



# CARE COORDINATION

# MEDICARE-MEDICAID PLAN (MMP) AND MENTAL HEALTH PLAN (MHP)

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# OVERVIEW OF CA 1.7 MEASURE

- ❑ 3-Way Contract Between DHCS, CMS, and IEHP
- ❑ Quality Withholds Measure 2015
- ❑ Quality Withhold Measure 2017
- ❑ Spirit – Real Time Care Coordination
- ❑ Letter – Yearly Case Review for all Remaining



# COUNTY BH SERVICES

□ System designed primarily for the Medi-Cal Population, meeting “Specialty Mental Health Services” Criteria.

- Mental health symptoms with significant functional impairments

□ § 1810.247. Specialty Mental Health Services.

□ “Specialty Mental Health Services” means:

- (a) Rehabilitative Mental Health Services, including:
  - (1) Mental health services;
  - (2) Medication support services;
  - (3) Day treatment intensive;

- (4) Day rehabilitation;
- (5) Crisis intervention;
- (6) Crisis stabilization;
- (7) Adult residential treatment services;
- (8) Crisis residential treatment services;
- (9) Psychiatric health facility services;

- (b) Psychiatric Inpatient Hospital Services;
- (c) Targeted Case Management;
- **(d) Psychiatrist Services;**
- **(e) Psychologist Services**

# MEMBERSHIP REPORT:

## IEHP DUALCHOICE CAL MEDICCONNECT

2018 TOTAL DUALCHOICE  
CAL MEDICCONNECT POPULATION

Grouping	Parent IPA	Members
Delegated	Heritage Medical	3,148
	Primecare Medical Network	3,882
	Epic Health Plan	1,717
	CPN - Horizon Valley Medical Group	508
	Dignity Health Physicians Network - IE	387
	Pomona Valley Medical Group	278
	Riverside Medical Clinic	519
	San Bernardino Medical Group	535
	Direct	IEHP Direct
<b>2018 Total CMC Members</b>		<b>25,780</b>

2017 TOTAL MEASURE POPULATION  
BY LAST ACTIVE IPA

Grouping	Parent IPA	Riverside	San Bernardino	Total	
Delegated	Heritage Medical	63	33	96	
	Primecare Medical Network	125	48	173	
	Epic Health Plan	15	41	56	
	Horizon Valley Medical Group	-	21	21	
	Dignity Health Physicians Network - IE	-	12	12	
	Pomona Valley Medical Group	-	4	4	
	Riverside Medical Clinic	17	1	18	
	San Bernardino Medical Group	-	17	17	
	Direct	IEHP Direct (1)	382	246	628
	<b>2017 Total by IPA</b>		<b>602</b>	<b>423</b>	<b>1,025</b>



A Public Entity

Inland Empire Health Plan

# CARE MANAGEMENT OVERVIEW



# CARE COORDINATION: IEHP DUALCHOICE CAL MEDICCONNECT PLAN

IEHP Direct and Delegated IPA are responsible for care management activities which include:

<b>Reviewing Health Risk Assessments (HRA)</b>	Each member receives an HRA.
<b>Interdisciplinary Care Teams (ICT)</b>	Building Individual Care Plan with Member input, PCP, and Specialists.
	Review issues and concerns; Add recommendations to Individual Care Plan
<b>Individual Care Plan (ICP)</b>	All Members have an ICP.
	Care Plan is available on IEHP Provider Web Portal. Members may request a copy of the care plan.

# IEHP DIRECT CARE MANAGEMENT PROGRAM SUPPORT

- Transition of Care (TOC) Team: Follow-Up on Discharge from SNF/Hospital
- Special Mobile Assessment Response Team (SMART): Mobile Face-to-Face Team – RN and MSW
- My Path Program: Palliative Care
- Center of Excellence (COE)
  - Low desert
- Wellness Programs
  - High Blood Pressure, Diabetes, Healthy Heart, Asthma, and Stop Smoking
  - Refer online at <https://ww3.iehp.org/en/Members/health-and-wellness/>
- Intense Home Based Care Management
  - Charter Transitional Care Program
  - Landmark

# LONG-TERM SERVICES AND SUPPORTS

- ❑ Community-Based Adult Services (CBAS)
- ❑ Multipurpose Senior Services Program (MSSP)
- ❑ In-Home Supportive Services (IHSS)





# TRANSPORTATION BENEFITS

- ❑ IEHP Benefits include Transportation for ALL medically necessary Medi-Cal and/or Medicare services, including carved out services (i.e., dental, specialty mental health, and substance abuse treatment).
- ❑ Members contact ALC directly at: 866-880-3654 or call IEHP Member services:
  - Medicare: 877-273-4347
  - Medi-Cal: 800-440-4347
- ❑ Requests for transportation should be made at least 5 business days prior (with exceptions within 24 hours).
- ❑ Member should mention these appointments are for “**County Behavioral Health**”.
- ❑ UM (Utilization Management) Transportation is required to verify ALL appointments. Members would need to complete agency’s Release of Information (ROI) before requesting transportation.

