

ALLIANCE CASE MANAGEMENT DEPARTMENT
2023 WORK PLAN

2024 Case Management Work Plan

Performance Measures	2024 Goal	Supporting Document / Report	Responsible Staff	Timeframe for completion	Committee & Reporting Frequency
Program Scope and Structure					
Utilization Management Committee (UMC) schedule	UMC meets at least quarterly; 2025 UMC schedule/agenda prepared and distributed by November 2024	UMC Meeting Minutes	Sr. Director, HCS	meet at least Quarterly; 2025 UMC schedule completed by November 2024	N/A - operational
Review of Policies & Procedure	100% of P&Ps reviewed within annual timeframe, and as needed	P&Ps	Sr. Director, Health Care Services	As needed, and at least Annually	UMC - annually
2023 CM Program Evaluation	Complete 2023 CM Program Evaluation by Q1 2024	2023 CM Program Evaluation	Sr. Director, Health Care Services	Annually, by Q1 2024	UMC - annually
2024 CM Program Description	Complete 2024 CM Program Description by Q1 2024	2024 CM Program Description	Sr. Director, Health Care Services	Annually, by Q1 2024	UMC - annually
2024 CM Work Plan	Complete 2024 CM Work Plan by Q1 2024	2024 CM Workplan	Sr. Director, Health Care Services	Annually, by Q1 2024	UMC - annually
CM Program Effectiveness					
CM Measures					

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Health Risk Assessment for SPDs (timely outreach & completion rate for newly enrolled and annual reviews)	≥ 90% timely outreach; ≥ 30% completion rate for newly enrolled; ≥ 30% completion rate for annual reviews	HRA Dashboard Report	Manager, CM	Quarterly	UMC - quarterly
HIF/MET (timely completion rate)	≥ 90% timely completion rate	HIF/MET Dashboard	Manager, CM	Quarterly	UMC - quarterly
Quality Audit Scores	≥ 90% audit score (CM, ECM, CS)	Internal File Review Audits (CM, ECM, CS)	Managers (CM, ECM, CS)	Monthly	UMC - quarterly
Percentage of Eligible Members enrolled in CCM	establish baseline	PHM KPI report	Manager, CM	Quarterly	UMC - quarterly
Percentage of Transitions for high-risk members that had at least 1 interaction with assigned CM within 7 days post-discharge	establish baseline	PHM KPI report	Manager, CM	Quarterly	UMC - quarterly
Percentage of members enrolled in ECM	establish baseline	PHM KPI report or IPP report	Manager, ECM	Quarterly	UMC - quarterly
Percentage of members who had at least one primary care visit within 12-month period	establish baseline	PHM KPI report	Quality Improvement / Manager, CM	Quarterly	UMC - quarterly
All-cause readmission rates (for members in CCM)	establish baseline	Analytics Report	Manager, CM	Quarterly	UMC - quarterly
Emergency Room Utilization (for members in CCM)	establish baseline	Analytics Report	Manager, CM	Quarterly	UMC - quarterly
BH - increase case closures with reason "complete"	5% increase in completed BH CM cases	BH Case Closure Report	Manager, BH CM	Quarterly	UMC - quarterly
ECM Oversight (includes Grandfathered ECM members, network capacity expansion)	100% grandfathered ECM members re-evaluated for eligibility, expand ECM capacity	ECM Project Report	Manager, ECM	Quarterly	UMC - quarterly
CS Oversight (includes expansion of CS services and network capacity expansion)	expand CS services and CS capacity	CS Project Report	Manager, CS	Quarterly	UMC - quarterly
Member Experience with CM					
Member Satisfaction Survey	≥ 90% overall satisfaction with the CM program	Member Survey Outcomes	Manager, CM	Annually	UMC - annually
Member compliants related to CCM program activities (NCQA)	< 3% will file G&A related to CM process	G&A Reports	Manager, CM / Director, G&A	Quarterly	UMC - quarterly
Community Advisory Committee Insights	Present Quarterly report of Community Advisory Committee Insights	Community Advisory Committee Report	Director, Population Health	Quarterly	UMC - quarterly
Evaluation of Delegated Case Management					
Delegation Oversight - Audit & Corrective Action monitoring	100% timely review, analysis, and attestation completion for Delegate audits & corrective action plans	Delegation Oversight Auditing Templates	Delegation Oversight / CM Director	Quarterly	UMC - quarterly
Delegation Oversight - Standard CM monitoring	100% timely review, analysis, and attestation completion for Delegate CM reports (monthly, quarterly, annually)	Delegation Oversight Reporting Templates	Delegation Oversight / CM Director	Monthly, Quarterly, Annually (depending on report)	N/A - operational
Regulatory, Compliance, Accreditation Findings					
DHCS - Corrective Action Plans for CM Activities	100% timely participation and response to DHCS CM Findings and/or Corrective Action Plans and associated activities	DHCS Findings / CAP Report	Sr. Director, Health Care Services	as needed	UMC - as needed

