



L.A. Care
HEALTH PLAN[®]
For a Healthy Life
www.lacare.org

Managed Care 101 Building Partnerships with Health Plans

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Torhon Barnes, MSW
Behavioral Health Department
L.A. Care Health Plan





Presentation Overview

- ❖ General Overview of Medi-Cal Managed Care in LA
 - ❖ The Medi-Cal Program
 - ❖ Basic Definitions
 - ❖ Los Angeles Model
- ❖ Navigating L.A. Care Managed Care Health Plan
 - ❖ Customer Solution Center Services
 - ❖ Transportation Benefit (NEMT and NMT)
 - ❖ Behavioral Health
 - ❖ LA Care Contacts



Medi-Cal Managed Care in Los Angeles Basic Definitions

The Medi-Cal Program

- Medi-Cal is.....
 - California's Medicaid Program
 - Under the Affordable Care Act, Medi-Cal expanded to serve low-income **adults without dependent children** on January 1, 2014.
- Medi-Cal is **NOT**.....
 - Covered CA coverage sold on the Exchange
 - (Health Insurance Marketplace)
 - My Health LA – operated by L.A. County Department of Health Services (DHS)
 - Free health program for individuals and families who do not have and cannot get health insurance.

Medi-Cal Eligibility

Medi-Cal is health insurance coverage for citizens and legal permanent residents who are:

- Low-income (less than 138% FPL) children and adults;
- Low-income seniors and people with disabilities
- Among others

To check status of Medi-Cal Eligibility:

Who is checking	Where to check	Notes
Medi-Cal Provider	Automated eligibility verification system (AEVS)	Requires provider ID to access
Member, or assisting a member	Contact Dept. Public Social Services (DPSS)	Can also check benefits online via Your Benefits Now (YBN)



Medi-Cal Managed Care

Managed Care is:

A method of delivering health care through a system of provider networks. Also known as a Health Management Organization (HMO).

In Managed Care, Medi-Cal members get their care through a health plan that ensures they have access to health care services.

The goal of managed care is to deliver coordinated care that is timely, high quality and cost-effective



Primary Care Provider

Primary Care Provider (PCP) is:

A member's assigned doctor or clinic, who is responsible for preventative care, referrals to specialists, and acting as a "medical home" for the member's needs.

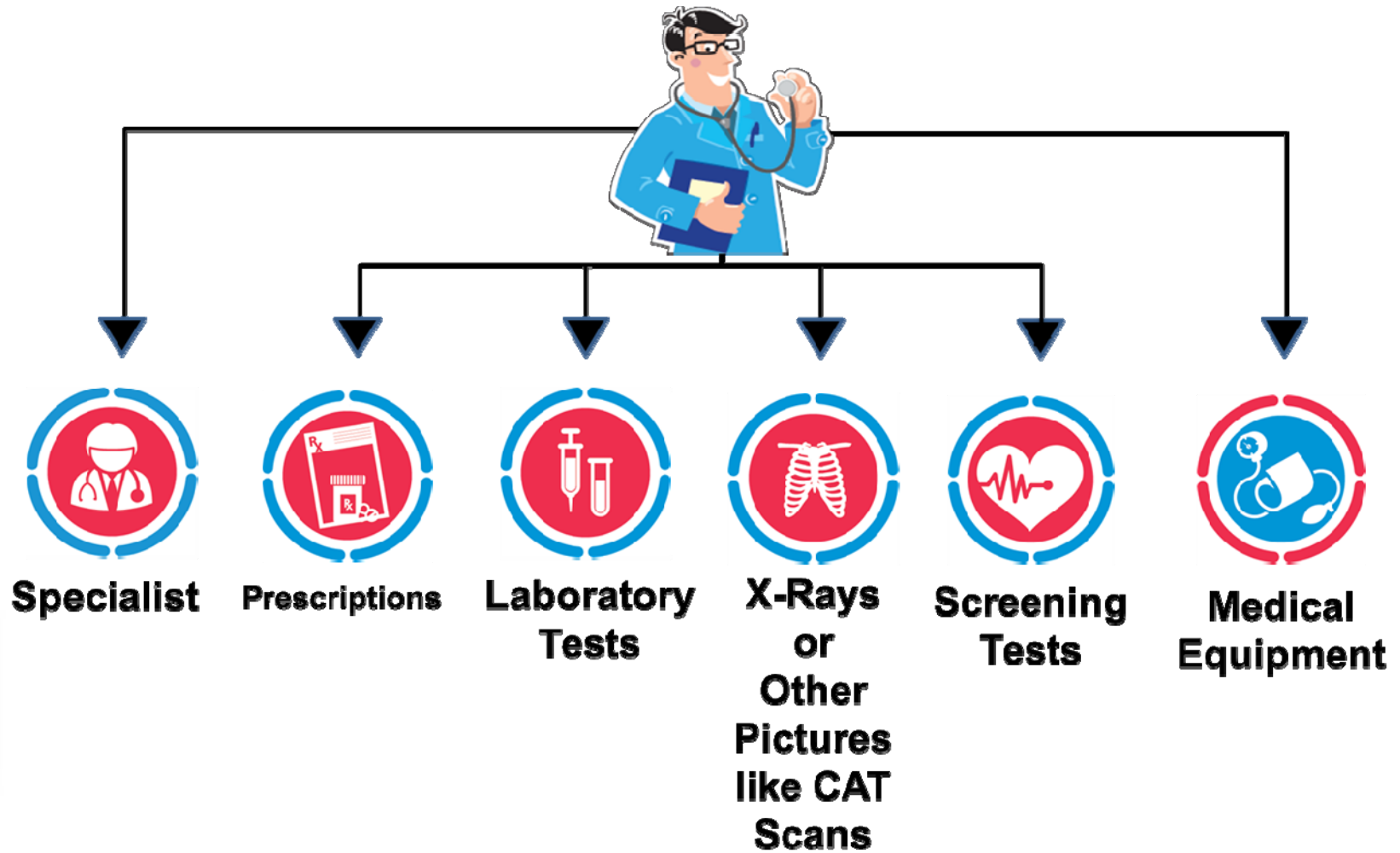
Members can select any open PCP in the health plan.

