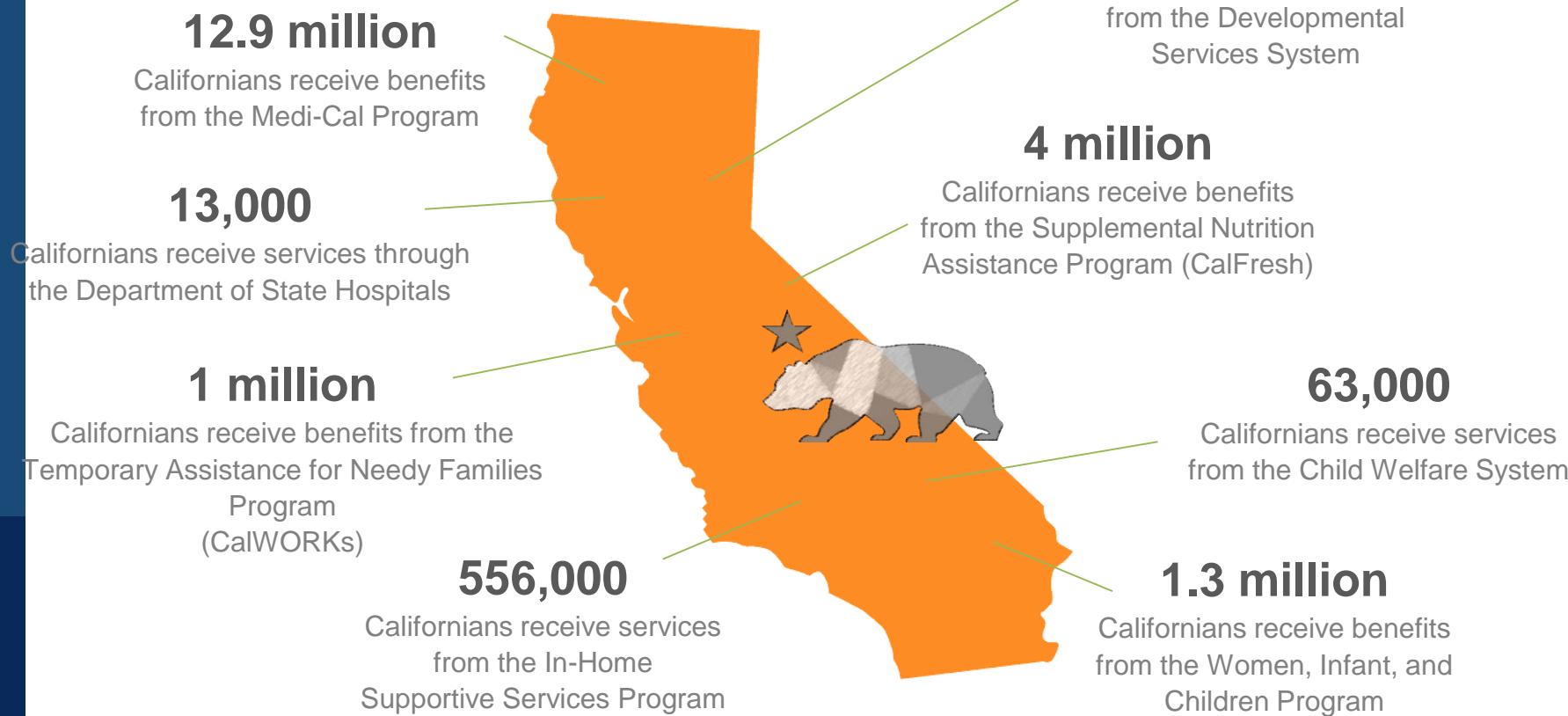


Together We Can Build a Healthy California for All

California Health and Human Services Agency
Person Centered. Data Driven.

Who We Serve



Our Strategic Priorities

Person Centered. Data Driven.



