Health Plans to Cover Long Term Services & Supports (LTSS)

Long Term Services and Supports (LTSS) refers to a wide range of services that support seniors and people with disabilities (SPDs) living independently in the community. This includes services traditionally funded by Medi-Cal, and other services available in the community that are not Medi-Cal benefits, but are known to support independent living. As defined by the California Coordinated Care Initiative (CCI), LTSS also includes care and support for members residing in long-term care facilities.

As part of the CCI, LTSS services will become managed care benefits as early as April 1, 2014. L.A. Care’s LTSS Department is responsible for helping members find the right combination of services to keep them safely in their homes or long-term care facility, and for coordinating access to those services. L.A. Care will be responsible for coordinating, paying for, and overseeing the following LTSS services for our members:

- **In-Home Supportive Services (IHSS):** IHSS pays for homecare services that enable eligible seniors and individuals with disabilities (including children) to remain safely in their own homes. An IHSS Homecare Provider can assist with personal care services such as bathing, grooming and dressing; domestic services such as cooking, house cleaning and laundry; protective supervision for individuals with mental impairment; paramedical services such as assistance with medications, bowel and bladder care, and catheter.

New Program Connects Medi-Cal and Medicare Benefits for Seniors and People with Disabilities

In June 2012, Governor Brown signed into law California’s Coordinated Care Initiative (CCI), which transitions Long Term Services and Supports (LTSS) into benefits offered through managed care plans (see article above) and establishes a new program called Cal MediConnect.

Starting as early as April 2014, patients with both Medi-Cal and Medicare will have the option to combine all their benefits into one new Cal MediConnect health plan. Patients who sign up for Cal MediConnect will be able to receive better coordination of the care they get from their physicians, LTSS providers, other caregivers, and health plan.

For additional information on Cal MediConnect, visit L.A. Care’s website at duals.lacare.org.
In 2010, the U.S. Department of Veterans Affairs initiated a new program called Blue Button, which allowed Medicare beneficiaries to access their prescription data online. By 2012, the Office of the National Coordinator for Health Information Technology began encouraging its broader use, and this year, L.A. Care Health Plan became the first adopter of Blue Button in California, and one of the first in the nation.

L.A. Care aggressively pursued the partnership opportunity because it aligns so closely with our mission – to provide access to quality health care for Los Angeles County’s vulnerable and low income communities and residents.

In partnership with the UC Davis Institute for Population Health Improvement’s California Health eQuality program, the web-based Blue Button program allows patients to easily view and download their health information and share it with health care providers and caregivers.

Having a list of medications available through the program is the biggest advantage for patients – it empowers them to take an active role in managing their care, increase effective communication with their providers and avoid potential prescription errors.

For underserved and disadvantaged populations, the availability of online medical information resources significantly lags behind those offered to commercial insurance and Medicare patients, limiting their ability to participate in their own care.

We are thrilled to have the opportunity to bring Blue Button to vulnerable L.A. County residents, who may now become more involved in the management of their conditions and share their information with their providers and caregivers.

This program will also help us to achieve the Triple Aim – improving the patient experience of care, improving health outcomes and reducing the cost of health care delivery.

It is our hope that the success of Blue Button will serve as a model for all managed care health plans in the state and country to adopt the same functionality to improve patients’ access to their data.
Howard A. Kahn, Chief Executive Officer
The Third Wave of Health Care Reform

When President Obama signed the Patient Protection and Affordable Care Act in 2010, it was hard to project how comprehensive the changes would be once the law was fully implemented. As I reflect on how far we’ve come (and how far we still have to go), I find myself contemplating the third, and perhaps most unsung, wave of health care reform.

With the first phase of health care reform, individuals with preexisting conditions were able to get health insurance for the first time, children could remain on their parents’ health insurance plans until age 26 and many preventive health services became available at no cost to the consumer.

