



- 1. Provide a forum for providers to understand the Enhanced Care Management (ECM) benefit, ECM implementation and connections to related systems of care for Children and Youth.
- 2. Provide an opportunity to hear your feedback and questions related to the ECM roll-out for Children and Youth to inform their planning.
- 3. Document questions and issues related to system coordination, eligibility, and network development and how Health Net can support you becoming an ECM provider for Children and Youth.

# Getting to Know Provider Attendees Zoom Polls

### CALIFORNIA ADVANCING AND INNOVATING MEDI-CAL (CalAIM)

#### **CalAIM**



Led by Department of Healthcare Services, CalAIM is: California Advancing and Innovating Medi-Cal



A 5-year plan to transform and integrate Medi-Cal's programs more seamlessly with other social services



Overarching goal is to improve medical & social outcomes for Medi-Cal recipients, especially those with the most complex needs



Other goals are service standardization, consistent & equitable care across the state, emphasizing outreach & a "no wrong door" approach

#### **Key Elements of CalAIM:**

Relevant to Children and Youth



**Enhanced Care Management (ECM)** 

**Community Supports (CS)** 

# Enhanced Care Management

# ECM's 7 Core Services: A Whole-Person approach with a focus on In-Person Services







#### DCHS Definitions: Adults, Children & Youth

#### In the populations of focus definitions:

- "adult" is defined as an individual who is 21 years of age or older
- a "child or youth" is defined as an individual up to age 21, which means that Children and Youth definitions for ECM apply up to age 21, with limited exceptions as called out in following slides.

When a Member under 21 is served in ECM and does meet adult ECM criteria upon turning 21, the Member should not be disenrolled from ECM; rather, the ECM Provider and MCP should apply usual "graduation" criteria to determine when the Member is ready to disenroll.



#### Children eligible July 1, 2023

ECM Populations of Focus (POFs)	Adults	Children
Individuals Experiencing Homelessness	•	•
Individuals At Risk for Avoidable Hospitalization or ED Utilization (formerly called "high utilizers")	•	
Individuals with Serious Mental Health and/or SUD Needs		
Individuals Transitioning from Incarceration		
Adults Living in the Community and At Risk for LTC Institutionalization	•	
Adult Nursing Facility Residents Transitioning to the Community	•	
Children and Youth Enrolled in California Children's Services (CCS) or CCS Whole Child Model (WCM) with Additional Needs Beyond the CCS Condition		•
Children and Youth Involved in Child Welfare		
Individuals with Intellectual or Developmental Disabilities (I/DD)		•
Pregnant and Postpartum Individuals At Risk for Adverse Perinatal Outcomes (effective January 2024)	•	

# Unique Expectations for Children and Youth Population Of Focus: <u>Systems Integration</u>

#### **DHCS Expectation for Family-Centered Approach\*:**

Launch Enhanced Care Management (ECM) in a manner that recognizes the unique needs of children and builds on Early and Periodic Screening, Diagnostic and Treatment (EPSDT) requirements\*

- Provide whole care management **above and beyond** what is provided by the preexisting programs
- Provide single point of accountability to ensure care management across multiple systems/programs the "air traffic control" role
- Provide additional reimbursement for ECM from MCPs to providers to complement these programs

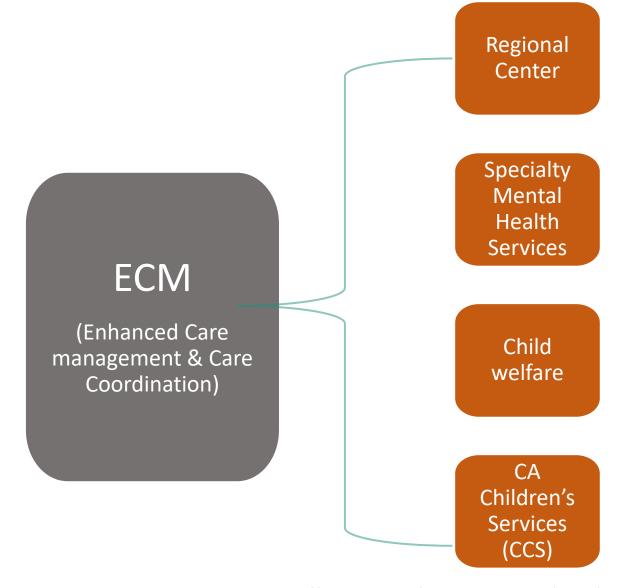
Medi-Cal - One System Among Many Serving Children at Highest Risk for Poor

**Outcomes** 

Highest Risk children are often served by multiple systems.