Build a Healthy California for All



Improve the Lives of California's Most Vulnerable



Integrate Health and Human Services



Build a Healthy California for All



1

Create a system in which every Californian has access to high-quality, affordable, health coverage

2

Whole-person orientation to care: Human-centered, culturally and linguistically specific

3

Increase affordability by reducing the rate of growth in health care costs in California

Integrate Health and Human Services



1

Advancing behavioral health care with an emphasis on community-based systems of care

2

Integrate clinical, financial, and structural elements of service delivery systems to facilitate seamless care delivery

3

Focus on social determinants and population health

Improve the Lives of California's Most Vulnerable



1

Reduce homelessness

2

Expand diversion and reentry

3

Improve outcomes for children living in poverty and foster care

4

Address the needs of persons with disabilities and our growing aging population



CalAIM: California Advancing and Innovating Medi-Cal



CalAIM

- Overview, Goals and Advancing Key Priorities
- Review of CalAIM Proposals
- From Medi-Cal 2020 to CalAIM: A Crosswalk
- Stakeholder Engagement



CalAIM Overview

DHCS has developed a comprehensive and ambitious framework for the upcoming waiver renewals that encompasses a broader delivery system, and program and payment reform across the Medi-Cal program, called CalAIM: California Advancing and Innovating Medi-Cal.

Includes initiatives and reforms for:

- Medi-Cal Managed Care
- Behavioral Health
- Dental
- Other County Programs and Services



CalAIM Overview

- Medi-Cal has significantly expanded and changed over the last ten years
- Depending on the needs of the beneficiary, some may need to access six or more separate delivery systems
- As one would expect, need for care coordination increases with greater system fragmentation, greater clinical complexity, and/or decreased patient capacity for coordinating their own care.



CalAIM Overview

- Offers solutions to reinforce the stability of the Medi-Cal program and allows the critical successes of waiver demonstrations such as Whole Person Care, the Coordinated Care Initiative, public hospital system delivery transformation, and the coordination and delivery of quality care to continue and be expanded.
- Seeks to build upon past successes and improve the entire continuum of care across Medi-Cal, ensuring the system more appropriately manages patients over time through a comprehensive array of health and social services spanning all levels of intensity of care, from birth to end of life.



CalAIM Overview

Advances several key priorities of the Newsom Administration by leveraging Medi-Cal as a tool to help address many of the complex challenges facing California's most vulnerable residents, such as:

- homelessness,
- increasing behavioral health care access,
- children with complex medical conditions,
- growing number of justice-involved populations who have significant clinical needs, and
- growing aging population.



CalAIM Goals

CalAIM has three primary goals:

- Identify and manage member risk and need through Whole Person Care approaches and addressing social determinants of health;
- Move Medi-Cal to a more consistent and seamless system by reducing complexity and increasing flexibility; and
- Improve quality outcomes and drive delivery system transformation through value-based initiatives, modernization of systems and payment reform.



Overview of CalAIM Proposals



Identify and Manage Member Risk and Need

The following proposals fall under this goal as well as incorporate the third goal of improved quality outcomes:

- Population Health Management
- Enhanced Care Management
- Mandatory Medi-Cal Application & Behavioral Health Coordination
- In Lieu of Services and Incentives
- Mental Health IMD Waiver (SMI/SED)
- Full Integration Plans
- Long-Term Plan for Foster Care



Population Health Management

Medi-Cal managed care plans shall develop and maintain a patient-centered population health strategy, which is a cohesive plan of action for addressing member needs across the continuum of care based on data driven risk stratification, predictive analytics, and standardized assessment processes.

The plan shall include, at a minimum, a description of how it will:

- Keep all members healthy by focusing on preventive and wellness services;
- Identify and assess member risks and needs on an ongoing basis;
- Manage member safety and outcomes during transitions, across delivery systems or settings, through effective care coordination; and
- Identify and mitigate social determinants of health and reduce health disparities or inequities.



Enhanced Care Management

- DHCS proposes to establish a new, statewide enhanced care management benefit effective January 1, 2021.
- An enhanced care management benefit would provide a whole-person approach to care that addresses the clinical and non-clinical needs of high-need Medi-Cal beneficiaries.
- Enhanced care management is a collaborative and interdisciplinary approach to providing intensive and comprehensive care management services to individuals.
- The proposed benefit builds on the current Health Homes Program and Whole Person Care pilots and transitions those pilots to this new statewide benefit to provide a broader platform to build on positive outcomes from those programs.



