Community of Constituents Initiative
Northern California Regional Coalition Meeting #1

Agenda Review

- Welcome & Overview
- Engaging Health Plans
- Hospital Discharge Planning
- Core Compentencies
- Work Plan Development
- Wrap Up & Next Steps

Amy Turnipseed
Director of Policy and Program Development

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About Partnership HealthPlan of California

Mission: *To help our members, and the communities we serve, be healthy*

Strategic Focus Areas:

- *Quality*
- *Operational Excellence*
- *Financial Stewardship*

Membership: *565,000*

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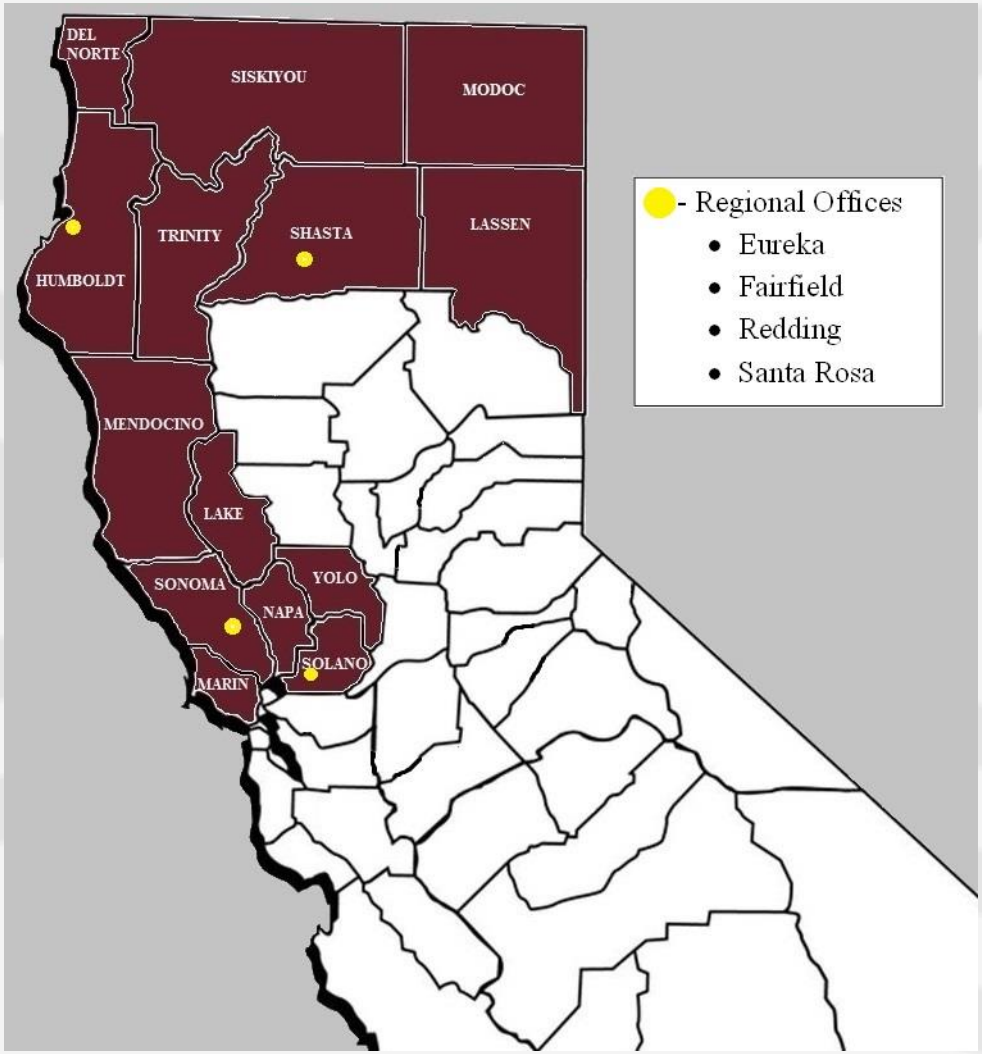
Counties Served



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Opportunities for Engagement

Currently, there are several opportunities available to health plans, providers, counties, and community-based organizations to improve the health outcomes in the areas they serve. These efforts should complement each other and will affect and influence PHC's work in the region. These opportunities include:

- **Health Homes**
- **Whole Person Care**
- **Social Determinants of Health**

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Health Homes Program

Section 2703 of the ACA allows states to create Medicaid health homes to coordinate the full range of physical health services, behavioral health services, and community-based long term services and supports (LTSS) needed by members with chronic conditions.

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HHP Team

The HHP will be structured as a health home network with members functioning as a team to provide care coordination.

This network includes the MCP, one or more Community Based Care Management Entities (CB-CMEs), and linkages to community and social support services (taken together as the HHP).

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HHP in our Region

PHC was selected to start the HHP in 10 of our counties in Group 1, no sooner than January 2017:

- Del Norte
- Humboldt
- Lake
- Marin
- Mendocino
- Napa
- Shasta
- Solano
- Sonoma
- Yolo

Two PHC counties were selected to be in Group 2, starting no sooner than July 2017:

- Lassen
- Siskiyou

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The PHC Model for HHP

- PHC is building the HHP from our Intensive Outpatient Care Management (IOPCM) program.
- IOPCM is built on several promising models to improve health outcomes and reduce health care expenses for the most complex, high cost patients.
- The model uses a care management team that works with a primary care medical team and includes in-home and face-to-face visits.
- PHC is working with our health center and CBAS partners to be CB-CMEs.