If member does not choose, PCP is automatically assigned.

Members can change PCP each month by calling their Health Plan.

To find out who a member's PCP is, contact L.A. Care Customer Solution Center (CSC) formerly Member Services
(888) 839-9909

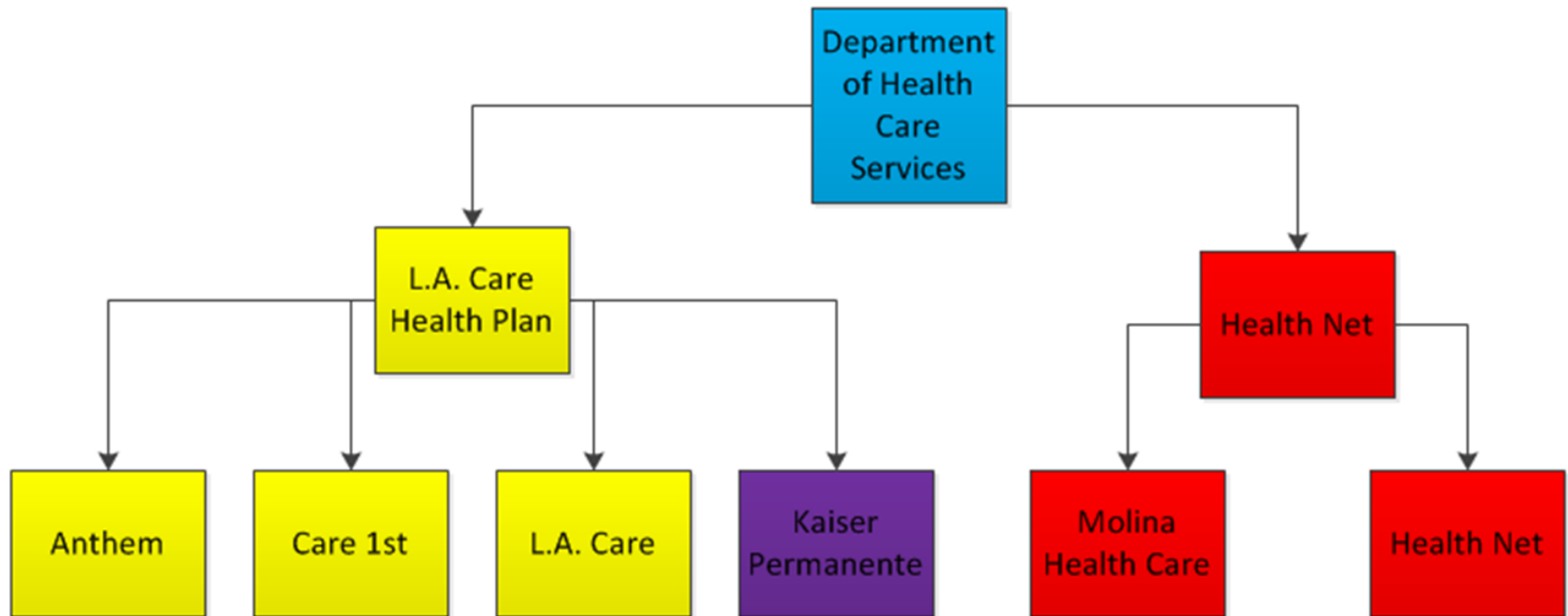
Primary Care Providers are the “gateway” to all needed care





Medi-Cal Managed Care Los Angeles Model

L.A. County: Medi-Cal 2 Plan Model



Medi-Cal Plans: Member Choice

Members can select any Medi-Cal health plan and change their health plan each month, if desired.

