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# **California Children's Services (CCS) Redesign**

**March 25, 2016**

# Agenda

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- Introduction
- Opening Remarks
  - Mark Refowitz, Director, Orange County Health Care Agency
- Featured Presentation
  - Jennifer Kent, Director, Department of Health Care Services
- CalOptima Implementation
  - Michael Schrader, CEO, CalOptima
- Questions and Answers
  - Candice Gomez, Executive Director, Program Implementation, CalOptima
- Closing Remarks



# Opening Remarks

**Mark Refowitz**

**Director, Orange County Health Care Agency**



# Featured Presentation

**Jennifer Kent**

**Director, Department of Health Care Services**

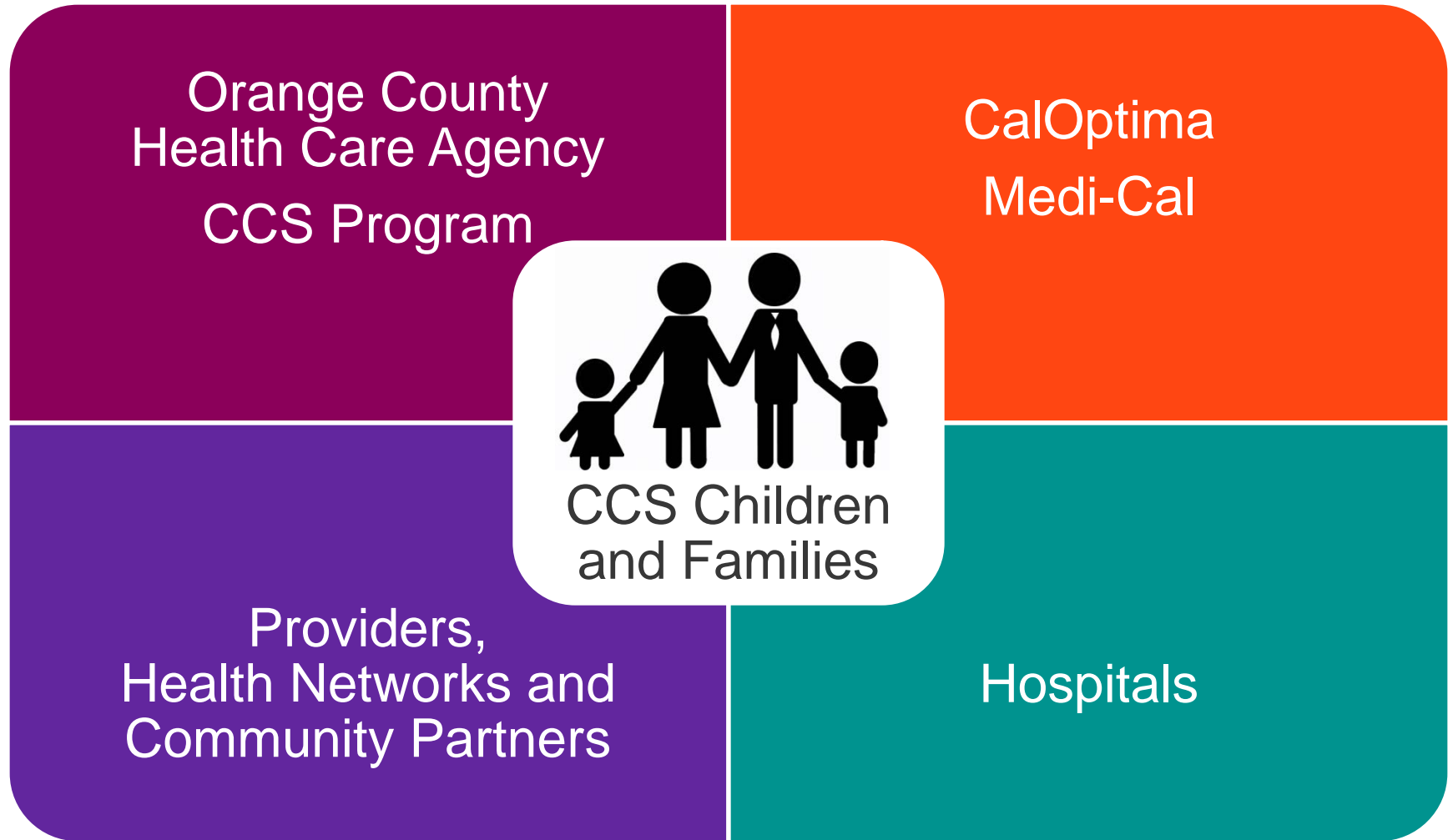


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# CalOptima Implementation

**Michael Schrader**  
**CEO, CalOptima**

# CCS: A Partnership in Orange County



# Guiding Principles: CCS Children

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- Continuity of care
  - Members continue seeing the same providers they currently see
  - Existing CCS children and families maintain relationships with their current CCS care coordinators
- Integration of services
  - Members have “one stop” for CCS and non-CCS-related services
- Member choice
  - Members access a broad and diverse network of providers that covers the entire county and beyond when necessary
- Timely access
  - Children receive timely authorizations and appointments with specialists

# Guiding Principles: CCS Providers

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- Broad participation
  - All existing CCS-paneled providers participate in the new Whole-Child Model
- Administrative simplification
  - Fewer agencies and policies means less fragmentation
- Stable payments
  - Providers receive 140 percent for CCS specialty care



