



**L.A. COUNTY COORDINATED CARE INITIATIVE (CCI)  
Stakeholder Workgroup  
MEETING MINUTES**

**Wednesday, May 14, 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: James Cruz, MD

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

TIME	TOPIC	PRESENTER
1:09 - 1:18 p.m.	<p><b>Welcome/Introductions</b></p> <ul style="list-style-type: none"> <li>Meeting was called to order at 1:09 p.m. by James Cruz and introductions were made by stakeholders and health plan representatives in the room and on the telephone.</li> </ul>	<p><b>James Cruz, MD</b> <i>Chief Medical Officer, Molina Healthcare</i></p>
1:18 - 1:21 p.m.	<p><b>Approve April 24, 2014 Meeting Minutes &amp; Stakeholder Workgroup Charter Review</b></p> <ul style="list-style-type: none"> <li>Lisa Hayes referred to the email distribution of the draft minutes from the previous meeting and asked if there were any corrections.</li> <li>No corrections were made. Workgroup approved the minutes as written.</li> <li>The L.A. County CCI Stakeholder Workgroup Charter was approved in March 2014, but a review of Charter was conducted by Lisa.</li> <li>Purpose of this Workgroup is to provide a forum where the five L.A. County CCI health plans can collaboratively work with advocates, stakeholders, and Community Based Organizations during the development, implementation, and operations of the CCI and Cal MediConnect.</li> <li>Five prime health plans will take turns, hosting, facilitating and paying for each stakeholder workgroup.</li> </ul>	<p><b>Lisa Hayes</b> <i>Director, Disability &amp; Senior Access Services, Molina Healthcare</i></p>
1:21- 1:43 p.m.	<p><b>Program for All Inclusive Care for the Elderly (PACE) Presentation</b></p>  <p>05.14.2014 - PACE CCI Presentation.ppt</p> <ul style="list-style-type: none"> <li>Lisa announced that one of the outstanding items from the last meeting was a request for more information about PACE.</li> </ul>	<p><b>Manoj Chaturvedi</b> <i>Director of Marketing, Senior Care Services, AltaMed</i></p>



- Manoj Chaturvedi presented an LA County review of the Program for All Inclusive Care for the Elderly (PACE) and provided AltaMed specifics.
- PACE is a managed-care-like program that uses an interdisciplinary team approach to provide patients with complete access to medical, social, psychological, transportation, homecare, nutritional, rehabilitative, and end of life services through one comprehensive program.
  - Makes it possible for those who are frail and meet nursing home eligibility criteria to live with dignity and pride in their own homes while receiving all the care they need.
  - Requires disenrollment from other managed care plans to be accepted.
  - Integrates acute and long-term care funding and delivery systems for nursing home certified seniors.
  - Receives monthly capitated payments for a full range of services and assumes full risk.

**Mari Abrams**  
 Marketing Director,  
 Brandman Centers for  
 Senior Care

**PACE Payment Options:**

<b>Eligibility:</b>	<b>Payment:</b>
Medi-Cal & Medicare	No Cost
Medi-Cal with No Share of Cost	No Cost
Medi-Cal Share of Cost	Monthly Fee (Equal to SOC)
Medicare Only	Monthly Fee (if not Medi-Cal Elig)
Private Pay	Monthly Fee (Determined by PACE)

**PACE Eligibility:**

- 55 years old or older
- Live in the service area of a PACE organization: 133 zip codes
- Certified by the state to meet the need for skilled nursing home
- Able to live safely in the community with the help of PACE services

**PACE Assessment:**

- Interdisciplinary Team conducts evaluation to determine eligibility and develop care plans and manage chronic conditions
- Annual and semi-annual reassessment to review status
- Unscheduled reassessment based upon significant change in participants health/psychosocial status

**AltaMed Mission Statement:** To eliminate disparities in health care



access and outcomes by providing superior quality health and human services through an integrated world-class delivery system for multi-ethnic and underserved communities in Southern California.

- Founded as the East Los Angeles Barrio Free Clinic in 1969, a volunteer-staffed storefront operation.
  - Largest independent, federally-qualified community health center (FQHC) in the U.S.
  - Received the nation’s highest levels of accreditation and certification for quality of care and performance.
  - AltaMed is one of six PACE organizations in California and the largest; nationally, there are now over 103.
  - Two new PACE sites opening in South LA and Covina in 2014.
  - AltaMed has approximately 1,600 patients and 24 providers (100 patients/provider panel).
  - Patients attend PACE center about 9 days a month.
  - Transportation is unlimited based on level of need but generally 14 round trips a month per patient.
  - About 80% of patients receive maintenance PT-OT.
  - Approximately 20 meals per month per patient.
  - About 70 Caregiver support service hours per month per patient.
- Mari Abrams presented the Brandman Centers for Senior Care specifics and explained how PACE fits into the CCI Program.

**Brandman Centers for Senior Care (BCSC) Philosophy:** Provide affordable, high-quality health and long-term care services for the well-being of participants and the communities we serve.

