



PATH – Collaborative Planning & Implementation (CPI)

Northwest Collaborative Planning Meeting

July 25, 2023



POPULATION HEALTH
INNOVATION LAB

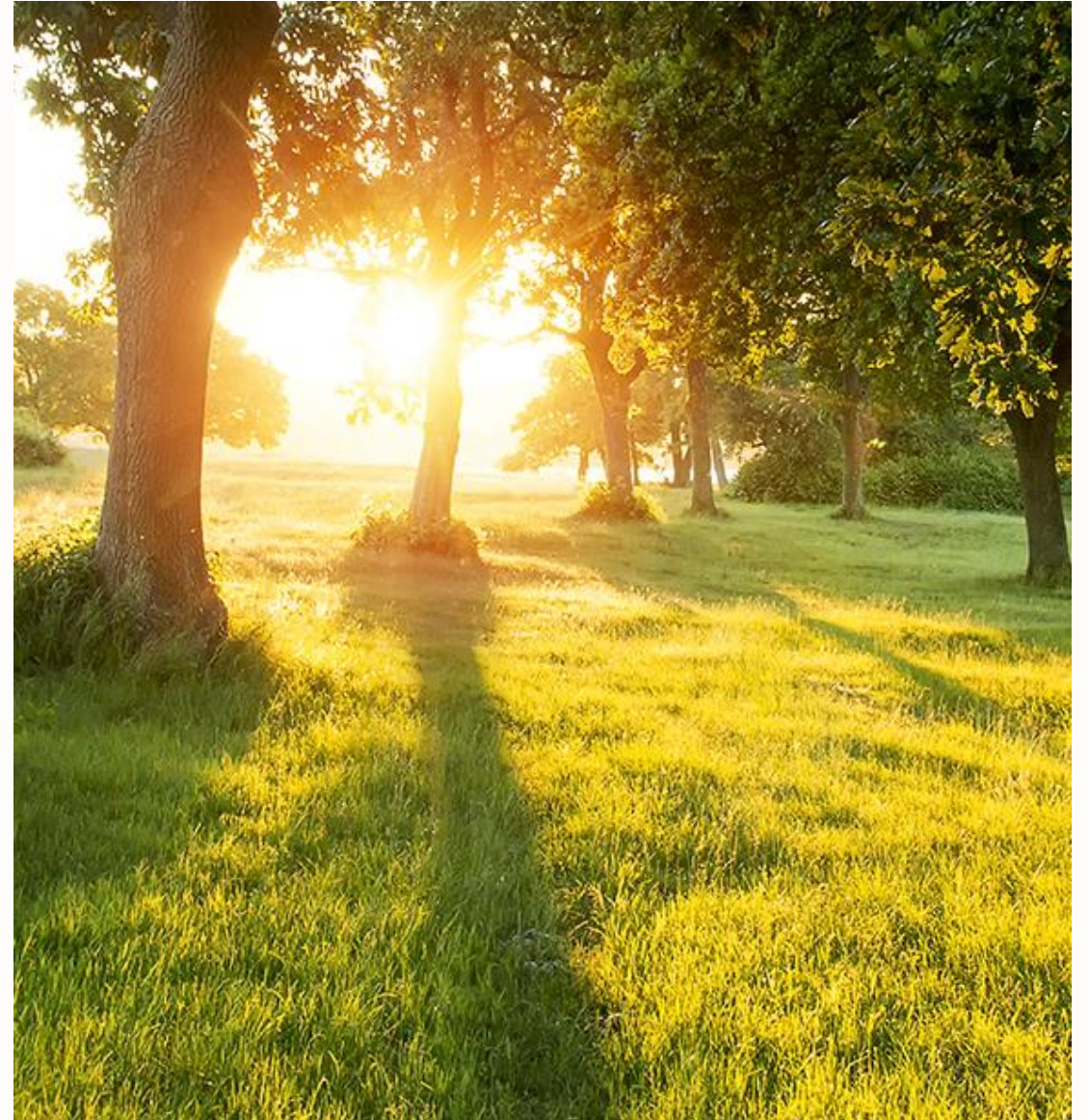
A Program of the PUBLIC HEALTH INSTITUTE



Check-In

What is something you learned recently about ECM / CS that you are excited about?

Do you have any “wins” you’d like to share?





Hybrid Housekeeping

Virtual Attendees:

- Feel free to use the chat feature and hand raise function
- Please mute your microphone while others are sharing
- We will conclude the virtual portion of the meeting around 12:30 pm
- PHIL representatives will be available for you until 1:00pm

In-person Attendees:

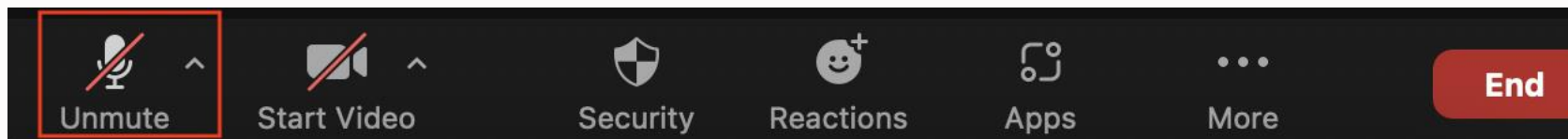
- Restroom location
- Exits
- Lunch will start around 12:30 pm



This event is being recorded.

