

SAPC in a Post-ODS and Post-EHR World: A Team-Based Provider Support and Management Model



QI & UM Provider Meeting; April 29, 2019

Context

- **Where we WERE**

- Previous to the Drug Medi-Cal Organized Delivery System (DMC-ODS) Waiver, SAPC's touch points with its treatment providers were more centralized, primarily with SAPC's Contract Program Auditors (CPA) acting as the holder of knowledge about and conduits to providers.
 - SAPC staff knew to go to CPAs for knowledge about specific providers
 - Providers knew to go to their CPAs for issues they were facing.

- **Where we ARE**

- With implementation of DMC-ODS and Sage:
 - Touch points with providers are now spread out across SAPC's organization.
 - Sage has required much more cohesive interactions across both SAPC operations and provider operations to ensure optimal administrative oversight and prevention and resolution of problems
- CPAs still play a major role in the post-ODS and post-Sage environment, but the Contracts/Clinical/System of Care/Finance/IT/Strategic & Network Development teams at SAPC also interact with providers on a regular basis, at times interacting with them independently.
- SAPC areas are working together much more than they have in the past, but there are still instances where important information is not communicated or where providers reach out to the wrong SAPC person and the exchange becomes lost → this has led to inefficiencies that often gets blamed on Sage, but often has deeper roots related to the need for more organizational connections across SAPC itself, providers themselves, and between SAPC and its providers.

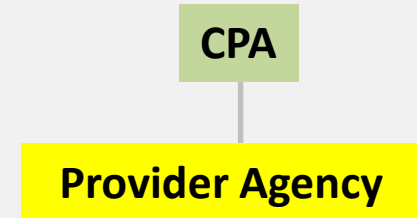
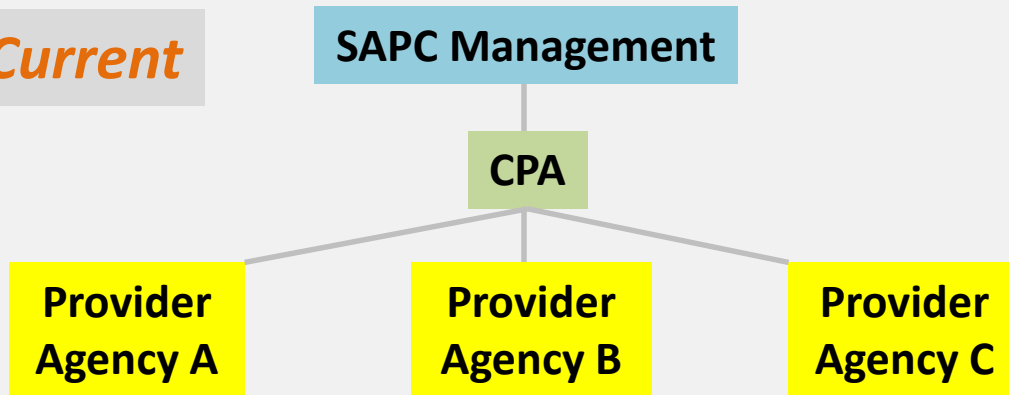
Context (cont'd)

- **The Problem We Are Aiming to Address**
 - Fragmented interactions with providers that result in miscommunication and misunderstanding across SAPC organizational areas and ultimately between SAPC and providers.
 - SAPC does not currently have adequate knowledge or visibility when providers are having issues, at least partly due to the multiple touch points providers have with SAPC now and the dissemination of communication/responsibility.
 - SAPC needs to have a better “sensor” to alert us when there are issues with providers for both support and management.
- **The SOLUTION**
 - **Team-based approach to our management and support of provider agencies when issues arise → Rather than having CPAs serving as the conduit to provider agencies, a team comprised various core areas at SAPC would serve this role.**
 - In some ways, this team-based approach to provider engagement is already happening, but it could just be happening in a more organized manner.
 - **Involved SAPC areas:**
 - **Routine:** Contracts, Clinical, Systems of Care, Finance
 - **As Needed:** IT, Strategic & Network Development, HODA (data)