- Except *Kaiser* (only with family connection or prior affiliation)
- If member does not choose, health plan will automatically assign.
- Call appropriate **Health Plan** to change from one plan to another (Health Net or L.A. Care)
 - To confirm if a member is enrolled in L.A. Care:
 - Visit <https://lacare.org> and click "Member Sign In" (upper right corner)
 - This member portal can be used to view eligibility & benefits, request or print ID cards, and change doctors

Medi-Cal Managed Care: Benefits

Medi-Cal Health Plans *must* provide:

- Outpatient services (doctor visits):
 - Primary Care
 - Specialty Care (e.g. cardiology, endocrinology, gastroenterology)
- Emergency Care
- Inpatient Hospital Care
- Long Term Services and Supports - MLTSS (e.g. IHSS, CBAS)
- **Mild-to-moderate Mental Health and Substance Use Disorder Treatment Services**
- Medically necessary **transportation** – provided by *Logisticare*

- And more!

For more details, visit:

<https://www.lacare.org/health-plans/medi-cal/benefits-guide>



Additional L.A. Care Benefits and Programs

- **Care Management Program (*Complex and High Risk*)**
- Behavioral Health Services (Non-Specialty and BH Treatment)
- Disease Management programs for **Diabetes, Asthma and Cardiovascular Disease**
- **Health Education**
- **Family Resource Centers**

- Telephonic and in-person **Interpretation Services**
 - Call the Customer Solution Center **(888) 839-9909**
 - Staff is over 90% bilingual
 - Member materials in 11 languages & alternate formats

Visit www.lacare.org for more info.



Navigating L.A. Care



Navigating L.A. Care

For assistance with all L.A. Care questions, issues or concerns:

- **Customer Solution Center (888) 839-9909**
- **24/7 Nurse Advice Line (800) 249-3619**

Customer Solution Center

(Formerly Members Services)

Customer Solution Center (CSC) (888) 839-9909

24/7 Phone Access

- Mon – Fri 7 am to 7 pm: Full access
- After Hours: Urgent issues only

Call CSC to:

- Verify Medi-Cal enrollment with L.A. Care
- Change or confirm assigned health plan, provider, or clinic*
- Replace Medi-Cal member ID card
- Explain Medi-Cal covered benefits
- Arrange for telephonic or in person health care interpreter
- Get help resolving any issue with a member's health plan services

**Must have member present on the phone to request changes.*

Transportation Overview

L.A. Care's current transportation provider, LogistiCare, has been delegated to manage transportation requests from members and providers.

LogistiCare works with providers (PCP) to obtain prior authorization via the Physician's Certification Statement (PCS form) and coordinates transportation for members via a contracted network of transportation providers.

Currently, L.A. Care provides the following transportation types, depending on the members program eligibility:

- Emergency Medical Transportation (EMT) and Non-Emergency Medical Transportation (NEMT)
 - All members receive this type of benefit

- Non-Medical Transportation (NMT)
 - MediCal members receive this benefit

Transportation Request Process

L.A. Care assumes the responsibility of reviewing transportation authorization requests when it is required.

- Providers will fax the Physician Certification Statement (PCS) form for Transportation Services to:

L.A. Care's Utilization Management FAX (213) 438-2201

- Providers can access the prior authorization form online:
<http://www.lacare.org/sites/default/files/referral-transportation-services-physician-certification-statement-form-110817.pdf>

Prior Authorization Form for Transportation Requests Physician Certification Statement (PCS)

<http://www.lacare.org/sites/default/files/referral-transportation-services-physician-certification-statement-form-110817.pdf>



Prior Authorization Form

Non-Emergency Medical Transportation – Physician Certification Statement

Date:			
PATIENT INFORMATION:			
First Name:	Last Name:	Date of Birth:	
ID Number / CIN#:	Address:		Phone Number:
City:	State:	Zip:	Caregiver Name:
			Caregiver Phone Number:

TRANSPORTATION TYPE:					
Ambulance: <input type="checkbox"/> BLS	<input type="checkbox"/> ALS	<input type="checkbox"/> Litter/Gurney Van	<input type="checkbox"/> Wheelchair Van	<input type="checkbox"/> Air Transport	
ANTICIPATED TRANSPORTATION DURATION:					
Start Date:	End Date:	<input type="checkbox"/> 12 Month Interval	<input type="checkbox"/> 6 Month Interval	<input type="checkbox"/> 30 Days	<input type="checkbox"/> Other (Specify)
PHYSICIAN CERTIFICATION STATEMENT: <i>required for NEMT</i>					
The physician, dentist, podiatrist or mental health or substance use disorder provider responsible for providing care for the member is responsible for determining medical necessity for transportation. This certificate may be completed and signed by the member's physician, dentist, podiatrist or mental health or substance use disorder provider responsible for providing care for the member. By my signature I hereby certify that medical necessity was used to determine the type of transport being requested.					

Benefits & Authorization Requirements

Medi-Cal

Product Line	Transportation Type	Benefit on 7/1/17	Authorization Responsibility as of 7/1/17
Medi-Cal	EMT	Unlimited	Authorization not required
	*NEMT: ALS/BLS/CCT Gurney/Litter Van Wheelchair Van	Unlimited	*L.A. Care provides authorization
	NMT	Unlimited	L.A. Care provides authorization

*Prior authorization is not required when a member is transferred from an acute care hospital, immediately following a stay as an inpatient member at the acute level of care, to a skilled nursing facility or an intermediate care facility licensed pursuant to Health and Safety Code Section 1250.

**EPSDT: Early and Periodic Screening, Diagnostic and Treatment (Covers children 21 and under)



Behavioral Health Services

Non-Specialty (members with mild to moderate level of functional impairment due to mental health condition)

Beacon Health Strategies, delegated vendor for L.A. Care Health Plan, provides the services listed below to **ALL** our members:

- Individual and group mental health evaluation and treatment (psychotherapy)
- **Psychological testing** when clinically indicated to evaluate a mental health condition
- **Outpatient services for the purposes of monitoring medication and treatment**
- Outpatient laboratory, medications, supplies and supplements
- **Psychiatric consultation**

Please Note: *These are all regular outpatient (office-based) services*

For Non-Specialty service, please contact:
Beacon Health Strategies - (877) 344-2858



Behavioral Health in Medi-Cal

PPG/PCP

Target Population: Children and adults in Managed Care Plans who meet medical necessity or EPSDT for Mental Health Services

- Outpatient Services by PCP**
- ✓ Routine Screening for Emotional Health and substance misuse
 - ✓ Outpatient Medication and Monitoring for Mental Health Treatment and Medication Assisted Treatment (MAT) for Substance Use Disorders
 - ✓ Brief Counseling/Support/Education
 - ✓ Screening, Brief Intervention and Referral for Treatment (SBIRT) for Alcohol*
 - ✓ Referral to Regional Centers for Comprehensive Diagnostic Evaluation
- * Indicates new service in primary care setting

- ✓ Behavioral Health eManagement on eConsult Platform
- *Available to solo providers with high panels

LA Care/Beacon
877-344-2858
FAX# 866-422-3413

Target Population: Children and adults in Managed Care Plans who meet medical necessity or EPSDT for Mental Health Services

- Outpatient Services**
- ✓ Individual/group mental health evaluation and treatment (Psychotherapy)
 - ✓ Psychological testing when clinically indicated to evaluate a mental health condition
 - ✓ Psychiatric consultation
 - ✓ Outpatient services for the purposes of monitoring medication treatment
 - ✓ Outpatient laboratory, supplies and supplements

L.A. Care
888-347-2264

- ✓ Behavioral Health Treatment for individuals under age 21 with Autism Spectrum Disorders (ASD)

LA County DMH
800-854-7771
FAX# 562-863-3971

Target Population: Children and adults who meet medical necessity or EPSDT criteria for Medi-Cal Specialty Mental Health Services

- Outpatient Services**
- ✓ Mental Health Services (Assessments, Plan Development, Therapy, Rehabilitation & Collateral)
 - ✓ Medication Support
 - ✓ Day Treatment Services & Day Rehabilitation
 - ✓ Crisis Intervention & Crisis Stabilization
 - ✓ Targeted Case Management
 - ✓ Therapeutic Behavior Services
- Residential Services**
- ✓ Adult Residential Treatment Services
 - ✓ Crisis Residential Treatment Services
- Inpatient Services**
- ✓ Acute Psychiatric Inpatient Hospital Services
 - ✓ Psychiatric Inpatient Hospital Professional Services
 - ✓ Psychiatric Health Facility services