The slides and recording will be available after the event at pophealthinnovationlab.org/events

Please mute your microphone and video during the presentation.





PATH – Collaborative Planning & Implementation (CPI)

Northwest Collaborative Planning Meeting

July 25, 2023



POPULATION HEALTH
INNOVATION LAB

A Program of the PUBLIC HEALTH INSTITUTE



CPI Participant Eligibility

The following entities are eligible and strongly encouraged to participate:

- Community Based Organization (CBO)
- County, City, or Local Government Agency
- Federally Qualified Health Center (FQHC)
- Managed Care Plans (MCPs)
- Medi-Cal Tribal and Designee of Indian Health Program
- Providers (including but not limited to hospitals and provider organizations)

We kindly ask vendors and sales people to remove themselves from the convenings and the collaborative. These regional convenings aim to be a safe and intimate place to resolve local implementation challenges.



Land Acknowledgment

The Population Health Innovation Lab team respectfully acknowledges that we live and operate on the unceded land of Indigenous peoples throughout the U.S.

We acknowledge the land and country we are on today as the traditional and treaty territory of the Native American, Alaska Native, and Tribal nations who have lived here and cared for the Land since time immemorial. We further acknowledge the role Native American, Alaska Native, and Tribal nations have today in taking care of these lands, as well as the sacrifices they have endured to survive to this day.



Introductions



Agenda

11:00 – Welcome and Introductions

11:15 – Partnership Healthplan of California Updates

11:25 – Glossary Offering

11:35 – Interactive Conversation with Local Leaders

12:20 – Next Steps & Upcoming events

12:30 – **End of virtual session** (with opportunity to connect online with PHIL representatives until 1:00pm) | **Lunch for in-person attendees**

12:50 – Action Based Working Sessions with local leaders

1:30 – **Stretch Break!**

1:35 – Lessons Learned

1:50 – Evaluation and End



Objectives

1. Build relationships and increase awareness of partners
2. Learn about Partnership Healthplan's improvements and resources.
3. Converse with local leaders to improve understanding of data exchange systems and creative solutions.
4. Engage in discussion to explore data exchange and coordinated care efforts
5. Help shape the future activities and direction of our CPI collaborative



CPI Foundational Slides



CPI Regions

➔ Northwest Region

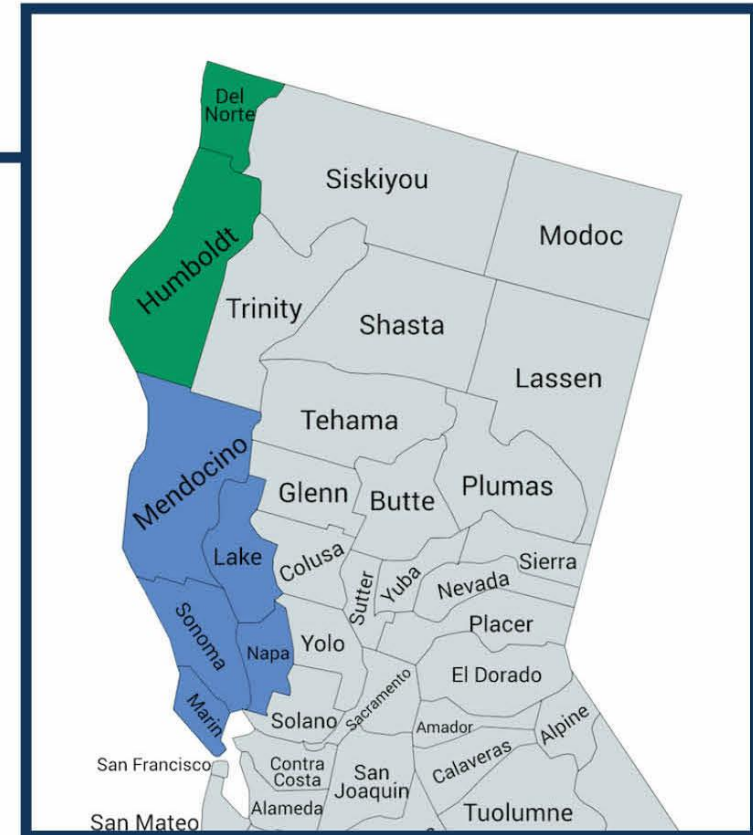
- Del Norte County
- Humboldt County

Southwest Region

- Mendocino County
- Sonoma County
- Marin County
- Lake County
- Napa County

Region Counties Supported by PHIL

-  Northwest
-  Southwest





Collaborative Planning & Implementation (CPI) Initiative

Regional collaborative planning groups will work together to:

- Identify needs and gaps in the current ECM / Community Supports
- Identify and resolve topical implementation issues
- Supporting Gap Filling plan efforts while avoiding duplication

CPI facilitator responsibility for this meeting:

- Facilitate comprehensive programming that allow for robust collaboration amongst participants.



