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CalOptima's Whole-Child Model implementation is delayed until no sooner than July 1, 2019.

Whole-Child Model (WCM) Stakeholder Meeting

July 25, 2018

Agenda

- Welcome and Overview
 - Michael Schrader, Chief Executive Officer
- Member Experience and Provider Impact
 - Richard Helmer, M.D., Chief Medical Officer
- WCM Preparation
 - Ladan Khamseh, Chief Operating Officer
- Next Steps and Q&A
 - Candice Gomez, Executive Director, Program Implementation

WCM Overview

CalOptima's Whole-Child Model implementation is delayed until no sooner than July 1, 2019.

- California Children's Services (CCS) is a statewide program providing medical care and case management for children under 21 with certain medical conditions
 - Locally administered by Orange County Health Care Agency
- The Department of Health Care Services (DHCS) is implementing WCM to integrate the CCS services into select Medi-Cal plans
 - CalOptima will implement WCM effective January 1, 2019

Orange County Partners

Orange County
Health Care Agency
CCS Program

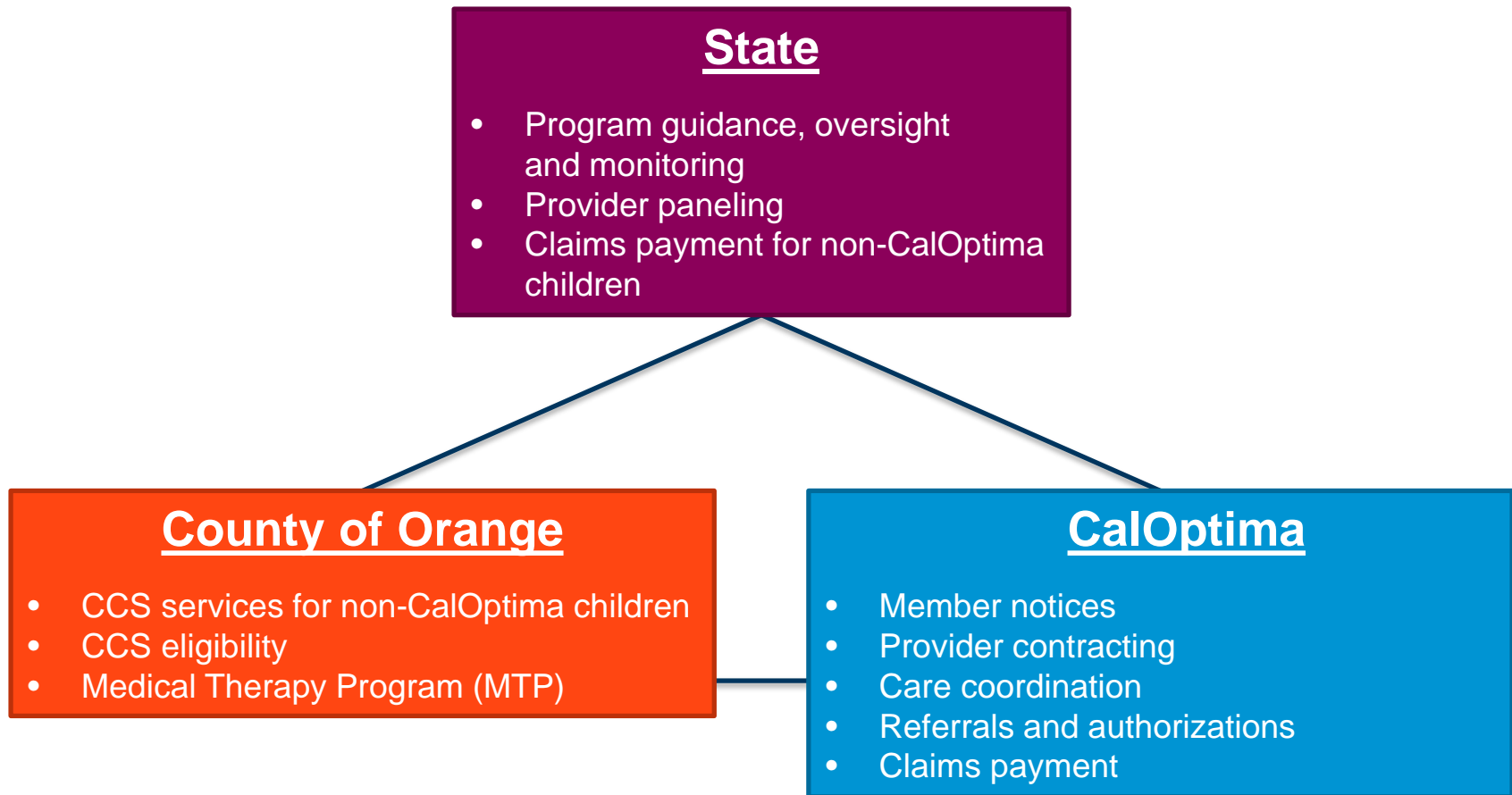
CalOptima
Medi-Cal



Providers,
Health Networks and
Community Partners

Hospitals

Division of WCM Responsibilities



June Board Actions

- DHCS contract approval
- Implementation plan
- Memorandum of Understanding with Orange County Health Care Agency
- Family Advisory Committee



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Member Experience and Provider Impact

Richard Helmer, M.D.
Chief Medical Officer

Member-Focused Approach



Model of Care

- Model of Care is CalOptima's structured, time-tested approach to deliver coordinated, individualized care
 - Family and various members of the health care team collaborate on this "road map" to optimal health for each CCS child
- Personal Care Coordinators (CalOptima and health network) have a central role in the model of care
- Coordination with County is integral
 - Medical eligibility determination
 - Medical Therapy Program
 - Medical Therapy Units
 - Medical Therapy Conferences

Member: What's Familiar and What's New

Familiar

CCS eligibility criteria and process

CCS-paneled providers

Primary care provider assignment

Care management and authorization

Access to specialists, medical equipment and medications

Medical Therapy Program and Medical Therapy Units

New

CCS services and Medi-Cal services managed by one entity – CalOptima

Comprehensive needs assessment

Care coordination using the Model of Care

Provider Impact

- Incorporating CCS benefits and guidelines
- Leveraging existing CalOptima processes
 - Delivery Model
 - Model of Care
