

Meeting Clients Where They Are: Emerging Best Practices in Care Coordination

Insure the Uninsured Project

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CPEHN ensures health justice and equity are on the agendas of policymakers and that communities are leading policy efforts

We build people power to educate and influence policymakers through lived experience and community expertise for better health equity



We pass, change, and implement policies that reflect community needs for better health



We invest in communities of color to build leadership, sustainability, and advocacy

We connect data, stories, partners, and regions to build knowledge, relationships, and understanding across cultures



To create equitable conditions that promote health equity and allow communities of color and all residents to thrive and prosper



The Issue: Barriers to Care are Pervasive

- **Community Fears**
 - *Chilling effect post 2016 election and reluctance to use public benefits*
- **Access/Utilization**
 - *Adequate language assistance, cultural brokers, health navigators*
- **Availability**
 - *Proper time and distance standards, appointment times, network adequacy*
- **Quality**
 - *Diverse workforce of providers, community-defined practices, cultural competency, disparity reduction*
- **Coordination**
 - *Referrals and continuity of care*



California's Medi-Cal Healthier California for All Initiative (MHCFA)

- **Full Integration Pilot Project**
 - Targeted for 2024 in several counties
 - DHCS to contract with one entity to provide:
 - Medi-Cal managed care
 - Specialty mental health
 - Substance use disorder
 - Dental
- **Whole Person Care (WPC) and Health Homes Programs (HHP)**
 - MHCFA eliminates the WPC and HHP programs
 - Managed care plans to implement starting in 2021
- **Enhanced Care Management (ECM) benefit**
 - Plans will have the option of providing housing transition services, currently provided under HHP and WPC, and other services **In Lieu of Services**



Provisions Impacting Diverse Populations

- **Expanding Access to Mental/Oral Health Care**
 - Incentive payments for preventive oral health care for adults
 - No wrong door approach for adults and mental health
 - ACES score could be considered a universal screening tool for ECM
- **Strengthening Cultural Competence**
 - Proposal to consolidate cultural competence plan requirements – July 2020
 - Allowance for specific cultural practices for Tribal 638 and urban clinics
 - Adoption of new Population Health Management (PHM) Initiative



Additional Recommendations

Strengthening Cultural Competence:

• *Allow Reimbursement for Mental Health Services based on “Community Defined Evidence Practices” (CDEP)*

- Services derive from community’s ideas of illness and healing or positive attributes of cultural or traditional practices and include:
 - Traditional healing activities for Native Americans (MHCFA proposal)
 - Peer-led community gardens for refugees
 - Gender-affirming support groups for lesbian, gay, bisexual, transgender, and queer (LGBTQ) individuals and
 - Advocacy training for Latinos and African Americans
- Can be provided by qualified mental health professionals who may not have a medical or social work license (e.g. peer counselors, community health workers, trained facilitators)
- Could be additional ILOS or funded through a State Plan Amendment (SPA)



What our Community Members are Saying...

“Learning about our tribal history was one of the most healing things I’ve done; my cultural learning has brought me to a good place.” - Native American Community Member

“Our parishioners come to us for help. We have a responsibility to help them. Our biggest need is for community mental health resources to help our people get the right assistance they need.”- African American Community Member

“Not feeling well physically, I see doctors. Not feeling well mentally, I go to the temple and talk to monks.”-API Community Member

“I didn’t want to be labeled as having a mental health diagnosis when I didn’t feel that I had one.” - Transgender Advisory Group Member

First, Do Not Harm: Reducing Disparities for Lesbian, Gay, Bisexual, Transgender, Queer and Questioning Populations in California. The California LGBTQ Reducing Mental Health Disparities Population Report. Retrieved from:

https://cpehn.org/sites/default/files/lgbtq_population_report.pdf



More to be Done: Building Trust, Capacity, and Integration

- **Coordination**

- *Encourage broader adoption of Advanced Primary Care Practices and use of Community Health Workers*
- *Foster referrals, define partnerships between plans and CBOs*
- *Include additional quality measures on care coordination*

- **Improve Quality**

- *Require collection, reporting and utilization of demographic data*
- *Establish financial incentives for adoption of PHM, prevention, equity and the social determinants of health interventions*

- **Strengthen Oversight & Accountability**

- *Encourage plans to partner with DHCS recognized local, multi-payer governance structures to develop PHM interventions*
- *Invest in improved translations of essential documents on health benefits*



Thank you!

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