Partnership Healthplan of California— Update on Process Improvements



***California
Advancing &
Innovating Medi-Cal
(CalAIM),
Community
Supports (CS) &
Enhanced Care
Management (ECM)***





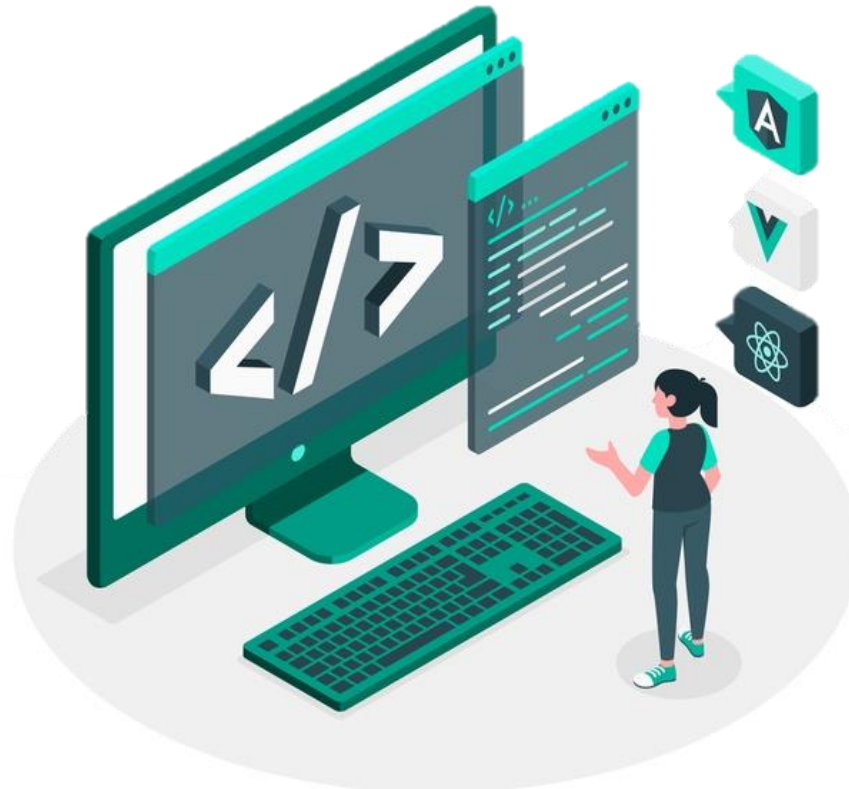
- Provider Billing
- Billing/Authorization Provider Tools
- Collective Medical/Point Click Care
- DHCS Policy Guides
- PHC Roundtables
- Resources

- Be sure you are billing PHC for CS & ECM services
- PHC has conducted an ECM 4th Quarter analysis of and determined only 10 providers have submitted claims during the quarter



Billing/Authorization Provider Tools

- PHC is finalizing ECM/CS billing and authorization provider tools.
- These are targeted to be released in early August. We will share with all CPIs, provider network, webpages, and via email blast.



- PHC provides Collective Medical/Point Click Care access to all ECM providers to have visibility into hospitalization utilization (ER/inpatient stays)
- We are working to enhance the platform to allow every ECM provider access to see all potential PHC ECM members in the portal
- PHC is having weekly meetings with the vendor to ensure implementation

- DHCS has release the updated ECM and CS policies guides for Managed Care Plans
- PHC is currently reviewing to make programmatic and procedure changes.
- More information and communications to providers, CPI, webpage, email blast, policies forthcoming.



- Please join us for our provider roundtables for PHC program technical assistance discussions and topics:
 - **ECM** next 7/20 12-1 and 8/17 9-10
 - **CS** next 7/27 and 9/21 9-10
 - (Note: Registration not required for CS)



- Additional Provider Resource Links:
 - [ECM](#)
 - [Previous Recorded Trainings](#)
 - [On-Demand Billing Training](#)
 - [CS](#)
 - [On-Demand Billing Training](#)

Questions

Please reach out to:
CalAIM@partnershiphp.org



- **PHC CalAIM Webpage:** <http://www.partnershiphp.org/Community/Pages/CalAIM.aspx>
- **ECM Populations of Focus:**
http://www.partnershiphp.org/Community/Documents/CalAIM%20Webpage/ECM%20Documents/ECM%20Time%20Frames/ECM_Timeframes_Final.pdf
- **PHC ECM Referral Form:**
www.partnershiphp.org/Community/Documents/CalAIM%20Webpage/ECM%20Documents/ECM%20Referral%20Form.pdf
- **PHC CS Referral Form:**
<http://www.partnershiphp.org/Community/Documents/CalAIM%20Webpage/Community%20Support%20Documents/CS%20Referral%20Form.pdf>
- **CITED Funding**-DHCS awarded \$119 million for round 1. Round #3 coming July 2023!
<https://www.ca-path.com/cited>



Glossary Offering



An Interactive Conversation with Local Leaders

Hear from local leaders to understand Structures and Systems' Landscapes:

- Data sharing policies
- Information exchange opportunities
- Care coordination efforts



Data Exchange Framework



The Vision for Data Exchange in California

Once implemented across California, the Data Exchange Framework (DxF) will create new connections and efficiencies between health and social services providers, improving whole-person care.

