

## Medicaid Health Plan Community Partnership Series

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*Diana Rodin, MPH*

As state Medicaid programs are increasingly shifting beneficiaries into managed care organizations (MCOs), some MCOs are expanding their traditional role to better meet the needs of their vulnerable members and communities. This case study is one of a series that describes how select MCOs are addressing myriad barriers and changing the way care is delivered through community engagement and partnerships. The purpose was to identify examples of successful or promising approaches, internal and state policy drivers that motivated the MCOs, challenges they faced, and lessons learned. A Synthesis Report summarizing strategies, lessons for other MCOs serving vulnerable populations, key “ingredients” for successful MCO-community partnerships, and policy implications for state policymakers from the four case studies in this series will be available at <http://www.commonwealthfund.org/Publications/Issue-Briefs/2013/Apr/Forging-Community-Partnerships-to-Improve-Care.aspx?omnicid=20>.

### **Abstract**

L.A. Care Health Plan (L.A. Care), a public entity health plan that serves Los Angeles County, conducts a variety of activities to support the health care safety net and engage with the communities it serves. These include establishing Family Resource Centers that are open to the general public and provide a variety of health education and health promotion activities as well as links to other health and social

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As a public entity, L.A. Care is governed by a stakeholder board including Medicaid beneficiaries, which drives the plan's community benefit activities and focus.<sup>1</sup> L.A. Care serves people enrolled in public coverage programs including Medi-Cal, L.A. Care's Healthy Kids, In-Home Supportive Services (IHSS) Workers Healthcare Program, and a Medicare Advantage Special Needs Plan. L.A. Care's network includes about 10,000 providers.

L.A. Care's mission is to



location and contact information. New L.A. Care members also receive information about the Family Resource Centers in their orientation packets and may attend an orientation session held at a Center.

Many classes are taught by visiting instructors from nearby community clinics or community-based organizations, ranging from the County Department of Public Social Services, local housing and health advocacy organizations, independent health promoters (*promotoras*), neighborhood exercise and dance studios, national chronic disease associations, and a variety of health care providers.

L.A. Care positions the Family Resource Centers as community centers,

Number of (unique user) visits (Lynwood)	2,212
Number of (unique user) visits (Inglewood)	1,717
Lynwood and Inglewood Combined:	
Total number of participants in health education and health promotion classes <i>Exercise classes for adults and children have the highest attendance.</i>	2,881
Total number of visits for other health information, including assistance with current insurance coverage and member information	408
Total number of visits with eligibility workers for application assistance to public coverage programs	44
Percentage of uninsured users	68%
Percentage of repeat users	81%
Percentage of female users	78%

Source: L. A. Care, 2012.

The Family Resource Centers were developed after extensive interviews with community-based organizations to ensure that the Centers would provide real value, rather than merely serve as a marketing tool for the health plan. The Center’s community representative develops and maintains relationships between the plan and potential partners, including attending city council meetings, health fairs, civic and community events, and meeting with providers to gather input on remaining gaps that the Centers could address. The Centers have contracts or memoranda of understanding with every organization that runs Center classes or other activities and with those with referral relationships.

## **Community Health Investment Fund**

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