



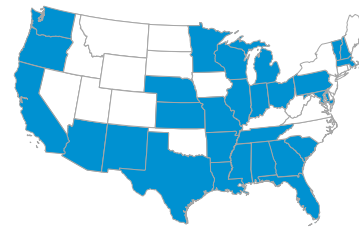
Jan. 23rd, 2018

A local approach in every state



Centene

- Health plan operations in 29 states
 - National experience with full integration
- 12.2 million members
- 28,900 employees
- The largest Medicaid managed care plan in the United States.
- National expertise, but locally controlled and governed.



29 states

with government sponsored healthcare programs

Medicaid
(25 states)

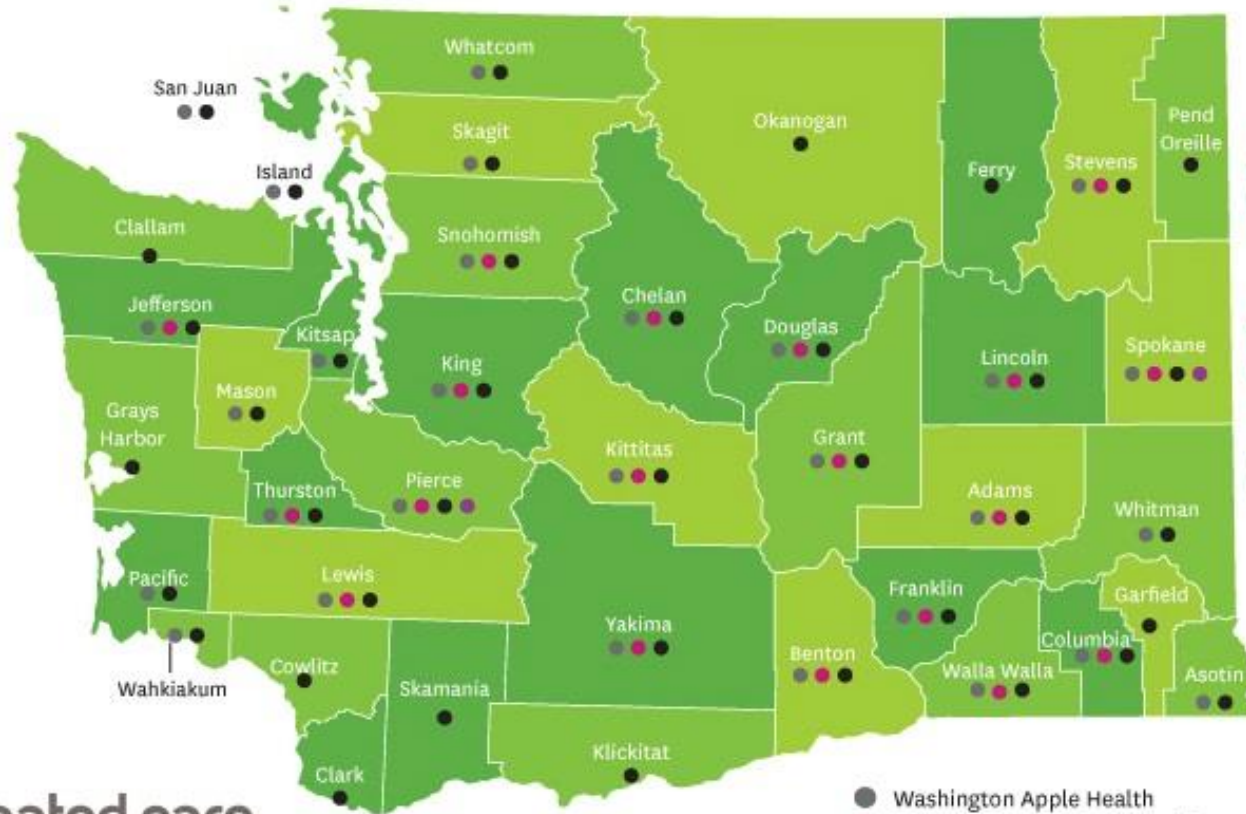
Exchanges
(15 States)

Medicare
(13 States)

Correctional
(8 States)

- 
- Serving over 250,000 Washingtonians
 - Coverage includes Medicaid, Foster Care, Health Benefit Exchange
 - 360 Employees statewide, offices in Seattle, Tacoma & Yakima
 - Integrated Behavioral Health in North Central region of Chelan, Douglas and Grant counties, 2018

Coordinated Care: We've Got You Covered



- Washington Apple Health
- Ambetter from Coordinated Care
- Allwell from Coordinated Care
- Apple Health Core Connections (Foster Care)

Goals for Integration



- Whole-person care, including social determinants of health
- Collaboration early, often with providers and allied health systems
- In-person technical assistance that works best for the community
- Trauma-informed care
- Patient-centered care teams

Our System of Care Model



System of Care



Core Values:

