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CalOptima Community Network (CCN)

Lunch and Learn Meeting

December 6, 2016



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Welcome

**Michael German, Manager
Provider Relations**

Agenda

- Provider Relations Updates
- Community Relations Update
- Member Satisfaction Survey Results
- CCS/Health Homes Program
- Medical Management Update
- Q&A and Closing Remarks

CCN Meeting Materials

- Meeting Agenda
- Notes page
- CCN Question Sheet
 - Complete if you would like CalOptima staff to follow up with you after this meeting.
- Today's Meeting Evaluation
 - Please complete at the end of each presentation.
- Meeting materials will be available on the provider webpage at www.caloptima.org. after this meeting.

Please place your cell phones on silent



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Provider Relations Updates

CCN Lunch and Learn

December 6, 2016

Arely Servin

Sr. Provider Relations Representative

Overview

- Community Network (CCN) Membership Update
- Semi-Annual Provider Directory Validation
- CalOptima Direct (COD) Claims

CCN Membership Update

- Total Medi-Cal Members: **68,513**
 - Children: **17,473**
 - Adults: **49,020**
 - 65 years of age and older: **2,020**
- Total OneCare Connect Members: **1,891**
- Total Primary Care Providers: **617**
- Total Specialists: **2,523**

Data as of October 1, 2016

Semi-Annual Provider Directory Validation

- CalOptima is updating the online provider directory
- Provider Relations will be visiting your office from January 2017 to March 2017
- Information to be validated includes:
 - Office hours / phone number / address
 - Languages spoken by the physician
 - Ages Accepted
- To make changes, contact the Provider Relations department at **714-246-8600**, or contact your provider relations representative.

CalOptima Direct Claims

- As mentioned at the October CCN Lunch and Learn, three code sets under COD were impacted, for dates of service from 10/1/15 to 6/30/16:
 - 99201-99204
 - 99211-99214
 - 99241-99244
- Please refer to www.caloptima.org for the most current listing of procedure codes that require prior authorization

Questions





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County Community Service Center

CCN Lunch and Learn

December 6, 2016

Maggie Moreno

Community Relations Specialist

Community Relations Department

- Mission:
 - To strengthen partnerships by enhancing communications, understanding and mutual support between CalOptima and community organizations
- Who we serve:
 - Nonprofit organizations
 - Community-based organizations
 - Faith-based organizations
- What we do:
 - Represent CalOptima in the community
 - Attend community events and collaborative/coalition meetings
 - Host Community Alliances Forums
 - Promote CalOptima Speakers Bureau

CalOptima at the County Community Service Center

- CalOptima's partnership with Social Services Agency
 - County Community Service Center (CCSC) Annex located at 15496 Magnolia Street, Suite 111, Westminster 92683
 - CCSC Annex serving members since September 2016
- Community partners:
 - Orange County Social Services Agency
 - Orange County Health Care Agency: Environmental Health Team, Behavioral Health Services and Public Health Nurse

CalOptima at the CCSC Annex

Come visit CalOptima
in Westminster!

**15496 Magnolia Street, Ste. 111,
Westminster, CA**

- As Orange County's community health plan, CalOptima is now available to serve our members at the County Community Service Center located in Westminster. CalOptima staff will be on site to provide health resource information.

CalOptima, Orange County's Medi-Cal Plan, Now at County Community Service Center

Come Visit CalOptima in Westminster!

As Orange County's community health plan, CalOptima is now available to serve our members at the County Community Service Center located in Westminster. CalOptima staff will be on-site to provide health resource information.



BEHAVIORAL HEALTH: To learn about accessing behavioral health services. Mondays, 8 a.m. to noon.

PACE (Program of All-Inclusive Care for the Elderly): To learn more about PACE, a community-based program that provides coordinated and integrated health care services. Tuesdays, 8 a.m. to noon.

ONECARE CONNECT CAL MEDICCONNECT (Medicare-Medicaid Plan): To enroll in a new health plan for people with Medicare and Medi-Cal. Wednesdays, 8 a.m. to 5 p.m.