ECM can support the required care management and care coordination

Source: CHCF https://www.chcf.org/publication/2019-medi-cal-facts-figures-crucial-coverage/#related-links-and-downloads



<sup>\*\*</sup>Medi-Cal Children's Health Advisory Panel (MCHAP)Meeting, March 17, 2022

#### **ECM & Other Child-Serving Programs**

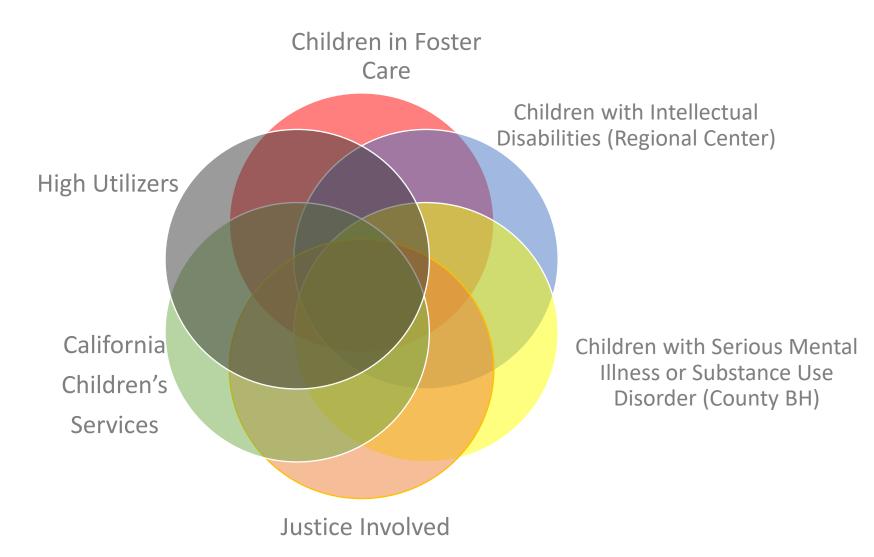
1) 1915(c) Waivers	2) Services Carved Out of Managed Care	3) Services Carved into Managed Care	4) Dual–Eligible Members	5) Other Programs	6) Programs Serving Pregnant & Postpartum Individuals
Multipurpose Senior Services Program (MSSP)	California Children's Services (CCS)	CCS Whole Child Model (WCM)	Dual Eligible Special Needs Plans (D-SNPs)	California Community Transitions (CCT) Money Follows the Person (MFTP)	Comprehensive Perinatal Services Program (CPSP)
Assisted Living Waiver (ALW)	County-Based Targeted Case Management (TCM)	Complex Care Management (CCM)	D-SNP Look-Alike Plans	Family Mosaic Project	Black Infant Health (BIH) Program
Home and Community-Based Alternatives (HCBA Waiver	Specialty Mental Health Services (SMHS) TCM	Community-Based Adult Services (CBAS)	Other Medicare Advantage Plans	Hospice	California Perinatal Equity Initiative (PEI)
HIV/AIDS Waiver	SMHS Intensive Care Coordination for Children (ICC)		Medicare Fee For Service (FFS)	California Wraparound	American Indian Maternal Support Services (AIMSS)
HCBS Waiver for Individuals with Developmental Disabilities (I/DD)	Drug Medi-Cal Organized Delivery System (DMC-ODS) & Drug Medi-Cal (DMC) Program Care Coordination & Management Programs		Cal MediConnect		CDPH California Home Visiting Program (CHVP)
Self-Determination Program for Individuals with I/DD	Full Service Partnership (FSP)		Fully Integrated Dual Eligible Special Needs Plans (FIDE-SNPs)		CDSS CalWORKs Home Visiting Program (HVP)
	Health Care Program for Children in Foster Care (HCPCFC)		Program for All- Inclusive Care for the Elderly (PACE)		
	In Home Supportive Services (IHSS) Genetically Handicapped Person's Program				