The DxF is California's first-ever statewide Data Sharing Agreement (DSA) that requires the secure and appropriate exchange of health and human services information to enable providers to work together and improve an individual's health and wellbeing.



[Data Exchange Framework Information is Power Webinar Series](#)



What Is the Data Exchange Framework (DxF)?

Access information

Keep data private
and secure

Statewide data
sharing agreement

Accelerate and
expand the
exchange of health
information

Informed by public
and experts



DxF is NOT...

- A system you can log onto
- The single solution to all data sharing challenges
- A new technology
- A centralized data repository



DxF Grant Program

CDII will administer \$50 million in funding over two years to support implementation of the DxF.

Key Program Goals



Support DxF implementation among DxF signatories in under-resourced geographies and/or serving historically marginalized populations and underserved communities



Address significant barriers to DxF implementation (operational, technical, or other) for DxF signatories



Align across other grant programs and promote activities ineligible for funding by other grant programs (past or present)



DxF Grant Types

Educational and Outreach Activities (*\$3 Million*)



DxF Educational Initiative Grants

Educational Initiative Grants **provided funding to eight associations and their partners** for educational initiatives designed to provide information about the Data Exchange Framework and the Data Sharing Agreement to signatories.

Supporting DSA Signatories (*Up to \$47 Million*)



DSA Signatory Grants (*Forthcoming*)

The DSA Signatory Grants are **designed to provide direct support to Signatories** to subsidize their implementation efforts. This grant will fund activities for Signatories to meet their DSA requirements



Introducing PCG, the DSA Signatory Grants TPA



CDII has contracted with **Public Consulting Group (PCG)** to be the Third-Party Grant Administrator for the DSA Signatory Grants.

Working closely with CDII, PCG will:

- Review applications and recommend applications for approval to CDII
- Serve as the fiscal administrator
- Troubleshoot issues as they arise
- Collect and review progress reports
- Report on best practices and disbursement of funds



Introducing CAHIE, QHIO Onboarding Grant Support



CDII has contracted with the **California Association of Health Information Exchanges (CAHIE)** to provide application writing support for organizations interested in applying for the QHIO Onboarding Grant.

CAHIE will provide end-to-end Application support and submission for all QHIO Onboarding Grant Applications, including:

- Holding one-on-one enrollment calls with applicants to discuss grant specifics
- Reviewing applicant's grant eligibility & funding qualifications
- Drafting and submitting applications



Who qualifies for DSA Signatory Grant funding?

The following criteria apply to both the QHIO Onboarding or TA Grants

(1) Must be a DSA Signatory

A **Signatory** is defined as an organization that has signed the Data Sharing Agreement. Organizations may sign the DSA directly, or a “parent organization” may sign the DSA on their behalf as a “subordinate organization.”

(2) Must have an HIT Need

Signatory must demonstrate that they require technical support and capabilities to assist in meeting DSA requirements.

For Short Expedited Rounds (1&2), Starting in May 2023

For the first two rounds only: To help meet DxF implementation deadlines, Signatories in Applications for the first two rounds of DSA Signatory Grants are limited to specific organization types, listed below:

- General acute care hospitals;
- Physician organizations and medical groups;
- Skilled nursing facilities;
- Health care services plans and disability insurers;
- Clinical laboratories; and
- Acute psychiatric hospitals.

For Round 3+, Starting in July 2023

Round 3 opens the grant opportunity to most Signatories who demonstrate an HIT need, including voluntary signatories of the DSA.



Questions?



