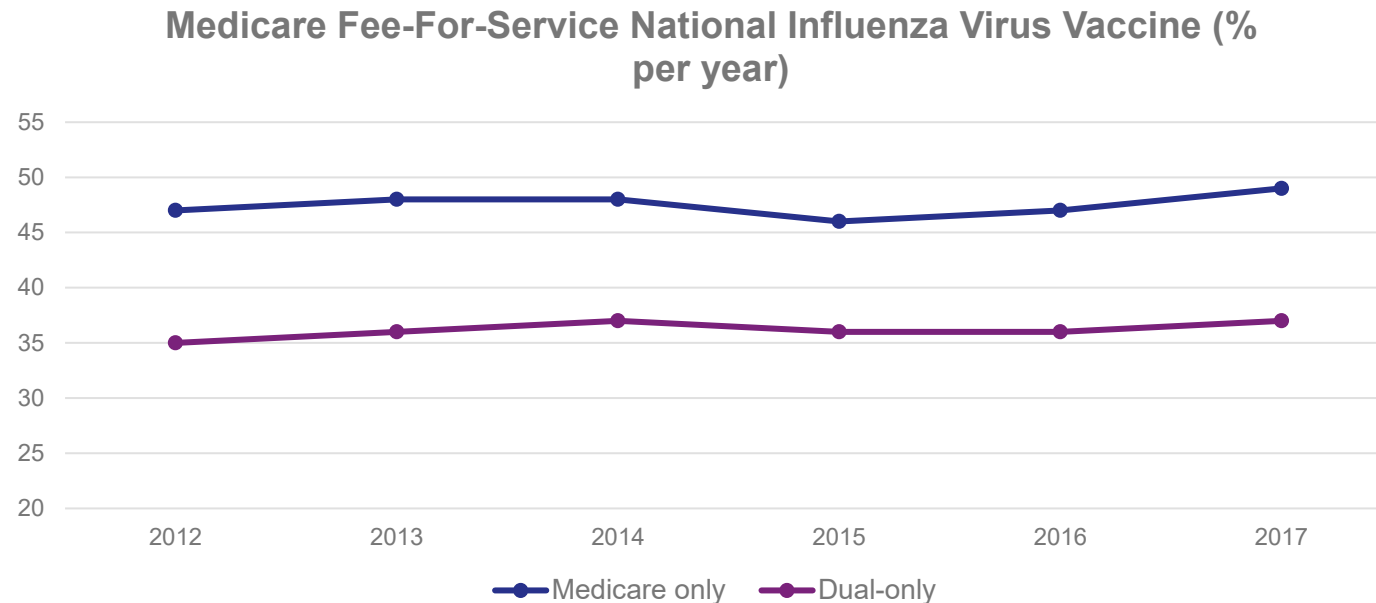
What is this measuring? The uptake (or usage) rates for preventive services represent how often Medicare beneficiaries utilize preventive services (i.e., percentage of population) such as screenings, tests, exams, and immunizations (i.e. Influenza Virus Vaccine). The data are 2012 through 2017 CMS administrative claims data for Medicare beneficiaries enrolled in the fee-for-service program.

Adapting Cal MediConnect Focus on Flu Vaccinations in 2020

70% of Cal MediConnect enrollees surveyed in 2019 reported having a flu shot in previous year.

The CDC has raised the prospect of a second wave of COVID-19 that could coincide with the next flu season.

We are seeking innovative approaches to improve take-up of flu vaccination even while many people may still be reluctant to go to a doctor's office or access other traditional flu shot options.

- Are there promising practices in your community?
- How can we (CMS/Cal MediConnect Plans/DHCS) be most helpful?"

Feedback is welcome. Please contact:
Kerry.Branick@cms.hhs.gov and Anna.Williams@cms.hhs.gov

Data from 2018 Consumer Assessment of Healthcare Providers & Systems (CAHPS) survey

Укрепляйте здоровье, сделайте прививку от гриппа

Где можно сделать прививку от гриппа?
Вакцины против гриппа предлагаются во многих местах:
- Врачебные кабинеты
- Аптеки
- Отделы здравоохранения
- Клиники

#FIGHT FLU
cdc.gov/FightFlu

Russian

Postcards and posters from prior flu campaigns in 10+ languages available at:
http://calduals.org/learn-more-resources/flu-vaccine-campaign/

Cal MediConnect Plan Responses to COVID-19

Santa Clara Family Health Plan™

COVID-19 Response – Uncharted Territory

Identifying and addressing needs of vulnerable populations

June 11, 2020

Christine Turner, Chief Operating Officer
Lori Andersen, Operations Director, Long-Term Services and Supports

Who is Santa Clara Family Health Plan?