- ECM is only a benefit for children enrolled in managed care (not FFS)
- Members can be enrolled in both
   ECM and the highlighted programs
- Managed care plan must ensure non-duplication of services between ECM and case management services that may be provided under highlighted programs

1. ECM and the other program	MCP Members can be enrolled in both ECM and the other program. ECM enhances and/or coordinates across the case/care management available in the other program. MCP must ensure non-duplication of services between ECM and the other program.
2. Either ECM or the other program	MCP Members can be enrolled in ECM or in the other program, not in both at the same time.
3. Not Eligible to Enroll in FCM	Medi-Cal beneficiaries enrolled in the other program are excluded from ECM

# Children and youth are often engaged with multiple systems of care

ECM is intended to provide a single point of accountability to ensure care management across multiple systems/programs — the "air traffic control" role



# Children Eligible for ECM (POF)

#### ECM Populations of Focus Going Live 7/1/23

#### **Children & Youth Experiencing Homelessness**

### Homeless Families or Unaccompanied Children & Youth Experiencing Homelessness who:

- (1) Are experiencing homelessness, as defined above in under the modified HHS 42 CFR Section 11302 "Homeless" definition; **or**
- (2) Are sharing the housing of other persons (i.e., couch surfing) due to loss of housing, economic hardship, or a similar reason; are living in motels, hotels, trailer parks, or camping grounds due to the lack of alternative adequate accommodations; are living in emergency or transitional shelters; or are abandoned in hospitals (in hospital without a safe place to be discharged to)

Children, youth, and families do not need to meet the additional "complex physical, behavioral, or developmental need" criteria noted for adults

# **ECM Populations of Focus Going Live 7/1/23**Children & Youth At Risk for Avoidable Hospital or ED Utilization

#### **Children & Youth** who meet one or more of the following conditions:

- (1) <u>Three or more</u> emergency room visits in a 12-month period that could have been avoided with appropriate outpatient care or improved treatment adherence;
- (2) <u>Two or more</u> unplanned hospital and/or short-term skilled nursing facility stays in a 12-month period that could have been avoided with appropriate outpatient care or improved treatment adherence

# **ECM Populations of Focus Going Live 7/1/23**Children & Youth with Serious Mental Health &/or SUD Needs

#### Children & Youth who meet one or more of the following conditions:

- Meet the eligibility criteria for participation in or obtaining services through one or more of:
  - Specialty Mental Health Services (SMHS) delivered by Mental Health Plans;
  - The Drug Medi-Cal-Organized Delivery System (DMC-ODS) or The Drug Medi-Cal (DMC) program

No further criteria are required to be met for children and youth in these POF. Children and youth do **not** need to meet the additional criteria noted for adults

#### ECM Populations of Focus Going Live 7/1/23

#### **Children & Youth Transitioning from Incarceration**

#### **Children & Youth who:**

(1) Are transitioning from being in custody of a youth correctional facility or transitioned from being in custody of a youth correctional facility within the past 12 months

No further criteria are required to be met for children and youth in these POF. Children and youth do **not** need to meet the additional criteria noted for adults

# ECM Populations of Focus Going Live 7/1/23 Children & Youth Enrolled in CCS or CCS WCM with Additional Needs Beyond the CCS Condition

#### Children & Youth who meet one or more of the following conditions:

- (1) Are enrolled in California Children's Services (CCS) or CCS Whole Child Model (WCM); and
- (2) Are experiencing at least one complex social factor influencing their health

Examples include (but are not limited to) lack of access to food; lack of access to stable housing; difficulty accessing transportation; high measure (4+) of ACEs screening; history of recent contacts with law enforcement; or crisis intervention services related to mental health and/or substance use symptoms.

- Children in CCS or CCS WCM are eligible to receive ECM if they meet the criteria of any other ECM Population of Focus, even if they do not have a complex social factor (in criteria #2 above) of this Population of Focus.
- For example, many children in CCS have a co-occurring behavioral health need; these children would be eligible for ECM.