LA County DPH- SAPC
844-804-7500

Target Population: Children and adults who meet medical necessity or EPSDT criteria for Drug Medi-Cal Substance Use Disorder Services

- Outpatient Services**
- ✓ Outpatient Drug Free
 - ✓ Intensive Outpatient
 - ✓ Narcotic Treatment Program
 - ✓ Naltrexone
- Residential Services:** Expanded to all populations

DHCS Local Field Office
866-644-6341

- Inpatient Services (Fee-For-Service)**
- ✓ Voluntary Inpatient Detoxification Services *
- *Benefit expanded with NO restriction for physical medical necessity

Updated 7/2/2017

Health Plan Behavioral Health Network Contact Information

Medi-Cal Only Beneficiaries		
Medi-Cal Managed Care Health Plan	Non-Specialty Behavioral Health Services Provider	Contact Information
Health Net	MHN	Fax: (855) 703-3268 Phone: (800) 675-6110 (Follow member prompts)
Health Net – Molina	Molina	Fax: (562) 499-6105 Phone: (888) 665-4621
L.A. Care	Beacon	Fax: (866) 422-3413 Phone: (877) 344-2858
L.A. Care – Anthem	Anthem	Fax: (855) 473-7902 (Attn: Medi-Cal BH) Email: Medi-CalBHUM@wellpoint.com Phone: (888) 831-2246 (Option 1 for BH, 2 for BH Intake)
L.A. Care – Care 1st	Beacon	Fax: (866) 422-3413 Phone: (855) 765-9701
L.A. Care – Kaiser	Kaiser	See below for Regional Offices:
Bellflower Area – Downey/Norwalk	Fax: (562) 657-2497 Phone: (562) 807-6200	San Fernando Valley – Woodland Hills Fax: (818) 592-3015 Phone: (855) 701-7955
Lancaster	Fax: (661) 951-2999 Phone: (661) 951-0070	San Gabriel Valley – Baldwin Park/West Covina Fax: (626) 856-3010 Phone: (626) 960-4844
Los Angeles – Sunset	Fax: (323) 783-4299 Phone: (323) 783-2600	South Bay Fax: (310) 517-3499 Phone: (310) 325-6543
Panorama City – Santa Clarita/Reseda	Fax: (800) 700-8705 Phone: (818) 758-1200	West L.A. Fax: (323) 298-3119 Phone: (323) 298-3100
Cal MediConnect Beneficiaries		
Cal MediConnect Health Plan	Non-Specialty Behavioral Health Services Provider	Contact Information
Care 1 st	Beacon	Fax: (877) 752-3257 Email: cmc_Care1st@beaconhs.com Phone: (855) 765-9701
CareMore	Beacon	Fax: (877) 749-3734 Email: cmc_caremore@beaconhs.com Phone: (855) 371-8092
Health Net	MHN	Fax: (855) 703-3268 Email: MHN.CMC@MHN.COM Phone: (855) 464-3571
L.A. Care	Beacon	Fax: (800) 916-4102 Email: cmc_lacare@beaconhs.com Phone: (877) 344-2858
Molina	Molina	Fax: (562) 499-6105 Phone: (855) 665-4627

L.A. Care Contacts

Customer Solution Center (Member Services)	Tel: (888) 839-9909
Behavioral Health Department	Tel: (844) 858-9940
Disease Management	Tel: (213) 694-1250 Ext. 5426 (Asthma) Tel: (213) 694-1250 Ext. 5436 (Diabetes) Tel: (213) 694-1250 Ext. 5430 (Heart)
Care Management	Tel: (844) 200-0104
Medical Management (for authorization)	Tel: (877) 431-2273
Managed Long Term Services & Supports	Tel: (855) 427-1223
Pharmacy (Vendor - Navitus Health Solutions)	Tel: (844) 268-9786
Telephonic Interpreter Services	Tel: (888) 930-3031 Providers Tel: (888) 942-7670 Members
Transportation Services (Vendor - LogistiCare)	Tel: (866) 529-2141 English Tel: (866) 529-2142 Spanish



Presenter Contact Info.

- **Torhon Barnes, MSW – BH Manager, (213) 694-1250, ext. 5283 , tbarnes@lacare.org**
 - **Address BH services access issues, including Regional Center, BHT and TransHealth**
 - **BH Outreach and Service/Care Coordination – LA Regional Centers, IPA/iPPG, Hospitals and Community partners**
 - **Member Education and Linkage Support**
 - **BH Services Quality Oversight and Monitoring**
 - **Advocate for unmet member needs**

