Regional Center MOU Template Post-Release Webinar



Objectives for Today's Discussion



Review the Released Regional Center MOU Template



Review Next Steps for Executing the MOU and the MOU Execution Timeline



Q&A Regarding the MOU Template and Execution Timeline

Goals of the Memorandums of Understanding (MOUs)

The 2024 Medi-Cal Managed Care Contract (Contract) requires all managed care plans (MCPs) to enter into MOUs with counties and third-party entities (Other Parties) to contractually ensure the provision of whole-system, person-centered care.

DHCS Goals for Requiring MOUs

- **Establish minimum requirements** around key Contract provisions for MOUs (e.g., training, data-sharing)
- Clarify roles and responsibilities for coordination of the delivery of care and services of all Members, including across MCP carved out services (i.e., services that are not MCP Covered Services but for which MCP must coordinate for members to ensure care)
- Establish formal processes for how MCPs and Other Parties will collaborate and coordinate on population health programs, including referring and linking Members to Community Supports
- Establish data sharing pathways between MCPs and Other Parties to support care coordination and enable robust monitoring
- Provide mechanisms to ensure overall oversight and accountability for MCPs to execute MOUs with Other Parties
- **Provide transparency** into roles/responsibilities and relationships between MCPs and Other Parties

MOU templates incorporate <u>existing service and program requirements into a single document</u> to support MCP/Other Party decision-making and relationship building. Templates are more robust where DHCS has promulgated detailed policies/quidance.

MOU Requirements & Structure

The Regional Center MOU Template is part of a broader set of documents and additional items focused on the release and execution of the MOUs. These items include:

APL on MOU Requirements

APL 23-029 explains the Base MOU Template and Bespoke MOU Templates

- Explains the intent and purpose of the provisions set forth in the MOUs
- Sets expectations of MCPs, such as an annual review of the MOU
- Details requirements related to MOU execution and submission to DHCS
- Lays out a monitoring plan for how DHCS will oversee MCP compliance with the MOU requirements

Base MOU Template

Contains provisions that must be included in all MOUs

- Clarifies roles and responsibilities of MCP and Other Parties
- Establishes "rules of engagement" to cooperate and address disputes
- Includes DHCS recommended op tional provisions that parties may consider for execution

Bespoke MOU Templates

Specific to MCP and Other Party's relationship and programs applicable under the MOU (e.g., Regional Center)

- Contains the general <u>and</u> program-specific required provisions, including incorporating Other Party requirements based on existing guidance
- Contains DHCS recommended optional provisions that parties may consider for that particular MOU
- Links to specific polices incorporated in the MOU

Overview of MOU Resources

DHCS is releasing resources to assist MCPs and Other Parties with implementing the MOUs

» DHCS MOU Webpage

- Houses the DHCS issued APL 23-029, Base MOU Template, and Bespoke MOU Templates
- MOU FAQs (forthcoming)
 - Provide additional guidance on the APL, Base MOU, and Bespoke MOU Templates
 - Clarifies aspects of MOUs in response to stakeholder feedback
 - Examples of questions answered include: "What are the optional provisions?"; "How can the parties share data?"; and "How will the MOUs be enforced?"
- Other updates will also be posted on the webpage as they become available

O.Gov About DHCS Translate **HCS Memoranda of Understandings Between Medi-Cal Managed Care Plans and Third Party Entities** Return to the Managed Care All Plan Letters Homepage Medi-Cal Managed Care Plans (MCPs) Contract with the Department of Health Care Services (DHCS) to provide high quality, accessible, and cost-effective health care through managed care delivery systems. The MCP Contract requires MCPs to build partnerships with the following Third Party Entities to ensure Member care is coordinated and Members have access to community-based resources in

order to support whole-person care:

» Technical Assistance

- DHCS will be providing technical assistance as needed
- DHCS MOU email address: MCPMOUS@dhcs.ca.gov

Purpose of the Regional Center MOU Template

Level Setting

The Regional Center MOU template seeks to improve care coordination between MCPs and Regional Centers through the following:

- » Opening channels of and improving communication between MCPs and Regional Centers to coordinate care for individuals receiving services from both parties and to address concerns related to care coordination.
 - This coordination will occur at the local level.
- » Enhancing each party's understanding of the other's respective services, eligibility criteria, referral processes, and operations.
 - For instance, each party should provide training and education resources for their respective services to the other party to increase timely coordination and decrease process inefficiencies.

Regional Center and Managed Care Plan Collaboration



- Improve individual/family experience navigating benefits
- Give key information about regional center system
- Increase individual/family access to medical and other benefits available through managed care
- Improve coordination and avoid duplication

- » NEW Definitions. Sets forth the defined terms used in the MOU, such as the "MCP-Agency Liaison." This section also states that capitalized terms not otherwise defined in the MOU have the meaning ascribed by MCP's Contract.
- Services Covered by This MOU. Describes the services that MCP and the other party must coordinate for Members.
- » <u>Party Obligations.</u> Describes each party's provision of services and oversight responsibilities (e.g., each party must designate a point of contact to act as the liaison for coordinating with the other party).
- <u>Training and Education.</u> Requires MCP to provide education to Members and Network Providers about Covered Services and
 - other party's services available. MCP must also train employees who carry out responsibilities under the MOU and, as applicable, Network Providers, Subcontractors and Downstream Subcontractors on the MOU requirements and services provided by the other party.
 - NEW This section provides a ramp up period (the length of which is determined by the Parties) for MCPs to ensure their employees who are responsible for performing activities under the MOU are trained on MOU requirements.

