Whole-Child Model
Program Overview

For CalOptima and Health Network Staff

May 2019
Course Content

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Introduction to Whole-Child Model
Whole-Child Model

• CCS is a statewide program providing medical care and case management for children under 21 years old with certain medical conditions.
  ➢ Locally administered by Orange County Health Care Agency (OC HCA) CCS.

• The Department of Health Care Services (DHCS) is implementing WCM to integrate CCS into select Medi-Cal plans.
  ➢ CalOptima will implement WCM effective no sooner than July 1, 2019.
Whole-Child Model Goals

• Combine CCS and Medi-Cal services under one managed care plan.
• Improve coordination of services to meet the needs of the child and family.
• Maintain existing patient-provider relationships when possible.
• Retain CCS program standards.
• Improve overall health results.
• Improve access to care.
Division of WCM Responsibilities

**State**
- Program guidance, oversight and monitoring
- Provider paneling
- Claims payment for non-CalOptima children

**County of Orange**
- CCS services for non-CalOptima children
- CCS eligibility
- Medical Therapy Program (MTP)

**CalOptima**
- Member notices
- Provider contracting
- Care coordination
- Referrals and authorizations
- Claims payment
WCM Services — Eligibility Referrals and Authorizations

• Before WCM:
  ➢ Referrals to County to determine CCS eligibility.
    ▪ County works with providers to gather medical records to support eligibility determination and Service Authorization Request (SAR).

• Under WCM:
  ➢ Health networks (HN) to send CCS eligibility referrals to CalOptima.
    ▪ CalOptima will act as liaison and will forward CCS medical eligibility determination requests to the County.
    ▪ County will send approval or denial to CalOptima.
    ▪ CalOptima will provide outcome to the HNs.
  ➢ CalOptima and HN will authorize and coordinate services regardless of CCS eligibility determination.
  ➢ This process will also apply for annual CCS redetermination.

Note: Members will continue to work with OC Social Services Agency (SSA) for Medi-Cal eligibility and annual redetermination.
WCM Services — Benefits

• Before WCM, CalOptima members enrolled in CCS.
  ➢ Received services for CCS conditions from the CCS program.
    ▪ County: eligibility, SAR, coordination
    ▪ State: provider paneling, claims payment
  ➢ Received services for non-CCS conditions from CalOptima.

• Under WCM, members will receive services for both CCS and non-CCS conditions through CalOptima and its HNs.
  ➢ Existing delivery model.
  ➢ County will remain responsible for Medical Therapy Program (MTP) and CCS eligibility and redetermination.
WCM Services — Systems

• Children’s Medical Services (CMS) Net
  ➢ County uses CMS Net for CCS case management, case notes, eligibility, SARs and MTP

• Provider Electronic Data Interchange (PEDI)
  ➢ PEDI is a subset of CMS Net

• CalOptima staff via Facets
  ➢ CCS eligibility status, CCS provider panel status, claims

• HN staff via CCS supplemental eligibility file
  ➢ CCS eligibility status

• Provider office via CalOptima LINK
  ➢ CCS eligibility status
Maintenance and Transportation (M&T)

• Benefit that will continue under WCM:
  - Separate from emergency, non-emergency medical transportation (NEMT), and non-medical transportation (NMT) benefits.
  - Available when costs are a barrier to accessing CCS services and no other resource is available.
  - Provides transportation and additional supports, such as parking, tolls, lodging and food.
  - Services may extend to additional family members.
  - CalOptima will be responsible for all WCM members.
    - Limitations, criteria and authorizations apply.
  - Refer to policy GG.1347: Maintenance and Transportation.
Medical Therapy Program (MTP)

- The MTP provides occupational therapy and physical therapy to children enrolled in CCS.
  - Services are provided at one of 12 medical therapy units (MTUs) in Orange County.
  - A medical therapy conference (MTC) service is also provided.
    - Interdisciplinary Care Team (ICT) meeting to review cases.
- County will continue to be responsible for the MTP under WCM:
  - CalOptima, its providers and its delegated entities will follow established processes for referring members to the County for MTP eligibility.
  - CalOptima, its providers and its delegated entities will coordinate the administration of durable medical equipment (DME) prescribed by the MTUs.
Delivery Model
Delivery Model

• Leverage existing delivery model using HNs.
  ➢ CCS services and non-CCS services will be under a single delivery system.