- Funded by Joyce and Saul (of blessed memory) Brandman.
- At capacity, the BCSC center will serve 180 participants.
- BCSC currently has approximately 90 patients at one site (expansion coming soon).
- Patients attend center about 9 days a month.
- Overall BCSC patient satisfaction slightly above the CalPACE average (89% for BCSC vs. 88% for CalPACE)
- Three Primary Care Providers (49 network providers, two ancillary providers and 31 organizations/institutions contracted to provide additional care).

**How does PACE fit into the Coordinated Care Initiative?**

- Medicare and Medi-Cal Eligible (Medi-Medi) Beneficiaries have three options:
  1. Enroll in Cal MediConnect
  2. Opt out of Cal MediConnect

3. Enroll in PACE

- Medi-Cal Only Beneficiaries have two options:
  1. Enroll in Medi-Cal managed care plan
  2. Enroll in PACE

**How to Select the PACE Option:**

- Must be 55 or older and live in an applicable zip code
  - If PACE is listed on your Health Plan Choice Form and you pick a PACE plan, you must also pick a Cal MediConnect plan from the list or a Medi-Cal plan from - this is just in case you do not qualify to join PACE.
  - PACE programs receive updates every week from the State regarding who has requested PACE enrollment.
  - PACE programs have 60 days to process enrollment
  - You can enroll, disenroll from a PACE plan at any time.
- Mari concluded her presentation by providing contact information for both BCSC and AltaMed.
  - Lisa announced that there are question sheets at the center of each table, and encouraged stakeholders to write down their questions.

**Independent Living Centers (ILC's) Presentation**



05.14.2014 - SCRS - Independent Living Pi

1:43 - 2:07 p.m.

- James Baker provided information on Independent Living Centers and presented a short film about Southern California Resource Services for Independent Living (SCRS-IL).
- Independent Living Centers (ILC's) are community-based, cross-disability and non-profit.
- There are 403 ILC's nationwide and 28 ILC's in California.
- SCRS-IL is one of six ILC's in Los Angeles County.
- Independent Living (IL) services maximize the ability to live independently in the environment of their own choosing (community-based living rather than an institutional setting).
- IL philosophy emphasizes the idea that people with disabilities are the best experts on their own needs, having crucial and valuable perspective to contribute and deserving of equal opportunity to decide how to live, work, and take part in their communities.

**James Baker,**  
*Executive Director,  
Southern California  
Resource Services for  
Independent Living  
(SCRS-IL)*

**Jordan Lopez,**  
*Education & Support  
Services Coordinator,  
Southern California  
Resource Services for  
Independent Living  
(SCRS-IL)*



- In the Independent Living Model, “the problem lies in the environment, not the individual. People with disabilities do not see themselves as problems to be solved, and ask only for the same human and civil rights enjoyed by others.” – NCIL
- At least 51% of the ILC’s staff, as well as its Board of Directors, must have a disability.
- ILC’s provide the following core services:
  - Peer Support
  - Information and Referral
  - Individual and Systems Advocacy
  - Independent Living Skills Training
  - Assistive Technology
  - Additionally, in CA: Personal Assistance Services & Housing Assistance
- Find the nearest center: [www.NCIL.org](http://www.NCIL.org)

**Southern California Resource Services for Independent Living**

- Founded in 1979.
- Service area is approximately 40 cities in the Los Angeles Area.
- Has served 50,000+ individuals.
- **Support Groups:** Women’s Peer Support Group, Men’s Peer Support Group, Recreational Group, Art Program, Disability-related Groups, Drum Circle, LGBTQ-Disability Peer Support Group, and Youth Program.
- **Computer Training:** Open lab, Instructors, Basic Computer Skills, Word, PowerPoint, Excel, and Internet basics training.
- **Vocational Department:**
  - Works in partnership with Department of Rehabilitation
  - Four So-Cal Counties: LA, Orange, Riverside, San Bernardino
  - Intake, Job Prep, Placement, Retention
  - Incentives for employers: OJT Funding, Work Opp. Tax Credit, Job Coaching Services.

2:07 – 2:24 p.m.

**Department of Healthcare Services Update**

- Hilary Haycock provided an update on the enrollment data and policy updates from the Department of Health Care Services (DHCS).
- Hilary stated that the next Cal MediConnect Enrollment Dashboard will be released and available on both the CalDuals.org and DHCS website within the next week or so.
- Total active enrollments in Cal MediConnect overall is 15,850 and total active enrollments in Los Angeles County is 27.

**Hilary Haycock ,**  
*Director of Strategic Outreach and Communication, Harbage Consulting*

**Denny Chan**  
*Staff Attorney, National Senior*

### D-SNP Policy Proposal

- DHCS released a Medicare Advantage / Dual Special Needs Plans (DSNP) policy proposal to both respect beneficiary choice and promote Cal MediConnect enrollment.
- During the upcoming CCI Monthly Stakeholder Update conference call on Friday, May 16, 2014 at 2:30 p.m., Margaret Tatar will cover the proposed DSNP policy that DHCS has released.