CUSTOMER SERVICE: To assist members with provider selection, referrals, ID cards and other service needs. Thursdays, 8 a.m. to noon.

HEALTH EDUCATION: To learn about health topics at no-cost monthly Friday seminars — second Friday in English, third Friday in Spanish and the last Friday in Vietnamese.

Visit us today!

County Community
Service Center
15496 Magnolia Street
Suite 111
Westminster, CA 92683

For more information about CalOptima and services provided at the County Community Service Center, call 714-246-8500 or visit www.caloptima.org.



CalOptima at the CCSC Annex

- Objectives:
 - Increase member-facing activities in the community
 - Increase awareness of CalOptima's programs and services
 - Increase members' knowledge regarding health-related topics
 - Build and enhance relationships with providers and community partners
 - Increase CalOptima's visibility in the community
- Key activities:
 - Provide customer service for members
 - Host health education seminars
 - Provide enrollment and outreach for OneCare Connect Cal MediConnect (Medicare-Medicaid Plan) and Program of All-Inclusive Care for the Elderly (PACE)

CalOptima at the CCSC Annex (cont.)

- CalOptima's goals for the CCSC Annex:
 - Serve our members in the community.
 - Provide comprehensive services to meet our members' health care needs.
 - Assess our members' and community's health needs.
- CalOptima would like to partner with our CCN providers to serve our members at the CCSC Annex.

CalOptima at the CCSC Annex (cont.)

CalOptima's Programs and Services at the CCSC Annex:

Behavioral Health Integration	Mondays	8 a.m.–12 p.m.
PACE	Tuesdays	8 a.m.–12 p.m.
OneCare Connect	Wednesdays	8 a.m.–5 p.m.
Customer Service	Thursdays	8 a.m.–12 p.m.
Health Education Seminars	Fridays	2nd Fridays in English 3rd Fridays in Spanish Last Fridays in Vietnamese

Health Education Seminars in January

- Purpose

- To increase understanding and awareness of benefits available to our members and how to access services.
- Open to members and service providers.

“Who is CalOptima? Understanding Medi-Cal Benefits”

- Friday, January 6 in Vietnamese at 9am
- Friday, January 13 in English at 9am
- Friday, January 20 in Spanish at 9am

Questions

Maggie Moreno
Community Relations Specialist
Public Affairs

Direct: 657-235-6924
mmoreno@caloptima.org



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Medi-Cal and OneCare Member Experience Survey Results

CCN Lunch and Learn

December 6, 2016

Marsha Choo

Manager of Quality Initiatives

Member Experience Surveys

CalOptima implements the following Consumer Assessment of Healthcare Providers and Systems (CAHPS), or member experience surveys, at the health network (HN) level.

Population	Purpose	Response Rate
Medi-Cal (MC) Child HN Level Survey	<ul style="list-style-type: none"> • Pay for Performance • Parents' Experience with their MC Child's Care at the HN Level 	37.6%
Medi-Cal Adult with Disabilities HN Level Survey	<ul style="list-style-type: none"> • MC Adults with Disabilities Member Experience at the HN Level • Department of Health Care Services (DHCS) Monitoring Smoking Cessation at the HN Level 	38.6%
OneCare (OC) HN Level Survey	<ul style="list-style-type: none"> • OC Member Experience at the HN Level 	46.7%

Medi-Cal: Measurements

- Overall Ratings — Single questions on the following areas:
 - Rating of Health Care
 - Rating of Personal Doctor
 - Specialist Seen Most Often
 - Rating of Program
- Composites: Multiple questions make up one composite
 - Getting Needed Care
 - Getting Care Quickly
 - How Well Doctors Communicate
 - Customer Service



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Medi-Cal Child HN Level Results

