



**CONTRA COSTA COUNTY
BOARD OF SUPERVISORS
FEBRUARY 8, 2022**

**CARES 2022 PLANNING GROUP
PRIORITIES FOR THE NEXT 18 MONTHS
A PATH TO MEDI-CAL**

PURPOSE OF PLANNING GROUP

CARES PLANNING PROCESS 2022 was convened by the Contra Costa County Board of Supervisors to develop a set of **potential options** for the future of the CARES Program

1. Understand current policy environment for and numbers of remaining uninsured/undocumented residents of Contra Costa County aged 26-49
2. Learn about current status of utilization and funding for CARES program
3. Provide options for future of CARES program, potentially including benefits and funding
4. Offer options to the Contra Costa County Board of Supervisors for their consideration on the future CARES program

TODAY'S DISCUSSION

- Changes in State Health Policy Environment
- Overview of CARES Program 2015 – 2021
- CARES as Pathway to Medi-Cal
- Priorities for Changes in CARES Program – 18 months
- Financing the Proposed Priorities

CARES 2022 PLANNING GROUP

MEMBERS

- Contra Costa Health Services, Contra Costa Health Plan and Contra Costa EHSD
- La Clinica de la Raza, LifeLong Medical Care and Brighter Beginnings and Redwood Community Health Coalition (formerly Community Clinic Consortium)
- Hospital Council of Northern California
- Operation Access
- Community Advocates including United Latino Voices, Contra Costa Immigrant Rights Alliance and #One Contra Costa
- CARES Member

GAME CHANGER:

State Policy Landscape

- Current State Budget expands Medi-Cal to income eligible residents over 50 in May 2022 (889 current CARES members)
- Proposed State Budget for FY 22-23 expands Medi-Cal to income eligible residents 26-49 in January 2024
 - ▣ Proposed budget closes the gap on income eligible residents regardless of immigration status
 - ▣ Allow CARES Program to end in 18 months and be used as Pathway to full scope Medi-Cal
 - ▣ Use CARES to build enrollment in county's single Medi-Cal managed care plan that will begin January 2024

CARES HISTORY:

ENROLLMENT AND FUNDING

- Began in 2015, funding by hospital systems and Contra Costa County
- Each year had limit on enrollment due to funding
- Average enrollment each year – 3,380
- 92% Latinx
- 2.2 average visits per year
- Members report high satisfaction with CARES
- Limited/no organized community engagement or outreach
- Provider payments have remained static well below current Medi-Cal reimbursements at health centers

PRIORITIES FOR CONSIDERATION— July 2022 – December 2023

- **Priority #1** – Increase provider payment
and
Lift Enrollment Cap with Community Outreach
- **Priority #2** - Add Integrated Behavioral Health to
primary care benefits and capitation
- **Priority #3** – Add fee-for-service dental benefit

*Explored other essential Medi-Cal benefits including vision and specialty care –
did not include due to provider capacity and limited timeframe for CARES*

PLANNING ASSUMPTIONS

- Increased payments effective July 1, 2022 – brings health centers up to approximately 73% of Medi-Cal rates
- Program enrollment target based on ~50% of remaining income-eligible uninsured
- Current County contribution to CARES will continue through FY 23-24
- In Fall 2023, EHSD will partner with health centers to facilitate transition to Medi-Cal

MEMBERSHIP ESTIMATES – NO CAP

Current income-eligible uninsured known to EHSD:	12,000
Enrollment assumption for CARES expansion:	8,200
Estimated CARES members as of May 2022: (current enrollment cap 4,464)	2,700
Assumed New Members	5,500
46% of remaining income-eligible uninsured 26-49	

Community Engagement and Outreach

- Essential to coverage expansion pathway efforts
- Educates community members on coverage options including Medi-Cal
- Builds on COVID-19 outreach and engagement efforts
- Would involve health centers as well as grass-roots community-based organizations

FUNDING AVAILABLE/ALLOCATED

	Balance forward as of 7/1/22	FY 2022-23	FY 2023-24 projected
Current carryover and balance as of 12/21	\$1,115,713 -		
County contribution		\$750,000	\$750,000
Measure X allocation for CARES		\$750,000	\$750,000
TOTAL AVAILABLE:		\$2,615,713	\$4,115,713

SUMMARY OF PRIORITY COSTS

	Cost for current CARES capacity (4,464)	Add'l cost for expanded CARES capacity for 18 months (3,736)	Additional Funding Required*
Priority #1 – Increase provider payment <i>and</i> Lift Enrollment Cap with Community Engagement and Outreach Component			
• Cost of increased primary care capitation	\$2,678,132	\$2,241,375	(\$803,794)
• Cost of community engagement & outreach	\$300,000	\$500,000	(\$1,603,794)
Priority #2 - Add Integrated Behavioral Health to primary care capitation	\$1,365,984	\$1,143,216	(\$4,112,994)
Priority #3 – Add fee-for-service dental benefit	\$1,785,600	\$1,494,400	(\$7,392,994)
Data Analysis and Evaluation		\$100,000	(\$7,492,994)

*Assuming **\$4,115,713** in projected funding