



**Coordinated Care Initiative  
Santa Clara County Stakeholder Advisory Committee  
June 17, 2015 Meeting  
SCFHP Offices**

## **Agenda and Summary of Meeting**

### **1. Welcome and introductions**

Lori Andersen, Santa Clara Family Health Plan (SCFHP) and Tammie Pitkin, Anthem Blue Cross Cal MediConnect Plan, welcomed all stakeholder advisory members and guests to the meeting. The list of attendees is attached to the minutes.

### **2. Health plans' updates**

*SCFHP:* Lori Andersen shared Cal MediConnect plan updates for SCFHP.

- Current enrollment: 6,591, with an average of 420 enrolled in each of the last three months.
- Call center: Average of 800 calls per week with inquiry topics such as:
  - Checking primary care provider (PCP) and enrollment to Cal MediConnect
  - Basic benefits and Part D
  - ID card request
  - PCP selection
  - Provider network and member materials
- HRA completion for high risk: 30-50 percent and growing
  - Of the completed HRAs, 80 percent of those mailed out are returned completed
  - 13 percent completed by phone
- SCFHP continues to expand its provider network, including skilled nursing facility contracts, and is exploring in-home care, respite and housing services.

*Anthem Blue Cross:* Tammie Pitkin shared Anthem Blue Cross Cal MediConnect Plan updates.

- Current enrollment: 3,183
- Call center: Took 1,065 member calls in May. The topics were like those shared by SCFHP above.
- Health risk assessment (HRA) completion for high risk: 1,334 HRAs completed; 1,208 by phone, 112 face-to-face and 14 by mail. 1,006 were "unable to contact." Anthem is actively involved in locating these members to include pharmacy claims, provider offices and historical claims data to find the most current contact information.

### **3. Program implementation**

Plans are getting fewer calls about continuity of care issues. Some providers continue to tell members they cannot provide services under Cal MediConnect, though. Provider Services staff at both plans continues to provide ongoing education to their providers and work one-on-one with physicians along with follow-up when members notify them of these issues.



Challenges include:

- Contacting members to complete the health risk assessments (HRAs) within the required time frames. Plans are anxious to move more heavily into the care coordination after HRA completion.

Cal MediConnect Consumer Advisory Board (CAB) meetings held in April and May included presentations by In-Home Supportive Services (IHSS), Multipurpose Senior Service Program (MSSP) and Community-Based Adult Services (CBAS) programs. Members have shared their experiences with Cal MediConnect and raised other questions about benefits and community resources. The next meeting will be on July 29, 2015. Lori said we are always looking for new Cal MediConnect member participants and would like a representative from the IHSS Advisory Council.

#### 4. Regulatory review updates

Lori Andersen from SCFHP shared the following updates:

DHCS updates

- Dual Plan Letter 15-004 Requirements for Cal MediConnect Plans and Qualified Agency Contract – direction for Cal MediConnect plans, qualified agencies and counties regarding provision of In-Home Supportive Services (IHSS) via contracts between qualified agencies and plans (does not apply in Santa Clara County)
- Multipurpose Senior Service Program (MSSP) Transition Plan timeline and guidelines – transitioning MSSP from a waiver program to a managed care benefit; now extended through 12/31/17.
- Managed Long Term Services and Supports (MLTSS) Contract Amendment for Medi-Cal only and partial duals under Coordinated Care Initiative (CCI)

Other updates

- HRA DPL to be released mid-June
- 2016 marketing materials released (Friday 6/12)
- Full duals rate recasting/Reblending
- Continuity of Care All Plan Letter 14-021 revision

#### 5. CMC Ombudsman – Lori Andersen shared information forwarded in an email, which included:

- 1) *Deeming issue* – individually helping clients resolve the abrupt disruption in care and access to services. Consumers are being assessed a share of cost while an enrollee in a Cal MediConnect plan. They are being abruptly terminated from the plan (it seems to be an automatic event) and unless they meet the share of cost, lose their Cal MediConnect coverage, as well as Part D coverage, and are turned away at the pharmacy. Bay Area Legal Aid helps in straightening out the confusion/plan enrollments for consumers. The Ombuds advocated for a deeming period be put into place with the health plans. This means a consumer has a period of time to remain in the Cal MediConnect plan and fix the Medi-Cal eligibility issue before being terminated from the plan. From what we have seen, consumers are not being given notice of the share of cost and disenrollment from the Cal MediConnect plan. This is because it happens very



quickly, which brings up due process issues. If you see consumers with this issue, please refer them to Bay Area Legal Aid.