# ECM Populations of Focus Going Live 7/1/23 Children & Youth Involved in Child Welfare

#### Children & Youth who meet one or more of the following conditions:

- (1) Are under age 21 and are currently receiving foster care in California;
- (2) Are under age 21 and previously received foster care in California or another state within the last 12 months;
- (3) Have aged out of foster care up to age 26 (having been in foster care on their 18th birthday or later) in California or another state;
- (4) Are under age 18 and are eligible for and/or in California's Adoption Assistance Program;
- (5) Are under age 18 and are currently receiving or have received services from California's Family Maintenance program within the last 12 months.

- Foster care is defined in California by WIC 11400(f).
- California's Adoption Assistance Program is defined by WIC 16120.
- California's Family Maintenance program is defined by WIC 16506 and designed to support a child or youth remaining in a safe, secure, stable home.

# ECM Populations of Focus Going Live 7/1/23 Children & Youth with I/DD

#### **Children & Youth who:**

- (1) Have a diagnosed I/DD; and
- (2) Qualify for eligibility in any other children & youth ECM Population of Focus

- An I/DD who are served by a Regional Center can qualify for ECM if they meet the eligibility criteria for any ECM PoF. Regional Centers may contract with MCPs to serve as ECM Providers.
- Children & youth with an I/DD receiving 1915(c) waiver services & those residing in an ICF are not eligible for ECM.

# ECM Populations of Focus Going Live 7/1/23 Pregnant & Postpartum Individuals who meet other Qualifying ECM Eligibility

#### Adults and Youth who:

- 1. Are pregnant or are postpartum (through 12 months period); and
- 2. Qualify for eligibility in any other adult or youth ECM PoF; or
- 3. Are subject to racial and ethnic disparities as defined by California public health data on maternal morbidity and mortality \*

- "Postpartum" means having delivered, whether a live birth or stillbirth; or a late term abortion.
- This PoF is already live statewide as of January 1, 2022 for adults and will go live statewide starting July 1, 2023 for children & youth PoF
- \*Pregnant & Postpartum Individuals who are subject to racial & ethnic disparities as defined by California public health data on maternal morbidity and mortality, will go-live statewide on January 1, 2024

#### What's Next

**Service Expectations:** Understanding how ECM connects to existing work to meet the needs of the children and youth ECM PoF

**Application and Contracting process:** Submitting an application and the contracting process.

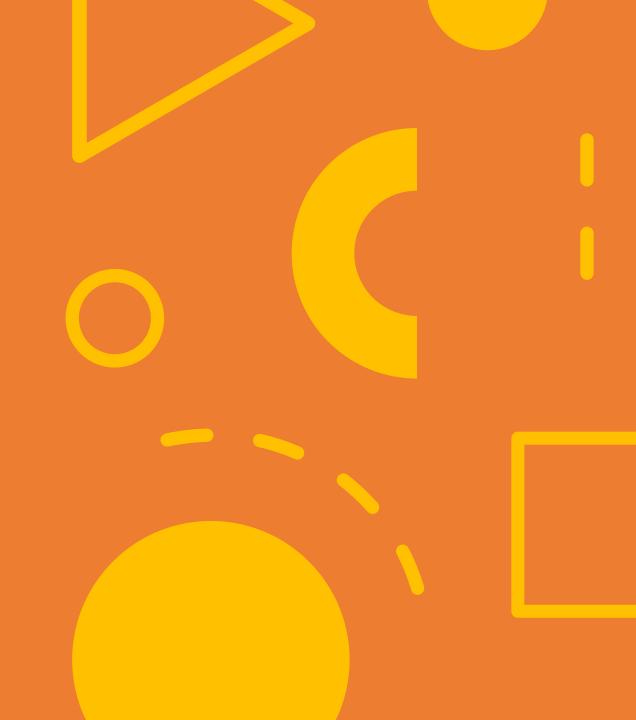
**Resources Available to Providers:** Funding and training is available to support capacity to become ECM providers.

Regional Partnerships and Collaboration: Systems of Care for Children are largely implemented the County-level, Health Net will be supporting a regional approach to implementing ECM for Children.

