



# County of San Mateo

## Inter-Departmental Correspondence

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**Department:** HEALTH

**File #:** 22-279

Board Meeting Date: 4/19/2022

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**Special Notice / Hearing:**None  
**Vote Required:**Majority

**To:** Honorable Board of Supervisors

**From:** Louise F. Rogers, Chief, San Mateo County Health  
Lisa Mancini, Director, Aging and Adult Services

**Subject:** Agreement for Aging and Adult Services to Provide Medi-CAL Enhanced Care Management Services for Health Plan of San Mateo Clients

### **RECOMMENDATION:**

Adopt a resolution authorizing an agreement for Aging and Adult Services to provide Medi-CAL Enhanced Care Management services for clients of the San Mateo Health Commission dba Health Plan of San Mateo for the term of January 1, 2022 through December 31, 2022.

### **BACKGROUND:**

Prior to 2014, San Mateo County Health's Aging and Adult Services (AAS) division contracted with the California Department of Aging (CDA) to provide Multipurpose Senior Services Program (MSSP) services, covering social and health care management services to frail elders. In 2014, the County, through Health Plan of San Mateo (HPSM), was selected by the State to be one of eight counties to participate in Cal MediConnect. That program promoted coordinated health care delivery for Californians dually eligible for Medicare and Medi-Cal. Through this agreement, HPSM paid the County a fixed monthly amount for each Cal MediConnect program participant who received MSSP services. This arrangement continued after the three-year demonstration project.

The California Advancing and Innovating Medi-Cal (CalAIM) initiative is moving Medi-Cal toward a population health approach that prioritizes prevention and whole person care. The program is designed to extend supports and services beyond hospitals and health care settings directly into California communities.

As part of CalAIM, the California Department of Health Care Services (DHCS) established a new statewide benefit called Enhanced Care Management (ECM). ECM will provide a whole-person approach to care that addresses the clinical and non-clinical circumstances of high-need Medi-Cal recipients. The goals of ECM are: 1) improving care coordination; 2) integrating services; 3)

facilitating community resources; 4) improving health outcomes; 5) addressing social determinants of health; and 6) decreasing inappropriate utilization. One of the highest need Medi-Cal eligible populations is served by the MSSP. Beginning on January 1, 2022, California counties began to automatically transition all MSSP members into the ECM program.

**DISCUSSION:**

Under the new ECM agreement, County staff will provide direct services for HPSM's ECM clients. HPSM will pay the County an initial fixed monthly rate of \$472 per client for these services. The contract effective date is January 1, 2022 and the County has operated under a letter of intent to prevent a lapse in service from the transition of MSSP to ECM and to allow time for both parties to enter into this agreement.

This agreement is coming to your Board late because of the time required to review and approve the new agreement template.

The agreement and resolution have been reviewed and approved by County Counsel as to form.

This program and agreement will allow the County to provide ECM services to older adults and people with disabilities to keep them in a community setting when possible. It is anticipated that the average number of days from HPSM's initial referral to the enrollment into County's ECM program will be 45 days.

**PERFORMANCE MEASURE:**

<b>Measure</b>	<b>FY 2021-22 Estimated</b>	<b>FY 2022-23 Projected</b>
Average number of days from HPSM's initial referral to the enrollment into County's ECM program	45 days	45 days

**FISCAL IMPACT:**

The term of the agreement is January 1, 2022 through December 31, 2022. Approval of this agreement allows the County to receive funding for ECM services. Funding and appropriation for ECM services are included in the recommended budget. There is No Net County Cost associated with this agreement.