Community-based, not-for-profit health plan

- Established by Santa Clara County Board of Supervisors to serve the residents of Santa Clara County
  - Enrolled first Medi-Cal members in 1997
  - Enrolled first Cal MediConnect members in 2015

- Public agency acting on behalf of and accountable to the people of our community.

- Work in collaboration with the health care Safety Net (e.g., Public Hospitals and Community Clinics)

Programs and Membership

Total Members
249,493

240,656
Medi-Cal

8,837
Cal MediConnect
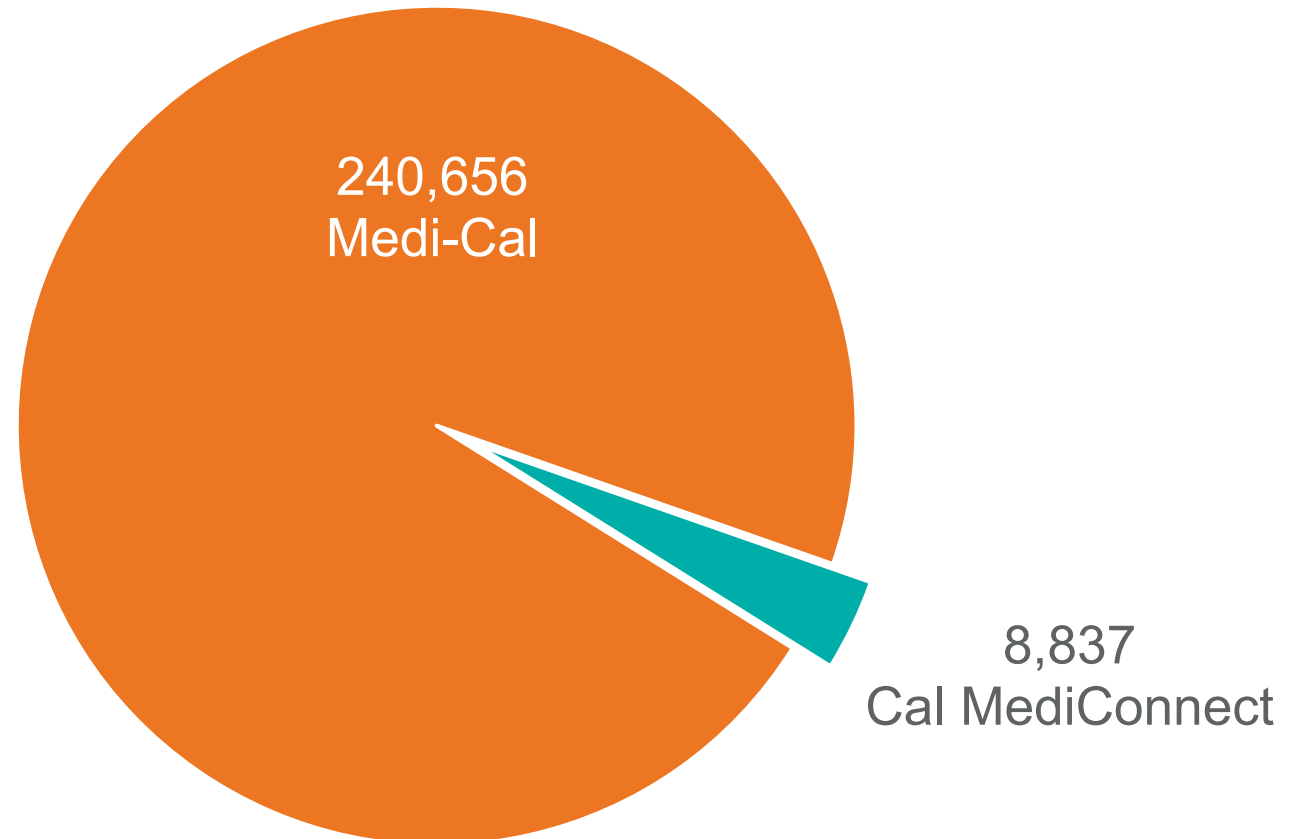
COVID-19 Interventions and Activities

- **Defined and identified** vulnerable populations, interventions and messaging

- **Developed robocall campaign and member mailing** with COVID-19 reminders and resources

- **Provided list of community resources** for members, case managers and customer service to assist with shelter in place or COVID-19-related needs.
  - Updated weekly and shared on the SCFHP website, with case management staff and with all staff and external resources making outreach calls

- **Implemented CBAS TAS** (Targeted Alternative Services)

- **Expanded Nurse Advice Line** to include hand-off to MDLive physicians for telehealth visits