DHCS Third Party Administrator (TPA) Updates

- [ECM Policy Guide](#) and [Community Supports Policy Guide](#) updated July 18
- Visit [Enhanced Care Management and Community Supports \(ILOS\)](#) landing page for upcoming and past webinars such as:
 - CalAIM Webinar: Forging New Managed Care Plan Partnerships with Counties and CBOs to Launch ECM for Children and Youth - *June 23, 2023*
- The second round of the California Health & Human Services Agency's Center for Data Insights and Innovation's DxF Signatory Grants is open and accepting applications through September 1, 2023.
 - Learn more here: [Data Exchange Framework - CDII \(ca.gov\)](#)
 - [DSA Signatory Grants Guidance Document](#)
- To learn more about the CPI Initiative, review this new FAQ document shared by our TPA
 - [CA PATH CPI Public Facing FAQ](#) (July 12, 2023)
 - [Collaborative Planning and Implementation Report June 2023](#)



Next Steps & Upcoming Events:

- Virtual meeting evaluation
- For the next 30 minutes: Stefani Hartsfield will be available for virtual participants to answer questions & collect requests for TA, resources
- Next CPI regional meeting is **virtual**:
 - Northwest Region: Tuesday, August 22 from 1:00-2:30 PM
 - Southwest Region: Wednesday, August 23 from 1:00- 2:30 PM
- Check out the PATH Collaborative Planning and Implementation page on the PHIL website:
<https://pophealthinnovationlab.org/projects/path/>



Opportunity for Virtual Participants

*Ask questions and request TA or
resources with Stefani Hartsfield*



POPULATION HEALTH INNOVATION LAB

A Program of the PUBLIC HEALTH INSTITUTE

Learn more about PHIL at pophealthinnovationlab.org

Follow Us!

Twitter: @PHInnovationLab

LinkedIn: Population Health Innovation Lab



Lunch Break!

Reconvene at 12:50 pm



Group conversation: Sharing Best Practices

1. In which forums are CPI participants sharing best practices with other providers?
2. Does the NW need a forum to share best practices that doesn't currently exist?
3. If so, what is a helpful space that does not add burden for providers (e.g., wiki page? CPI convening time? Another locally-hosted meeting? Etc.)?



Next Steps for our CPI Collaborative



CPI Convening Evaluation



<https://bit.ly/3K9bOwM>



Thank You!

Feel free to contact our CPI team:

Rachel McCullough-Sanden

Program Manager

rmcculloughsanden@phi.org

Jessica Sanchez

Project Coordinator

jsanchez2@phi.org

Kathryn Stewart

Director of Learning and Action

kastewart@phi.org

Sue Grinnell

Director of PHIL

sgrinnell@phi.org

Stephanie Bultema

Director of MERLIN

sbultema@phi.org

Stefani Hartsfield

Consultant

stefani@hartsfieldhealth.com

Thank you!