The next stage of health care reform was an explosion of frenetic activity as the entire health care industry prepared for the launch of the state marketplaces – Covered California™ here in California – and an influx of hundreds of thousands of the newly insured seeking access to health care services.

The third wave – Medi-Cal expansion – while perhaps not as big a media story as Covered California, is equally important to the approximately 389,000 adults in Los Angeles County who are now eligible (and the thousands more who were previously eligible and are now enrolling for the first time) for Medi-Cal and a regular source of health care.

A large number of this new expansion population — an estimated 305,000 adults enrolled in the Los Angeles County Low Income Health Program, known as Healthy Way LA (HWLA) — transitioned into a Medi-Cal health plan on January 1, 2014. As one of two Medi-Cal health plans in Los Angeles County, L.A. Care received more than 164,000 of those members. Our goal was a successful transition that ensured that the medical home choice of these new members was honored and that continuity of care was achieved.

We learned some valuable lessons from the transition of Seniors and People with Disabilities into our health plan, and as a result, L.A. Care took extra steps to guarantee continuity of care for these new members. For example, if a member shows up at a DHS facility during the first quarter of the year, L.A. Care and the IPA will honor that appointment, even if the member hasn’t completed the necessary continuity of care paperwork. We are working with the County and our IPAs to honor surgery or specialist appointments scheduled prior to the transition, and we have established a special HWLA Transitional Response Unit for those who have more complex needs.

To prepare for our new members, we worked diligently to both expand and train our Medi-Cal provider network. L.A. Care held an all-day training for all Participating Physician Groups, three on-site trainings for DHS staff, and additional sessions for hospitals, clinics, homeless human services providers and Ryan White providers. We also conducted additional webinar trainings on the new Medi-Cal health plan behavioral health benefits.

To better serve the thousands of physicians, specialists, clinics, hospitals, pharmacies and other health care professionals in our growing Medi-Cal network, we now have a dedicated team to respond to questions and concerns from our provider network, which can be reached by calling (213) 694-1250 x4719. Of course, we also still provide digital accessibility through L.A. Care Connect, our provider portal, where you can quickly check eligibility and claims status without having to call in your request.

As we look back on where we were even a year ago, and forward to the year ahead, I want to thank you for taking this health care reform journey with us.
The National Committee for Quality Assurance (NCQA) has recognized six medical practices in the L.A. Care network for achieving Patient-Centered Medical Home (PCMH) status.

South Bay Family Health Care, JWCH Institute, Valley Community Clinic, QueensCare Health Centers (QHC), and CHAPCare community clinics in the L.A. Care provider network, have each earned NCQA recognition for their patient centered care. Family Care Specialists Medical Group, a private practice with a residency training program in the L.A. Care provider network has also received this distinction. To receive recognition, these practices met standards in the following areas: enhanced access and continuity, identify and manage patient populations, plan and manage care, provide self-care support and community resources, track and coordinate care and measure and improve performance.

According to Bertha Becerra, Quality Assurance Coordinator at South Bay Family Health Care, “Our physicians have enhanced their relationships with their patients. Physicians and support staff have been working together to help their patients achieve specific health goals. This involves working with the patient in their preferred language, reviewing and managing high-risk patients by following up with reminder calls and providing them with a written plan of care.”

Becerra said the group has made significant improvements in care coordination. “Our current goal is to implement a system in which patients who are discharged from the hospital are routinely given an appointment within seven days at one of our facilities.”

According to Paul Gregerson, MD, MBA, Chief medical officer of the JWCH Institute, “We are always looking for ways to improve our quality of care. The PCMH was initially viewed as a way to prepare for healthcare reform, but once we got started we realized the process and end point would greatly improve our quality of care and result in better health outcomes and higher patient satisfy.”

