



**L.A. COUNTY COORDINATED CARE INITIATIVE (CCI)
Stakeholder Workgroup
(DRAFT) Meeting Minutes**

Thursday, April 24, 2014; 1-3 p.m.
Cathedral of Our Lady of the Angels
555 West Temple Street, Los Angeles, CA 90012
Conference Rooms 6, 7 & 8
Facilitator: Paul Lopez

Call-In: 1-888-584-2113 Code: 229-738-8378

TIME	TOPIC	PRESENTER
	<p><u>Welcome/Introductions</u> Meeting was called to order at 1:10 p.m. by Paul Lopez and introductions were made by stakeholders and health plan representatives in the room. Due to technical issues with the phone line, call-in attendees were not able to participate.</p> <p><u>CareMore Cal MediConnect Plan</u> Paul Lopez reviewed CareMore’s contractual relationship as a Cal MediConnect Medicare-Medical Plan and model of care.</p>	<p>Paul Lopez <i>General Manager, Duals Program, CareMore</i></p>
<p>1:20 p.m.</p>	<p>Approve March 26, 2014 Meeting Minutes Joyce Furlough asked for approval of March meeting minutes. Workgroup approved minutes.</p>	<p>Joyce Furlough <i>Vice President, Duals Programs, CareMore</i></p>
<p>1:25 p.m.</p>	<p><u>Los Angeles County Enrollment Strategy</u> Jane Ogle provided an update on the Los Angeles enrollment strategy. She reviewed a new Cal MediConnect Dashboard available on calduals.org. The monthly dashboard will include the following:</p> <ul style="list-style-type: none"> • Membership by month/county/plan • Mailing schedule for consumer notices • Opt out rates by County. • Health Care Options (HOC) Call Center Responsiveness/Call volume <p>Key Enrollment Dates:</p> <ul style="list-style-type: none"> • 4/14 – LTSS Benefits for those in Medi-Cal Managed Care Plan • 7/14 – Passive Enrollment Phase begins • 8/14 – Medi-Cal FFS 	<p>Jane Ogle <i>Former Deputy Director, Health Care Delivery Systems, DHCS</i></p>



- 1/15 – Medicare Advantage eligible and other plan roll over

The LA enrollment strategy, notices, choice brochure and choice form are posted on calduals.org

Consumer Rights & Protections

Jane Ogle re-affirmed IHSS consumer right to hire fire and supervise their care team. Plans are responsible for providing information in accessible formats – Braille, audio or large print. The State is setting up systems to retain requests for information in alternative formats.

CMS and the State will keep their own individual processes for Medicare and Medi-Cal Appeals process in place. Part D has a separate appeals process. A single integration process for Medicare and Medi-Cal appeals is challenging and complex to implement at this time.

Expedited Appeals are automatic when coming from a physician. There is an integrated Denial Notice.

Cal MediConnect Ombudsman Program

The Ombudsman program launched April 1st. Operated outside of DCHS with offices located throughout LA county.

Compliant Tracking Modular:

- Required per the 3-way contract
- Used to monitor and track complaints related to the CCI.
- Identify trends: What is working and not working.

Continuity of Care (COC)

An important protection for consumers is COC. To support the transition into Cal MediConnect, consumers can request to continue services with existing physicians. COC eligibility rules apply. Out-of-network physicians must receive authorization from the plan. COC applies to physician services but does not apply to ancillary service vendors such as DMS.

- Medicare: 6 month COC
- Medi-Cal: 12 month COC



Jane Ogle led a robust question & answer discussion:

Stakeholder Question: How will someone know what DME providers are contracted with the plans?

Response: Consumers should contact the plans directly to determine if the DME vendor is in their network.

Stakeholder Question: Will plans cover expensive DME equipment such as a \$6,000 wheelchair if a person can disenroll at any time.

Response: Plans currently serve duals members that can disenroll at any time. The goal of the plans is to retain their members through outstanding service to avoid rapid disenrollments. Plans will be motivated to build relationships with their members and exceed expectations.

Stakeholder Question: There remain concerns with the choice form. Opt out language not highlighted. Plans not identified as HMOs. PACE not included. Can changes still be made?

Response: In Los Angeles county, the existing form will be used while additional consumer feedback on the form is obtained and tested.

Response: PACE program is included on the form based on zip code as PACE is not available in all areas and includes qualification criteria.

Response: Health Care Options is an enrollment broker and not a sales counselor. Their role is not intended to make decisions for consumers but to provide unbiased information on CCI and support the consumer with enrollment/opt-out processing.

Stakeholder Question: What if Choice materials are needed in an alternative format (braille)?

Response: Consumers can contact Health Care Options.

Stakeholder Question: Why does the Choice form request written responses in capital letters?

Response: The form is scanned so ideally capital letters are easier to read. The form will still be processed if capital letters are not used.



