

Preparing for 2021: Implications of DHCS's Population Health Management Program

Waiver Integration Team+ Convening

December 4, 2019

Pre-Reading

- ✓ CalAIM Excerpt: Population Health Management Proposal
- ✓ CalAIM Population Health Management Proposal Overview (slides)

Objectives: WITs+ will...

- ✓ Understand what is expected under DHCS's Population Health Management Program (PHMP)
- ✓ Assess opportunities and concerns related to the PHMP, particularly regarding PHS and health plan roles and responsibilities, to prepare for conversations with health plans in 2020
- ✓ Learn how peer systems are thinking about the PHMP

INSTRUCTIONS

Part A (30 minutes): With your WIT+ team members, consider the following questions about the PHMP, DHCS's proposal for Medi-Cal managed care plans to address population health in a more standardized and structured manner.¹ The PHMP ties together multiple elements of the CalAIM initiative that are pertinent to PHS.

As your team works through the questions, consider what value you can offer to health plans to support successful implementation of the PHMP. Due to limited time, you will not be able to cover all of the questions. Please begin with the section(s) that you most want to discuss with your team, and continue the activity when you return to your home system.

Overall

1. What opportunities does the PHMP present for your health system?
2. What concerns does it raise for you?
3. Which PHMP activities does your health plan(s) already conduct, if any? Does the proposal create new requirements and infrastructure needs for your health plan(s)?
4. Where is there overlap between what is proposed for health plans in the PHMP and what your system is currently doing?

Developing and Administering a New Standardized Health and Social Needs Assessment

5. What lessons or resources might you share with your health plans related to developing and/or administering health and social needs assessments?

¹ DHCS cites the NCQA definition of PHM: "A model of care that addresses individuals' health needs at all points along the continuum of care, including in the community setting, through participation, engagement, and targeted interventions for a defined population."

6. What about the Staying Healthy Assessment (SHA) and Health Information Form (HIF) does not work well today that could be addressed with a new assessment tool/process?
7. Who should be responsible for administering the new health and social needs assessment? Does the answer vary for different populations?

Data Sharing

8. What data should the PHS share with health plans to support PHMP activities (e.g., clinical data for risk stratification)?
9. What data should health plans share with PHS to support PHMP activities (e.g., results of risk stratification, intake assessments to inform patient care)?
10. What data infrastructure is already in place to support the data sharing described in questions 8 and 9? What new infrastructure might be needed?
11. Health plans are expected to develop a network of social service and community based organizations to support the PHMP. What data sharing opportunities and concerns does this raise for you (e.g., related to social referral platforms, impact on current PHS – CBO partnerships)?

Care Management (General, Complex, and Enhanced Care Management)

12. Review the descriptions of each type of care management in the PHMP proposal – general, complex, and enhanced. What questions would you have for the State or your health plan(s) about the distinctions between the three types? For each type, discuss preferred PHS and health plan roles and responsibilities. How might your health plan partners agree or disagree with your assessment? Where is there a need for further clarification around roles and responsibilities?
13. What assets can you offer going into these discussions?

In-Lieu-of-Services (ILOS)

14. Which of the proposed in-lieu-of-services (ILOS) are offered by your county today (okay for this to be an imperfect list)?
15. What ILOS does your health plan(s) invest in today?
16. Ideally, which ILOS would your plan(s) invest in under CalAIM?
17. Consider the process of engaging your health plans to contract for the desired ILOS. What do the major milestones and timeline look like?

Quality Incentive Program (QIP)

18. Based on conversations with DHCS, we expect that QIP 3.0 metrics will align in part with the Managed Care Accountability Set (MCAS) in 2021. Have you had (or do you plan to have) discussions with your health plans regarding the current MCAS measures? For example, have you requested plan data to understand your system's current performance on the MCAS measures? Have you spoken with your health plans about alignment of their 2020 P4P initiatives with the MCAS measures?
19. How can the PHMP support collaboration between your system and health plans for QIP data sharing and performance (e.g., MCAS measures in QIP, outreach and care management for numerator fall out cases)?

INSTRUCTIONS

Part B (40 minutes): Each table around the room has been assigned one of the topics above (Health and Social Needs Assessment, Data Sharing, Care Management, In-Lieu-Of-Services, Quality Incentive Program).

- Choose a topic that you would like to discuss further with peer health systems and move to that table.
- Choose a table facilitator and start with introductions.
- Each system, take a turn sharing what you discussed during the WIT+ team time related to your table topic. Share major take-aways, opportunities, barriers, and outstanding questions.
- We will move through 2 rounds of table discussions, time permitting. SNI will announce when it is time to switch to a new table topic.

NOTES