Appendix





CPI Foundational Slides



CPI Regions

Northwest Region

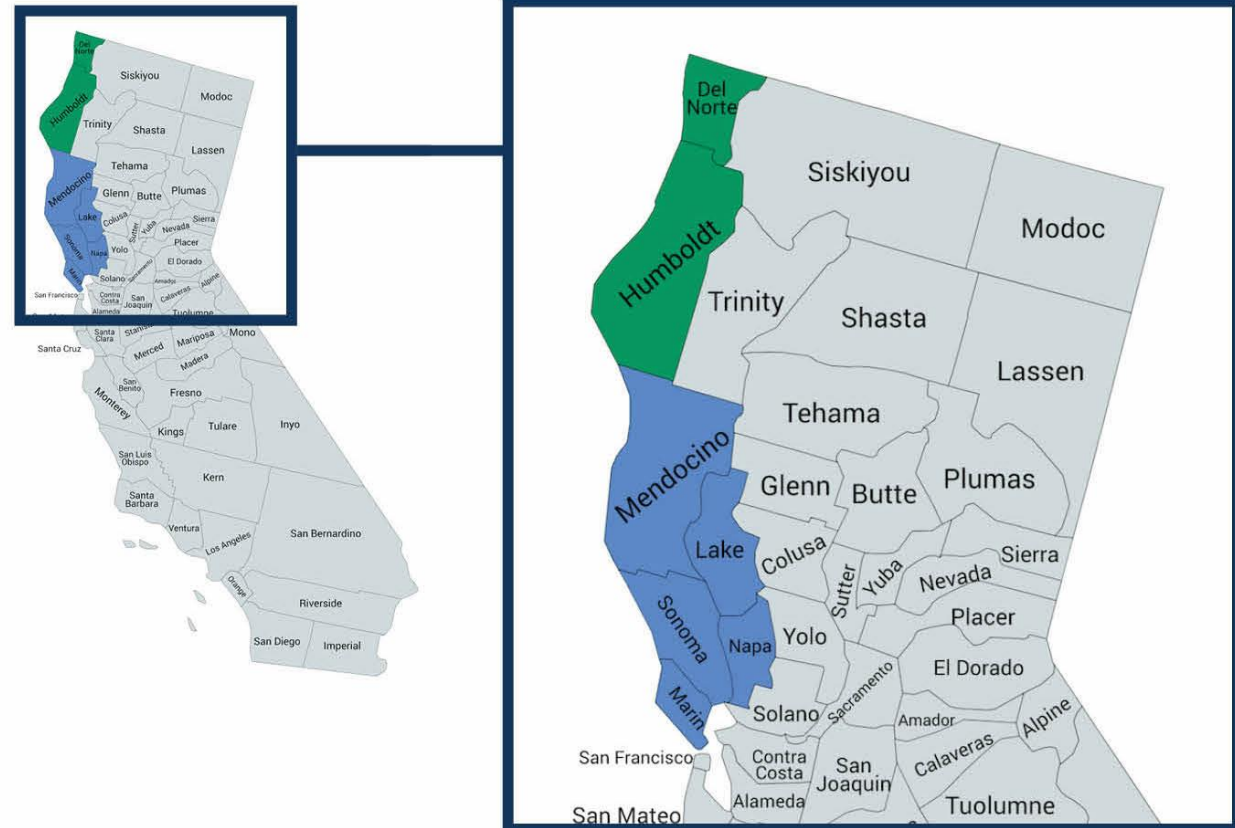
- Del Norte County
- Humboldt County

Southwest Region

- Mendocino County
- Sonoma County
- Marin County
- Lake County
- Napa County

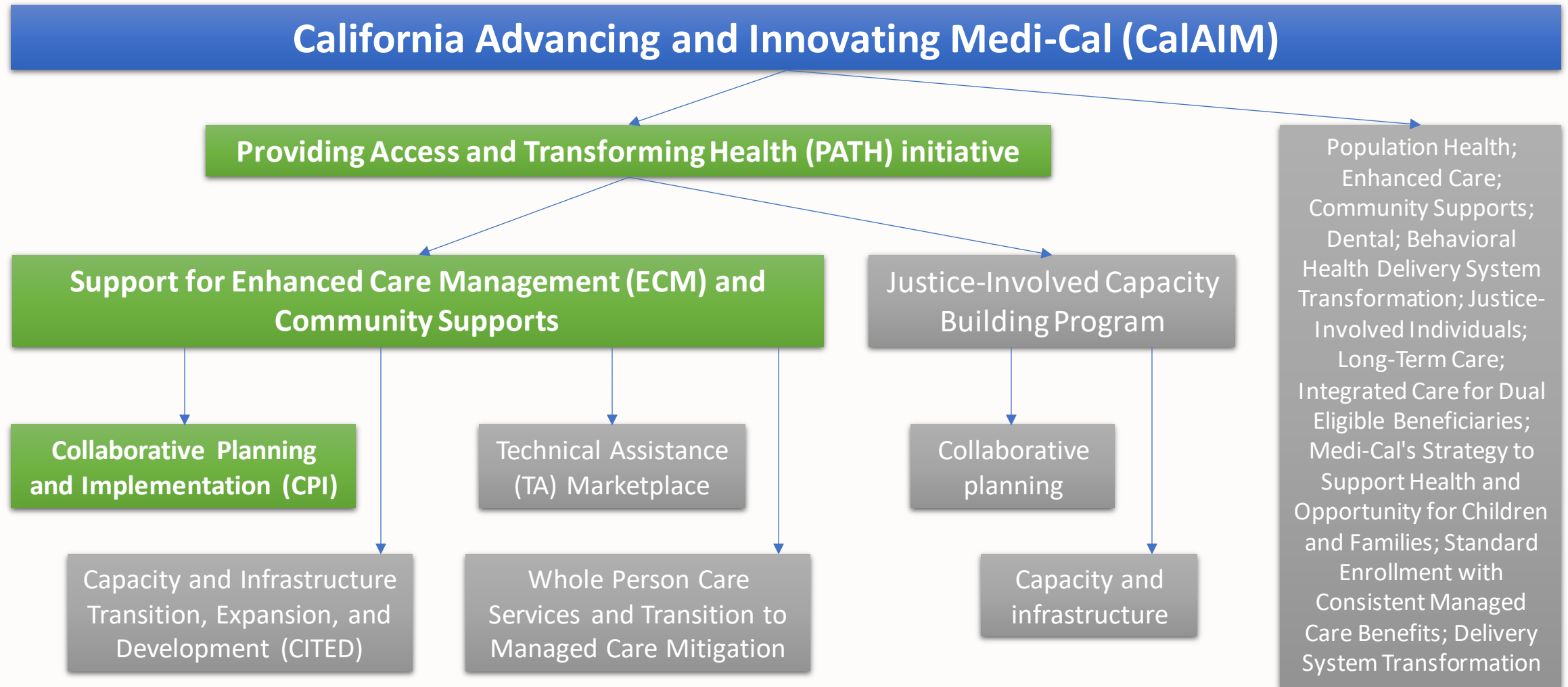
Region Counties Supported by PHIL

-  Northwest
-  Southwest





CaAIM → PATH → CPI





Goal / Aim Statement

The PATH Collaborative Planning and Implementation (CPI) initiative will support the advancement of CPI participants at least one step along the Readiness Roadmap towards successfully implementing Enhanced Care Management (ECM) and Community Supports services within the Medi-Cal delivery system through collaborative solutions that expand CPI participants' capacity and infrastructure needed to move towards an equitable, coordinated, and accessible Medi-Cal system by Dec 31, 2023.