- **Collaborated on targeted outreach** to vulnerable populations with providers and partners (MSSP, CBAS, Behavioral health, CB-CMEs)

- **Conducted targeted outreach call campaigns** to high risk populations

- **Supplemented case manager role** for all outbound calls to include COVID-19 related resources and check-in

Outreach to Vulnerable Populations

Targeted Member Populations

1. All Cal MediConnect members
2. Callers to nurse advice line re: COVID-19
3. Age 65+ with multiple chronic conditions
4. MSSP & CBAS
5. Health Homes Program
6. Behavioral health SMI
7. Case management
8. Post-acute discharged
9. Pregnant & post-partum members (Not CMC)

Outreach Activities

- Robocalls & mailed flyers
- Outbound calls to:
  - Respond to a member inquiries or care transitions
  - Inform regarding COVID-19 safety protocols
  - Assess for safety knowledge
  - Identify unmet needs, hardships, health status
  - Assist with access to telehealth, providers, resources
  - Coordinate care to address barriers
  - Provide comfort

Next Time…

Worked Well

- Cross-functional team structure with assigned leadership and support
- Well-defined scope
- Weekly check-ins
- Primary owners for activities
- Building on strong provider relationships
- Timely and strong support from IT

Learning

- Confirm clear understanding of leadership and business unit responsibility for all activities up front
- ID project risks up front and troubleshoot with team to mitigate risks
- Avoid 'scope creep' or changes, if possible
- Communicate more frequently for quicker sign-offs and movement forward
- Send out project status report/to-do check lists prior to team meetings
- Monitor momentum with partners and providers

our
mission

To ensure access to high-quality care services and supports that help San Mateo County's vulnerable and underserved residents live the healthiest lives possible. HPSM serves all the County's Medi-Cal eligible residents, as well as families, older adults, people with disabilities and children with complex medical conditions who do not qualify for other health insurance. HPSM also has special programs that address eligible members' social determinants of health – from home-based health care to affordable housing for the homeless.

HealthPlan
OF SAN MATEO

Healthy is for everyone

Agenda

- About HPSM

- COVID-19 Response Priorities & Strategy

- Provider Network Support

- Member Access

  - Healthcare Services

  - Food

  - Accurate Information

  - Social Support

About HPSM

- County Organized Health System (COHS) founded in 1987

- Ensures that San Mateo County's vulnerable and underserved residents have access to high-quality care, services and supports so they can live the healthiest lives possible

- With more than 130,000 members, HPSM serves all of the County's Medi-Cal eligible residents, as well as families, seniors, people with disabilities and children with complex medical conditions who do not qualify for other health insurance

- HPSM also has special programs that address members' social determinants of health – from home-based health care to affordable housing for the homeless

- Learn more at www.hpsm.org

Priorities During COVID-19

- HPSM's top priority has been serving members and providers

  – Cross-departmental taskforces were created in the first days of the stay-at-home order to streamline member and provider efforts and report out on progress weekly.

- Supporting the provider network

  – Telemedicine

  – Nursing Facilities

  – Outreach & Recruitment

- Ensuring member access

  – Health care services, supplies, and medications

  – Accurate Information

  – Food

  – Social Support

Provider Network

- Telemedicine

  - Established reimbursement mechanism to align with Medicare and Medi-Cal reimbursement updates and provided billing guidance to providers

  - Surveyed all primary care providers (PCP) to determine whether they could offer telemedicine visits by phone and/or by video

- Nursing Facilities

  - In collaboration with San Mateo County, identified 3 Skilled Nursing Facility (SNF) COVID-19 centers of excellence

  - Established a coalition of SNF administrators and medical directors to communicate about resources and new protocols

  - Care Transitions staff are working with county public health nurses to coordinate acute and post-acute discharges

- Outreach & Recruitment

  - Conducting ongoing network outreach to track access changes and the availability of telemedicine

  - Conducting additional provider recruiting, with an emphasis on primary care, virtual behavioral health, speech therapy

  - Supporting county volunteer staff credentialing

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Access to Healthcare Services

- Telehealth Services

  – For members not assigned to a PCP or assigned to a PCP who does not offer telemedicine, HPSM established an arrangement with Teladoc to provide primary care through telemedicine

- Telephonic Wellness Checks

  – Identified existing internal and external outreach resources and worked with those partners to expand their scopes to perform telephonic wellness and welfare checks for high-risk older adults and people with disabilities, including all of CMC

  – Ask members about access to services/meds, precautions for COVID-19 exposure, and their health conditions

- Home-Based Clinical Assessments

  – Maintained partner operations of home-based programs for CMC members while ensuring implementation of appropriate screening measures, PPE use, and telehealth strategies

Access to Healthcare Services, Cont.