MC Child HN Level Survey Results

Measurement	MC Child MY 2014 HN Level	MC Child MY 2015 HN Level	CCN MY 2015
Rating of Health Care	79.8%	81.2%	80.7%
Rating of Personal Doctor	87.0%	86.1%	90.6% ↑
Specialist Seen Most Often	83.4%	82.9%	88.9%
Rating of Health Network	81.5%	81.2%	82.1%
Getting Needed Care	74.3%	72.9%	74.7%
Getting Care Quickly	81.5%	80.5%	79.9%
How Well Doctors Communicate	87.9%	87.0%	91.0% ↑
Customer Service	83.1%	85.4%	91.8% ↑

* Sample size may be too small; ↑↓ indicates statistically significant increase/decrease in score from MC Child MY 2015 group level; MY = Measurement Year; Bold = Areas of focus at the plan level; CCN = CalOptima Community Network

MC Child HN Level Survey Results (cont.)

Key Strengths

HN Aggregate	CalOptima Community Network (CCN)
Q4. Usually or always got urgent care as soon as child needed.	Q4. Usually or always got urgent care as soon as child needed.
Q27. Personal doctor usually or always explained things in a way that was easy to understand.	Q14. When talking about starting or stopping a prescription, doctor/provider asked what you thought was best for child.
Q30. Personal doctor usually or always showed respect for what you had to say.	Q29. Personal doctor usually or always listened carefully to you.
Q48. Customer service usually or always treated you with courtesy and respect.	Q36. Personal doctor usually or always seemed informed about care your child got from other providers.
Q47. Customer service usually or always gave the information or help you needed.	Q47. Customer service usually or always gave the information or help you needed.

MC Child HN Level Survey Results (cont.)

Opportunities for Improvement

Group Aggregate	CalOptima Community Network (CCN)
Q18. Usually or always easy to get the care, tests or treatment child needed.	Q13. Doctor/provider talked about the reasons you might not want child to take a medicine.
Q20. Usually or always easy to get special medical equipment or devices for child.	Q16. Usually or always easy to get after-hours care your child needed.
Q22. Usually or always easy to get therapy for child.	Q22. Usually or always easy to get therapy for child.
Q36. Personal doctor usually or always seemed informed about care your child got from other providers.	Q24. Someone from doctor's office or health network helped coordinate care for child.
Q50. Forms from your child's health network were usually or always easy to fill out.	Q42. Usually or always got appointments with specialists as soon as child needed.



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Medi-Cal Adult with Disabilities HN Level Results

MC Adult with Disabilities HN Survey Results

Measurement	MC Adult with Disabilities MY 2014 HN Level	MC Adult with Disabilities MY 2015 HN Level	MC Adult with Disabilities CCN MY 2015
Rating of All Health Care	69.1%	72.4%	76.0%
Rating of Personal Doctor	79.6%	81.1%	84.2%
Specialist Seen Most Often	79.0%	80.1%	82.7%
Rating of Health Network	69.4%	72.4%	74.3%
Getting Needed Care	77.6%	80.0%	76.8%
Getting Care Quickly	77.8%	78.2%	78.6%
How Well Doctors Communicate	87.0%	88.8%	91.6%
Customer Service	83.2%	85.5%	86.0%

* Sample size may be too small; ↑↓ indicates statistically significant increase/decrease in score from MC Adults with Disabilities MY 2015 group level; MY = Measurement Year; Bold = Areas of focus at the plan level; CCN = CalOptima Community Network

MC Adult with Disabilities HN Survey Results

Key Strengths

Group Aggregate	CalOptima Community Network (CCN)
Q4. Usually or always got urgent care as soon as needed.	Q4. Usually or always got urgent care as soon as needed.
Q15. Usually or always easy to get the care, tests or treatment you needed.	Q15. Usually or always easy to get the care, tests or treatment you needed.
Q36. Usually or always easy to get a referral to a specialist.	Q36. Usually or always easy to get a referral to a specialist.
Q33. Personal doctor usually or always spent enough time with you.	Q42. Customer service usually or always gave needed information or help.
Q43. Customer service usually or always treated you with courtesy and respect.	Q43. Customer service usually or always treated you with courtesy and respect.