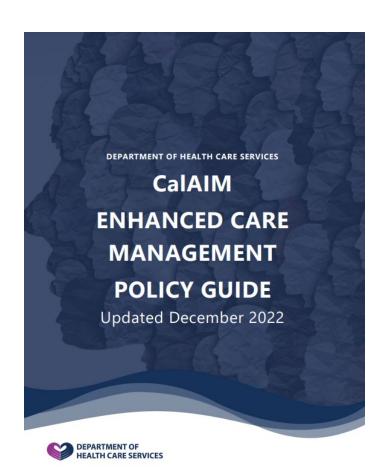
June 28 10 – 11 AM

July 26 10 – 11 AM

# Additional Resources



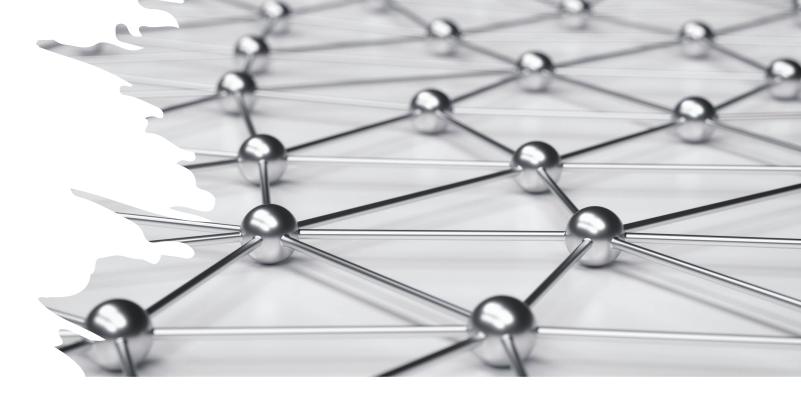
#### **Resources: DHCS ECM Policy Guide**



https://www.dhcs.ca.gov/Documents/MCQMD/ECM-Policy-Guide.pdf

# ECM and CS Provider Resource

**Health Net:** 



https://www.healthnet.com/content/healthnet/en\_us/providers/support/calaim-resources.html

#### California Health and Wellness:

https://www.cahealthwellness.com/providers/resources/calaim-resources.html

#### **ECM's Seven Core Services**

# A Whole-Person Approach with a Focus on In-person Services



**Outreach & Engagement** 

ID, Locate, Contact and Engage → Prioritize those most in need → Various Strategies/Modes → Multiple Attempts → Culturally & Linguistically Appropriate



**Comprehensive Assessment & Care Plan** 

Engage Primarily In-Person & use Innovative Alternatives → Develop a Comprehensive, Individualized, Person-Centered Assessment & Care Plan → Timely Reassessment & Updates to Plan

#### **ECM's Seven Core Services**

# A Whole-Person Approach with a Focus on In-person Services



# **Enhanced Coordination** of Care

Organize & Implement activities in the
Care Plan → Promote Integration of all
Care → Engage in Care & Reduce Barriers
→ Communicate with the Team



## **Comprehensive Transitional Care**

Provide Support During Transitions of Care (TOC) → Coordinate with Providers → Educate the Member → Review Medications → Overall Goal to Reduce Avoidable Readmissions

#### **ECM's Seven Core Services**

# A Whole-Person Approach with a Focus on In-person Services



#### **Health Promotion**

Identify Member's Strengths, Resiliencies &
Supports → Coaching to health lifestyle choices
→ Promote Skill-building and Self-Management



# Individual & Family/Social Supports

Identify, Document & Educate Chosen
Caregivers/Support →Integrate Supports in
Member's Care → Connect with Additional
Resources



Coordination of & Referral to Community & Social Support Services

Identify Needed Resources → Coordinate and Refer → Follow up (Close the Loop)

#### **Community Supports**

Housing Transition Navigation Services

**Housing Deposits** 

Housing Tenancy and Sustaining Services

Short-Term Post-Hospitalization Housing

Recuperative Care (Medical Respite)

Day Habilitation Programs

Caregiver Respite Services

Nursing Facility Transition/Diversion to Assisted Living Facilities

Community Transition Services/Nursing

Facility Transition to a Home

Personal Care and Homemaker Services

Environmental Accessibility Adaptations

(Home Modifications)

Medically Supportive Food/Meals/Medically

Not all community supports available in each county/plan

**Tailored Meals** 

**Sobering Centers** 

**Asthma Remediation**