“So far, patient satisfaction as well as provider satisfaction is higher and the efficiency and flow in the clinic has markedly improved. More comprehensive care is being provided because providers are responsible for ensuring that their patients get all of the necessary preventive care in addition to their primary and chronic disease care. We have observed that our patients are more involved in their care when they feel comfortable with their regular provider, and patient self management is facilitated,” Gregerson said.
Helping Patients with Medication Adherence

Only about half the people who leave a doctor’s office with a prescription take the drug as directed. Among the many reasons people give for not adhering to drug treatment, forgetfulness is the most common. Some patients are concerned about possible side effects which may also result in reluctance to follow the plan. Clearly, if a person does not adhere to treatment, symptoms may not be relieved or the disorder may not be cured, and may even become exacerbated. People are more likely to adhere to treatment if they have a good relationship with their doctor and pharmacist. Doctors and pharmacists can encourage and support adherence through two-way communications with the patient:

• Provide clear explanations, verbal and written, about how to take the drugs, why the drugs are necessary, and what to expect during treatment.

• Invite patient participation, and have the patient monitor and report effects of medication and treatment, so that adjustments can be made.

• Ask the patient to track a list of all their medications, and provide supportive resources.

• Recommend one pharmacy for all prescriptions to be filled in order to best monitor them for possible duplication and drug interactions.

• Offer referrals to support groups.

• Provide multi-compartment containers or computerized container caps that help the patient take medications as directed.

• Discuss ideas and suggestions about other mechanisms to help the patient’s medication adherence, such as a paging service, smart phone apps, phone alarms and other alternatives.

For more information about helping patients with medication adherence, Primary Care educators may use the following slides from Centers for Disease Control & Prevention (CDC) for teaching purposes: cdc.gov/primarycare/materials/medication/docs/medication-adherence-01ccd.pdf.

[Source: merckmanuals.com and CDC]
L.A. Care’s new behavioral health provider, Beacon Health Strategies, offers uniquely effective programs and expert care

“Beacon” is a company of industry-leading behavioral health experts, managed and advised by nationally recognized medical, behavioral, human services, and pharmacy clinicians. They have developed uniquely effective programs built upon seamless integration with their clients’ medical and disease management programs that have been proven to lower the total cost of care while measurably improving patient outcomes.

Beacon brings a robust network and vast knowledge of our current products as well as our upcoming initiatives, including Cal MediConnect for dual Medicare-Medicaid eligibles. They used their experience with the Massachusetts readiness and served a vital role with L.A. Care in preparation and the delivery of our readiness review for Cal MediConnect.

If your L.A. Care patients need mental health or substance abuse care, please refer them to contact Beacon Health Strategies for care at 1-877-344-2862, 24 hours a day, 7 days a week and holidays.

[As of August 1, 2013 Beacon replaced CompCare for providing Behavioral Health services.]

Continued from page one.

Health Plans to Cover Long Term Services & Supports (LTSS)

insertion; and accompaniment to medical appointments. IHSS serves approximately 181,000 individuals in L.A. County.

- Multi-Purpose Senior Services Program (MSSP): MSSP is an intensive case management program for seniors who are certified for nursing home placement, but wish to remain at home. Six MSSP sites serve nearly 3,400 individuals in L.A. County, providing both social and health care management services such as adult day care, housing assistance, chore and personal care assistance, protective supervision, care management, respite care, transportation, meal services, social services, and communication services.

- Community Based Adult Services (CBAS): CBAS is a facility-based program that provides skilled nursing, social services, physical and occupational therapies, personal care, family/caregiver training and support, meals, and transportation services. Over 120 CBAS centers serve approximately 20,000 individuals in L.A. County. To qualify for CBAS, members must be over 18 years old, certified for nursing home placement, and have other specified disabilities or health conditions.

- Long Term Care (LTC): LTC is the provision of medical, social, and personal care services in either an institution or private home. Most LTC services, including rehabilitation services and skilled nursing care, are provided in Skilled Nursing Facilities. Nearly 25,000 individuals in L.A. County receive LTC.

