2011 ANNUAL REPORT of the CCHP MANAGED CARE COMMISSION to the CONTRA COSTA COUNTY BOARD OF SUPERVISORS

Chair: Joan Lautenberger

Meeting Time/Location: 3rd Wednesday of every other month, 4-5:30 p.m.

595 Center Avenue, Suite 200B, Martinez

Staff: Deboran Everist

The primary topics discussed throughout 2011 were the Health Care Reform and Waiver legislations with budgetary concerns for Provider Payment Reductions in conjunction with SPD Readiness, SPD Cultural Sensitivity Training, and Pediatric Obesity Efforts and Outcomes.

Managed Care Commission – Activities and Accomplishments for 2011

- The 2011 Annual Quality Management Program Description & Work Plan was introduced and accepted. Highlights included HEDIS data submission and the algorithm used to determine the default. Gradually CCHP's share of default assignments increased to 100% based on quality and safety net access. CCHP received an A-plus for efforts to improve the quality of care for children enrolled in the Healthy Families Program. CCHP was one of six statewide to achieve the "Superior Performance" designation in 2008, awarded by the Managed Risk Medical Insurance Board.
- Monitored status of key CCHP units throughout the year with standing reports from Quality Assurance, Customer Relations and Resource Management including Pharmacy, Authorizations / Utilization Management, Case Management, Marketing and Member Services and the Advice Nurse units.
- Updated on enrollment numbers for all the health plan products at each meeting.
- Accepted resignations
 - CCHP Commercial Subscriber Seat (retired, moved out of the area),
 - Member-at-Large Seat #9 (contracted with CCHP)
- Reappointed the three Commissioners whose terms were expiring in August. CCHP is grateful that all Commissioners wished to continue service on the MCC.
- Welcomed 2 new appointments for Member-at-Large and Commercial Subscriber seats.
- Kept apprised of health care reform through reports of meetings, testimony, and detailed analysis reports.
- Tracked the on-going success of mandated SPDs into Managed Care and the impact of the program on the county.
- Presented the monthly Grievance Report reflecting the small numbers of complaints. The complaints ranged from <1% to <5% notwithstanding the addition of approximately 1,000 mandated new members a month from the SPD population.
- Reviewed the growth trends in populations served. MediCal grew 17%, SNP grew 54%, county employees grew by 1%, Healthy Families grew by 33% and overall membership grew by 11%.

Managed Care Commission – Focus Topics

- The 2011 Annual Quality Management Program Description & Work Plan was introduced and accepted. Highlights included HEDIS data submission and the algorithm used to determine the default. Gradually CCHPs share of default assignments increased to 100% based on quality and safety net access. CCHP received an A-plus for efforts to improve the quality of care for children enrolled in the Healthy Families Program. CCHP was one of six statewide to achieve the "Superior Performance" designation in 2008, awarded by the Managed Risk Medical Insurance Board.
- CCHP prepared for the mandatory enrollment of the non-dual Medi-Cal Fee-for-Service adults (Seniors and Persons with Disabilities SPDs) into Managed Care. The enrollment began in June 2011 and continued over a 12-month period. SPD strategic planning had three components: (1) Provider Recruitment; (2) Member Orientation; and, (3) Transition Care. Databases for transitioning care were created to transmit state utilization, claims and Treatment Authorization Request (TAR) data about these members to the providers, Authorization/Utilization Department and Pharmacy Department within the Health Plan to facilitate their continuity of care. The data was also useful in identifying high risk and low risk members needing case management.
- CCHP created a SPD Cultural Sensitivity Training program. CCHP conducted two (2) community physician trainings, one in East County and one in West County in addition to all of CCHP staff. The training is on-going and available on-line. The focus of the training is sensitivity and practical items, such as: what is disability? Disability is the interaction of physical, sensory, or cognitive impairment with environmental factors, either temporary or permanent including mental health conditions.
- CCHP closed its Special Needs Program (SNP). CCHP is actively restructuring to serve this population in a different way as the state eliminated in California the entire benefit of Adult Day Health Care (ADHC) as of December 2011. This benefit will become the Community Based Adult Services (CBAS) benefit for those deemed eligible by DHCS. The Medi-Cal and Duals who received ADHC services were enrolled in Managed Care in October 2011 and CCHP received most of these patients in our county. This population will be mandated into managed care under a Duals Pilot Implementation Program by the year of 2014. CCHP staff is concentrating on continuing to provide the best services in our Culture of Caring while concurrently creating a structure to meet the challenges.
- The 2012 focus will be people enrolled in both the federal Medicare program and the state-run Medi-Cal program known as "dually eligible beneficiaries" or "dual eligibles." New coordinated care systems have been proposed by the State for development and implementation in an effort to make accessing care less confusing and more efficient for dual eligibles. CCHP will be in the forefront of this transition.