



JENNIFER KENT
DIRECTOR

State of California—Health and Human Services Agency
Department of Health Care Services



EDMUND G. BROWN JR.
GOVERNOR

August 17, 2017

Stephen Melody, President
Anthem Blue Cross Partnership Plan
2868 Prospect Park Dr., #100, MS CA6
Rancho Cordova, CA 95670

RE: Department of Health Care Services Medical Audit

Dear Mr. Melody:

The Department of Health Care Services (DHCS), Audits and Investigations Division conducted an on-site Medical Audit of Anthem Blue Cross Partnership Plan, a Managed Care Plan (MCP), from October 31, 2016 through November 10, 2016. The survey covered the period of October 1, 2015 through September 30, 2016.

On July 31, 2017, the MCP provided DHCS with additional information regarding its Corrective Action Plan (CAP) in response to the report originally issued on June 2, 2017.

All items have been reviewed and found to be in compliance. The CAP is hereby closed. The enclosed report will serve as DHCS' final response to the MCP's CAP.

Please be advised that in accordance with Health & Safety Code Section 1380(h) and the Public Records Act, the final report will become a public document and will be made available on the DHCS website and to the public upon request.

If you have any questions, feel free to contact me at (916) 552-8946 or Christina Viernes at (916) 552-8765.

Sincerely,

Jeanette Fong, Chief
Compliance Unit

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Enclosures: Attachment A CAP Response Form

cc: Yvonne Harden, Contract Manager
Department of Health Care Services
Medi-Cal Managed Care Division
P.O. Box 997413, MS 4408
Sacramento, CA 95899-7413

**ATTACHMENT A
Corrective Action Plan Response Form**



Plan: Anthem Blue Cross Partnership Plan

Audit Type: Medical Audit and State Supported Services

Review Period: 10/1/15 – 09/30/16

MCPs are required to provide a CAP and respond to all documented deficiencies within 30 calendar days, unless an alternative timeframe is indicated in the letter. MCPs are required to submit the CAP via email in word format which will reduce turnaround time for DHCS to complete its review.

The CAP submission must include a written statement identifying the deficiency and describing the plan of action taken to correct the deficiency, and the operational results of that action. For deficiencies that require long term corrective action or a period of time longer than 30 days to remedy or operationalize, the MCP must demonstrate it has taken remedial action and is making progress toward achieving an acceptable level of compliance. The MCP will be required to include the date when full compliance is expected to be achieved.

DHCS will maintain close communication with the MCP throughout the CAP process and provide technical assistance to ensure the MCP provides sufficient documentation to correct deficiencies. Depending on the volume and complexity of deficiencies identified, DHCS may require the MCP to provide weekly updates, as applicable.

Deficiency Number and Finding	Action Taken	Supporting Documentation	Implementation Date* <small>(*anticipated or completed)</small>	DHCS Comments
2. Case Management and Coordination of Care				
2.2.1 Strengthen oversight to ensure that provisions of the Sacramento County MOU is followed by holding quarterly meetings with the local CCS to ensure continuous communication and to resolve operational,	Anthem is working to ensure and coordinate ongoing communication in 2017. Upcoming meetings: Sacramento Public Health Meeting Q3—8/25/2017 Q4—11/9/2017	Sacramento County CCS MOU Meeting Minutes.	Remediated as of Q2 2017	07/31/17 – The following documentation supports the MCP’s efforts to correct this deficiency: - “Sacramento County CCS MOU Meeting” minutes and corresponding sign-in sheets (07/26/17) which include documented discussions between CCS and MCP regarding various issues (e.g., program updates, transition to adult services, referral

Deficiency Number and Finding	Action Taken	Supporting Documentation	Implementation Date* (*anticipated or completed)	DHCS Comments
administrative and policy issues.				<p>challenges, etc.).</p> <p>The meeting minutes indicate that meetings will take place the last Wednesday of the first month of each quarter and that the next meeting is scheduled for 10/25/17.</p> <p>This finding is closed.</p>
<p>2.3.1 Strengthen oversight to ensure that provisions of the MOU are followed by holding quarterly meetings with the local Regional Centers to ensure continuous communication and to resolve operational, administrative and policy issues.</p>	<p>Anthem is working to ensure and coordinate ongoing communication in 2017. Upcoming meetings:</p> <p>Central Valley Regional Center Q3-9/21/2017 Q4-12/21/2017</p> <p>Valley Mountain Regional Center Q3-7/12/2017 Q4-10/11/2017</p> <p>Kern Valley Regional Center Q3-9/7/2017 Q4-12/4/2017</p> <p>Golden Gate Regional Center Q3—TBD in September</p> <p>San Andreas Regional Center Q3—TBD in September</p> <p>Alta Regional Center Q3—8/18/2017 Q4—11/17/2017</p>	<p>Alta RC Q1.docx Alta RC Q2.doc Central Valley RC Q1.doc Central Valley RC Q2.doc Far Northern RC Q1.docx Far Northern RC Q2.docx Golden Gate RC Q1.docx Golden Gate RC Q2.doc Kern Valley RC Q1.doc Kern Valley RC Q2.xlsx.doc Regional Center of the East Bay Q1.docx Regional Center of the East Bay Q2.docx San Andreas RC</p>	<p>Remediated as of Q1 2017</p>	<p>07/14/17 – The following documentation supports the MCP’s efforts to correct this deficiency:</p> <p>-“RC by County” grid that was requested by DHCS and submitted by the MCP during the 2015 audit CAP process. This grid indicates all that the plan holds MOUs with eight Regional Centers.</p> <p>-A complete set of meeting minutes for Q1 and Q2 of 2017 for each of the Regional Centers as evidence that the MCP is consistently holding meetings with all eight Regional Centers as required by its MOUs.</p> <p>This finding is closed.</p>

Deficiency Number and Finding	Action Taken	Supporting Documentation	Implementation Date* <small>(*anticipated or completed)</small>	DHCS Comments
	Far Northern Regional Center Q3 – TBD Q4 – TBD East Bay Regional Center Q3 – TBD Q4 - TBD	Q1.docx San Andreas RC Q2.docx Valley Mountain RC Q1.docx Valley Mountain RC Q2.docx		

Date: 7/14/17

Submitted by: Stephen L. Melody

Title: President