- Community Services: L.A. County has numerous agencies and programs that support individuals living independently in the community including Independent Living Centers, Regional Centers, and Area Agencies on Aging. These agencies provide LTSS services that are not a part of a member’s benefit package, but they often work with Medi-Cal Health Plans like L.A. Care to get plan members the services they need. The LTSS Department is responsible for coordinating services with these agencies.

For additional information on Long Term Services and Supports, please contact the LTSS Department at 1-855-427-1223 or via e-mail at LTSS@lacare.org.
Directing Your Patients for the Right Access to Care

Your patients don’t always know where to go or who to call when they have medical concerns, and often they may end up with an unnecessary Emergency Room visit. Please help your patients learn who to call for care, and let them know about the Nurse Advice Line.

The Nurse Advice Line is a free service for members available 24 hours a day, 7 days a week, even on holidays. The Nurse Advice Line can help by providing self-care tips to your patients, and help to ensure that they don’t use the hospital emergency room unnecessarily.

The following chart was developed to help patients understand what resources to use and when to use them. L.A. Care provides this chart to our members in a mailer after their new enrollment; we encourage you to remind your patients of the Nurse Advice Line and share the chart with them.

Not all health worries require emergency services. Use this chart to help you decide how to get the right medical care when you need it.

<table>
<thead>
<tr>
<th>Nurse Advice Line</th>
<th>Your Doctor’s Office</th>
<th>Urgent Care Sites</th>
<th>Emergency Room</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>For</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Round the clock advice on health worries</td>
<td>• Routine care to prevent illness</td>
<td>• Non-life threatening conditions like minor injuries, small burns, minor infections, sprains, small wounds, minor broken bones, minor burns, rashes and more.</td>
<td>• Critical or life-threatening conditions like uncontrolled bleeding, chest pain, difficulty in breathing, head injury, spinal injury, major burns and more.</td>
</tr>
<tr>
<td>• Help getting the right medical care</td>
<td>• Physical exams</td>
<td>• After-hours care</td>
<td>• After-hours care</td>
</tr>
<tr>
<td>• Accessing the audio health library</td>
<td>• Vaccinations</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• After-hours care</td>
<td>• Referrals to specialist</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>• And more!</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>When</strong></th>
<th>24 hours, Everyday</th>
<th>8am – 5pm, M-F</th>
<th>7am – 11pm, Everyday</th>
<th>24 hours, Everyday</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Wait Time</strong></td>
<td>Less than a minute</td>
<td>By appointment**</td>
<td>Some, first come, first serve</td>
<td>None to long***</td>
</tr>
<tr>
<td><strong>How</strong></td>
<td>Call</td>
<td>Schedule</td>
<td>Walk in</td>
<td>Walk in</td>
</tr>
</tbody>
</table>

* Your doctor’s office hours and urgent care site hours may vary; call to make sure when they are open.
** Call your doctor’s office to see if walk-ins are welcomed.
*** The Emergency Room wait time may be long if the patient’s condition is not critical or life-threatening.

L.A. Care and its sub-contracted plans all operate Nurse Advice Lines. Members can find the number to call on the back of their Member ID Cards. For reference, the numbers are as follows:

<table>
<thead>
<tr>
<th>L.A. Care</th>
<th>Kaiser</th>
<th>Care1st</th>
<th>Anthem Blue Cross</th>
</tr>
</thead>
<tbody>
<tr>
<td>1-800-249-3619</td>
<td>1-888-576-6225</td>
<td>1-800-609-4166</td>
<td>1-800-224-0336</td>
</tr>
</tbody>
</table>
L.A. Care offers several targeted health interventions to select member populations. One of these interventions is the Passport to Good Health for Medicare Advantage (HMO SNP) members. The Passport helps members remember and track recommended lab tests, screenings, and immunizations each year. Passports are mailed to all new SNP members each month and again annually in February to all existing SNP members. Members are instructed to bring their Passport with them to their doctor visits and track the dates of each test. Please encourage your patients to use their Passport to its full advantage!

Get Updated on Pharmacy & Formularies at lacare.org!

