

**MEDI-CAL MANAGED CARE ADVISORY COMMITTEE
2016 AREAS OF FOCUS
February 4, 2016**

AREA	DETAIL	RESPONSIBLE	OTHER
Access	<p>Primary Care – Where are we now?</p> <p>Mental Health – See transitions below. Are we meeting the need? Data?</p> <p>Specialty Care – Plans and IPAs planned some interventions. What specific specialties are problematic? What are they doing?</p> <p>Transportation Policies – These were requested but not submitted.</p> <p>Language/cultural needs</p> <p><u>Data</u> – What specific measures can we review in the Committee to see progress?</p>	<p>Jenni Gomez</p> <p>Hospitals</p> <p>Plans</p> <p>IPAs, Providers</p> <p>County MHP</p>	
Care Coordination	<p>What efforts are currently in process to improve care coordination?</p> <p>How is care coordinated on behalf of beneficiary needs?</p> <ul style="list-style-type: none"> - Mental Health - Social Services - Specialty - Across levels of care <p>What is the role of the plan? IPA? Physician / Clinic?</p> <p>How does this work when plans have differences (in contracted hospitals, IPAs, providers and processes)?</p> <p>How to measure?</p>		<p>Small defined pilot to test partnerships?</p>
Mental Health Care Transition	<p><i>There is some overlap for access and care coordination (of individuals with mental health conditions).</i></p> <p>When is it appropriate to refer to Health Plan mental health benefit?</p> <p>When is it appropriate to refer to County MH Plan Specialty? Criteria? Tool?</p> <p>What constitutes a need to transition from Plan to County MHP? Or vice versa? Need for warm handoff.</p> <p>Can we adopt operational guidance county-wide? (Too confusing if variation among non-Kaiser Plans for other system members and advocates.)</p>		

DRAFT FOR DISCUSSION

Drug Medi-Cal Organized Delivery System	August 2015 State received CMS approval under the Bridge to Reform Waiver to establish an Organized Delivery System and began implementation. They are on Phase Two Counties. Sacramento County is part of Phase Three. Overview of current status and next steps.	Uma Zykofsky	
Enrollment & Education	<p>Default rate increased to 40%.</p> <ul style="list-style-type: none"> • Are those providing outreach and assistance educating beneficiaries re: timeframe to choose a plan. • Once a plan is chosen, who provides education on how to use the plan services? This requires repeated education from system partners? • HCO willing to educate the “Care Navigation” group. We just completed a brief Managed Care orientation with them. Sandy followed up with Nenick Vu. 		
Metrics	<p>Need to prioritize some measures for review.</p> <ul style="list-style-type: none"> • Plans suggested the 15 they review. • We may also wish to review measures which indicate care coordination and/or look at measures related to high cost conditions. 		

Other items requested:

Dental Managed Care Advisory Committee – report and coordination – March and October

CCS – what is happening?