



CalPERS Board Education Day

January 18, 2022

DHCS Initiatives

- » CalAIM
- » Medi-Cal Managed Care Commercial Plan Procurement
- » New Medi-Cal Benefits and Expansions
- » Comprehensive Quality Strategy and Equity Roadmap

CalAIM

Our Journey to a Healthier California for All

Goals of CalAIM

- » Identify and manage comprehensive needs through whole person care approaches and social drivers of health
- » Improve quality outcomes, reduce health disparities, and transform the delivery system
- » Make Medi-Cal more consistent and seamless for enrollees to navigate by reducing complexity and increasing flexibility

Supporting Californians' Ability to Stay Healthy in All Areas of Life

- » Moving Medi-Cal towards a population health approach that prioritizes prevention and whole person care
- » Extend supports and services beyond hospitals and health care settings directly into California communities
- » Meet people where they are in life, address social drivers of health, and break down the walls of health care

A Better Medi-Cal for Californians

- » CalAIM aligns Medi-Cal into a system that is standardized, simplified, and focused on helping enrollees live healthier lives
- » Success requires a broad network of health partners with incentives to achieve high quality of service
- » When fully implemented, Medi-Cal will better serve enrollees as a seamless and streamlined health care system.

CalAIM is a long-term commitment to transform and strengthen Medi-Cal, making the program more equitable, coordinated, and person-centered to help people maximize their health and life trajectory.

CalAIM Goals



Implement a whole-person care approach and address social drivers of health.



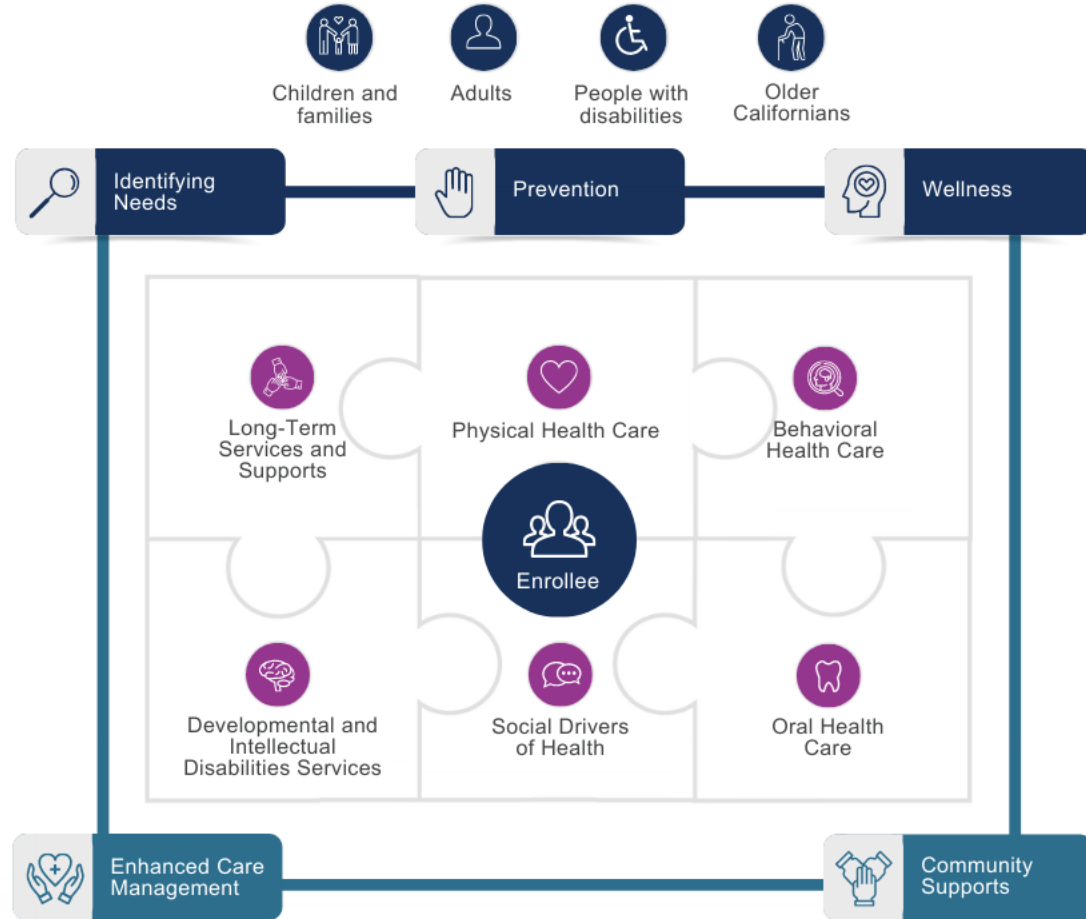
Improve quality outcomes, reduce health disparities, and drive delivery system transformation.