• Using existing model creates several advantages.
  ➢ Maintains relationships between CCS-eligible children, their chosen HN and PCP.
  ➢ Improves clinical outcomes and health care experience for members and their families.
  ➢ Decreases inappropriate medical and administrative costs.
  ➢ Reduces administrative burden for providers.
Health Network

• Most members can keep their assigned HNs.
  ➢ A child in a HN that is not participating in WCM, will need to move to a participating HN to receive CCS services.
  ➢ Children with the following conditions will transfer to CalOptima Community Network:
    ▪ End-Stage Renal Disease (ESRD)
    ▪ Hemophilia
    ▪ Approved for transplant
    ▪ Refer to policy DD.2006: Enrollment In/Eligibility with CalOptima Direct
Primary Care Provider (PCP)

- Members can keep their PCP if their PCP is in a HN participating in WCM.
  - A member may request their CCS specialist to act as their PCP if provider agrees.
    - DD.2006b: CalOptima Community Network Member Primary Care Provider Selection/Assignment and
    - EE.1112: Health Network Eligible Member Assignment to Primary Care Provider
CCS–Paneled Providers

- DHCS requires some, but not all, provider types to meet CCS paneling requirements.
  - Paneling is a process to determine if the provider meets education, training and/or experience requirements.
  - DHCS will continue responsibility for paneling providers.
    - Physicians, surgeons and podiatrists must be CCS-paneled to provide services to members enrolled in CCS.
    - CalOptima and HNs will validate paneling as part of contracting, credentialing and authorization processes, where required.
Other Providers

• DHCS requires hospitals, including NICUs, to be approved to provide CCS services, except in emergencies.

• DHCS requires Special Care Centers (SCC) to be approved to provide CCS services.
  ➢ SCC provide comprehensive, coordinated health care to children with certain complex, physically handicapping medical conditions.

• Full list of paneled and approved providers listed on the DHCS website.
WCM Model of Care
WCM Model of Care

• CalOptima and its HNs will follow its structured, time-tested approach to deliver coordinated, individualized care.
  ➢ Family and various members of the health care team collaborate on this “road map” to optimal health for each member enrolled in WCM.

• An integrated delivery system that supports:
  ➢ Care management and coordination.

• Personal Care Coordinators (PCC).
  ➢ CalOptima and HNs have a central role.
WCM Model of Care Process: Summary

- Health Needs Assessment (HNA) completed for WCM member by CalOptima’s PCC or registered nurse.
- Members are identified for one of the following care management levels:
  - Basic
  - Care Coordination
  - Complex
- A case manager reviews the HNA, gathers additional information as needed and prepares an Individualized Care Plan (ICP).
- An ICP for care coordination or complex case management members is created by an interdisciplinary care team.
Interdisciplinary Care Team (ICT)

- The ICT is formed based upon the member and family’s needs. The care team may include:

<table>
<thead>
<tr>
<th>Core Team Members</th>
<th>Ad Hoc Team Members</th>
</tr>
</thead>
<tbody>
<tr>
<td>Member, Parent or Guardian</td>
<td>Social Worker</td>
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<tr>
<td>Personal Care Coordinator</td>
<td>Behavioral Health</td>
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<tr>
<td>Medical Case Manager</td>
<td>Special Care Center Staff</td>
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<tr>
<td>PCP</td>
<td>Medical Therapy Unit Therapist</td>
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<tr>
<td>Specialist(s)</td>
<td>Disease Manager/Health Educator</td>
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<td>Pharmacist</td>
<td>Discharge Planner</td>
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<td>HN Medical Director</td>
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- The ICT is coordinated by the member’s HN.
Aging Out — Transitions of Care

• CalOptima is committed to transition planning for WCM members, as needed.
  ➢ Planning will begin as early as age 14.
  ➢ Includes identification of ongoing needs and resources, as well as future considerations.
  ➢ PCPs, specialists, SCCs and MTP are vital in this process.
  ➢ Information about the age-out process will be provided to members and their families as the transition approaches.

• Transitions may also occur for other reasons.
  ➢ Undocumented status (age 19).
  ➢ Loss of Medi-Cal eligibility.
  ➢ Need to transition to an adult provider prior to aging out of WCM.
  ➢ CalOptima/HN will coordinate needs for these transitions, as needed.
Guardianship/Conservatorship

- Individuals appointed by the court to make certain decisions on behalf of others who are unable to do so.
  - Guardians — health care and other non-monetary decisions.
  - Conservators — financial decisions.

- Process
  - At age 17, a member’s guardian will receive a notice from CalOptima encouraging them to discuss guardianship/conservatorship options with their child receiving CCS services.
  - A case manager will provide a referral for services to the member and their family when the member turns 17.
  - The member or family will follow CalOptima’s procedure to document guardianship/conservatorship, if applicable.
    - Refer to policy HH.3011: Use and Disclosure of PHI for Treatment, Payment, and Health Care Operations
Inter-County Transfers

• Definition:
  ➢ Transition of care to or from another county.

• Goal:
  ➢ Allow for a seamless transition of care and records.

