



SACRAMENTO COUNTY HEALTH AUTHORITY COMMISSION

MEETING 3: RATIFY MCP FINAL SCORES AND RANKING, AND PREPARE FOR STRATEGIC PLANNING

February 4, 2022

Agenda Item 1:

Welcome and Opening Remarks

Agenda Item 2:

Agenda Review

Agenda

1. Welcome/Opening Remarks
2. Agenda Review
3. Action: Approve Minutes
4. Updates and Discussion (Committees, DHS Director)
5. Review and Ratify Ad Hoc Committee's Rank of Managed Care Plans and Aggregate Scores
6. Health Authority Strategic Planning
7. Public Comment
8. Closing Comments, Next Steps and Adjournment

Agenda Item 3:

Action: Approve Minutes

Agenda Item 4:

Updates and Discussion

- A. Consumer Protection Committee
- B. Quality Improvement/Quality Assurance Committee
- C. Ad Hoc Committee
- D. Department of Health Services Director's Update

Agenda Item 5:

Presentation and Action: Review and Ratify Ad Hoc Committee's Rank of Managed Care Plans and Aggregate Scores

MCP Assessment Process

- SCHA designed the assessment process so that it:
 - Aligns with state's timeframe
 - Assesses MCP's ability to deliver on Sacramento-specific Medi-Cal goals and accounts for past performance
 - Utilizes expertise of subject matter experts and beneficiary advocates
 - Maintains integrity and limits conflicts of interest (per County Counsel recommendations)
 - Maintain confidentiality of MCP responses
 - Maintain anonymity of expert reviewers
- The Commission voted to rank all MCPs according to their final overall scores, and to recommend to the Board of Supervisors that the top 3 MCPs receive letters of support

MCP Assessment Process

- The assessment consists of minimum threshold requirements and the following three components:
 - (1) RFQ Technical Response (60%).
 - Quality
 - Access to Care
 - Continuum of Care
 - Children Services
 - Behavioral Health Services
 - Coordinated/Integrated Care
 - Reducing Health Disparities
 - Increased Oversight of Delegated Entities
 - Local Presence and Engagement
 - Emergency Preparedness and Ensuring Essential Services
 - Addressing the Social Determinants of Health
 - CalAIM
 - Value-Based Purchasing
 - (2) Publicly Available Data (20%)
 - HEDIS quality
 - Network adequacy
 - Timely access
 - (3) Oral Presentations (20%)

MCP Assessment Process

	Ad-Hoc Committee	Expert Reviewers
Number	8 voting Commissioners (a hospital system, FQHCs, advocates for beneficiaries, and physicians)	9 Expert Reviewers (confidential, appointed by Ad-Hoc Committee)
Role	<ul style="list-style-type: none"> • <u>Oversaw</u> RFQ review process and plan interviews • <u>Reviewed</u> MCP submissions • <u>Ratified</u> final scores 	<ul style="list-style-type: none"> • <u>Participated</u> in review process and plan interviews • <u>Scored</u> MCP submissions • <u>Scored</u> MCP oral presentations
Subject Matter Expertise	<ul style="list-style-type: none"> • Familiarity with managed care business operations, population health, social determinants of health, quality metrics, health equity, payment and reimbursement approaches and issues, medical coding, etc. • Quality Improvement & HEDIS data • Deep understanding of beneficiary and provider experiences in Sacramento, including familiarity with provider impacts on managed care business operations • Utilization management and case management experience • Public health and systems planning expertise • Experience treating Medi-Cal patients experiencing homelessness, housing insecurities, chronic disease, which may include (but is not limited to) housing, community and social service agencies, community-based services that integrate and provide continuity of care services 	

Timeline for Letter of Support and MCP Procurement

Feb. 4

- Commission ratifies Ad Hoc Committee's MCP rankings and sends them to BOS

Mar. 8 2022

- BOS approves recommendations by the Commission for Letters of Support for top 3 MCPs
- County sends letters of support to MCPs for inclusion in MCP proposal to DHCS

By Dec. 2022

- DHCS announces MCPs that it will contract with in Sacramento County

2024

- Selected MCPs will operate in Sacramento County

MCP Assessment Process Results

Managed Care Plan	Final Score
1. Health Net Community Solutions, Inc.	65.62
2. Molina Healthcare of California Partner Plan, Inc.	60.84
3. Anthem Blue Cross Partnership Plan	58.40
4. Kaiser NorCal	56.11
5. Aetna Better Health of California	42.84



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DISCUSSION ON STRATEGIC PLANNING

Prepared by Bobbie Wunsch, Founder and Partner,
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WHY DO STRATEGIC PLANNING

- High level **plan** to achieve one or more goals under conditions of uncertainty
- **Roadmap** for future initiatives
- Provides Commission, Staff and Community with **common focus and perspective**
- Focus on **members** and **improved health status**

CHARACTERISTIC OF AN EFFECTIVE PLAN

- Articulates the **unique role and strategic advantage** that the organization brings
- Delineates **clear responsibilities** for the organization
- Identifies **trade-offs** and makes decisions about both **what to do** and what **NOT** to do
- **Uses information** about the community, external environment and internal strengths/performance to develop strategic direction

COMPONENTS OF STRATEGIC PLAN

- Vision
- Mission
- Values
- Strategic Goals and/or Priorities
- Major Strategies
- Anticipated Outcomes
- Oversight and Monitoring
- Timeline

DISCUSSION QUESTIONS

- ❑ What do you want to accomplish with strategic planning?
- ❑ What has been your experience with strategic planning and what did you learn that would be beneficial to the group?



PLANNING PROCESS OPTIONS

- ❑ Survey all Commission members about strengths, opportunities and issues of key concern in advance of beginning the process
- ❑ 3-4 Educational Sessions on Topics of Key Concern to Health Authority and to Members: Conduct learning sessions as full Health Authority on key strategic issues
- ❑ Options:
 - ❑ Option #1 – Strategic Planning Committee of 4-5 members to guide process, develop draft strategic plan and regularly bring back to Commission sections of plan for Commission to review at regular Commission meetings
 - ❑ Option #2 – Use Commission as a whole to develop plan components at regular or special meetings

EXAMPLES OF LEARNING SESSIONS

- Effective Functioning of a Health Authority – Roles and Responsibilities
- History of Health Authorities in California and Case Studies
- Effective Approaches to Evaluation of Health Plans' Contribution to Improvements in Health Status
- Future Key Financing Issues Impacting Health Plans
- New Delegation and MLR Rules from CMS/DHCS

DISCUSSION QUESTIONS

- ❑ Which components of process are of most interest?
- ❑ Which option do you prefer?

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