L.A. Care has a very active Pharmacy Therapeutics and Technology Committee (PT&T) which updates our formularies on a regular basis. As your partner in healthcare, L.A. Care wants you, our network physicians and pharmacists, to have access to all the necessary information regarding our pharmacy programs and approved formulary drugs. We also encourage your suggestions and comments for additions and changes.

Stay up to date with the pharmacy and formulary listings and procedures, as well as other management methods to which your prescribing decisions are subject, by referring to L.A. Care’s Formulary information on our website, lacare.org/providers/pharmacy.
L.A. Care’s eConsult Program Passes 50,000 Electronic Consultations

For L.A. Care’s eConsult telehealth program, more than 50,000 electronic consultations between PCPs and specialists have been initiated. eConsult is a web-based care coordination platform that enables PCPs and specialists to securely share health information and discuss patient care. The program is the largest rollout of its type in the nation.

The eConsult platform is used by almost 2,000 PCPs in 182 community clinic/health center sites across L.A. County that serve 500,000 low-income individuals and families. More than 30 different types of specialist physicians are available to review eConsults from PCPs.

The program includes the second largest public health care delivery system in the nation, Los Angeles County Department of Health Services, and one of the largest safety net clinic associations in the state, Health Care L.A. IPA. Also playing central leadership roles are MedPOINT Management and Community Clinic Association of Los Angeles County. For more information, visit econsultla.com.

L.A. Care Supports Opening of Clinic for Developmental Disabilities

On Monday November 4th, The Achievable Foundation opened a new door with the Achievable Clinic in Culver City, a first-of-its-kind, multidisciplinary community based medical clinic for individuals with developmental disabilities. This clinic provides access to specialized services and supports that enable these community members to lead healthier, more independent and more productive lives.

“We appreciate the acknowledgment that in addition to early funding support, we also helped them to develop the blueprint the clinic later used for proposals, including securing a full 330 FQHC [Federally Qualified Health Center] grant from the federal government,” said Roland Palencia, L.A. Care Director of Community Benefits.

The Achievable Foundation expects to improve their reach and service to ensure better health outcomes while overcoming barriers to adequate care for this usually underserved population. For more information, or to offer support for the Achievable Foundation, please visit achievable.org.

HITEC-LA Helping 27 L.A. County Health Centers Reach Meaningful Use Stage 2 and Achieve PCMH Recognition

HITEC-LA is making significant progress in its first year as a Service Partner to the Community Clinic Association of Los Angeles County (CCALAC) on the Health Center Controlled Network grant. HITEC-LA was selected by CCALAC to provide L.A. County Federally Qualified Health Centers with education and on-site technical assistance to implement certified electronic health records (EHRs), reach meaningful use Stage 2, and achieve Patient-Centered Medical Home (PCMH) recognition. The services have been well received. As of this past October:

- 368 total providers in 27 health centers serving 700,000 CCALAC members received onsite consulting
- 154 providers in health centers attested for meaningful use and were approved for incentive payments
- 8 health centers serving 270,000 CCALAC members received PCMH recognition
Access L.A. Care’s Clinical Practice & Preventative Health Guidelines

L.A. Care’s Clinical Practice and Preventative Health Guidelines are posted on our website. You may find these clinical practice guidelines helpful in managing care in common areas of your medical practice. Clinical Practice Guidelines include:

- Angina
- Anxiety Disorder
- Attention Deficit Hyperactivity Disorder
- Asthma
- Cardiovascular
- Chronic Obstructive Pulmonary Disease
- Chronic Pain
- Congestive Heart Failure
- Major Depressive Disorder – Adults
- Major Depressive Disorder – Adolescents and Children
- Diabetes
- High Blood Cholesterol in Adults
- HIV
- Hypertension
- Low Back Pain
- Obesity in Adults
- Obesity in Childhood
- Otitis Media
- Perinatal Care
- Pharyngitis
- Smoking Cessation
- Sexually Transmitted Diseases

Please visit lacare.org/providers/resources/clinical_guidelines for links to our new and updated guidelines. You may also call L.A. Care Provider Relations at (213) 694-1250 x4719 to request a hard copy.

