Medi-Cal Managed Care for Kids in California

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The Medi-Cal Population of Children is Diverse

Figure 1: Medi-Cal Enrollment of Children by Race/Ethnicity²

- **Latino** - 60% (3.1m)
- **White** - 13% (694k)
- **Black** - 7% (360k)
- **Unknown** - 7% (367k)
- **Other*** - 6% (324k)
- **Alaskan Native or American Indian** <1% (58k)
- **Asian or Pacific Islander** - 7% (339k)
  - Vietnamese (76k)
  - Chinese (73k)
  - Filipino (55k)
  - Other API (41k)
  - Asian Indian (35k)
  - Korean (20k)
  - Cambodian (14k)
  - Laotian (9k)
  - Samoan (7k)
  - Hawaiian (3,800)
  - Japanese (3,500)
  - Guamanian (1,300)
  - Amerasian (400)

*This group may include single race/ethnicity individuals who are not categorized in one of the other groups and it also may include individuals with more than one race/ethnicity.
Medi-Cal Contracts With A Lot of Health Plans

• 92% of kids with Medi-Cal are enrolled in managed care

• County-based service areas (or reporting units)
  • Some counties have one plan;
  • Many counties have two plans that compete
  • A few counties have six or seven plans competing
  • Some multi-county service areas as well

• California is re-procuring Medi-Cal managed care contracts which will begin in 2024
  • State plans to limit contracts to 2 plans per county max
Medi-Cal Managed Care Has History of Documented Poor Access and Oversight

- **State Auditor Reports:**
  - Children’s preventive care in Medi-Cal (2018-111)
  - Children’s dental care in Medi-Cal (2013-125)
  - Childhood lead levels (2019-105)
  - Youth suicide (2019-125)
  - Medi-Cal access in rural areas (2018-122)
  - Medi-Cal eligibility system issues (2018-603 and 2020-613)

- **Past HEDIS Reports**

- **Academic Research**

- **New! Children’s Preventive Services Report**
### Children’s Quality in Medi-Cal is Low Statewide, 2019

<table>
<thead>
<tr>
<th>Children’s Preventive Health Service</th>
<th>Medi-Cal Managed Care Statewide Average</th>
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<tbody>
<tr>
<td>Lead screening in children who turned 2 years of age</td>
<td>61%</td>
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<tr>
<td>Well-child visits in the first 15 months of life</td>
<td>26%</td>
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<td>Child and adolescent well-care visits</td>
<td>51%</td>
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<td>Dental fluoride varnish application for children 6 months to 5 years of age</td>
<td>23%</td>
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<tr>
<td>Tobacco use screening for children and youth ages 12 to 21 years</td>
<td>1%</td>
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Children’s Quality in Medi-Cal Managed Care Has Notable Disparities by Race

Figure 2: Disparities in Children’s Preventive Care Utilization by Race/Ethnicity

- American Indian or Alaska Native
- Asian
- Black
- Latino
- Native Hawaiian or other Pacific Islander
- White
- Statewide

Categories:
- Well-Child Visits
- Immunizations for Adolescents
- Childhood Immunizations
- Use of Preventive Dental Services
- Annual Dental Visits
Figure 3: Widest Disparities in Children’s Preventive Care by Language

- **Chinese**: Childhood Immunizations: 86.9%, Well Child Visits: 70.8%
- **State Average**: Childhood Immunizations: 82.5%, Well Child Visits: 73.7%
- **Farsi**: Childhood Immunizations: 47.1%
- **Vietnamese**: Childhood Immunizations: 60%
Children’s Quality in Medi-Cal Managed Care Varies by Health Plan

Figure 1: Wide Variation in Children's Utilization of Preventive Services Among Medi-Cal Health Plans
As demonstrated by the overall top- and bottom-ranked plans:
What the Medicaid Department Director Said:

“The power of DHCS is in the fact that it pays for, we pay for, the care for this population. And if we are adept in our purchasing processes and working with our partners in setting the incentives in the right places, we can really move the system of care to a place that is much more holistic in addressing the totality, a place where it’s much more of a wraparound to people’s needs.”

# The Medi-Cal Managed Care Quality Improvement Toolbox

## Current Tools
- Regular reporting w/ accurate data
- Minimum Performance Levels (new 50th percentile) for some quality measures
- Corrective Action Plans
- Performance Improvement Projects
- Auto-assignment
- Monitoring re: language access

## Additional Tools
- Accessibility of reports
- Plan-specific comparative dashboards
- Consumer satisfaction
- Disparities Reduction Targets
- Penalties or Sanctions
- Capitation Rate-Setting