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DMHC - Corrective Action Plans for CM Activities	100% timely participation and response to DMHC CM Findings and/or Corrective Action Plans and associated activities	DMHC Findings / CAP Report	Sr. Director, Health Care Services	as needed	UMC - as needed
NCQA - Corrective Action Plans for CM Activities	100% timely participation and response to NCQA CM Findings and/or Corrective Action Plans and associated activities	NCQA Findings / CAP Report	Sr. Director, Health Care Services	as needed	UMC - as needed
CM Processes					
TCM - Identification and Referrals made to TCM LGAs	Benchmark - ≤ 1%	Internal Tracking Log	Manager, CM	Quarterly	N/A - operational
Out of Plan Services - Referrals made for Developmental Disabled/Regional Center	Benchmark - ≤ 1%	Regional Center Tracking Log	Manager, CM	Quarterly	N/A - operational
Out of Plan Services - Referrals made for Early Intervention Services/Regional Center	Benchmark - ≤ 1%	Regional Center Tracking Log	Manager, CM	Quarterly	N/A - operational
CM Activity Reporting (AAH CM only) - engagement and UTC rate	≥ 60% engagement rate; ≤ 30% UTC rate	Case and Disease Management Dashboard	Manager, CM	Quarterly	N/A - operational
CCM Activity Report - referrals & outreach rate, UTC rate, aged-cases rate (CCM case open >90days); ICT completion rate	≥ 80% outreach rate to CCM-eligible members; ≤ 40% UTC rate; ≤ 1% of CCM cases open >90 days; ≥ 90% ICT completion (for CCM members open for >90 days)	Case and Disease Management Dashboard, Daily Aging Report and Complex Case Log	Manager, CM	Quarterly	N/A - operational
CCM Assessment Timeliness (per NCQA)	100% of CCM cases with initial assessment started within 30 calendar days of identifying a member for CCM; 100% of CCM cases with assessment completed within 60 days of identifying a member for CCM	CM Aging Report	Manager, CM	Quarterly	N/A - operational
Collaborate with Analytics to enhance predictive modeling to improve identification of appropriate members for CCM	100% active participation in Population Health Management Workgroups and Risk Stratification discussions	Population Health Report	Director, SDOH	Semi-annual	N/A - operational
Major Organ Transplant Reporting	100% timely review and submission of DHCS MOT Report	DHCS Quarterly MOT Reports	Manager, CM	Quarterly	N/A - operational
MCP Transition Post-Transitional Monitoring (PTM) Reporting	100% timely review and submission of DHCS MCP Transition PTM Reports	DHCS Quarterly MCP Transition Post-Transition Reports	Sr. Director, HCS	per DHCS schedule	N/A - operational
Continuity of Care (MER & OON requests) Reporting	100% timely review, analysis, and submission of COC and OON sections in DHCS Quarterly Monitoring Report	DHCS Quarterly Monitoring Reports	Sr. Director, HCS	Quarterly	N/A - operational
Accuracy of Published CM content	100% timely completion of platform audits	Member and Provider Portals (public and secure site), Platform Audit Results	Sr. Director, HCS	As needed, and at least Annually	N/A - operational
Accuracy of Member and Provider Communications related to CM, ECM, and CS Process	100% participation in creation or updates to member and/or provider-facing content for CM activities (including NOAs, EOC, Provider Manual, Website, Portals)	Member- and Provider-facing communications	Sr. Director, HCS	As needed, and at least Annually	N/A - operational
Administrative					

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Annual Review of CM Staffing	Timely and accurate submission of staffing review, including applicable justifications	Staffing Worksheets	Sr. Director, HCS	Annually, by Q1 2024	N/A - operational
Clinical Information System Enhancements	100% participation in TruCare Steering Committee and System Optimization Efforts	Change Requests, Project Plans	Sr. Director, HCS	n/a	N/A - operational