### MLTSS Fact Sheet

- The following MLTSS Fact Sheets were recently posted on the CalDuals.org website:
- **The Coordinated Care Initiative and Beneficiaries in the Assisted Living Waiver (ALW) Program and Medicare and/or Medi-Cal (May 2014)**



- **The Coordinated Care Initiative and Beneficiaries with HIV/AIDS and Medicare and/or Medi-Cal (May 2014)**



- **The Coordinated Care Initiative and Beneficiaries in NF/AH and IHO Waivers (May 2014)**



- **The Coordinated Care Initiative and Consumers Enrolled with Regional Centers and State Developmental Centers (May 2014)**



CCI-DD-and-ICF-DD-  
Waiver-Fact-Sheet.ppt

### Open Items

- Hilary addressed the following stakeholder questions from our last meeting:

**Stakeholder Question (04/24/2014):** What percent of nursing home residents have signed up for CMC?

**Response:** Distribution by Long-Term Care (LTC) Status in LA County

- **5.0% - LTC Facility Residents**
- **2.0% - Had a Short Term Stay in a LTC Facility and Received Long Term Services and Supports (LTSS)**
- **2.8% - Had a Short Term Stay in a LTC Facility**

**Stakeholder Question (04/24/2014):** 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. The first wave of translated beneficiary materials is now available for Los Angeles County. Fact sheets in Spanish, Korean, and simplified and traditional Chinese can be found on the L.A. County page on the CalDuals.org website. Translated materials for other counties will be coming soon.

### Community Outreach & Education Update

- Denny Chan provided an update on community outreach and educational activities.
- NSCLC will be conducting upcoming trainings for Advocates for African American Elders and Asian Americans Advancing Justice.
- Denny also reported NSCLC's previous faith-based outreach to Providence Health Ministries.
- L.A. Communications Workgroup – Over 20 people representing different organizations in Los Angeles met on Thursday, May 1<sup>st</sup>, 2014 to collaboratively identify specific populations for future



	<p>outreach activities.</p> <ul style="list-style-type: none"> <li>▪ Blue Envelope Help campaign, a project with AARP volunteers involving direct outreach to dual eligible beneficiaries. NSCLC will train AARP volunteers later this month about the CCI, and the volunteers will go to Los Angeles senior centers to run a Blue Envelope Help table. The idea is for seniors to bring their blue envelopes and questions about them to senior centers to get assistance. This will be an additional consumer resource in Los Angeles County.</li> <li>▪ New American Media Roundtable Event will be held on Thursday, May 29, 2014 to reach non-English audiences.</li> <li>▪ DHCS will be conducting the first Tele Town Hall Meeting on Thursday, May 15, 2014 for beneficiaries who already received their 60-day notice and large blue envelope with the Cal MediConnect Guidebook and Choice Book. Tele Town Hall Meetings will be held on a monthly basis.</li> <li>▪ Harbage will continue to focus on provider education to reduce the misinformation. Provider educational tools are also posted on calduals.org</li> </ul>	
<p>2:24 - 2:40 p.m.</p>	<p><b>Open Forum</b></p> <p><b><u>Stakeholder Question:</u> What is the status of Choice Forms?</b></p> <p><b><u>Response:</u></b> Choice Forms are currently undergoing beneficiary testing. DHCS is waiting to receive feedback from some skilled nursing facilities and on some braille versions.</p> <p><b><u>Stakeholder Question:</u> How will the plans enroll MSSP institutional deeming cases? Also, once a beneficiary is enrolled in a Cal MediConnect plan, can community providers refer the beneficiary to be enrolled in an MSSP?</b></p> <p><b><u>Response:</u></b> The health plans do not enroll anyone into MSSP programs. The criteria for qualifications are not changing. If you have a client who you think needs MSSP, you may reach out to the health plan or the MSSP.</p>	<p><b>Ruthy Argumedo,</b>  <b>AVP</b>  <i>Community Engagement, Molina Healthcare</i></p>



**Stakeholder Question: Could we have a list of key contact information for all of the Cal MediConnect and Medi-Cal plans?**

**Response:** The plans are currently working on developing lists of contacts from each of the health plans for Cal MediConnect and Medi-Cal.

**Stakeholder Question: The delegation down to medical groups in San Diego has been chaotic, and providers are not aware of these arrangements timely. How is readiness being evaluated by the State? Providers are being told that details between the plan and the delegated groups have not been finalized. Is this how the State intended this process to work? When the delegated groups assume payment, contracts are not in place in a timely manner when the relationships/delegation is not made public.**

**Response:** The State and Federal government developed a readiness review process to examine key elements of the plans' operations. We are in daily contact with plans and their provider contracting teams. The State and Federal governments are carefully reviewing the readiness of each health plan prior to allowing any member enrollment.

**Next Steps/Wrap Up**

- **Next Meeting: Thursday, June 19th, 2014**
  - Location: Los Angeles Cathedral
  - Facilitated by L.A. Care
  - Time: 1:00 p.m. – 3:00 p.m.
- Meeting was adjourned at 2:45 p.m.

2:40 - 2:45 p.m.

**James Cruz, MD**  
*Chief Medical Office,  
 Molina Healthcare*