COHS Discussion

The County Organized Health System (COHS) discussion segment of the July 17, 2015 meeting will include COHS representatives providing a brief statement about their particular health plan and their current experience with the CCS population. Following these statements the COHS representatives, selected county representatives, and CCS parent representative will discuss specific questions around:

- Provider Network Adequacy
- Care Coordination
- Continuity of Care
- Consumer Protections

Questions to be discussed are listed below.

1. Tell us a little about your health plan first and then how you have worked with CCS in the past, either with carved in services or through an MOU with CCS?
2. What process and major challenges should be considered in developing a provider network for children with complex chronic populations? What are the challenges to securing the right types of providers for this population? In the case of the CCS population what are the criteria for identifying and including appropriate specialty and sub-specialty providers?
3. How is “care coordination” defined in the context of a health plan and what does this mean for a child with a CCS health condition? How would you ensure Care Coordination of the “whole child”?
4. The transition of any population from one health care delivery system to another may impact pharmacy benefits. How has your health plan dealt with this in the past? Or if you have not, how will the plan address this issue?
5. How have or will health plans ensure access (for continuity of care) to out-of-network CCS providers and sustain that access?
6. What measures or methods do health plans use to ensure member needs are being addressed.
7. What mechanisms are in place or can be in place to ensure that the needs and concerns of children and families are known by health plans? What do health plans do or can they do to reach out to children and families to help them understand how to access health care in a managed care system?