AGENDA NO.

November 07, 2023

MOTION BY SUPERVISOR JANICE HAHN

Maximizing CalAIM's Enhanced Care Management Benefit for Children and Youth Involved in Child Welfare

The California Department of Health Care Services (DHCS) launched California Advancing and Innovating Medi-Cal (CalAIM) to improve the quality of life and health outcomes of managed care Medi-Cal members by implementing broad delivery system, program, and payment reform across the Medi-Cal program. CalAIM offers major changes, and thus new opportunities, for utilizing Medi-Cal to fund a continuum of services to benefit children and families at risk of involvement or already involved with the child-welfare system. A key feature of CalAIM is the Enhanced Care Management (ECM) program, a comprehensive care management benefit to address clinical and non-clinical needs for the highest-need members enrolled in Medi-Cal managed care plans (MCPs). The ECM launch includes stepwise implementation for "populations of focus" from 2022 through 2024. ECM for Children and Youth, including the child welfare population, launched on July 1, 2023. MCPs also have the option to provide Community Supports, which can address members' social drivers of health and help them avoid higher, costlier levels of care. Examples of community supports that may be applicable to the child welfare population include housing supports, medically-tailored meals, asthma remediation, and others.

According to DHCS, ECM and Community Supports are foundational parts of the

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transformation of Medi-Cal to focus on breaking down the traditional walls of health care, extending beyond hospitals and health care settings into communities; introducing a better way to coordinated care; and providing high-need members with in-person care management where they live. Moreover, the intent of ECM for Children and Youth is to serve as “air traffic control,” providing whole-child care management above and beyond what is provided by existing programs.

There are multiple complexities associated with implementation of the ECM benefit for eligible children and youth in the child welfare population of focus. These include, but are not limited to, lack of experience and tested models of care, system coordination with existing services, and limited and fragmented data on the eligible population. While the state and Los Angeles County specifically have experience in delivering whole-person care and health home programs for the adult population, we both lack experience delivering a whole-child, interdisciplinary approach to integrated care for children and their families. Collaboration and planning with multiple system partners - including the Department of Children and Family Services (DCFS), Department of Health Services (DHS), Department of Mental Health (DMH), Department of Public Health (DPH), and the MCPs - are necessary to support effective and responsive services to meet the needs of child welfare-involved children, youth, and their caregivers. In addition, child welfare-involved children and youth often engage with multiple systems of care, including specialty mental health services, Regional Centers, California Children’s Services, and services by Child Welfare Public Health Nurses. ECM requires coordination across these

systems to ensure that they are complimentary and not duplicative of existing systems of care. Systems partners must also ensure that they are not overburdening their contracted community-based providers - who oftentimes hold multiple contracts for children's services - and most importantly children and families, with multiple assessments, case plans, and other program requirements. Finally, the eligibility of the child welfare population for ECM is broad, spanning the continuum of child welfare system involvement and those with limited needs and engagement to those with multiple medical, behavioral health, and social challenges. It will be important to identify and characterize the eligible population to ensure that outreach occurs to those with the highest potential to engage in and benefit from ECM services. Moreover, and quite significantly, children and youth in foster care - one of the child welfare subpopulations eligible for ECM - are traditionally enrolled in Medi-Cal fee-for-service, rather than in managed care Medi-Cal, which leaves them ineligible for the ECM benefit. Maximizing ECM access for children and youth in foster care would necessarily involve an overhaul of Medi-Cal enrollment, which will take time and careful planning.

For successful implementation of ECM for the child welfare population, we must ensure that systems coordination and planning is occurring across DCFS, its health and social service partners, County departments, and MCPs. The Office of Child Protection (OCP) has convened these systems partners over the last year to prepare for ECM implementation for the child welfare population. At this stage in the planning and implementation process, the OCP and the planning group will benefit from subject matter expertise in CalAIM implementation, MCPs, and the

interaction of healthcare systems with child welfare. Health Management Associates (HMA) has deep expertise in CalAIM policy, operations, and implementation, and can provide this support. HMA also currently serves as a technical assistance vendor for DHCS on CalAIM and has provided consulting and technical assistance to numerous County departments on CalAIM. Further, HMA currently facilitates a MCP/County collaborative on CalAIM implementation for Justice-Involved populations, and so has critical knowledge and relationships with key MCP and County partners.