Medical Nutrition Therapy (MNT) from L.A. Care

L.A. Care’s Health Education Unit offers unique, high-touch nutrition counseling to eligible direct-line-of-business members upon provider referral. Medical Nutrition Therapy (MNT) is the treatment of medical conditions through nutrition counseling provided by a registered dietitian. Patients receive an individualized nutrition diagnosis and treatment plan based on an initial one-hour comprehensive telephonic assessment with up to three follow-up consultations. MNT services are made available to patients with one or more of the following:

- Uncontrolled type I or II diabetes (HBA1c<8)
- Pre-end-stage renal disease (GFR 13-50ml/min/1.73m)
- Obesity (pediatric, age 2-18 years, BMI>95th percentile and adults, age 18 years and over, BMI >35)
- Underweight (pediatric, age 2-18 years, BMI<5th, adults, age 18-64 years, BMI<18, and older adults, age 65 years and older, BMI <23

To refer a patient to MNT, complete the Health Education & Social Services Referral form located in the health education section of the provider resources page on L.A. Care’s website at lacare.org/providers/resources/healtheducation link titled: “Refer L.A. Care members to free Health Education, Cultural and Linguistic Services (Writeable PDF).”

New:

L.A. Care’s new Perinatal Care Toolkit and other provider toolkits are available at:

https://www.lacare.org/providers/resources/providertoolkits.
Disease Management Programs to Support You and Your L.A. Care Patients

To support you, our physician partners, in the treatment provided to our members, L.A. Care has three disease management programs offered to our members at no-cost. The programs provide a comprehensive ongoing and coordinated care approach to achieving desired outcomes, including improving the patient’s clinical condition and quality of life, through education and support to empower your L.A. Care patients to manage asthma, diabetes and/or heart disease.

Each month we identify and stratify members based on diagnosis, medication and claim utilization and when available, lab results. Based on diagnosis, members are automatically enrolled into the appropriate disease management program and may opt out at any time. Interventions are based on severity and include:

- Telephonic care coordination from a nurse (for higher severity members)
- Health education, goal-setting and coaching
- Access to a dietician

When a member is enrolled with one of our disease management programs, you will receive care guides, letters requesting verification of patients’ chronic disease severity, or follow-up information from a nurse to support your patient’s chronic disease management. Our goal is to partner with you to support the treatment you provide your patients and curb these chronic conditions.

You can assist by referring your L.A. Care patients to contact us to access the educational information and support of our disease management programs. The following chart shows the contact information for each program and which programs are available under each line of business:

<table>
<thead>
<tr>
<th>Program</th>
<th>L.A. Care Covered</th>
<th>L.A. Care Medicare Advantage (HMO SNP)</th>
<th>L.A. Care Medi-Cal</th>
<th>Healthy Kids</th>
<th>PASC-SEIU Homecare Workers Health Plan</th>
</tr>
</thead>
<tbody>
<tr>
<td>L.A. Cares About Asthma®</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
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<tr>
<td>1-888-200-3094 or <a href="mailto:asthmadm@lacare.org">asthmadm@lacare.org</a></td>
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<td>L.A. Cares About Diabetes®</td>
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<td>✓</td>
<td>✓</td>
<td>✓</td>
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<td>1-877-796-5878 or <a href="mailto:diabetesdm@lacare.org">diabetesdm@lacare.org</a></td>
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<tr>
<td>L.A. Cares About Your Heart™</td>
<td>✓</td>
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<td>1-855-707-7852 or <a href="mailto:heartdm@lacare.org">heartdm@lacare.org</a></td>
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news alert

Helping Patients with Medication Adherence

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11 | Disease Management Programs To Support You And Your L.A. Care Patients

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