• Process:
  ➢ OC and the other county’s CCS program will be responsible for transitioning members between counties.
  ➢ CalOptima will work with the County by providing or receiving the necessary medical information for the transfer.
CCS Transition to WCM
WCM Transition Notices and Events

• CalOptima members enrolled in CCS as of February 25, 2019, will receive two written notices and phone calls about the transition.
  - 90-day and 60-day prior notices sent by CalOptima.
    - 60-day notice will include a CalOptima member guide with information about the change
  - CalOptima will conduct a call campaign shortly after members receive the 60-day notice.

• Family-oriented informational events were hosted by CalOptima in October 2018.

• Additional family-oriented events will be held after the transition, as appropriate.
Health Needs Assessment (HNA)

• Members transitioning from CCS to WCM:
  ➢ Will be risk stratified
  ➢ Contacted to complete a HNA by a CalOptima PCC
Continuity of Care (CoC)

• CoC will be provided to transitioning members to ensure care is not disrupted.
• Under WCM, members can request to continue receiving the following services, if certain criteria are met:
  ➢ Member has existing relationship with the provider.
  ➢ Provider accepts CalOptima’s or HN’s reimbursement rate or the applicable Medi-Cal or CCS fee-for-service rate, whichever is higher, unless otherwise agreed.
  ➢ Provider has not quality and credentialing issues
Continuity of Care (CoC) (cont.)

• CoC applies to:
  ➢ CCS providers for CCS services for up to 12 months
  ➢ Specialized or customized durable medical equipment (DME) provider for up to 12 months.
    ▪ May be extended if still under warranty and medically necessary.
  ➢ Prescribed drugs until no longer medically necessary.
  ➢ County Public Health Nurse (if available).

• For CCS member newly enrolled in CalOptima, standard Medi-Cal CoC applies, as appropriate.
CoC Extension

• Members have the right to request an extension of the 12-month CoC period once it has ended.
• If CalOptima denies this request, the member has the right to appeal through the State Fair Hearing process.
WCM Claims

- CalOptima or the HN will pay claims for transitioning WCM members for up to 6 months after WCM implementation:
  - Member is CCS-eligible
  - SAR is active
  - Authorization does not already exist for approved service
WCM Authorizations

• Providers will need to submit new authorizations for CCS services.

• CalOptima and HNs will establish authorizations, where required.
  ➢ Members with appointments or who anticipate needing supplies or medication soon after the transition will be contacted first.

• Refer to CalOptima and HN for services that require authorizations.
Resources
Member Resources

• Customer Service
  ➢ 1-714-246-8500
  1-888-587-8088 (toll-free)

• Resources at www.caloptima.org
  ➢ Provider Directory including CCS-paneled provider-specific search
  ➢ List of Family Empowerment Centers and Family Resource Centers
  ➢ WCM Member FAQ

• Whole-Child Model Family Advisory Committee
  ➢ Family members are invited to attend
  ➢ https://www.caloptima.org/en/AboutUs/BoardandAdvisoryCommittees/WCMFAC.aspx
Other Resources

• California Welfare and Institutions Code 14094.4–.20
• DHCS All Plan Letter 18-023: Whole Child Model Program
• DHCS CCS Guidance
  - [http://www.dhcs.ca.gov/services/ccs](http://www.dhcs.ca.gov/services/ccs)
    - Publications (Manuals, Numbered/Information/HRIF letters)
    - Directories (CCS providers, Special Care Centers, NICU)
    - Becoming a CCS Provider
• CalOptima WCM webpage
  - CalOptima WCM Provider FAQ
Acronyms

- CCS — California Children’s Services
- CMS Net — Children’s Medical Services Net
- CoC — Continuity of Care
- DHCS — Department of Health Care Services
- DME — Durable Medical Equipment
- HNA — Health Needs Assessment
- HN — Health Network
- HRIF — High Risk Infant Follow-Up
- ICP — Individualized Care Plan
- ICT — Interdisciplinary Care Team
- M&T — Maintenance and Transportation
- MTC — Medical Therapy Conference
- MTP — Medical Therapy Program
- MTU — Medical Therapy Unit
- NEMT — Non-Emergency Medical Transportation
- NICU — Neonatal Intensive Care Unit
- NMT — Non-Medical Transportation
- OC HCA — Orange County Health Care Agency
- PCP — Primary Care Provider
- PEDI — Provider Electronic Data Interchange
- SAR — Service Authorization Request
- SCC — Special Care Centers
- WCM — Whole-Child Model
- WCM FAC — Whole-Child Model Family Advisory Committee
CalOptima’s Mission

To provide members with access to quality health care services delivered in a cost-effective and compassionate manner