

Join HealthTech 4 Medicaid (HT4M) + COPE Health Solutions for

IMPROVING PERFORMANCE & FINANCIAL SUSTAINABILITY UTILIZING THE CA PATH TA **MARKETPLACE**

September 12, 2024 | 12pm PST / 3pm EST

Featuring:



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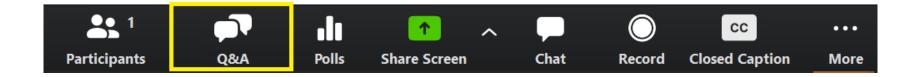
Executive Director Community Doulas





Housekeeping

- Please enter questions through the Q&A feature in Teams (screenshot below), and we will answer questions at the end
- You may also email questions directly to info@copehealthsolutions.com



• Attendees will receive a PDF copy of the presentation, a link to the recording and a written Q&A.



Agenda

- TA Marketplace Waiver Timeline
- TA Marketplace Project Domains and Types
- Accessing the Marketplace
- State & National Connection
- Panel Discussion
- Q&A



TA Marketplace Waiver Timeline



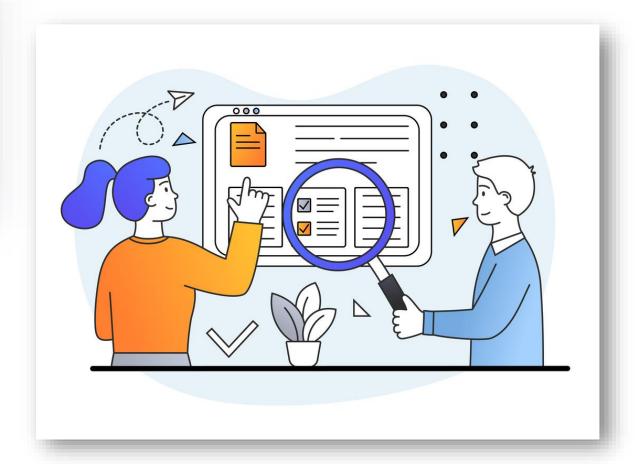
PATH Technical Assistance (TA) Marketplace

Providing Access and Transforming Health (PATH) is a \$1.85 Billion Initiative, approved under California's Section 1115 Waiver that provides funding to counties, providers, community-based organizations, and other local entities to expand capacity to implement key Medi-Cal Transformation (formerly known as CalAIM) components, including Enhanced Care Management and Community Supports, statewide.

The PATH Technical Assistance (TA) Marketplace

is a component of the PATH initiative that provides funding to state approved vendors to help Enhanced Care Management (ECM) and Community Supports (CS) providers build out or reconfigure their programs.

TA PATH's online portal opened for recipients in *February 2023*





TA Marketplace Project Domains and Types



The TA Marketplace Offers TA Services in Seven Different Domains



COPE Health Solutions has executed projects in all 7 domain

Our firm has decades of experience working with organizations to help manage total cost of care, quality & clinical outcomes.

Support the development of value propositions to utilize with managed care plans & partnering entities.

Translate Medi-Cal Transformation (formerly known as CalAIM) contract and programing requirements to align with value-based payment arrangements & population health infrastructure to maximize quality, clinical outcomes & bottom-line for all organization types & scale.

Example Project for Each TA Domain

Building Data Capacity

- Configuration of analytics and data models to meet Medi-Cal Transformation requirements
- Development of data processes and workflows to make data easy to use & access
- Risk stratification for high-risk member identification, outreach & enrollment
- Self-service tools for in-house analytics, managed care plan reporting & team performance management
- Platform & technology best practices to accelerate member engagement, data aggregation, sharing & improve clinical quality outcomes

Community Supports

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- Assessment of community support services offered within service area
- Project plans to develop or reconfigure current CS service offerings
- Gap assessments, workflows, training, documentation, staffing, and member engagement strategies for CS services

Engaging in CalAIM through Medi-Cal Managed Care

- Staffing & financial models
- Application development support
- Payer collaboration & engagement
- Contract term and reimbursement structure advisory
- Billing, reporting & documentation best practices



Example Project for Each TA Domain

Enhanced Care Management **Promoting Health Equity Supporting Cross-Sector Partnerships** Workforce

