



# MEDI-CAL MANAGED CARE OVERVIEW

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# Eligibility & Enrollment

- ▶ Apply for Medi-Cal year round:
  - County Department of Human Assistance (DHA) – Online, phone, mail, or in person.
  - Covered California – Online, phone, or mail.
- ▶ Eligibility based on income and family size.
- ▶ Income and other information verified electronically when possible.
- ▶ Once enrolled, need to renew annually.
- ▶ Assistance is available through certified enrollment counselors at community based agencies.

# Eligibility & Enrollment

- ▶ **Notice of Action (NOA)** – County Eligibility or Covered California sends a letter called a “Notice of Action (NOA).”
- ▶ **Plan Choice Information & Form** – Health Care Options (HCO) assists with plan choice. Plan must be selected within 30 days to avoid a “default” plan assignment.
- ▶ **ID Card and Health Plan Materials** – Health Plan provides an ID card, Primary Care Medical Home, & health plan information.

# Medi-Cal Managed Care Health Plans

- ▶ Contracted by the State Department of Health Care Services (DHCS)
- ▶ Geographic Managed Care (GMC) Model
  - Aetna Better Health
  - Anthem Blue Cross
  - Health Net
  - Kaiser Permanente
  - Molina Healthcare

# Provider Networks Differ

- ▶ Kaiser – Closed Network
- ▶ Non-Kaiser Plans – Physician services are primarily contracted through Independent Provider Associations (IPA)
- ▶ Hospital Contracts – Differ per Plan
- ▶ Pharmacy Benefits Managers – Differ per Plan
- ▶ *Review each health plan's network under the "Managed Care Resources" section on the [www.SacGMC.net](http://www.SacGMC.net) webpage.*

# Independent Provider Association (IPA)

- ▶ **Definition** – Network of physicians (solo practitioners and groups of physicians) who agree to participate in an association to contract with managed care plans, and also vendors.
- ▶ **Roles** – Delegated network management and care coordination.
- ▶ **Plan Networks** – Not all plans contract with the same IPAs.

# IPAs with GMC Enrollment

- ▶ River City Medical Group
- ▶ Hill Physicians Medical Group
- ▶ Imperial Health Holdings Medical Group
- ▶ Nivano Physicians

# Administrative Services

- ▶ Provider Network
- ▶ Case Management, Care Coordination
- ▶ Utilization Review
- ▶ Claims
- ▶ Quality Improvement System
- ▶ Reporting
- ▶ Coordination with local Health and Mental Health Departments



# Member Services

- ▶ Informing materials
- ▶ Member Service Line
- ▶ Interpretation, accessible formats
- ▶ Beneficiary protections such as grievance and fair hearing
- ▶ Cultural & Linguistic Services
- ▶ Transportation when needed

# Access & Availability Standards

- ▶ Urgent care – 48 hours
- ▶ Primary care – 10 business days
- ▶ Mental Health Non–Psychiatry Outpatient – 10 business days
- ▶ Specialty care – 15 business days

## Each Plan has:

- ▶ Member Service Lines
- ▶ 24 Hour RN Advice Lines
- ▶ Urgent Care Centers

# Core Services

- ▶ Outpatient (Ambulatory) services
- ▶ Emergency services
- ▶ Hospitalization
- ▶ Maternity, Newborn Care
- ▶ Mental Health and Substance Use Disorder services
- ▶ Prescription drugs
- ▶ Rehabilitative, Habilitative services and devices
- ▶ Laboratory services
- ▶ Preventive, Wellness & Chronic Disease Mgmt.
- ▶ Pediatric services

# What are “Carve Outs?”

- ▶ “Carve outs” are services not offered within the scope of the health plan.
- ▶ What are they in Sacramento?
  - Mental Health Specialty
  - Drug Medi-Cal
  - Dental
  - California Children's Services

# Mental Health Split Benefit

Services to enrollees are provided in two systems of care.