Readiness Roadmap

WHERE IS OUR ORGANIZATION ON THE READINESS ROADMAP?

2. We're exploring the contracting process.

What are the steps to becoming an ECM or CS provider? How can I be sure my organization can manage?



4. We have a contract!

We are finalizing workplans and internal processes.



6. We are making it work, but...

We are delivering services and have an internal process, but are having issues with referrals, reimbursements, or other workflow complications.



1. What are ECM & CS?

My colleagues are talking about these services. What are they? We are learning more about them.



3. We have started to work on the contract!

Our team began the application. BUT... we may be experiencing roadblocks or challenges.



5. We are testing the service delivery and billing system.

Eligibility confirmation, service delivery, claim submission and payment processes are ready to test on a small client group.



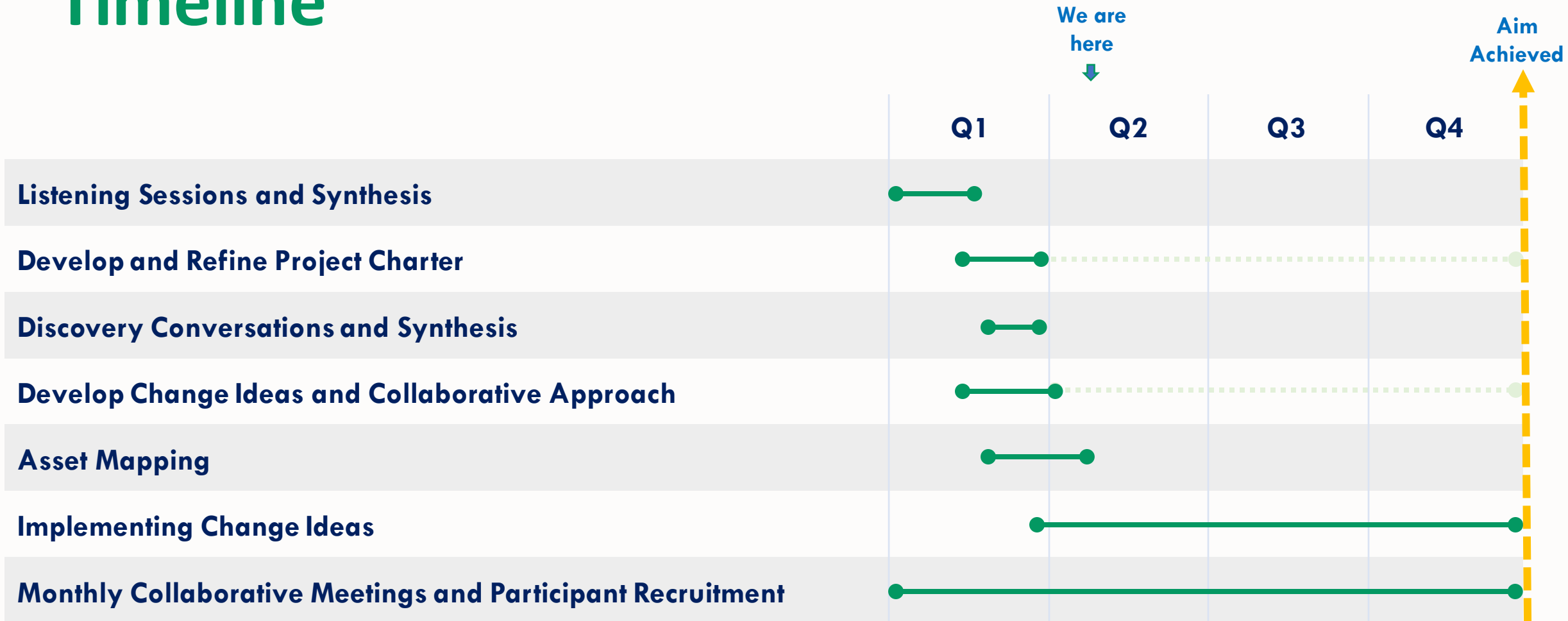
7. Coordinated delivery, billing, and referral system in place!

Our organization is part of a regional system delivering seamless and equitable cross-sector ECM & CS services.





Timeline





Support Strategies to Achieve Our Aim

We propose a multi-pronged approach:

Capacity Building

Technical Assistance offered to CPI organizations

Training opportunities to address challenges

Collaborative Systems

Improvement

Foster cross-county systems solutions across all regional stakeholders, including the Managed Care Plan

Relationship and Network Building

Networking opportunities (including monthly CPI meetings) will address siloes and support the establishment of regional collaboration.