Create a consistent, efficient, and seamless Medi-Cal system.

For more information on all CalAIM initiatives, visit

www.dhcs.ca.gov/CalAIM



Foster youth



Medically complex



People who are justice involved



People with serious mental illness/ substance use disorder



People experiencing homelessness or housing instability



People at risk of institutionalization

Population Health Management

- » Managed care plans will implement a whole-system, person-centered strategy focused on wellness and prevention
- » Assessments of each enrollee's health risks and health-related social needs
- » Care management and care transitions across delivery systems and settings

Enhanced Care Management

- » Person-centered care management for the highest-need Medi-Cal enrollees
- » In-person engagement where enrollees live, seek care, and choose to access services

Community Supports

- » Help meet enrollees' needs for health and health-related services
- » When unmet, these needs can be social drivers of health
- » Examples include housing supports and medically tailored meals

Dental Benefits

- » CalAIM will expand key dental benefits statewide, including a tool to identify risk factors of dental decay
- » Also, silver diamine fluoride for children and some high-risk populations
- » Pay-for-performance initiatives will reward dental providers for focusing on preventive services and continuity of care

Behavioral Health

- » Strengthen the behavioral health continuum of care and promote better integration with physical health care
- » Improve access to behavioral health services and simplify how these services are funded
- » Also, support the administrative integration of treatment for mental illness and substance use disorders

Other CalAIM Initiatives

- » Services and Supports for Justice-Involved Adults and Youth
- » Statewide Dual Eligible Special Needs Plans and Managed Long-Term Services and Supports
- » Standard Enrollment with Consistent Managed Care Benefits
- » Delivery System Transformation

California's commitment to building a healthier and more equitable state

- » Black and Latino Californians have long faced health disparities due to structural racism, and worsened by the pandemic
- » This underscores the need for investment in Community Supports, and home and community-based services
- » Lessons learned are at the heart of the CalAIM transformation

Culturally competent services for people in transition

- » CalAIM will support crucial transitions, including the path from homelessness to housing; from incarceration to community re-entry; and from institutional to home-based care
- » Extend Medi-Cal services to people who are incarcerated before their release, disproportionately people of color

Medi-Cal Managed Care Commercial Plan Procurement

Medi-Cal Managed Care Commercial Plan Procurement

- » On February 2, 2022, DHCS will release the Medi-Cal managed care plan Request for Proposal.
- » Key priorities for procurement:
 - » High quality care
 - » Reducing disparities and addressing social drivers of health
 - » Increased oversight of delegated entities
 - » Coordinated/integrated care
 - » Access to care
 - » Value-based payments
- » New managed care contracts go into effect January 1, 2024.

Quality & Health Equity Strategy



Defining the Vision:

QUALITY STRATEGY GOALS

Engaging members as owners of their own care

Keeping families and communities healthy via prevention

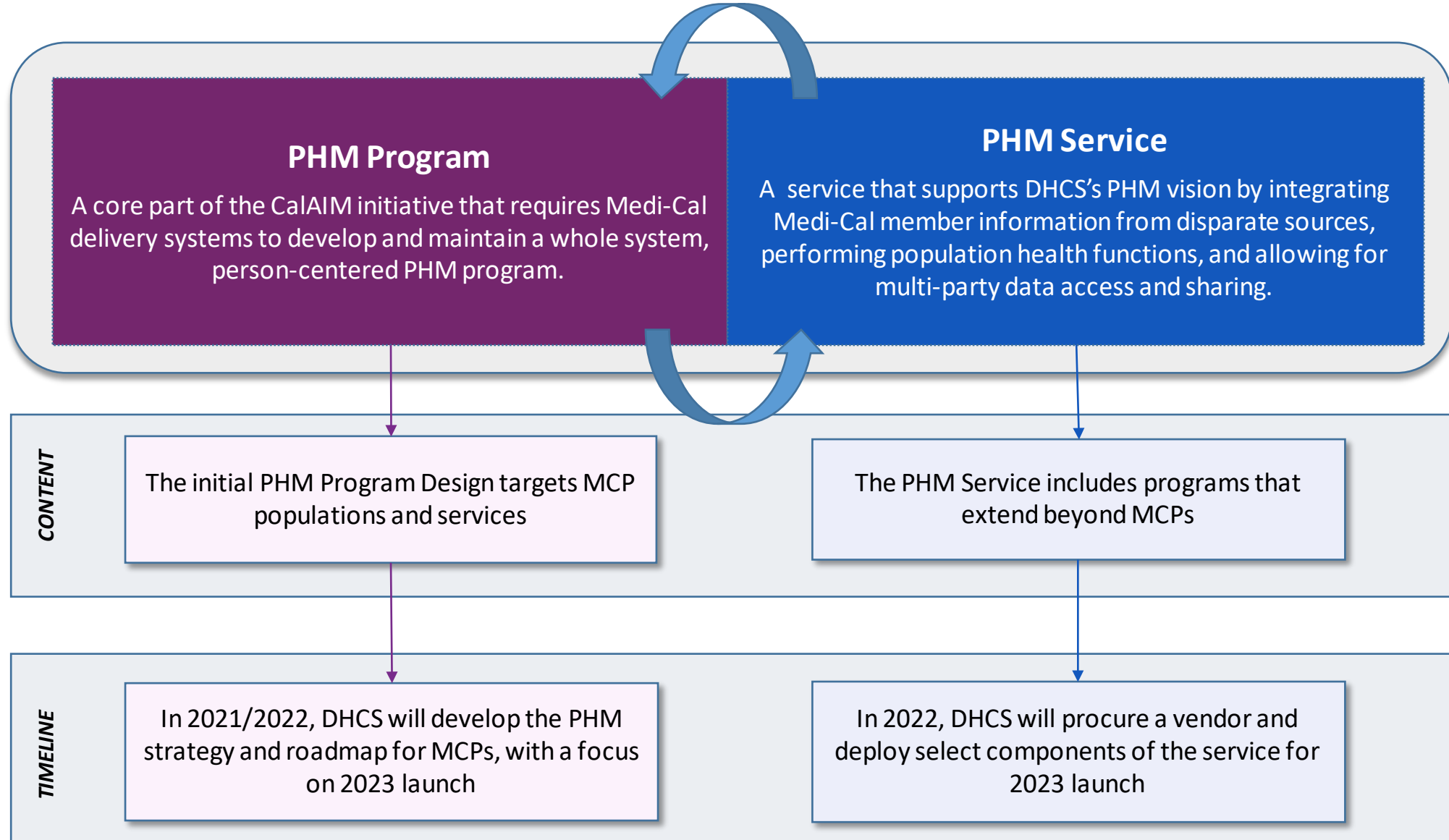
Providing early interventions for rising risk and patient-centered chronic disease management

Providing whole person care for high-risk populations, addressing social drivers of health