MC Adult with Disabilities HN Survey Results

Opportunities for Improvement

Group Aggregate	CalOptima Community Network (CCN)
Q20. Usually or always easy to get special medical equipment.	Q20. Usually or always easy to get special medical equipment.
Q22. Usually or always easy to get special therapy.	Q22. Usually or always easy to get special therapy.
Q27. Usually or always easy to get doctors to agree with you on how to manage health problems.	Q27. Usually or always easy to get doctors to agree with you on how to manage health problems.
Q37. Usually or always got an appointment to see a specialist as soon as you needed.	Q37. Usually or always got an appointment to see a specialist as soon as you needed.
Q42. Customer service usually or always gave needed information or help.	Q45. Forms from your health network were usually or always easy to fill out.



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OneCare Results

OneCare: Measurements

- Overall Ratings — Single questions on the following areas:
 - Rating of Health Care Quality
 - Rating of Personal Doctor
 - Rating of Specialist Seen Most Often
 - Rating of Health Network
 - Rating of Drug Plan

OneCare: Measurements (cont.)

- Composites: Multiple questions make up one composite
 - Getting Needed Care
 - Getting Appointments and Care Quickly
 - Doctors Who Communicate Well
 - Customer Service
 - Getting Needed Prescription Drugs
 - Getting Information from Drug Plan
 - Care Coordination

OneCare HN Survey Results

Measurement	OneCare MY 2014 HN Level	OneCare MY 2015 HN Level	CCN MY 2015
Rating of Health Care Quality	83.3%	83.4%	83.3%*
Rating of Personal Doctor	92.2%	92.5%	100%*
Rating of Specialist Seen Most Often	88.0%	87.9%	100%*
Rating of Health Network	87.9%	87.3%	83.3%*
Rating of Drug Plan	90.3%	88.8%	90.9%*

* Sample size may be too small; ↑↓ indicates statistically significant increase/decrease in score from OneCare MY 2015 group level; MY = Measurement Year; CCN = CalOptima Community Network

OneCare HN Survey Results (cont.)

Measurement	OneCare MY 2014 HN Level	OneCare MY 2015 HN Level	CCN MY 2015
Getting Needed Care	83.0%	82.7%	68.8%*
Getting Appointments and Care Quickly	71.8%	72.4%	100%*
Doctors Who Communicate Well	91.6%	91.5%	86.1%*
Customer Service	88.3%	87.9%	88.2%*
Getting Needed Prescription Drugs	91.1%	91.0%	87.5%*
Getting Information from Drug Plan	82.5%	81.8%	87.5%*
Care Coordination	N/A	86.4%	88.6%*

* Sample size may be too small; ↑↓ indicates statistically significant increase/decrease in score from OneCare MY 2015 group level; MY = Measurement Year; CCN = CalOptima Community Network

Data Activities

- Deeper data dive on member experience data
 - Analyze 2016 (MY 2015) plan and group level CAHPS results
- Analysis of the supplemental survey results at the clinic and provider level
- Implement Clinician and Group (CG) CAHPS, a provider level member experience survey.
- Explore ways to collaborate with the health networks on data collection on CG-CAHPS.
- Evaluate member pain points from various data sources.

Activities to Improve Member Experience

- Member experience scores were given greater weight (up from 25% to 40%) in our new Pay for Value (P4V) program for the calendar year 2016.
- Customer service post call survey (first call resolution)
- Member education on referral and authorizations
- Engage the Provider Advisory Committee ad hoc subcommittee on member experience
- Issue request for information on provider coaching
- Workgroup to address on referral and authorization — review and update the prior authorization list
- Plan level CAHPS results were presented at committees

Next Steps

- Article on provider CAHPS performance in provider communications with tips to improve member experience
- Explore provider coaching and peer to peer education opportunities
- Health network-specific results will be shared with each of the health networks at the HN Quality Forum with further discussion to occur at the HN Joint Operation Meetings (JOM) or at the Quality Meetings.

Next Steps (cont.)

