

MEDI-CAL MANAGED CARE OVERVIEW

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Eligibility & Enrollment

- Open year round
- Based on income and family size
- Simplified procedures
- Income and other eligibility information verified electronically when possible
- Once enrolled, need to renew annually

Exception – income and asset rules apply to some programs.

Eligibility & Enrollment

Eligibility Channels:

Online, in person, by phone, mail in

Where to apply:

- County Department of Human Assistance (DHA) online, in person, phone, mail
- Covered California online, phone, mail

Enrollment 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) is an Enrollment Broker. They assist with plan choice. Plan must be selected within 30 days to avoid default plan assignment.
- ID Card and Health Plan Materials Health Plan provides the beneficiary 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
 - Anthem Blue Cross
 - Health Net
 - Molina Healthcare
 - Kaiser Permanente
 - New Plans UnitedHealthcare & Aetna effective July 2017 (target date for go live)

Plan Networks Differ

- Kaiser Closed Network
- Anthem & Health Net Primarily contract through Independent Provider Associations (IPA)
- Molina Molina Medical Groups, IPAs, & direct provider contracts
- Hospital Contracts Differ per Plan

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.
- <u>Details</u> See Power Point Presentation materials (Medi-Cal Managed Care Advisory Committee Meetings June & July 2012).

IPAs with GMC Enrollment

- Employee Health Systems Medical Group (EHS)
- River City Medical Group
- Hill Physician Medical Group
- Northern California Physicians Medical Group

Plan Member Services

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

Access Standards

- Urgent care 48 hours
- Primary care 10 business days
- Specialty referral 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
- Preventative, Wellness & Chronic Disease Mgt.
- 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 Benefits

Through Health Plans -

Serves individuals with low to moderate mental health needs

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

Mental Health Benefits

Through County Mental Health Plan (MHP) -

Serves individuals with serious mental health needs

- Mental Health (MH) Specialty services
- MHP Specialty has established points of access
- Authorization is based on medical necessity (defined target population, functional impairment)

Substance Use Disorder Benefits

- Screening, brief intervention & referral provided by primary care providers.
- Drug Medi-Cal operates as a "carve out" from managed care plans.
- Service providers certified by the state and counties.
- <u>Services that will be available to Medi-Cal</u> <u>beneficiaries</u>: Outpatient Drug-Free Services, Narcotic Treatment Services, Intensive Outpatient Treatment, Residential Substance Use Disorder Services, Voluntary Inpatient Detoxification

Dental Managed Care

- Plan Selection through Health Care Options
- Dental Managed Care Plans include:
 - Access Dental Health
 - Health Net
 - Liberty Dental
- For more information on dental services, visit the DHCS Dental Managed Care webpage

Administrative Plan Functions

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

What is a Primary Care Medical Home?

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

Changes since 2011

- Seniors and Persons with Disabilities (SPD)
- Community Based Adult Services (CBAS)
- Healthy Families
- Low Income Health Program (LIHP)
- Rural Expansion
- Expanded Medi-Cal
- Expanded Mental Health Benefits
- Behavioral Health Treatment (BHT)
- Drug Medi-Cal Organized Delivery System
- Coverage for All Children (SB75) May 2016

Eligibility & Enrollment Resources

Covered California

www.coveredca.com

Phone: 800-300-1506

County DHA Eligibility

www.dha.saccounty.net

Apply online: www.mybenefitscalwin.org

Phone: 916-874-3100

Health Care Options (Health Plans and Dental Plans)

www.healthcareoptions.dhcs.ca.gov

Phone: 800-430-4263 / TTY: 800-430-7077

Other Languages: 800-430-4263

Key links

Sacramento County
Medi-Cal Managed Care Advisory Committee
http://www.dhhs.saccounty.net/PRI/Pages/PRI-Home.aspx

State Department of Health Care Services http://www.dhcs.ca.gov/Pages/default.aspx