Aging & Independence Services (AIS) Long Term Care Integration Project (LTCIP) Update for the Health Services Advisory Board (HSAB) February 18, 2016

The goal of the Long Term Care Integration Project (LTCIP) is to improve the delivery of health care and long term services and supports for older adults and persons with disabilities. This report includes updates on some key LTCIP activities.

The Community-based Care Transitions Program (CCTP)

CCTP was established under Section 3026 of the Affordable Care Act (ACA) in 2011 as a 5-year demonstration to link community based organizations with hospitals to improve care that high-risk Medicare patients receive as they transition across different care settings, reduce the readmission rate for high risk patients and reduce Medicare spending. The San Diego Care Transitions Partnership (SDCTP), a partnership between AIS and Palomar Health, Scripps Health, Sharp HealthCare and the UCSD Health System (13 hospitals) has provided comprehensive, person-centered, health care and social services to over 43,000 high-risk, fee-for-service (FFS) Medicare patients across thirteen participating hospitals since its inception in January 2013. The SDCTP's success has resulted in an extension of the Program Agreement with CMS through June 30, 2016. The SDCTP is one of only 34 CCTPs across the country that remains funded.

The SDCTP has joined forces with 26 of the 34 remaining CCTPs to advocate for the extension of the program and allocation of additional funding to support the program through fiscal year 2018. Over the course of the 5-year CCTP demonstration, the financing for Medicare services has evolved, and funding has shifted from fee-for-service (FFS) to alternative payment models. Unfortunately, the adoption of Medicare alternative payment models is just beginning in many communities across the country. As a result, the SDCTP and other high-performing CCTPs are left without a safety net to serve high-risk FFS Medicare patients. Thus, Senator Warner from Virginia and Senator Isakson from Georgia have sent letters to CMS calling for the extension of CCTP. Additionally, to support the remaining CCTPs both Senators have asked CMS to work with these successful programs to transition CCTP best practices to the new value-based purchasing arena, and address the technical barriers that exists for community-based organizations to participate in value-based purchasing programs.

The Coordinated Care Initiative (CCI)

At the CCI Advisory Committee meeting on February 2, 2016 updates on consumer experience were shared by key stakeholders. As of January 1, 2016 there are 16,090 San Diego County duals actively enrolled in Cal MediConnect (CMC). Enrollment in CMC is holding at 33% meaning that 67% of duals residing in San Diego County have either opted-out or have disenrolled from CMC. Beneficiaries who opted out of Cal MediConnect continue to face challenges related to balance billing, as some physicians are refusing to work with their patient's health plan and hence are shifting the financial burden to the beneficiary. The CCI Communication Workgroup met on Wednesday, January 27, 2016 and reviewed the latest CMC enrollment figures and program evaluation findings. The program evaluation findings indicate that duals are not seeing the added value that CMC plans offer. Therefore, the workgroup is in the process of developing a couple communication products targeted at IHSS beneficiaries (who have the highest opt-out rate) that will aim to clarify two important unique benefits of CMC plans - care coordination and interdisciplinary care teams. Finally, the managed care plans participating in Cal MediConnect, who established the CCI Advisory Committee, have decided to alter

the frequency of the meeting schedule of the committee from monthly to quarterly. The next scheduled CCI Advisory meeting will be held on Wednesday, May 4, 2016.

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