- Develop a member experience provider scorecard.
- Share provider level member experience performance with health networks.
- Gather action plans from health networks on member experience.
- Prepare for CAHPS fielding in February 2017.



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California Children's Services (CCS) Transition: Whole Child Model

CCN Lunch & Learn

December 6, 2016

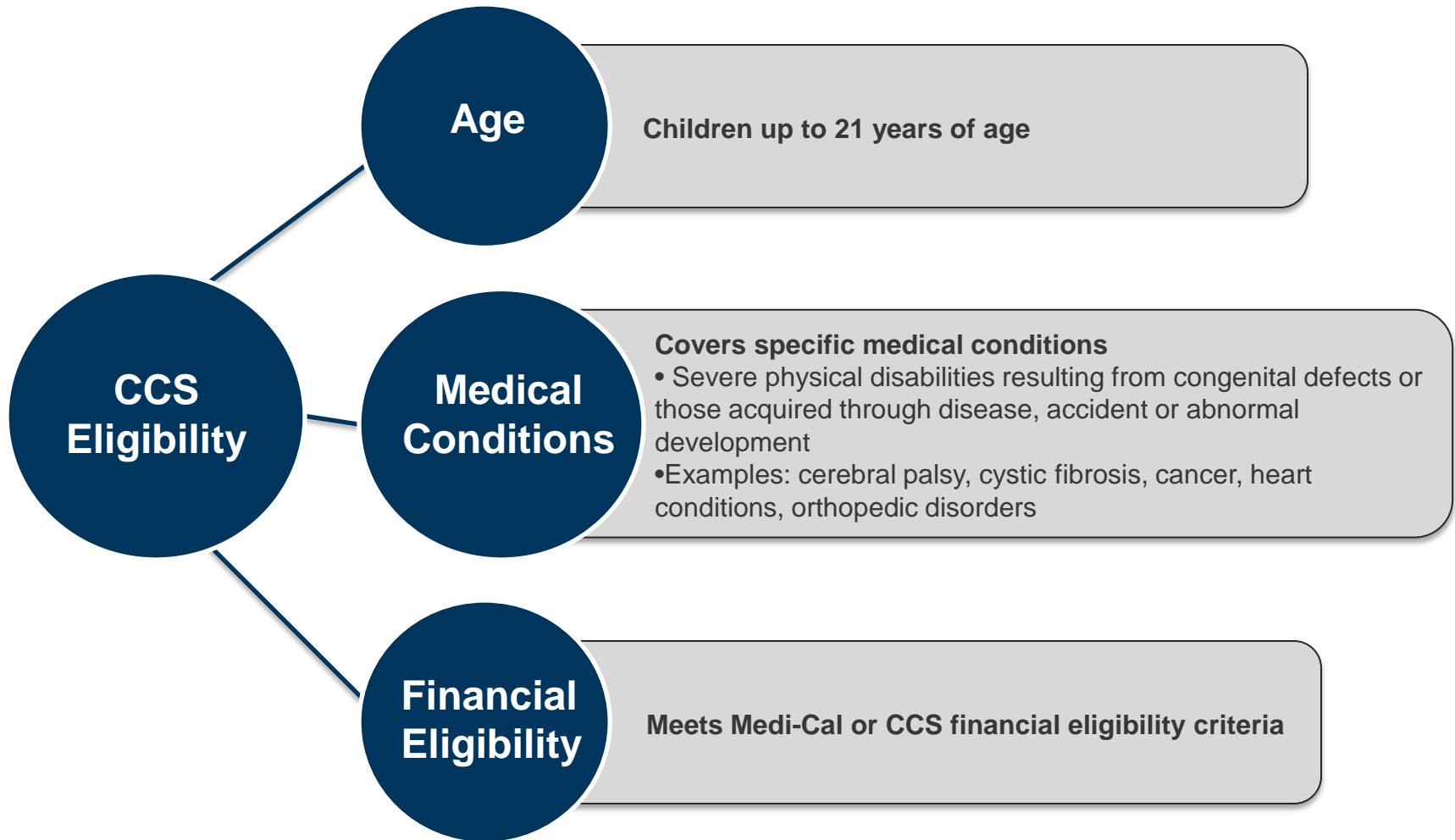
Pallavi Patel

Director, Business Integration and Process Excellence

CCS Background: Current State

- California Children's Services (CCS) is a statewide program providing medical care, case management, PT/OT and financial assistance for children meeting CCS eligibility criteria
 - Services carved out of most Medi-Cal Managed Care Plans (MCP), including CalOptima
 - Orange County Health Care Agency (OCHCA) is responsible for CCS services for approximately 12,000 children

CCS Background: Eligibility Criteria



Whole Child Model (WCM)

- On September 25, 2016, Gov. Brown signed Legislation (SB 586) authorizing CCS integration as a MCP benefit
 - Intent is to improve coordination of services to meet the needs of the whole child, not just address the CCS-eligible condition
 - Effective in select counties, including Orange County
 - Integration is no sooner than July 1, 2017
 - DHCS is expected to adopt a phased approach
 - CalOptima is currently scheduled to implement no sooner than January 1, 2018
 - Responsibilities for eligibility determination, NICU and Medical Therapy Program remain unchanged

Member Continuity of Care Rights

- Members will have 90 days from go-live to elect to stay with their county public health nurse for care management and care coordination
- Member will have right to continue to use
 - CCS providers that have existing relationships for treatment of a child's CCS condition for up to 12 months*
 - Specialized or customized durable medical equipment (DME) providers for up to 12 months*
 - Currently prescribed drug until:
 - Provider completes an assessment of the child
 - Provider creates a treatment plan
 - MCP and provider agree that the drug is no longer medically necessary/
no longer prescribed

* Conditions apply

MCP Responsibilities

- Provide advance written notices to all CCS transitioning children
- Track aged-out child for three years after they turn 21 if they continue to be a CalOptima member
- Perform risk assessments for CCS-enrolled children
- Be responsible for service authorization, paying claims and handling grievances and appeals for MCP covered CCS benefits
- Conduct stakeholder engagement, including establishing CCS family and clinical advisory committees

Guiding Principles

CCS Children

Continuity of care

- Members continue seeing the same providers they currently see, if conditions are met
- Existing CCS children and families maintain relationships with their current CCS care coordinators, if elected to stay

Integration of services

- Transitioned 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

CCS Providers

Broad participation

- All existing CCS-paneled providers are able to participate in the new Whole Child Model

Administrative simplification

- Fewer agencies and policies means less fragmentation

CCS Community

Thoughtful approach

- CalOptima shows careful consideration and ample planning to minimize disruption in the community from the CCS transition

Collaboration

- Families, providers, consumer advocates, CCS program staff and others work together at local stakeholder meetings

CCS WCM Resources

- SB 586 History
http://leginfo.legislature.ca.gov/faces/billNavClient.xhtml?bill_id=201520160SB586
- DHCS CCS Advisory Group
<http://www.dhcs.ca.gov/services/ccs/Pages/AdvisoryGroup.aspx>
- DHCS CCS Resources
<http://www.dhcs.ca.gov/services/ccs/Pages/default.aspx>
- OCHCA CCS Resources
<http://ochealthinfo.com/phs/about/ccs>
- CalOptima WCM Stakeholder Resources
https://www.caloptima.org/en/CCS_Info.aspx
 - Sign up for email updates