- Focused on the whole-person
- Recovery-oriented
- Culturally responsive
- Self-determined

Whole Person Healthcare



- Supporting physical, behavioral health and social services with:
 - Aligned and integrated care
 - Support/services to meet member-determined goals
 - Communication and links between the member's medical home and other care/service needs
 - Prevention
 - Relationships and interactions with providers, members and community partners grounded by four core values of our System of Care framework

Behavioral Health Benefits



Before Jan. 1, 2018

- For low/moderate needs by Coordinated Care:
 - Office visits
 - Counseling
 - Outpatient treatment
- Access to Care Standards for
 - Inpatient behavioral health services
 - Intensive behavioral health services, and
 - Substance abuse treatment
- Work with BHO (Behavioral Health Organization)
- Needed authorization for outpatient services

Behavioral Health Benefits



After Jan. 1, 2018

- No more Access to Care standards
- No more North Central BHO
- Low, moderate and high intensity provided by Coordinated Care
- Same provider network!
- Services available from any Coordinated Care provider (even outside county member lives in)
- Members can self-refer
- Easier access to outpatient services

Call Coordinated Care for any behavioral health service 1-844-354-9876.

Behavioral Health Benefits



- Wraparound with Intensive Services (WISe)
- Program of Assertive Community Treatment (PACT)
- Substance Use Disorder Treatment
 - Outpatient
 - Intensive Outpatient
 - Residential
 - Detox
 - Medication Assisted Treatment
- More now coordinated directly by Coordinated Care.

Healthcare Coordination



- Supports wellness of enrollees
- Focused on improved health outcomes
- Care Coordination Services (CCS)

Short-term or intermittent needs, such as:

- Access to care/services addressing social needs
- Improving clinical outcomes
- Increasing self-management skills

Health Care Coordination



Complex Case Management (CCM)

- Focus on chronic or complex needs requiring ongoing care management.



Who we serve with AHCC:



- Approx. 23,000 members across the state
 - all 39 counties
- Children and youth:
 - in out-of-home placements
 - receiving adoption support
- Extended foster care (18-21)
- Alumni of foster care (aged out the mo. of their 18th birthday or after, enrolled until 26)
- **American Indian or Alaska Native may choose AHFC/Apple Health Core Connections but are not automatically enrolled
- Note: Extended Foster Care and Alumni are all referred to as “Alumni” for the purposes of available benefits.



National Expertise



- Leader delivering Medicaid services for child welfare
- First managed care program for children in foster care
 - Superior Star Health, Texas 2008
- Responsible for 107,000+ members in 11 states
 - Only health plan serving foster care population: Texas, Mississippi, Florida, Washington, Illinois (starting April 2018)
 - One of several health plans serving foster care population within these states: Missouri, Louisiana, Kansas, New Hampshire, Indiana, California

Integration for AHCC



By October 1, 2018 all physical and behavioral health services for foster, adopted, extended foster care, and alumni will be covered statewide by Coordinated Care.

Grant, Douglas and Chelan counties begin Jan. 1, 2018.

This provides:

- Simplified continuity of services for members
- Less duplication and disruption of services
- More timely access to needed treatments
- Broader services and support ensuring a whole person /holistic approach

Examples of Programs



a2A (adolescent to Adult)



Outreach to members prior to their 18th birthday. A customized tool is used to assist CM's in identifying life areas of particular importance to young adult members. CM's also help connect the member to resources, health education and health care. This program includes no cost cell phone and financial incentives for healthy behaviors through the CentAccount Rewards program.

Adoption Success



For members who are adopted into a “forever home;” preparing members and families with the coping skills and resources to prevent disruption from their “forever home” back to out of home placement. Specialized support from CM's experienced in foster care adoption, behavioral health and family wrap-around services.

Zero Suicide



A Suicide Prevention Protocol to quickly assess members at high risk of suicide, self-harm, overdose. Upon identification of a high risk member outreach is made, screening occurs and a safety plan is developed. A CM continues to provide services, outreach, screenings and update the member's safety plan until the CM and member agree services are no longer needed. Member is then reassessed quarterly and on an as-needed basis for high risk behaviors.

Examples of Programs



We Care



Effort to reach homeless youth/alumni through face-to-face contact at local shelters. Youth are connected to medical, behavioral health and Care Management services, set up with a no cost cell phone and connected to community resources.

PMUR



Psychotropic Medication Utilization Review (PMUR) is a retrospective review of psychotropic prescriptions to reduce unnecessary medication utilization for members who meet established criteria. This program supports the oversight already in place through the existing Partnership Access Line (PAL) and the Second Opinion Network (SON).

AHCC Community Educators



Located throughout the state to provide no cost training for caregivers, adoptive parents, DSHS social workers, and providers on topics related to the needs of children in the child welfare system. Training topics include trauma, resiliency, and evidenced based treatment.

Thank You!