- 2) *Bills* – Clients who saw providers while unknowingly enrolled in Cal MediConnect are starting to get bills from their providers. Bay Area Legal Aid is resolving by contacting providers, educating them on Cal MediConnect, and requesting retroactive continuity of care from the health plans to cover the bills.
- 3) *General questions about Cal MediConnect notices, etc.*

Committee members discussed the policy change effective July 1, 2015, that gives plans the option of providing a one- to two-month period of “deemed continued eligibility” for Medi-Cal.

HICAP shared some of the issues they see with HICAP clients around the annual Medi-Cal recertification process. HICAP helps Medi-Cal enrollees with this process. The application is six pages long, and eligible people can no longer reinstate by phone. Many need help with the application. The County currently does do text and voice messaging to Medi-Cal members to let them know they need to apply for recertification.

At this time, SCFHP has decided not to implement the deeming process for Cal MediConnect members. SCFHP will continue referring Medi-Cal only and Cal MediConnect dual-eligible members to county Social Services for Medi-Cal eligibility issues. SCFHP is also checking other options for reaching out to Cal MediConnect members with eligibility issues. Anthem will be participating in the deeming policy change allowing for a one-month deeming eligibility period. Anthem plans to get the data from the state to make outbound calls to alert members about this process.

Shared that 80-85 percent of their skilled nursing facility (SNF) residents have Medi-Cal. The SNF reminds them of the deadline for recertification so it can be done. So, there is less of a risk for SNF residents. Ninety-eight percent of those who miss the deadline are eventually reinstated.

Service coordinators from senior housing communities can also help remind residents about this process and the timing.

### **FOLLOW-UP ITEMS**

1. Share with Committee what the plans are doing to follow up with members on Medi-Cal recertification.
2. What percent of the plan’s members are in senior/congregate housing and/or skilled nursing facilities?
3. Ask Coordinated Care Initiative (CCI) Communications Committee to consider taking this on as a topic for presentations in the community.
4. Will share lists of senior housing and/or service coordinators with the group.

**Communications Committee:** Shared a PowerPoint presentation on the current activities of the committee. Given time limits, she agreed to include a copy of this with these minutes. Tammie Pitkin and the Committee were involved in creating a public service announcement in Vietnamese about Cal MediConnect. It will be aired on Vietnamese radio stations two to three times per day going forward.



Talked about the value of sharing Cal MediConnect with consumers to support enrollment now and later in December when passive enrollment ends. The value of care coordination needs to be shown NOT by using the term itself, but by sharing stories that describe well how this service has helped members. Marta reported the HICAP volunteers counsel on this often.

**FOLLOW UP ITEM:**

- Revisit this at next meeting – build a strategy for engaging HICAP and others to do outreach for newly eligible Medicare members around Cal MediConnect.

- 6. In-Home Supportive Services (IHSS) Update:** –IHSS is building the Coordinated Care Initiative (CCI) Coordination Unit at IHSS to support coordination of IHSS for CCI recipients, Medi-Cal members and Cal MediConnect. He was hired as the Unit Manager. Six other positions hired include one supervisor, four social workers and one clerical position. The current staff will meet with SCFHP on July 10, 2015, to discuss how they can work together with expediting applications and interdisciplinary care teams. Shared that state funding to upgrade the case management data system for IHSS (CMIPPs) was not approved.
- 7. Health Insurance Counseling Advocacy Program (HICAP)** –HICAP continues to respond to calls about CCI, Medi-Cal redetermination, changing providers, provider network issues (above all with community clinics) and providers billing members.
- 8. Multipurpose Senior Services Program (MSSP)** No MSSP representative was present.
- 9. Behavioral Health (BH) Report:** Shared what's being done around Coordinated Care Initiative (CCI) and BH. Training on how to access drug formularies and specialty clinics has been done for manager staff and contracting agencies. They are doing care coordination at different levels with CCI recipients as well as involvement in interdisciplinary care teams (ICTs). They are becoming better at identifying Cal MediConnect members at the clinics and the County Mental Health system. Coordination and involvement by Drug and Alcohol Services (DADS) is also occurring but in smaller numbers.
- 10. Stakeholder Input – Roundtable - Questions, Comments, New Initiatives**  
The agenda item requested for next meeting is to discuss and possibly draft specific set of objectives for the Committee wasn't covered due to lack of time.

**FOLLOW UP ITEM:**

Tammie and Lori will meet to draft some objectives and outcomes for the Committee to discuss at the next meeting.

**Next Meeting: September 16, 2015, 12:15 to 2 p.m. (NOTE: Meeting time has been extended.)**

We will meet at the Anthem office. A reminder notice will go out a few weeks ahead of the meeting.