Questions





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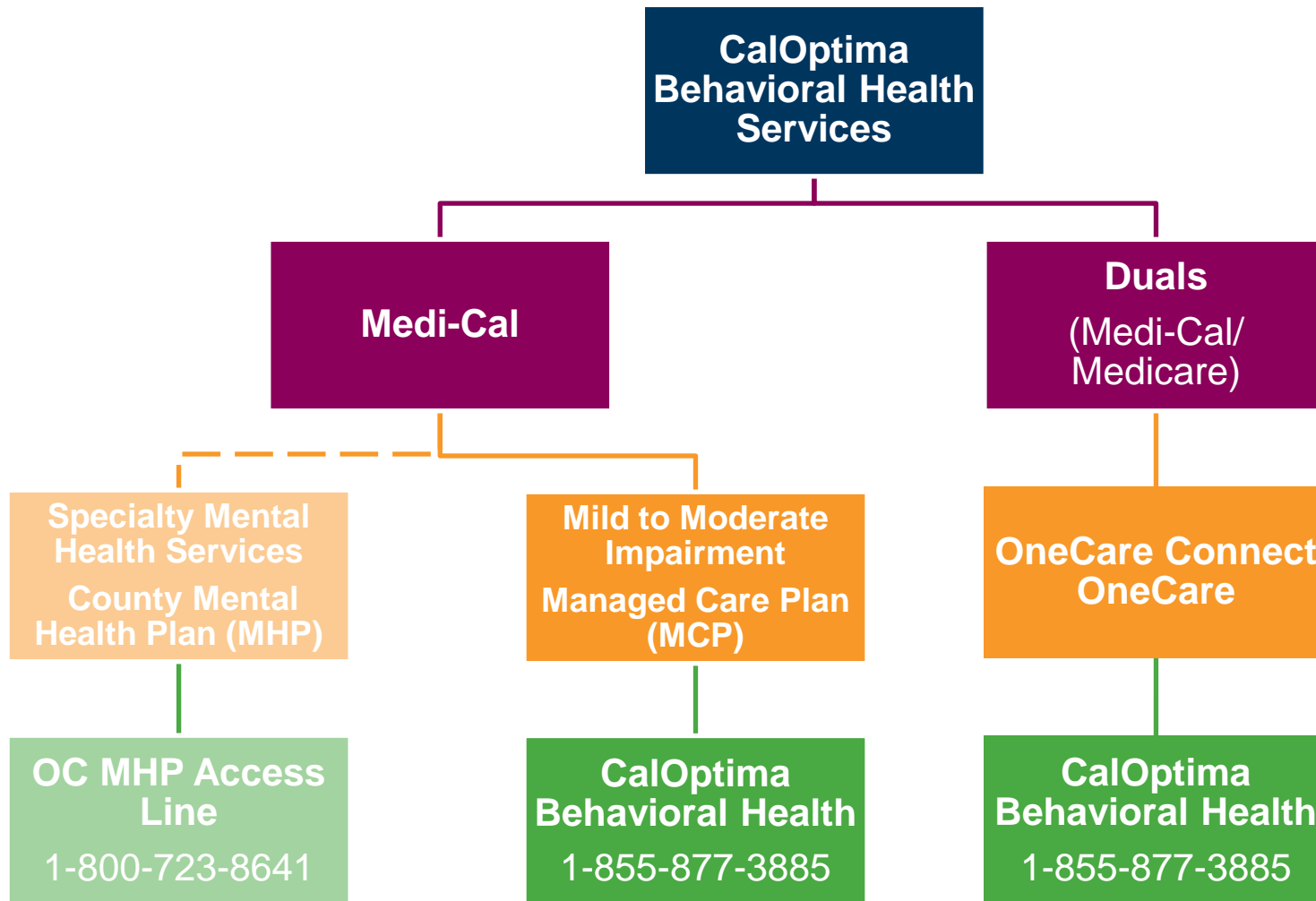
Behavioral Health Updates

Edwin Poon, Ph.D.