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Whole Person Care

The overarching goal of the federally funded Whole Person Care (WPC) pilot is the coordination of physical health, behavioral health, and social services, as applicable, in a patient-centered manner with the goals of improved beneficiary health and wellbeing through more efficient and effective use of resources.

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Whole Person Care

- WPC pilot projects will provide an option to service providers (i.e., county, city, health or hospital authority, or a consortium of any of the above entities serving a county or region consisting of more than one county) to receive support to integrate care for a particularly vulnerable group of Medi-Cal beneficiaries.
- The health plan is not the lead entity, but we will be an engaged partner.
- PHC is aware that many of the counties in our service area are interested in applying.
- Applications are due July 1, 2016.

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Social Determinants of Health

Social determinants of health (SDH), as defined by the World Health Organization, are “the circumstances in which people are born, grow up, live, work, and age, and the systems put in place to deal with illness. These circumstances are in turn shaped by a wider set of forces: economics, social policies, and politics.”

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Social Determinants of Health

- Examples of social determinants of health include: employment, housing, food security, literacy, access to transportation, and education level.

- A health plan alone cannot make major impacts on the social determinants of health. Coalitions of engaged organizations and individuals are key to achieving collective impact.

- The health plan's role will vary over time, depending on the nature of the program, community priorities, and the relative engagement and involvement of other community stakeholders.

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SDH Grants

- PHC allocated more than $2 million to support efforts impacting social determinants of health across our provider network. Two funding streams were developed, including:

- **Implementation Grants:** Two years of funding for a maximum amount of $500,000. These grants support the creation or enhancement of a robust SDH initiative or screening program.

- **Planning Grants:** One year of funding for a maximum amount of $50,000. These grants support the creation or development of a SDH community framework or support the planning process of a SDH initiative.

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SDH Grantees

- Siskiyou Healthcare Collaborative (Health Alliance Northern California) is working to develop an SDH branch of the county collaborative.

- First 5 Shasta and Shasta County HHSA received grants to increase Adverse Childhood Experiences (ACE) and Help Me Grow Developmental Screenings and referrals to needed services.

- Hill Country will investigate the feasibility of the development of the Center of Hope, a village campus to be created in Redding to provide medical care, training, substance abuse treatment and hope to homeless individuals, most of whom will qualify for MediCal.

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Questions?

Hospital Discharge Planning

SB 675 (LIU) The California Hospital & Family Caregiver Law which became law in California January 1, 2016:

- Require California hospitals to record the name of the family caregiver when a loved one is admitted to a hospital, notify the family caregiver when the loved one is to be discharged to another facility or home, and provide detailed instruction about the medical tasks that the family caregiver will perform.

Hospital Discharge Planning

- Require this information to include, but not be limited to, education and counseling about the patient's medications, including dosing and proper use of medication delivery devices, when applicable.

- Require the information be provided in a culturally appropriate manner in a language that is understood by the patient and caregiver, and includes an opportunity for the caregiver to ask questions.

Hospital Discharge Planning

- Require hospital discharge planning policies to ensure that planning is appropriate to the condition of the patient, meets the patient's needs and acuity, and is appropriate to the discharge destination.

Core Competencies – Update

Core Competencies for Local Action

- Developing a Policy Agenda / Communications Plan
- Relationships with District Offices of State Legislators
- Presence at the Board of Supervisors
- Managed Care Plan Advisory Committees
- Establish Communication Platforms
- Collaboration Between Aging and Disability
- Establish Bridges Between Medical & Social Services

Core Competencies – Update

- Lake and Mendocino
  - Relationships with district offices of state elected officials
  - Established communication platforms
- Santa Clara
  - Development of a policy agenda/communications plan
  - Relationships with Board of Supervisors
- Bay Area
  - Established communication platforms
  - Development of a policy agenda/communications plan
- Nevada
  - Development of a policy agenda/communications plan
  - Relationships with district offices of state elected officials

Core Competencies - Update

- Contra Costa
  - Development of a policy agenda/communications plan
  - Participation on managed care org/health plan advisory committees
- Chico
  - Established communication platforms
  - Established bridges between medical and social services
- Monterey
  - Development of a policy agenda/communications plan
  - Relationships with district offices of state elected officials
- San Mateo
  - Development of a policy agenda/communications plan
  - Established communication platforms

Core Competencies - Update

- Placer
  - Development of a policy agenda/communications plan
  - Participation on managed care org/health plan advisory committees
- SF
  - Established communication platforms
  - Established bridges between medical and social services
- Stanislaus
  - Relationships with district offices of state elected officials
  - Participation on managed care org/health plan advisory committees
- Alameda
  - Relationships with district offices of state elected officials
  - Established bridges between medical and social services

Core Competencies - Update

- Yolo
  - Development of a policy agenda/communications plan
  - Participation on managed care org/health plan advisory committees

Work Plan Development

- What are the priorities that need to be accomplished?
- What could be helpful for everyone?
- How do we make our objectives productive and useful?
- Where is there common agreement?