	<p>Stakeholder Question: Based on data from other counties or nationally, why are people opting out of MMPs? Response: So far the opt out rates have been low, 29% in San Mateo county. Consumers continue to have choices and opting out is one of the available choices.</p> <p>Stakeholder Question: What percent of nursing home residents have signed up for CMC? Response: The assumption is voluntary enrollment of nursing home residents into CMC is low. This information can be provided at the next meeting.</p> <p>Stakeholder Question: For a person who wishes to disenroll from Cal MediConnect, can they still enroll in a D-SNP? D-SNPs are scheduled to sunset on December 31, 2014. Response: The state has not determined extension of D-SNPs. This policy is currently in review.</p> <p>Stakeholder Question: Concerns remain about the narrow networks of the Cal MediConnect plans? Response: All Cal MediConnect plans had to meet accessibility standards to pass readiness requirements. Plans will continue to review the network and add providers as needed to support growth.</p> <p>Stakeholder Question: How much are plans paid and is it enough money to cover all the benefits and services? Response: Actual capitation rates are posted on the website. In signing the 3-way contract, plans have committed to the rates.</p>	
<p>1:55 p.m.</p>	<p>Community Outreach & Education Update Hilary Haycock provided an update on community outreach and educational activities.</p> <p>The Communications Workgroup has been actively meeting to develop a community plan and outreach efforts.</p> <ul style="list-style-type: none"> • Blue Envelope Campaign – Train AARP volunteers to review contents of the blue envelope notices and direct further questions to HICAP and HCO. • Stakeholders are welcome to join this workgroup. 	<p>Hilary Haycock <i>Director of Strategic Outreach and Communication, Harbage Consulting</i></p>



	<p>Plans have collaborated to conduct LTSS training.</p> <p>Harbage will continue to focus on provider education to reduce the misinformation. Provider educational tools are also posted on calduals.org</p> <p><u>Community Outreach/Training Events:</u></p> <ul style="list-style-type: none"> • California Association of Nursing Facilities - Videos • IHSS/SEIU workers training - LA / San Diego • American New Media Round Table to reach non-English audiences May 29th. • Twice a month webinars • TeleTownhalls - PASC 10000/2000 attended for the whole hour. Also doing peer to peer counseling in small groups • Harbage/DCHS will begin doing 60 day TeleTownhalls every month with Jane Ogle. <p>Stakeholder Question: What is the PR strategy? Response: State does not have a PR plan. The decision was to provide Educating and Consumer Outreach activities to support consumers in making the right decisions.</p> <p>Stakeholder Question: What is the ethnic breakout of the county? Response: We can share the ethnic breakout of the county at the next meeting.</p> <p>Stakeholder Question: What is the strategy for reaching out to the various ethnic communities? Response: We are developing a plan that will include outreach strategies targeted to the ethnic communities and organizations.</p>	
<p>2:25 p.m.</p>	<p>Open Forum Stakeholder Question: SNF's calling in for authorizations are being turned away by Plan's. Plans need to create an information cheat sheet. Response: Health Net and LA Care as currently the only available CMC plans. These plans will follow up after the meeting to obtain specific information on which SNFs are encountering these issues.</p>	<p>Jane Ogle <i>Former Deputy Director, Health Care Delivery Systems, DHCS</i></p> <p>Hilary Haycock <i>Director of Strategic Outreach and Communication, Harbage Consulting</i></p>



	<p>Stakeholder Question: There is some fear that HMO's are not going to be willing to spend the money to care for the population and will deny access to expensive services.</p> <p>Response: The State has tried to establish rates so that everyone is whole and not incentivized to withhold care. Plan representatives also confirmed that providing best care to patients was a win-win for everyone. Reduces costs and provides better outcomes.</p> <p>Stakeholder Question: What are the plans doing to get the information into the hands of LTSS organizations and so they can empower their staff to reach their constituents?</p> <p>Response: All plans collaborated to conduct CCI training to LTSS providers in March/April. On-going training will continue to occur.</p> <p>Stakeholder Question: Hospital System discharging to SNF's are having a difficult time finding SNF's willing to accept the custodial patients. Will the Cal MediConnect plans have the same issue? Do the plans need to contract with more SNFs?</p> <p>Response: The Cal MediConnect plans have contracted with SNFs to meet LTSS long term care requirements. Plans can expand their network of SNFs. SNF providers can contact the individual health plans regarding joining their network.</p>	<p>Paul Lopez General Manager, Duals Programs, CareMore</p>
<p>2:50 p.m.</p>	<p>Next Steps/Wrap Up Paul Lopez thanked the stakeholder workgroup for their on-going participation, valued insights and recommendations during the meeting.</p> <p>He also extended a special thank you to Jane Ogle. Her knowledge and on-going support of CCI has been instrumental in the accomplishments achieved to date.</p>	<p>Paul Lopez General Manager, Duals Programs, CareMore</p>