

# California Children's Services Program Redesign:

Vision, Goals and Groundwork for the  
Stakeholder Process

September 26, 2014

# Agenda

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| <b>9:30-9:35</b>   | <b>Welcome and Introductions</b><br>Dylan Roby, UCLA   |
| <b>9:35-9:45</b>   | <b>Opening Statement</b><br>Mari Cantwell, Chief Deputy Director of Health Care Programs, DHCS |
| <b>9:45-9:55</b>   | <b>Overview of CCS and Redesign Goals</b><br>Dylan Roby, UCLA                                  |
| <b>9:55-10:55</b>  | <b>Stakeholder Input Process &amp; Implementation Plan</b><br>Dylan Roby, UCLA                 |
| <b>10:55-11:25</b> | <b>General Question and Answer Session</b><br>DHCS & UCLA Panelists                            |
| <b>11:25-11:30</b> | <b>Next Steps and Upcoming Events</b><br>Dylan Roby, UCLA                                      |

# California Children's Services Redesign

## Opening Statement

Mari Cantwell, DHCS

# California Children's Services Redesign

## Overview

Dylan Roby, UCLA

# Background:

## The California Children's Services Program

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California Children's Services (CCS) is a program jointly administered by counties and the Department of Health Care Services (DHCS) to provide medical care and case management to children and youth with special health care needs (CYSHCN) who meet certain eligibility requirements.

- Children enrolled in CCS may also be enrolled in other insurance plans:
  - 90% of CCS enrollees have Medi-Cal Coverage.

# Background:

## Challenges in Delivering and Paying for Care

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- CCS provides needed services for CYSHCN, but the division of care and payment between CCS and the primary Medi-Cal managed care plan has posed challenges:
  - Delays in care for children,
  - Fragmentation and a lack of coordination, and
  - Increased cost to the state.
  
- In response, California included a CCS demonstration program in its 2010 Medicaid Section 1115 waiver.

# Background:

## CCS Component of §1115 Waiver

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- Options for demonstration models included:
  - Managed care plan
  - Specialty health care plan
  - Provider-based accountable care organization
  - Enhanced primary care case management
- All five demonstration applicants – San Mateo Health Plan, Alameda County, LA Care, Children’s Hospital Orange County, and Rady Children’s Hospital in San Diego – were approved in 2011, but only San Mateo has been implemented.
  - Rady’s ACO is likely to become operational in early 2015.
  - CCS programs have engaged in other attempts at innovation.

# Background:

## Need for CCS Redesign

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- The current waiver will sunset on October 31, 2015, but DHCS intends to renew it.
  - The CCS program is included as a component of the 1115 Waiver Renewal and is also engaged in a needs assessment required of all State Title V programs during 2015.
- DHCS would like to incorporate lessons learned and input from stakeholders to improve the current program and develop opportunities for innovation and improvement through a stakeholder-driven process.
  - These efforts should be coordinated with the waiver renewal, reauthorization and Title V needs assessment.

# Overview:

## CCS Redesign Goals

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1. Improve access to services, quality of care, and health outcomes for CYSHCN.
2. Eliminate fragmentation and increase efficiencies in the current health care delivery system.
  - To achieve these goals, DHCS will utilize a stakeholder process to drive the CCS program redesign.

# Overview:

## Guiding Principles of Stakeholder Process

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1. Maintain high standards for CCS providers, including paneling providers and sustaining regional provider networks.
2. Ensure continued viability of CCS program.
3. Simplify the existing funding structure.
4. Provide consumer protections for CCS clients and families currently unavailable in the fee-for-service structure.
5. Improve and facilitate care coordination.
6. Utilize a medical home model with an emphasis on family-centered care, including behavioral health and wraparound services.
7. Look for context-specific solutions that work in different localities and populations.

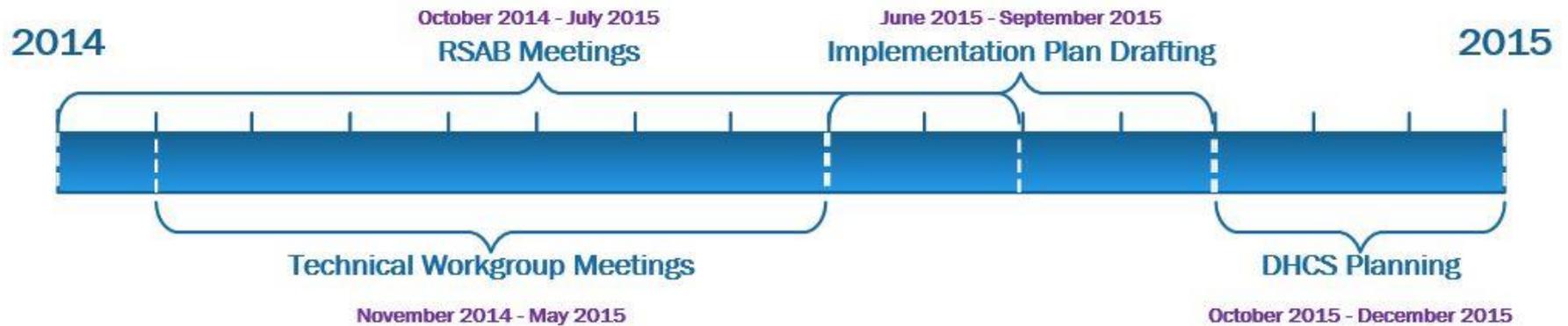
# California Children's Services Redesign

