Alliance Programs and Specialty Care Services







Health care you can count on. SERVICE YOU CAN TRUST.







November 5, 2012



Who Does the Alliance Serve Today:

Group	Total Membership
ACC - Alliance Complete Care	5,267
HFP - Healthy Families	10,162
IHSS - In-Home Support Services	4,958
MCAL - Medi-Cal	128,154
MNF - Member Not Found	0
WELL - Well	0
Total: All	148,541

The Alliance provides comprehensive coverage to members through four plans:

- Medi-Cal ≈ 128,154 members
- Healthy Families ≈ 10,162 members
- Alliance Group Care ≈ 4,958 members
- Alliance CompleteCare ≈ 5,267 members

*Source: Alliance eligibility data for October 1, 2012.



What Lies Ahead?

- The Affordable Care Act (ACA) aka "Healthcare Reform"
 - Duals Pilot Program approximately 20,000 enrollees 6/2013
 - Medicaid expansion approximately 39,000 enrollees -1/2014
 - Exchange 2014
- NCQA Accreditation December 2013
 - Complex Case Management (CCM)
 - Disease Management (DM)



AAH Access Standards:

- Contractually Required Access Standards
 - At least two PCP's within 10 miles or 30 minutes.
 - For specialists, 1 specialist within 15 miles or 30 minutes.





Department of Health Care Time & Distance Standards:

Provider to Member Ratios:

- Primary Care Physicians 1:2,000
- Total Physicians 1:1,200
- No specific Provider to Member ratio for Specialists

Mid-Level/PA/NP to Member Ratios:

1:1,000 additional caseloads per Mid-Level per office.





Appointment Access Standards:

Type of Care	Standard	
Emergency	Immediate; 24 hours a day, 7 days a week	
Urgent Care	 Prior Authorization- Within 96 hours of the request No Prior Authorization- Within 48 hours of the request 	
Routine (Non-Urgent) Primary Care	Within 10 business days of the request	
Preventive Care	Within 10 business days, not to exceed 30 calendar days of the request	
Prenatal Care	 Urgent Prenatal- Same day Initial Prenatal Visit- Within 2 weeks of the request 	
Specialist Care	Within 15 business days of the request	
Ancillary service for diagnosis or treatment (Non- Urgent)	Within 15 business days of the request	
Behavioral Health Care	 Non-urgent by non-physician provider- Within 10 business days Urgent- Within 48 hours of the request Emergency (non-life-threatening)- Within 6 hours Emergency (life-threatening)- Immediate; 24 hours a day, 7 days a week 	
Initial Health Assessment (IHA) and Individual Health Education Behavioral Assessments (IHEBA)	 Members under the age of 18 months- Within 60 days of member assignment or within periodicity timelines established by the American Academy of Pediatrics (AAP) for ages two and younger whichever is less Members age 18 months and older- Within 120 days of member assignment 	
Children's Preventive Periodic Health Assessment	According to American Academy of Pediatrics Periodicity Schedule	
Follow-up on Missed Appointments	Providers must follow-up with all members that do not show up for their scheduled appointment to schedule another appointment based on the type of care required (i.e. urgent, routine, preventative, prenatal, etc.).	

Looking Ahead: Specialty Providers

- The wave of aging population will reshape the health care system forever. By 2030 key studies indicate:
 - The over 65 population will nearly triple.
 - More than 6:10 Patients will be managing more than one chronic condition.
 - More than 1:3 Patients over 21 million will be considered obese.
 - 1:4 Patients 14 million will be living with diabetes.
 - Nearly 1:2 Patients more than 26 million will be living with arthritis.
 - Eight times more knee replacements will be performed than today.

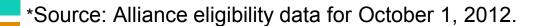




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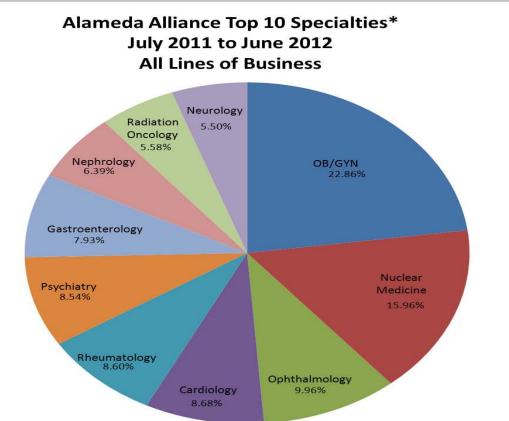
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- Alameda Alliance for Health Members<21 years of age = 82,661
- Senior Persons with Disabilities = 20,353
- Women in Childbearing Age (15-45) = 30,000
- Approx. Births per year = 2,500





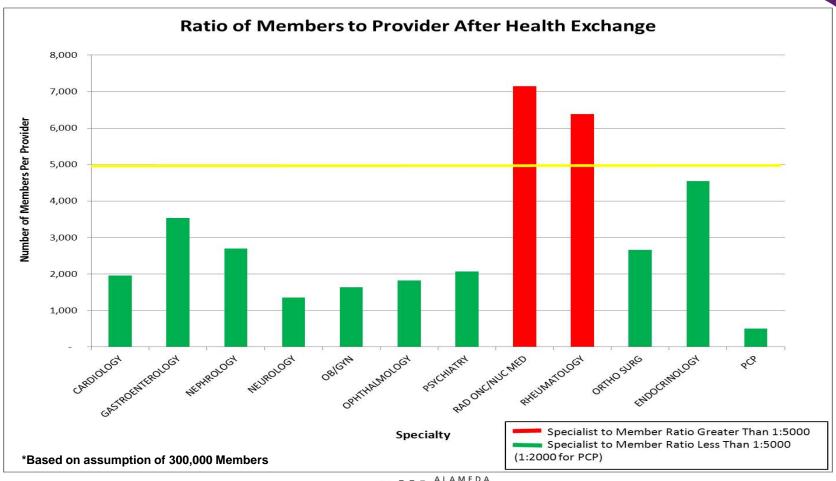
Top Ten Specialties By Dollars Spent:





*Per claims paid to provider report

Ratio of Members to Providers:





Building Linkages to Specialty Care:

- Opportunities
- Challenges
- Shortages
- Role of County Supervisors





Alameda Alliance's Specialty Access Goals:

- Goal: Improving quality by organizing care around the patient with the primary care provider as the foundation of the system.
 - Measure and Improve Performance
 - Improved Coordination of Benefits
 - Extended Relationship with County Partners
 - Focused Attention to Quality via NCQA
 - Preserving our Mission
 - Plan and Manage Care
 - Provide Self-Care and Community Support