- Enhancing processes where necessary to meet needs of the higher-acuity population
- Decreasing duplication and increasing coordination

Provider: What's Familiar and What's New

Familiar

CCS eligibility criteria and process

Delivery model (CalOptima and health network structure and processes)

Care coordination with the County for non-Medi-Cal members

New

Model of Care for children with CCS conditions

Single entity for care management, authorizations and claims

Coordination of intercounty transfers



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WCM Preparation

Ladan Khamseh
Chief Operating Officer

WCM Preparation: Engagement

- Engage CalOptima Board, Advisory Committees and employees
- Organize robust stakeholder outreach and engagement
 - Family meeting series
 - Provider meetings, including Orange County Medical Association
 - General stakeholder meetings
 - Community-based organization focus groups
- Hold regular meetings with County
- Engage health networks
 - Health Network Forums
 - Recurring meetings for operational and clinical readiness
 - Ad hoc meetings

WCM Preparation: Operations

- Develop the network
 - CCS providers
 - Access requirements
- Prepare for member communications
 - 90-day notice from the state
 - 60- and 30-day notices from CalOptima
 - Call campaign
- Implement system interfaces
- Update and create internal processes and workflows

WCM Preparation: Financial Model

- Use the current Medi-Cal reimbursement model
 - Combination of delegated and fee-for-service (FFS) health networks
- For delegated health networks:
 - Keep health network risk and payment structure similar to current methodologies
 - Develop capitation rates
 - Implement mechanisms to mitigate risk
- For CalOptima Direct and CalOptima Community Network:
 - Follow current FFS methodology and policy
 - Maintain payment at current contracted rates
 - CCS-paneled physicians are reimbursed at 140% of Medi-Cal

WCM Preparation: Advisory

- Whole-Child Model Family Advisory Committee (WCM FAC)
 - Structure includes 11 volunteer seats
 - Seven to nine family member representatives
 - Two to four community representatives
 - First meeting will be August 9
- Clinical Advisory Committee
 - CalOptima Chief Medical Officer
 - County CCS Medical Director
 - At least four CCS-paneled providers
 - Launch in the fall



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Next Steps and Q&A

Candice Gomez

Executive Director, Program Implementation

Next Steps

- Continued stakeholder and family engagement
 - Fall meetings to coincide with notices
 - Resource fairs for families

Q&A



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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