- ▶ Health Plans
- ▶ County Mental Health Plan (MHP)

Each system has an organized delivery system – member services, networks, etc.

# Health Plan > MH Benefits

*Serves individuals with “low to moderate” mental health needs –*

## Services:

- ▶ Individual and Group evaluation & treatment
- ▶ Psychological testing – when clinically indicated
- ▶ Outpatient services for monitoring drug therapy
- ▶ Outpatient laboratory, medications, supplies and supplements
- ▶ Psychiatric consultation

# County Mental Health Plan > MH Benefits

*Serves individuals with “serious” mental health needs –*

## Services:

- ▶ Mental health services – assessment, plan development, therapy, rehabilitation
- ▶ Medication support services
- ▶ Day treatment intensive, day rehabilitation
- ▶ Crisis intervention, crisis stabilization
- ▶ Crisis residential
- ▶ Case management
- ▶ Psychiatric hospitalization

# County Mental Health Plan > MH Benefits

*How is County MHP different?*

- ▶ Separate system
- ▶ Serves individuals with “serious” mental health needs
- ▶ Provides mental health “specialty” services
- ▶ MHP Specialty has established points of access
- ▶ Authorization is based on medical necessity (defined target population, functional impairment)



# Substance Use Disorder (SUD) Benefits

Through County Alcohol & Drug Services

*Serves individuals with substance use disorders*

- ▶ Drug Medi-Cal operates as a “carve out” from managed care plans
- ▶ Services – Outpatient Treatment, Intensive Outpatient Treatment, Residential Treatment, Withdrawal Management, Narcotic Treatment Services, Recovery Support Services, Case Management, Physician Consultation, Additional Medication Assisted Treatment

# Substance Use Disorder Benefits

## Exception:

- ▶ Screening, brief intervention & referral are provided by the Plan primary care providers.
- ▶ Acute Medical Detoxification is covered by the Plan.

# Dental Managed Care

- ▶ Sacramento County has mandatory enrollment
- ▶ Plan Selection is through Health Care Options
- ▶ Dental Managed Care Plans include:
  - Access Dental Plan
  - Health Net
  - Liberty Dental
- ▶ *For more information on dental services, visit the DHCS Dental Managed Care webpage.*

# What is a Primary Care Medical Home?

- ▶ Core provider essential to patient care
- ▶ May be a physician provider or a clinic
- ▶ Primary and preventative health care
- ▶ Chronic disease management
- ▶ Care coordination – specialty referrals, post-hospitalization follow-up, across other organized systems of care such as Specialty Mental Health (County MH Plan)

# Care Coordination

Medi-Cal Managed Care Plans ensure the provision of care coordination to their members.

- ▶ Basic Case Management – Includes coordination of carved-out services & referrals to other resources. Provided by the Primary Care Provider.
- ▶ Complex Case Management – Services for members with complex needs.
- ▶ Health Homes Program – Intensive coordination and care management services for members with chronic conditions and high health needs.

# Eligibility & Enrollment Resources

- ▶ **Covered California** / [www.coveredca.com](http://www.coveredca.com)  
Phone: 800-300-1506
- ▶ **County DHA Eligibility** / [www.dha.saccounty.net](http://www.dha.saccounty.net)  
Apply online: [www.mybenefitscalwin.org](http://www.mybenefitscalwin.org)  
Phone: 916-874-3100
- ▶ **Health Care Options (Health Plans/Dental Plans)**  
[www.healthcareoptions.dhcs.ca.gov](http://www.healthcareoptions.dhcs.ca.gov)  
Phone: 800-430-4263 / TTY: 800-430-7077  
Other Languages: 800-430-4263

# Managed Care Resources

- ▶ Medi-Cal Managed Care Advisory Committee – *See “Managed Care Resources” page in the link for helpful documents* [www.SacGMC.net](http://www.SacGMC.net)
- ▶ State Department of Health Care Services (DHCS) – *See Medi-Cal Managed Care* [www.dhcs.ca.gov](http://www.dhcs.ca.gov)