Director of Behavioral Health Services

December 6, 2016

CalOptima Behavioral Health (BH) Services (Effective 1/1/2017)



Managed Care Plan (MCP) Medi-Cal BH Benefits

- Outpatient mental health services, including psychotherapy, psychological testing, and medication management, for members with mild to moderate impairment as a result of a mental health condition
- Screening, Brief Intervention, and Referral to Treatment (SBIRT) in a primary care setting for individuals over 18 years of age
- Behavioral Health Treatment (BHT) for children under 21 years of age diagnosed with autism spectrum disorder (ASD)

Medi-Cal BH System of Care

Impairment Level	System of Care
Mild	Primary Care Providers
Mild to Moderate	CalOptima Behavioral Health Providers
Severe	County Mental Health Plan

OneCare and OneCare Connect (Cal MediConnect) BH Benefits

- Behavioral health services include inpatient and outpatient care, integrated with medical care and services:
 - Inpatient services (general acute, emergency services)
 - Partial hospitalization/intensive outpatient
 - Psychological testing
 - Psychiatric office visits
 - Individual and group outpatient psychotherapy
- Specialty mental health services are referred to the Orange County Health Care Agency

County Mental Health Plan and Drug Medi-Cal

Specialty Mental Health Services available through County *

- Mental health assessment and therapy
- Targeted case management
- Psychiatrist support services
- Crisis intervention
- Crisis stabilization
- Adult residential treatment services
- Crisis residential treatment services
- Psychiatric inpatient hospital services

Substance Use Disorder Services available through Drug Medi-Cal

- Intensive outpatient treatment services
- Residential treatment services
- Outpatient drug free services
- Narcotic treatment services

* For Medi-cal specialty mental health services, county maintains the authority to determine which services within the array shall be available and adequate to meet the needs of the community. This authority is specified in regulation (CCR Title 9, Section 1810.345) and within the federally approved state Medi-Cal 1915(b) waiver.

Managed Behavioral Health Organization

- Like many managed care plans, CalOptima uses Managed Behavioral Health Organizations (MBHOs) to provide expertise and specialization in the management of BH benefits

Program	MBHO (current)	MBHO (1/1/2017)
Medi-Cal	Beacon	Magellan
OC/OCC	Windstone	Magellan

MBHO Transition

- Ensure minimal disruption to member services.
- Follow DHCS and CMS continuity of care guidelines including APL14-021, APL15-025, and DPL16-001.
- Beneficiary notice will be mailed to those who might need to change providers at least 30 days prior to 1/1/17.
- No change in BH benefits

MBHO Transition (cont.)

- Single toll-free number for all CalOptima members (855-877-3885)
- Referral process will remain the same.
- Streamline steps for obtaining services
- Magellan will have a dedicated call center in Orange County to support CalOptima members and providers.

Primary Care Provider (PCP) Roles in Behavioral Health Services

- Routine screening for behavioral health
- Outpatient medication management for mental health condition
- Screening, Brief Intervention, and Referral to Treatment (SBIRT)
- Coordination of care (e.g. Interdisciplinary Care Team (ICT), exchange of information with mental health providers)

Behavioral Health Care Coordination

- Components for coordination of behavioral and physical health care include:
 - **Health Risk Assessment (HRA)**, includes behavioral health questions
 - **PCP assessment**, includes the Screening, Brief Intervention, and Referral to Treatment (SBIRT)
 - **Interdisciplinary Care Team (ICT)**, includes behavioral health providers
 - **Individualized Care Plan (ICP)**, includes the behavioral health provider in the development

Referral for BH Services (Effective 1/1/2017)

Call **CalOptima Behavioral Health** at:

855-877-3885

For screening and referral to mental health services.

This number is available 24 hours a day, 7 days a week.

TTY/TDD: **800-735-2929**

Behavioral Health Integration Department

Vision and Purpose

1. Integrate Behavioral Health (BH) at all levels of CalOptima operations
2. Provide oversight and accountability to Behavioral Health services provided to CalOptima members
3. Serve as subject matter experts for Behavioral Health (Mental Health and Substance Use Disorder) for all lines of business

Questions?

Please email behavioralhealth@caloptima.org

CalOptima's Mission

To provide members with access to quality health care services delivered in a cost-effective and compassionate manner



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Medi-Cal

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OneCare (HMO SNP)

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OneCare Connect

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PACE

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CCN Lunch and Learn Q & A

- Evaluation Form — Please complete and leave behind.
- In your packet, there is a form on which you can write any questions about anything that we have not addressed today.
- What questions do you still have?