## Stakeholder Input Process & Implementation Plan

Dylan Roby, UCLA

# CCS Stakeholder Redesign Project Timeline

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# Timeline for Stakeholder Meetings

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# CCS Redesign Stakeholder Advisory Board

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- DHCS, together with UCLA, will select approximately 25 experts to serve on the CCS Redesign Stakeholder Advisory Board (RSAB).
- RSAB members will be drawn from multiple organizations, including:
  - California Children's Hospital Association
  - County CCS programs
  - Health plans
  - Family Voices of California
  - Patient representatives
  - Independent CCS providers

# Stakeholder Advisory Board Meetings

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- UCLA will organize and facilitate up to 5 meetings in Northern California (primarily in Sacramento) between October 2014 and July 2015.
- The meetings will serve to identify and discuss alternative health care delivery models to better serve CYSHCN in California.
- Topic-specific break-out sessions will be determined by RSAB members, but may include:
  - Care coordination
  - Health homes
  - Eligibility
  - Provider standards
  - Provider network maintenance and enhancement
  - Program financing/funding
- We will incorporate opportunities for the public to observe the meetings and provide comments and feedback.

# CCS Technical Workgroups

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- Smaller groups of technical experts will be organized to address key programmatic issues as determined by the RSAB, potentially including:
  - Quality of care
  - Consumer protections
  - Enrollment
  - Staffing and workforce
  - County interface
  - Health care delivery options
  - Financing
- The technical workgroup meetings will be organized and facilitated by staff from UCLA's Center for Health Policy Research, Stanford's Center for Policy, Outcomes and Prevention (CPOP), and Harbage Consulting.

# CCS Technical Workgroups

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- Proposed workgroup meeting topics include:
  - Care coordination for complex conditions: How do organizations work together and where are the gaps?
  - Care coordination among non-health care entities.
  - Workforce and staffing issues in the CCS program.
  - Specific diseases of importance for CYSHCN.
  
- Workgroup members will work closely with UCLA and Stanford to interpret data, inform evidence-based decision-making, and serve as resources to DHCS.

# Communications Strategy

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- Documentation of all RSAB and workgroup meetings.
- DHCS will develop methods to communicate with interested parties, including public announcements and e-mail updates.
- UCLA will develop a website with information for external stakeholders, DHCS staff, RSAB members, and workgroup participants.
  - The website will also be used to host webinars, solicit public comments, and post educational materials and meeting notes.
- After the RSAB process is complete, UCLA will organize and facilitate up to three CCS redesign meetings to disseminate updates, strategy, and/or vision for the redesign process.

# DHCS will Develop an Implementation Plan

UCLA, Stanford and Harbage Consulting will provide support to:

Conduct a literature review on reforming health care programs for CYSHCN.

Identify best practices and policy proposals from multiple sources.

Assist in analyzing data and research to provide expert consultation on redesign to DHCS.

Prepare educational materials and develop a set of options for DHCS and RSAB to consider.

Adapt these options according to RSAB and technical workgroup input.

Submit a finalized Implementation Plan to DHCS in November 2015.

# California Children's Services Redesign

## Q & A

### DHCS and UCLA panelists

# California Children's Services Redesign

## Next Steps and Upcoming Events

Dylan Roby, UCLA



# Information and Questions

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- For information, including a recording of this webinar, please visit:
  - [healthpolicy.ucla.edu/ccs](http://healthpolicy.ucla.edu/ccs)
- Please contact the UCLA CCS Redesign Team with questions and/or suggestions:
  - [CHPR\\_CCS@em.ucla.edu](mailto:CHPR_CCS@em.ucla.edu)
- If you want to be added to the DHCS Stakeholder email list, please visit:
  - <http://www.dhcs.ca.gov/Pages/DHCSListServ.aspx>