Data Exchange Framework Resources

1. [Information is Power](#) – May 2023 Slides
2. [DSA Signatory Grants Guidance Document](#)
3. [Data Exchange Framework \(DxF\) Glossary of Defined Terms](#)
4. Upcoming Webinar:
 - **DxF Webinar 11 (8/24/2023, 1:30 PM – 2:30 PM PT): [Register](#)**



Data Exchange Framework

- DSA Signatory Grant Applications Round 2 is Open!
 - The [DxF Grant Portal](#) is now accepting applications from DSA Signatories who demonstrate an HIT need in order to meet DxF requirements.
- In July 2022, CalHHS released the Data Exchange Framework, Data Sharing Agreement, and initial set of Policies and Procedures. Please see the Data Exchange Framework section for more information.
 - [View the Executive Summary.](#)
 - [Frequently Asked Questions \(FAQ\)](#)



Data Exchange Framework Initiative

- What is the Data Exchange Framework?
 - The data exchange framework is an agreement across health and human services systems and providers to share information safely. That means every health care provider can access the information they need to treat you quickly and safely; health care, behavioral health and social services agencies can connect to each other to deliver what Californians need to be healthy; and our public health system can better assess how to address the needs of all communities.
- Why is it needed?
 - Every Californian, no matter where we live, should be able to walk into a doctor's office, a county social service agency, or an emergency room and be assured health and human services providers can access the information they need to provide safe, effective, whole person care—while keeping our data private and secure.



DSA Signatory Grants Guidance

- This DSA Signatory Grants Guidance Document provides a comprehensive overview of the DSA Signatory Grants, a component of the Data Exchange Framework (DxF) Grant Program launched in May 2023.
- Administered by the California Health and Human Services (CalHHS) Center for Data Insights and Innovation (CDII), the DSA Signatory Grants program will support Signatories of the DxF Data Sharing Agreement (DSA) by subsidizing their investments to meet DSA requirements. [In this document](#), readers will find:
 - A guide to understanding and choosing between the two types of grants in the program, which are: o Technical Assistance Grants; and o QHIO Onboarding Grants;
 - Details on eligibility and permissible uses of grant funding;
 - An overview of the application process; and
 - Information on how awarded grantees will receive funding upon completion of standard milestones.



CalHHS Data Exchange Framework Frequently Asked Questions (FAQ)

- How are signatories to the Data Sharing Agreement (DSA) supposed to share data?
 - The Data Exchange Framework allows Participants to provide access to or exchange information including through any health information exchange network, health information organization, or technology that adheres to the DSA and Policies and Procedures found on our web site at Data Sharing Agreement and Policies & Procedures. The DxF is not intended to be an information technology system or single repository of data, rather it is a collection of organizations that are required to share health information using national standards and a common set of policies.
- Many more helpful FAQ's here: <https://tinyurl.com/4uh9kv9b>



CalAIM Providing Access and Transforming Health Initiative (PATH)



CalAIM Enhanced Care Management and Community Supports Updates

- On **Tuesday, July 18th**, DHCS released its updated [ECM Policy Guide](#) and [Community Supports Policy Guide](#), which include all recent updates aimed at supporting greater uptake and delivery of ECM and Community Supports to eligible members while reducing administrative burden and duplication. These updates reflect the policy refinements discussed at the June 9th Summit and cover key areas including eligibility, referrals and authorizations, provider networks, payment, market awareness, and data exchange. All updated areas are marked with red indicators throughout both Policy Guides.

A "[Cheat Sheet](#)" is available to help providers and other stakeholders navigate the ECM and Community Supports policy updates. It summarizes the key policies as well as the distinction between state-standardized policies and where there is flexibility for MCPs to define their own policies and procedures.

- On **Thursday, April 27th**, DHCS released [updated implementation data for ECM and Community Supports](#), which launched in 2022. The data highlights early implementation activity (January 2022 through September 2022) and growth in provider capacity and member enrollment in both programs, particularly among historically underserved populations.



Health Information Exchange



What is HIE?

- Electronic health information exchange (HIE) allows doctors, nurse practitioners/physician assistants, nurses, pharmacists, and other health care providers to appropriately access and securely share a patient’s vital medical information electronically—improving the speed, quality, safety and cost of patient care.
- Secure and timely sharing of patient information can better inform decision-making at the point of care and allows providers to:
 - Avoid readmissions
 - Avoid medication errors
 - Improve diagnoses
 - Improve care quality
 - Decrease duplicate testing
- “Health Information Exchange” can also depict the type of organizations that facilitate data exchange through technology and services. NCHIIN is Humboldt County’s HIE. NCHIIN connects providers using technology, while maintaining patient privacy and data security, to improve the health of community members.



Community Information Exchange



What Is A Community Information Exchange (CIE)?

- The North Coast Care Connect (Care Connect) is a network of health and social service providers (a Community Information Exchange) who have partnered together to coordinate care for persons in need of assistance. When persons consent to share their information with the network, Partner Agencies are able to share client information using a secure data platform and to provide coordination and electronic referrals for services.
- People can often benefit from connecting to multiple service providers for their various needs. As clients and their families seek supportive services, opting into CIE can reduce the amount of times persons are asked to repeat basic information when they get referred from one agency to another and avoid being referred to programs that they already accessed. This allows care coordinators from different agencies to work together and provide warm handoffs and electronic referral.