# Guiding Principles: CCS Community

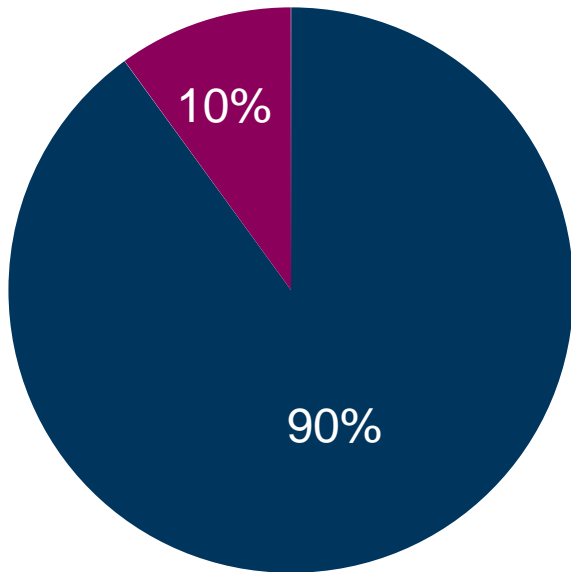
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- Thoughtful approach
  - CalOptima shows careful consideration and ample planning to minimize disruption of any future transition in CCS community
- Collaboration
  - CCS families, providers, consumer advocates, CCS program staff and others work together at local stakeholder meetings

# CCS Children in Orange County

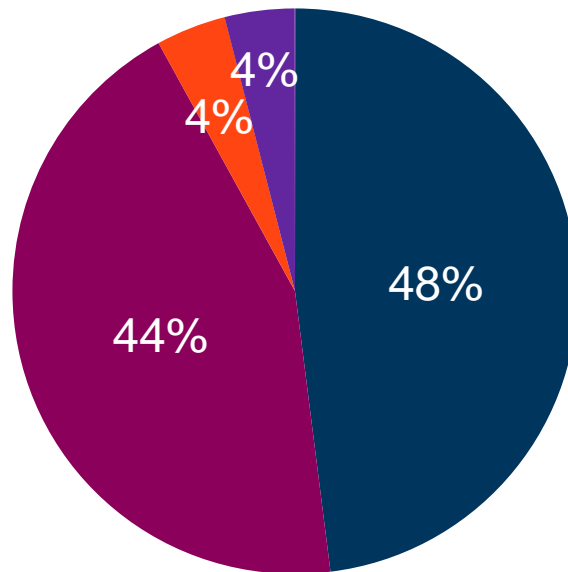
- Approximately 13,000 children

## Insurance



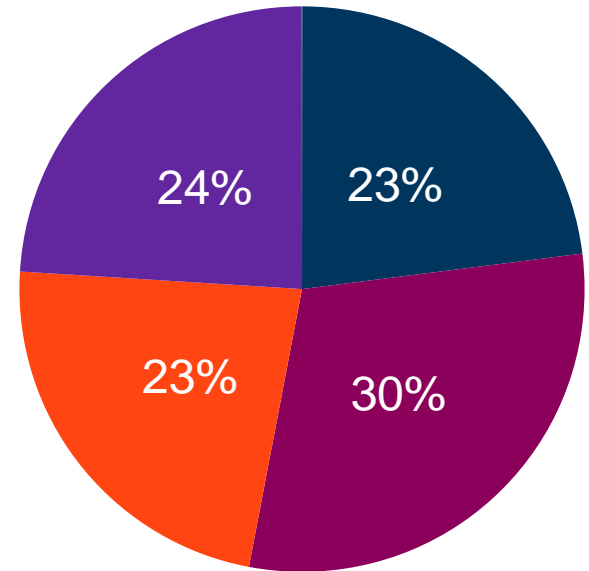
■ Medi-Cal  
■ Non-Medi-Cal

## Language



■ Spanish   ■ English  
■ Vietnamese   ■ Other

## Age



■ 0-5   ■ 6-10  
■ 11-15   ■ 16-20

# CCS Children by Health Network

Health Network	% of CCS Population
CHOC Health Alliance	53%
Arta Western	9%
Monarch	7%
Kaiser	6%
CalOptima Community Network	6%
Family Choice	4%
AltaMed	3%
Noble	3%
United Care Medical Group	3%
AMVI	2%
Prospect	2%
Talbert	2%

Source: Membership Data, March 18, 2016

# CalOptima's Prior Transitions

## Healthy Families Program

- January 2013
- 6 months of advance planning
- 74,000 children in HFP plans moved to CalOptima Medi-Cal

## Medical Services Initiative

- January 2014
- 24 months of advance planning
- 40,000 adults in county MSI program moved to CalOptima Medi-Cal

## OneCare

- January 2016
- 12 months of advance planning
- 9,800 seniors in OneCare moved to OneCare Connect

# CalOptima's Current Transitions

## Behavioral Health Treatment

- February 2016
- 17 months of advance planning
- ~1,200 children from the Regional Center of Orange County to Medi-Cal

## California Children's Services

- July 2017
- 17 months of advance planning
- ~13,000 children in the county CCS program to CalOptima

# Summary

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- Some uncertainty exists at the state level
- CalOptima intends to start planning now
  - Best course of action to shape policy and determine what's best for Orange County's CCS children
- Additional stakeholder meetings will be held for at least the next 16 months



# Questions and Answers

**Candice Gomez**

**Executive Director, Program Implementation,  
CalOptima**



# Closing Remarks

**Michael Schrader**  
**CEO, CalOptima**