

**Blue Shield of California Health Plan
Cal MediConnect (CMC)
Measurement Year 2020 Quality Program Evaluation
Executive Summary**

Blue Shield of California Promise Health Plan (Blue Shield Promise offers Cal MediConnect (CMC) to “dual-eligible” members. CMC is a chronic care coordinated initiative for “dual-eligible” members that integrate Medicare and Medicaid health care services for members in a way that coordinates the delivery of medical, behavioral, and long-term care services. The CMC population are those individuals who are eligible for Medicare Advantage and entitled to Medi-Cal benefits.

The Model of Care (MOC) Committee establishes direction, recommends changes, and evaluates results of ongoing CMC clinical and service improvement activities documented in the work plan. In addition, a CMC Oversight Group (CMC OG) was launched to specifically track and monitor performance on CMC Quality Withholds.

The 2020 CMC Quality Program Evaluation documents the formal assessment of Blue Shield Promise Health Plan’s Quality Improvement Program for the CMC population. This evaluation serves as the foundation of ongoing quality activities and any CMC performance metric that does not meet the goal will be carried forward to the following year’s CMC Work Plan. The CMC performance areas include but are not limited to the following clinical and operational areas:

- Appeals and Grievances
- Care Coordination
- Provider Relations
- Quality Improvement
- Delegation Oversight
- Behavioral Health
- Health Promotion and Education
- Encounters
- Community & Provider Engagement