- Pharmacy Benefits & Medication Therapy Mgmt. (MTM)

  - Changed pharmacy rules to allow easier access to early refills and 90-day supplies and publicized free medication delivery options

  - Expanded the MTM script to identify COVID-related member needs in addition to comprehensive medication reviews

- Baby + Me Outreach

  - Expanded the script for this existing telephonic and text messaging outreach program for pregnant women and new moms

  - Now includes COVID-19 specific information such as impacts on pregnancy, breastfeeding, and hospital delivery protocols. Also emphasizes the importance of children's immunizations

- Asthma Outreach

  - Refined and expanded the asthma outreach program's script to focus on adhering to asthma medication guidelines, new pharmacy flexibilities, and COVID-19 related questions

Access to Accurate Information

- **Microsite:** Created an embedded website dedicated to COVID-19 updates and resources for meal delivery, telehealth, behavioral health, eligibility, medications & personal safety

- **Text Campaign:** Developing messaging related to COVID-19 prevention, mental health/social support during shelter-in-place, and other resources to send via text.

- **Postcard:** Delivered a postcard to all members with a link to the website and key contact numbers.

Coronavirus (COVID–19) Resources

The coronavirus disease 2019 (COVID–19) situation is changing rapidly. The health of our members remains our top priority. For the safety all HPSM members and employees, and to comply with public health guidelines, HPSM will no longer host in-person meetings at the offices. However, HPSM is committed to serving your needs during this crisis.

To make sure you have the information and support you need to stay safe and healthy, we will post COVID–19 updates here. Just click the button below to find what you need.

- Access to medication
- Eligibility & Coverage
- Behavioral Health & Care Coordination
- Meal Delivery & Community Resources
- Telephonic Medical Advice
- Personal & Home Safety

Your health is our top priority.
We are in this together.

For information about:
- Access to Medication
- Behavioral Health & Care Coordination
- Eligibility & Coverage
- Meal Deli...
- Online & ...
- Personal ...

Visit **www.hpsm.org/COVID-...**

We want to make sure you stay informed about your healthcare an...

If you have an urgent question, call us.

- For medical questions, call your PCP or our Nurse Advice Line **1-833-846-8773**
- For urgent benefits questions, call:

  CareAdvantage: **1-866-880-0606** (toll-free) or **650-616-2174**

  Medi-Cal/HealthWorx/ACE: **1-800-750-4776** (toll-free) or **650-616-2133**

  TTY users: **1-800-735-2929** or dial **7-1-1**

- For questions about mental health or substance abuse services, call **1-800-686-0101**
- For health-related transportation, call ALC **1-844-856-4389**

To check your coverage, go online to **www.hpsm.org** and log into the member portal

Access to Food

- Expanded Short-Term Meal Delivery Program

  – Existing program targets members with complex, chronic health conditions and now includes pregnant women and new moms

- Great Plates Delivered

  – HPSM partnered with San Mateo County's Aging & Adult Services to plan this state-wide FEMA program that delivers 3 restaurant meals per day to seniors and people experiencing COVID.

  – To apply, call (800) 675-8437

- Grocery Delivery

  – HPSM is exploring options to connect members with local volunteers for free delivery of groceries, diapers, household items, and medications.

Access to Social Support

- Social Outreach Calls by HPSM Staff

  – HPSM staff from all departments and levels make social calls to members, primarily targeting people who are likely to be at higher risk of social isolation.

  – Calls focus on providing a social connections, but also identify additional member needs.

- Member to Member Buddy Calls

  – This program utilizes existing social connections between older adult members, who call each other to socialize telephonically

- 'Dear Neighbor' Postcard Writing Campaign

  – Focused on members that are unreachable through other means, as we are concerned that these members are particularly vulnerable to social isolation.

  – In collaboration with the San Mateo County Volunteer Corps and local community-based organizations, HPSM prints postcards and volunteers write hand-written notes to members. HPSM then labels and mails out to members.

COVID-19 has reinforced the critical role of safety net health plans

HPSM is **uniquely positioned to foster relationships** between community-based organizations, the health care system, and people most in need. Through those relationships, we provide what our members have come to expect from their health plan: access to **doctors**, **hospitals** and **medicines**.

Providing access to those services is essential – but isn't enough.

Now more than ever, people also need human connection and social support in their communities.

Thank You

Q & A

If you have a question, please click on the "raise hand" icon.

Next Steps

For more information about CalAIM please visit
https://www.dhcs.ca.gov/calaim.

For more information on the CCI – including enrollment, quality data, and toolkits – visit www.calduals.org.

You can send any questions or comments to info@CalDuals.org.