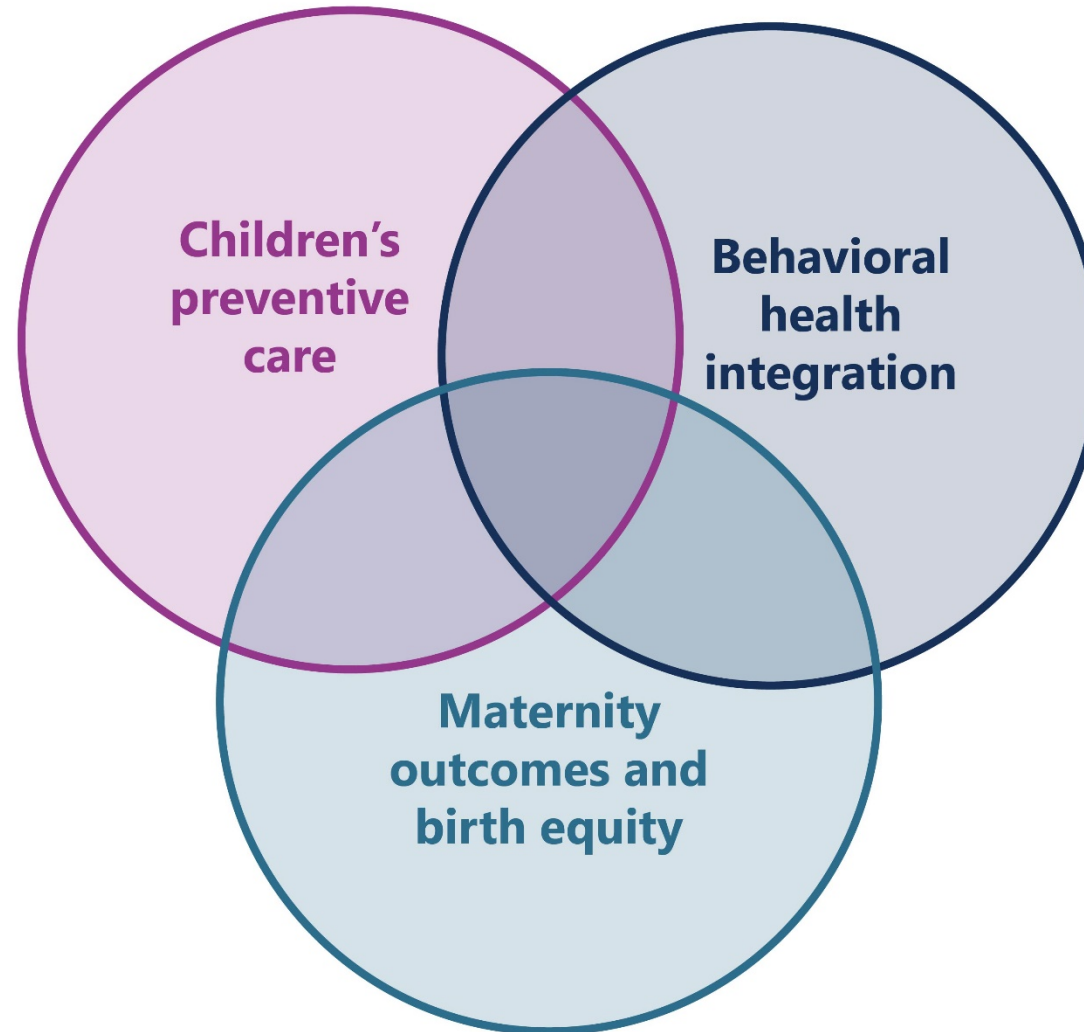
QUALITY STRATEGY GUIDING PRINCIPLES

- » Eliminating health disparities through anti-racism and community-based partnerships
- » Data-driven improvements that address the whole person
- » Transparency, accountability and member involvement

New framework that takes a population health approach



The long view of health and wellness in California



Thinking big:

BOLD GOALS: 50x2025

STATE LEVEL



Close racial/ethnic disparities in well-child visits and immunizations by 50%



Close maternity care disparity for Black and Native American persons by 50%



Improve maternal and adolescent depression screening by 50%



Improve follow up after emergency department visit for mental health or substance use disorder by 50%



Ensure all health plans exceed the 50th percentile for all children's preventive care measures



QUALITY/HEALTH EQUITY IMPROVEMENT FRAMEWORK



Driving Change

- » Focused initiatives to drive transformation/innovation
- » Innovative metrics, process measures, bundles
- » Incentives if met (financial or otherwise)
- » Example uses: CaAIM incentive programs, COVID19 vaccine incentive program, QIP optional metrics



Foundation:

- » Creates a standard across programs/plans
- » Fundamental outcome/access measures
- » Minimum performance levels & improvement targets
- » Penalties if not met
- » Example uses: QIP required metrics, MCAS, auto-assignment algorithm

Co-Designing for Health Equity:

- **Skeleton Roadmap:** Inventory of current and planned DHCS efforts
- **Full Roadmap:** Formal co-design working group with stakeholders
 - Capacity-building, technical expertise and outside consultation required for Health Equity work



Proposed Equity Metrics for 2022

- » Colorectal cancer*
- » Controlling high blood pressure*
- » HgbA1c for persons with DM*
- » Prenatal and postpartum care*
- » Child and adolescent WCV*
- » Childhood immunizations
- » Adolescent immunizations
- » Follow up after ED visit for mental illness & SUD (include adolescent measure if available)
- » Perinatal and postpartum depression screening

*Metrics recommended by NCQA for stratification by race/ethnicity

Improved Transparency, Accountability and Member Involvement

- » Creating an organizational structure that supports accountability
- » Standardizing and streamlining elements of monitoring and compliance across programs
- » Creating a pro-active assessment structure for managed care performance, including public data
- » Enhanced county oversight (in BH, Medi-Cal eligibility and enrollment, CCS program)
- » Member engagement at all steps, including with Quality Strategy review process

Questions?

