



To: Primary Care Physicians, Office Managers and Staff
From: Health Services Department
Date: 06/08/2022
Re: Health Home Process

Medical Managed Care Plans (MCP) are responsible for providing the following six core HHP services to eligible Medi-Cal members: comprehensive care management, care coordination, health promotion, comprehensive transitional care, individual and family support, and referral to community and social support services. Network Medical Management (NMM) will provide support for such services based on delegated and division of financial responsibilities. NMM will support education and training of all providers or staff who serve eligible Medi-Cal beneficiaries with complex medical needs and chronic conditions who may benefit from enhanced care management and coordination, including the HHP services.

Program Eligibility:

MediCal Managed Care members with the following: a. The member has certain chronic condition(s) which are determined by specified ICD 10 codes: i. At least two of the following: Chronic obstructive pulmonary disease, diabetes, traumatic brain injury, chronic or congestive heart failure, coronary artery disease, chronic liver disease, chronic kidney disease, dementia, or substance use disorders. ii. Hypertension (high blood pressure) and one of the following: Chronic obstructive pulmonary disease, diabetes, coronary artery disease, or chronic or congestive heart failure iii. One of the following: Major depression disorder, bipolar disorder, or psychotic disorders (including schizophrenia)

Chronic Homelessness: A person is chronically homeless if they have a condition limiting his or her activities of daily living and have been homeless for: o 12 consecutive months or more; or o 4 or more periods of time in the last 3 years A person who lives in transitional housing, or has been residing in permanent supportive housing, for less than 2 years is considered chronically homeless if they were chronically homeless prior to residence. c. Members cannot receive HHP services if they are: • Skilled Nursing Facility (SNF) residents with a duration longer than the month of admission and the following month (i.e., members are only eligible within the first 2 months of admission to the SNF). • Hospice services recipients.

If you have any members that meet the criteria above, please call our Case Management Department at 626 282 0288 ext. 6259 Mon – Fri between 8.30am to 4pm. We are here to assist with coordination of care.

Sincerely,

Network Medical Management - Health Services Department