

MEMBER PROFILE:

Health Plan of San Mateo

Health Plan of San Mateo (HPSM), a local public health plan, provides health care benefits to San Mateo County’s historically underserved residents, including older adults and people with disabilities. These especially vulnerable adults, who are often eligible for both Medicare and Medicaid, comprise 40 percent of the plan’s Medicaid membership, one of the highest proportions among the 15 local public health plans in California. Current overall membership is approximately 110,000 or roughly one in seven San Mateo County residents. HPSM offers several programs for Medicaid beneficiaries, including a Medicare Advantage Special Needs Plan (SNP) for people eligible for both Medicare and Medicaid; a Medicare-Medicaid plan for Cal MediConnect – California’s demonstration for Medicare-Medicaid enrollees; and several local coverage and insurance programs for children and uninsured adults.

As a public agency, HPSM’s governing board and board committee meetings are open to the public, its finances are completely transparent, and all meeting materials, including financial information, are available to the public online. All of HPSM’s profits are reinvested in services for the local community. A key aspect of HPSM’s effectiveness is local autonomy that allows the plan to respond nimbly to the highest priority needs of members, providers, and the community.

QUICK FACTS

- **Organization type:** Local public health plan
- **Tax status:** Government entity; non-profit
- **Year founded:** 1987
- **Integration models:** D-SNP and Cal MediConnect demonstration
- **D-SNP enrollment:** 9,000 Medicare-Medicaid enrollees
- **Cal MediConnect demonstration enrollment:** 3,500 Medicare-Medicaid enrollees (anticipated)
- **Service area:** San Mateo County, California

PRIDE Contact

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Medicare-Medicaid Integration Status

In April 2014, HPSM became the first health plan in California to begin passive enrollment of dually eligible Medicare and Medicaid beneficiaries into Cal MediConnect. HPSM is the sole Cal MediConnect plan serving Medicare-Medicaid enrollees in San Mateo County. Having been a Dual Eligible Special Needs Plan (D-SNP), HPSM has extensive experience contracting with the San Mateo County Behavioral Health and Recovery Services agency to: (1) provide not only Medicaid-funded, but also Medicare-funded mental health and substance abuse services to members; and (2) coordinate Medicare and Medicaid benefits. As a Cal MediConnect health plan, HPSM is able to offer the same behavioral health coverage arrangements as used in its D-SNP program.

Through Cal MediConnect, HPSM is responsible for providing and integrating a complete array of medical and social service supports. Its person-centered approach emphasizes home- and community-based care and strives to help members avoid nursing home stays, but does provide institutional care for those unable to live in the community. By complementing the enhanced integration of Cal MediConnect with supportive housing options, HPSM offers members a unique and comprehensive set of resources to help them live in the setting of their choice.

The [Promoting Integrated Care for Dual Eligibles \(PRIDE\)](#) initiative, made possible by The Commonwealth Fund, is a consortium of high-performing health care organizations focused on improving the care of individuals dually eligible for Medicare and Medicaid. The Center for Health Care Strategies (CHCS) is helping PRIDE members to identify and test innovative strategies that enhance and integrate care for Medicare-Medicaid enrollees. CHCS is a nonprofit health policy resource center dedicated to advancing access, quality, and cost-effectiveness in publicly financed health care. For more information, visit www.chcs.org.

Key to Success: Community Care Setting Pilot

HPSM recognizes affordable housing as essential to enabling individuals with high service needs to live in the community. Often, individuals end up living in institutional settings because they have no alternatives. In response,

HPSM identified funding to secure housing and developed the “Community Care Settings” pilot. Two entities, West Bay Housing and the Institute on Aging, are partnering with HPSM to identify and develop housing solutions for HPSM’s Medicare-Medicaid enrollees who are at-risk for unnecessary institutionalization. By wrapping the full range of services around the individual in a community setting, the pilot will enable individuals to live in the residential environment of their choice, such as supportive housing, Residential Care Facilities for the Elderly/Adult Residential Facilities, affordable housing, or a private home or apartment. Expected outcomes of the pilot may include reduced cost, improved member care and coordination, reduced readmissions, and the alignment of resources for the broader Medicare-Medicaid enrollee population.

INTEGRATED CARE IN ACTION

HPSM’s emphasis on facilitating community-based care is illustrated by a dually eligible member, an 87-year old woman who was having increasing difficulty living at home. She has numerous chronic health conditions, and was hospitalized five times in eight months – usually after a trip to the emergency department. At the urging of her primary care doctor, she enrolled in HPSM’s interdisciplinary care management program. The program assigned her to a social worker and a nurse practitioner/case manager, who worked together to ensure that she received home visits and weekly check-in calls.

The care management team found that the member’s house had stairs between almost every room that she could no longer manage with her walker. Although she had a manual wheelchair, she could not propel herself, and ended up dragging herself from room to room, hanging onto walls. This led to frequent falls, some of which led to emergency department visits. Her care team suggested that relatives build ramps inside the house, and they helped her to obtain an electric wheelchair. This improved her mobility and decreased the risk of falls. Through the team effort of her doctor, family members, and care coordinators, she has stayed out of the hospital and continues to live in her own home.