# BH AND SUD BENEFITS SUMMARY

## Behavioral Health

- Outpatient Psychotherapy
- Medication Management
- Group Therapy
- Intensive Outpatient
- Partial Hospitalizations
- Inpatient

## Substance Use

- Intensive Outpatient
- Partial Hospitalizations

## BH Integrated Pain Program

## Eating Disorder





# CARE COORDINATION

# CAPTURING CARE COORDINATION: BETWEEN IEHP/DELEGATES AND COUNTY BH

## Care Coordination with the County Behavioral Health Provider

- IEHP and IPA Care Managers will contact County Behavioral Health Providers for all Members on their monthly list who are receiving Specialty Mental Health Services. Some discussions can include:
  - When the Member needs linkage to health plan benefits.
  - When the Member experiences a medical episode that is impacting behavioral health.
  - When the Member experiences a behavioral health episode that is impacting physical health.
  - When additional information is needed to complete the Individualized Care Plan.

# CARE COORDINATION: PROCESS FOR DELEGATES

## Documentation Requirement

- ❑ Documentation of outreach attempts must include:
  - The name of the Member's county mental health Provider/county clinic;
  - The name of the person the MMP/IPA attempted to contact at the Member's county mental health Provider/county clinic;
  - The time and date of the outreach attempt;
  - The method of the outreach attempt (e.g., phone, email, fax, in-person, etc.);
  - If successful, document care coordination discussed.
- ❑ For IEHP Direct, documentation of care coordination would occur in IEHP's medical management system (MedHOK in the Communication Tab, under Contact Note).
- ❑ For IPA Delegates, documentation of care coordination would occur in the IPA's medical management system.

# CARE COORDINATION: PROCESS FOR DELEGATES

## Report Overview

- Eligible Members
- Eligibility Date: Effective with IEHP and Effective with IPA
- Behavioral Health Diagnosis
- IEHP Behavioral Health Authorizations and/or Enrollment in Special Programs.
- Specialty Mental Health Services through County Behavioral Health
- Contact information for County Behavioral Health partners
- Measure Met
- IPA Outreach Attempts
- [Monthly CAI.7 Specialty MH Report to IPAs.xlsx](#)

# CARE COORDINATION: PROCESS FOR DELEGATES

## Reporting Requirements

### □ Definition of Successful Contact

- Discussion between the MMP/IPA and Member and the MMP/IPA and county Provider include:
  - Diagnoses (including medical, behavioral, and social needs), review treatment plans, and/or coordinate mental health services provided by the county Provider with any of the services (e.g., medical, LTSS, etc.) provided by the MMP/IPA. This exchange of information may be conducted via phone, secure email, fax, or in person.

### □ Definition of Unsuccessful Contact

- MMP/IPA was unable to reach the Member or the Member's county mental health Provider/clinic following at least three documented outreach attempts (for Provider and Member separately), for the purpose of care coordination of the Member's mental health needs.

# CARE COORDINATION: PROCESS FOR DELEGATES

## Reporting Requirements

### □ Dates

- IPA will receive an automated report on the **1st** of each month.
  - Beginning on 6/1/18, pick up files from the SFTP **Specialty Mental Health** folder.
- IPA will return completed report no later than the **15th** of the following month.
  - Beginning on 7/15/18, place completed files in the SFTP **IPA Oversight/YYYY/MM** folder

### □ Naming

- Use naming of **IPA Code\_SpecialtyMH\_MM\_YYYY** for file
  - Use the unique IPA code in the naming
  - Use the month the file was received in the naming
  - For example, by no later than July 15, 2018, the IPA will post XXX\_ SpecialtyMH\_06\_2018 file in the IPA Oversight/2018/July folder

### □ Files

- When the IPA returns the completed report, IEHP will process report to determine which Members require additional outreach attempts to meet the measure.
- Depending on when IPA returns the completed report, the updated report of remaining follows ups may be one month behind





# **MONITORING AND OVERSIGHT**

# MONITORING AND OVERSIGHT

## Documentation Requirement within the Case Management Files

- ❑ Delegation Oversight Team will be monitoring IPA's to ensure the monthly reports are submitted on time and is completed each month.
- ❑ Delegation Oversight Nurse Auditors will include Members who are on the Specialty Mental Health report as part of files selected for auditing on a monthly basis. IPA's are expected to document their discussion, coordination of care, and ICT's within their case files.
  - Can be a separate field in your system
  - Can also be entered as case notes
  - Evidence of participants, roles, and any care plan updates
  - Scheduled follow up calls/interventions

# QUESTIONS?



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