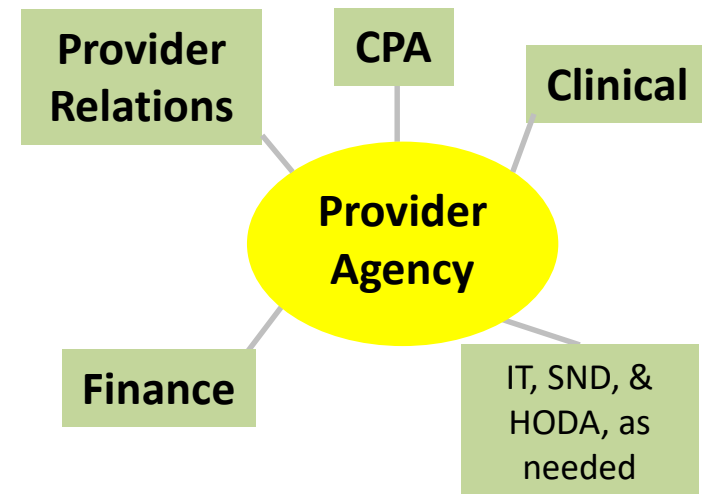
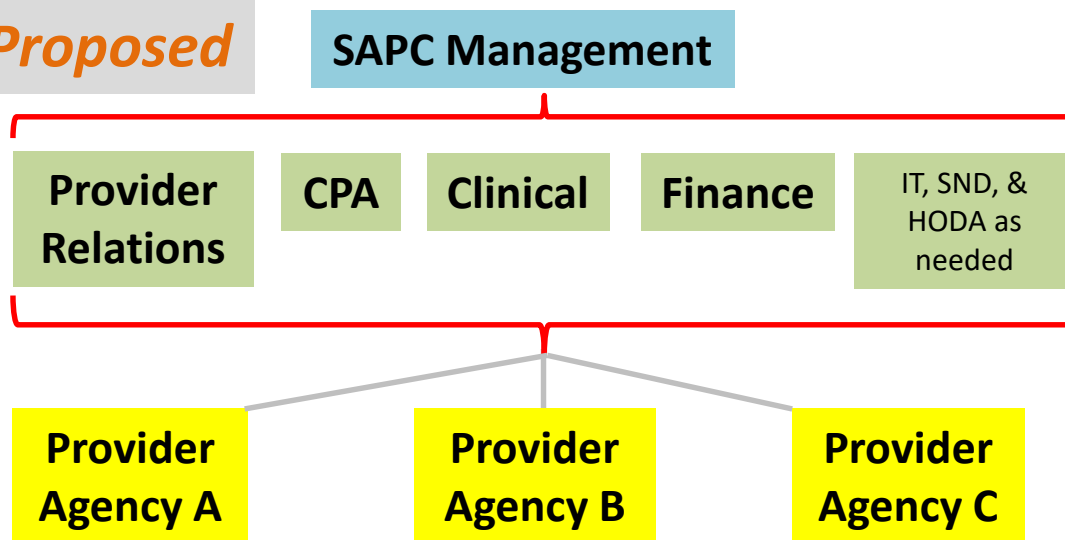
SAPC Perspective

Provider Perspective

Current



Proposed



Reporting Structure – Between SAPC Teams and Leadership

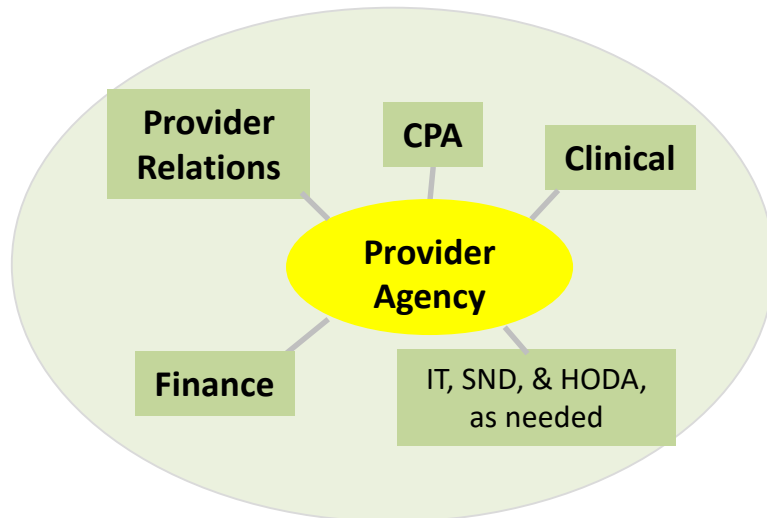
SAPC System Management Meeting



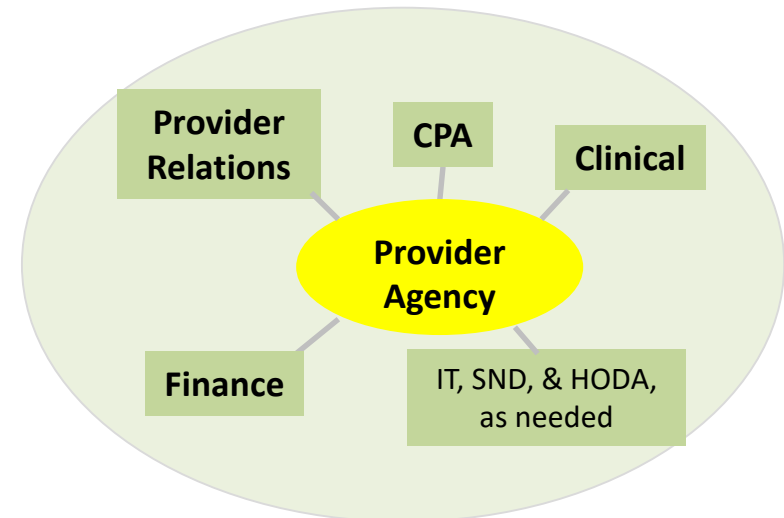
Teams-Based Organizing Committee

- Led by SAPC leadership, in addition to leads from each team

Team 1



Team 2



Team Process

1. Provider approaches someone from their assigned SAPC team, based on topic of concern
2. Assigned SAPC team member responds to provider that they will be discussing with the rest of that agency's SAPC team and communicates issue to the team
 - Issues should always be discussed with team first before determining the resolution, given that resolutions often have overlapping considerations
3. SAPC team identifies an action plan together and circles back with provider to work through the plan