I, THEREFORE, MOVE that the Board of Supervisors direct the Executive Officer, Board of Supervisors, or her designee, to:

1) Delegate authority to the Executive Officer, Board of Supervisors, or her designee, to execute a sole source contract with Health Management Associates for a term of one (1) year to provide technical assistance to the Office of Child Protection in the planning and implementation of ECM for the child welfare population of focus in LA County in the context of and in alignment with other newly available sources of funding for child and family support. The OCP will develop a scope of work and clear deliverables for HMA, in collaboration with DCFS, that will include technical assistance to DCFS in the following areas:

a) Identification and assessment of the ECM eligible child welfare population, including recommendations related to transition to managed care Medi-Cal to improve access;

b) Facilitation of a joint MCP/County collaborative on ECM for child welfare that includes, but is not limited to, CalAIM/ECM subject matter experts from OCP, DCFS, MCPs,

DMH, DHS, and DPH;

c) Creation of a workplan for launch and ongoing implementation of ECM within the child welfare population; and

d) ECM implementation support to DCFS, MCPs, and ECM-contracted providers; 2) Delegate authority to the Executive Officer, Board of Supervisors, or her designee, to exercise options to extend the term of the contract for up to two (2) additional one (1) year periods by written notification to HMA, contingent upon:

a) approval by County Counsel; and

b) the Executive Officer, Board of Supervisors, or her designee, notifies the Board and the Chief Executive Officer (CEO) in writing in advance of such execution;

3) Delegate authority to the Executive Officer, Board of Supervisors, or her designee, to negotiate and execute amendments to the contract with HMA for changes that pertain to the general project and tasks/deliverables needed to meet the County's goals around ECM implementation for child welfare; terminate for convenience when such action is deemed to be in the County's best interest; and/or revise the terms and conditions to align with Board policy changes and directives. The approval of County Counsel will be obtained for any of the situations prior to executing any amendments, and the Executive Officer, or her designee, will notify the Board and CEO in writing in advance of the execution of such amendment;

4) Delegate authority to the Executive Officer of the Board of Supervisors, or her designee, to authorize non-material changes to the contract, pursuant to a change notice, for general County

updates;

5) Approve a Fiscal Year 2023-24 appropriation adjustment to transfer $160,000 from the Provisional Financing Uses budget unit designated for Children and Families/Board Priorities to the Board of Supervisors - Executive Office operating budget to provide funding to the OCP for its contract with HMA.

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BOARD OF SUPERVISORS

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November 07, 2023

COUNTY OF LOS ANGELES

REQUEST FOR APPROPRIATION ADJUSTMENT

DEPARTMENT OF CHIEF EXECUTIVE OFFICER

AUDITOR-CONTROLLER:

THE FOLLOWING APPROPRIATION ADJUSTMENT IS DEEMED NECESSARY BY THIS DEPARTMENT. PLEASE CONFIRM THE ACCOUNTING ENTRIES AND AVAILABLE BALANCES AND FORWARD TO THE CHIEF EXECUTIVE OFFICER FOR HER RECOMMENDATION OR ACTION.

ADJUSTMENT REQUESTED AND REASONS THEREFORE
FY 2023-24
3 - VOTES

SOURCES		USES	
PFU-CHILDREN AND FAMILY SERVICES		**BOARD OF SUPERVISORS**	
A01-CB-2000-13749-13759		A01-BS-2000-10010	
SERVICES & SUPPLIES		SERVICES & SUPPLIES	
DECREASE APPROPRIATION	**160,000**	**INCREASE APPROPRIATION**	**160,000**
SOURCES TOTAL	**$ 160,000**	**USES TOTAL**	**$ 160,000**

JUSTIFICATION

Reflects the transfer of funding from the Provisional Financing Uses budget unit to the Board of Supervisors' operating budget to fund consultant services for the Enhanced Care Management (ECM) program.

ADOPTED
BOARD OF SUPERVISORS
COUNTY OF LOS ANGELES
#25 November 7, 2023

Anthony Baker Digitally signed by Anthony Baker Date: 2023.10.26 11:57:32 -07'00'

AUTHORIZED SIGNATURE ANTHONY BAKER, MANAGER, CEO

BOARD OF SUPERVISOR'S APPROVAL (AS REQUESTED/REVISED)

CELIA ZAVALA
EXECUTIVE OFFICER

REFERRED TO THE CHIEF EXECUTIVE OFFICER FOR---

☐ ACTION

☑ RECOMMENDATION

AUDITOR-CONTROLLER

BY Andrea Turner Digitally signed by Andrea Turner Date: 2023.10.26 13:23:09 -07'00'

DATE 10/26/23

B.A. NO. 044

☑ APPROVED AS REQUESTED

☐ APPROVED AS REVISED

CHIEF EXECUTIVE OFFICER

BY Yolanda Reyes Digitally signed by Yolanda Reyes Date: 2023.10.26 13:47:07 -07'00'

DATE 10/26/23