- Outreach and engagement strategies for POF
- Care plan development to support effective engagement of high-needs patient populations
- Strategies and workflows for coordinating with CS, BH, and social services providers, including primary care coordination
- Development and implementation of engagement strategies for marginalized or under served communities and POF
- Development of data processes, tools, and dashboards related to health equity, to support identification and engagement with members
- Assessment of potential cross-sector partners within service area
- Support engaging with partners and developing shared contracts to increase service offerings
- Development and implementation of shared cared plans with identified partners
- Development of shared team models
- Development and implementation of customized competency-based training programs (e.g., care models, member engagement & care coordination)
- Development and implementation of hiring processes, employee engagement and training and performance management tools



Pre-Packaged and Customized Project Offerings

TA recipient's have the choice to choose from off-the-shelf or hands-on projects when working with a TA Vendor, both can support the recipient in addressing notable organizational gaps and improvement opportunities



Hands-On

Customized TA projects tailored to the unique needs of the TA Recipient's organizational operations.

These project require significant interactions between the recipient and the vendor to define the scope and project deliverables to ensure it aligns with the recipient's intended outcome.

Project approval from DHCS can take between 4 – 8 weeks from initial project request.



Off-the-Shelf

These projects are "prepackaged" offerings that typically encompass best practices, trainings, and standard program tools and materials.

These project require limited interactions between the recipient and the vendor as they are not tailored to a specific organizations operations and are developed with little to no customization.

Project approval from DHCS can take between 3 – 6 weeks from initial project request.



Accessing the Marketplace



Becoming a TA Project Recipient



Entities interested in accessing TA resources through the TA Marketplace must complete a TA Recipient Eligibility Application, along with submitting all required forms and documentation.

- Step 1
- Obtain an attestation or contract for ECM and/or CS services through a Managed Care Plan (MCP) or the Department of Health and Human Services (DHCS)
- Step 2
- Complete the recipient eligibility application on the TA Marketplace website to ensure you are eligible to receive support through the TA Marketplace
- Step 3
- Work with COPE Health Solutions to identify hands on or off the shelf projects to support configuration and/or development of your ECM or CS program
- Step 4

COPE Health Solutions submits project scope and budget to DHCS for review and approval

^{*}Eligible organizations may include, but are not limited to, county, city, and local government agencies, public hospitals and providers, Community-based providers and organizations (CBOs), Other Enhanced Care Management (ECM) and Community Supports providers, Medi-Cal Tribal and Designees of Indian Health Programs and other DHCS-approved entities.



State & National Connection





Aligning TA with State and National Policy Goals

Focus Areas:

- Value-Based Care: Policies promoting value-based care models require TA that supports the transition from fee-for-service to value-based payment structures.
- Health Equity: New policies targeting health equity necessitate TA focused on reducing disparities and improving access for underserved populations.
- **Data Interoperability:** Federal initiatives pushing for improved data sharing and interoperability demand TA to enhance data systems and compliance.

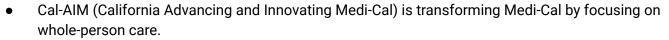
Ensuring Policy Compliance and Strategic Alignment:

- Selecting the Right TA:
 - Compliance Assurance: Choose TA services that help meet current regulatory requirements and prepare for future policy shifts.
 - Strategic Positioning: Align TA with organizational goals to ensure adaptability and sustained performance amidst evolving policy landscapes.



Exploring California's Cal-AIM & PATH Initiatives

Addressing Key Gaps in Medicaid Delivery



- PATH (Providing Access and Transforming Health) is a \$1.85 billion initiative aimed at supporting local providers and CBOs to enhance Medi-Cal services.
 - PATH aims to address gaps in local capacity and infrastructure that hinder the full implementation of Cal-AIM.
 - Focus areas: staffing, billing systems, data exchange capabilities.
 - Enhancing Medi-Cal delivery through collaboration with managed care organizations and community partners.
- Enhanced Care Management (ECM), Community Supports, and Justice Involved Services under Cal-AIM.





PATH Initiatives

- Whole Person Care Services and Transition: Funding services until transition to managed care coverage by January 2024.
- **Technical Assistance Initiative**: A virtual marketplace for technical support and resources.
- Collaborative Planning & Implementation: Regional planning to improve readiness for ECM and Community Supports
- Capacity and Infrastructure Transition, Expansion, and Development (CITED): Direct funding for capacity building.



Panel Discussion



Question & Answer (Q&A)

For more information on how COPE Health Solutions can support you in maximizing Medi-Cal Transformation (formerly known as CalAIM) funding and opportunities, please contact our team at info@copehealthsolutions.com or 213-259-0245.

www.copehealthsolutions.com



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