Enhanced Care Management

Target populations include, but are not limited to:

- High utilizers with frequent hospital or emergency room visits/admissions;
- Individuals at risk for institutionalization with Serious Mental Illness, children with Serious Emotional Disturbance or Substance Use Disorder with co-occurring chronic health conditions;
- Individuals at risk for institutionalization, eligible for long-term care;
- Nursing facility residents who want to transition to the community;
- Children or youth with complex physical, behavioral, developmental and oral health needs (i.e. California Children Services, foster care, youth with Clinical High Risk syndrome or first episode of psychosis);
- Individuals transitioning from incarceration; and
- Individuals experiencing chronic homelessness or at risk of becoming homeless.



In Lieu of Services

- Medi-Cal managed care plans will integrate in lieu of services into their population health management plans – often in combination with the new enhanced care management benefit.
- In lieu of services may be focused on addressing combined medical and social determinants of health needs and avoiding higher levels of care.
- For example, in lieu of services might be provided as a substitute for, or to avoid, hospital or nursing facility admissions, discharge delays, and emergency department use.



In Lieu of Services

DHCS is proposing to cover the following distinct services as in lieu of service under Medi-Cal managed care. Details regarding each proposed set of services are provided in Appendix D of the CalAIM proposal.

- Housing Transition/Navigation Services
- Housing Deposits
- Housing Tenancy and Sustaining Services
- Short-Term Post-Hospitalization Housing
- Recuperative Care (Medical Respite)
- Respite
- Day Habilitation Programs
- Nursing Facility Transition/Diversion to Assisted Living Facilities
- Nursing Facility Transition to a Home
- Personal Care (beyond In-Home Supportive Services) and Homemaker Services
- Environmental Accessibility Adaptations (Home Modifications)
- Meals/Medically Tailored Meals
- Sobering Centers



Moving Medi-Cal to a Consistent and Seamless System

The following proposals fall under this goal as well as incorporate the third goal of improved quality outcomes:

- Standardize the Managed Care Benefit
- Standardize Managed Care Enrollment
- Transition to Statewide MLTSS
- Annual Medi-Cal Health Plan Open Enrollment
- NCQA Accreditation of Medi-Cal Managed Care Plans
- Regional Rates for Medi-Cal Managed Care
- Behavioral Health Proposals
 - Payment Reform
 - Revisions to Medical Necessity
 - Administrative Integration Statewide
 - Regional Contracting
 - SUD Managed Care Renewal (DMC-ODS)
- Future of Dental Transformation Initiative Reforms
- Enhancing County Oversight and Monitoring
- Improving Beneficiary Contact and Demographic Information



Stakeholder Engagement



Stakeholder Engagement

Throughout 2019 and 2020, DHCS will conduct extensive stakeholder engagement for both CalAIM and the renewal of the 1115 and 1915b waiver(s).

DHCS intends to work with the Administration, Legislature and our other partners on these proposals and recognizes the important need to discuss these issues and their prioritization within the state budget process. These are initial proposals whose implementation will ultimately depend on whether funding is available.



Stakeholder Engagement

DHCS is undertaking a robust CalAIM workgroup process that will cover key issue areas:

- Population Health Management
- Enhanced Care Management and In Lieu of Services
- Behavioral Health
- National Committee on Quality Assurance (NCQA) accreditation
- Full Integration Plans

Each CalAIM workgroup will be open to the public, so DHCS encourages interested parties to attend and/or submit written comments. Workgroup schedules, agendas, materials, and other CalAIM updates will be made available on the [CalAIM webpage](#).



Stay Informed

Please subscribe to DHCS' stakeholder email service to receive CalAIM updates.

Listen-in on all workgroup meetings and attend the SAC and BH-SAC meetings.

For any other comments, questions, or concerns, please contact
CalAIM@dhcs.ca.gov.



Discussion