- » <u>Referrals.</u> Requires the parties to refer to each other as appropriate and describes each party's referral pathways. NEW Closed Loop Referral requirements for 2024 are now optional as the policy is still in development.
- <u>Care Coordination.</u> Describes the policies and procedures for coordinating care between the parties, addressing barriers to care coordination, and ensuring ongoing monitoring and improvement of care coordination.
- » Quarterly Meetings. Requires the parties to meet at least quarterly to address care coordination, Quality Improvement (QI) activities, QI outcomes, and systemic and case-specific concerns, and to communicate with others within their organizations about such activities.
 - NEW These meetings may be conducted virtually.
 - NEW Within 30 Working Days after each quarterly meeting, MCP must post on its website the
 date and time the quarterly meetings occurred and, as applicable, distribute to meeting
 participants a summary of any follow-up action items or corrective changes to processes that are
 necessary to fulfill MCP's obligations under the Medi-Cal Managed Care Contract and this MOU.

- <u>Quality Improvement (QI)</u>. Requires the parties to develop QI activities specifically for oversight of the MOU requirements, including any applicable performance measures and QI initiatives, such as those to prevent duplication of services, as well as reports that track referrals, Member engagement, and service utilization.
 NEW MCP must document these QI activities in its policies and procedures.
- Data Sharing and Confidentiality. Requires the MCP to have policies and procedure for sharing the minimum data and information necessary to ensure the MOU requirements are met and describes the data and information the other party may share with MCP to improve care coordination and referral processes. Requires the parties to implement policies and procedures for how the minimum necessary information and data (determined by the parties) will be shared in accordance with applicable law. NEW The minimum necessary information and data elements to be shared between the Parties are set forth in Exhibit C of the MOU. The Parties must annually review and, if appropriate, update Exhibit C of this MOU to facilitate sharing of information and data.

- Dispute Resolution. Describes the policies and procedures for resolving disputes between the parties and the process for bringing the disputes to DHCS (and CDDS as appropriate) when the parties are unable to resolve disputes. NEW MCP must, and Regional Center should, document the agreed-upon dispute resolution procedures in policies and procedures.
- Disaster Emergency Preparedness. The parties should have policies and procedures to ensure the continued care coordination for services in the event of a disaster or emergency. NEW This requirement is now optional for 2024.
- » NEW Equal Treatment. Provides that nothing in the MOU is intended to benefit or prioritize Members over persons who are not Members also receiving services from the other party.
- <u>General.</u> Sets forth additional general contract requirements, such as the requirements that the MCP must publicly post the executed MOU, the MCP must annually review the MOU, and the MOU cannot be delegated.

Regional Center MOU Template

The Regional Center MOU template contains the following provisions specific to the MCP relationship with Regional Centers:

» Obligations for Oversight and Responsibility.

- Regional Center is responsible for services provided or made available by Regional Center, e.g., Regional
 Center must determine eligibility for and authorize services arranged for or provided by Regional Center
 are not covered by MCP.
- MCP is responsible for coordinating care for Members provided by MCP's Network Providers and other
 providers of carve-out programs, services, and benefits as well as authorizing Medically Necessary Covered
 Services.
- NEW MCP must comply with all requirements set forth in APL 23-023.
- NEW The MCP-Regional Center Liaison functions may be assigned to the MCP-Long Term Services and Supports ("LTSS") liaison if the MCP-LTSS Liaison meets the training requirements and has the expertise to work with Regional Center, in accordance with APL 23-004 or any subsequent version of the APL and Section 6 of the MOU.

Regional Center MOU Template

The Regional Center MOU template contains the following provisions specific to the MCP relationship with Regional Centers:

- Referrals. Requires that (1) MCP identify members who may be eligible for Regional Center services and refer such members to Regional Center; and (2) Regional Center refer Members under age twenty-one (21), regardless of diagnosis, to MCP for evaluation for medically necessary services, [NEW] including services using the Early Periodic Screening, Diagnostic, and Treatment medical necessity criteria. Regional Center is encouraged to share a list of recipients eligible for covered services with MCP.
- <u>Care Coordination.</u> The parties must implement care coordination policies and procedures, including processes for (1) ensuring non-duplication of ECM, CCM, and Community supports; (2) ensuring the continuation of Population Health Management; (3) providing Regional Center with Members' Primary Care Provider information; and (4) coordinating care for members in Intermediate Care Facilities for the Developmentally Disabled (ICF/DD) Homes, Intermediate Care Facilities for the Developmentally Disabled-Habilitative (ICF/DD-H) Homes, and Intermediate Care Facilities for the Developmentally Disabled-Nursing (ICF/DD-N) Homes. to ensure members receive all medically necessary covered services.
 - NEW MCP must ensure ICF/DD home services that a Member needs, as determined by the Member's choice of living arrangement and documented by the Member's assigned Regional Center and services and supports provider(s), are authorized.

MOU Execution Timeline

Date	Requirement
As of 1/1/24	Requirement to Have Executed MOUs Go Live » MCPs submit Executed MOUs on a rolling basis
As of 3/31/24	First Quarterly Report Due >> In addition to submitting Executed MOUs on a rolling basis, MCPs submit "best efforts" to execute MOUs for any that are not yet executed
As of 6/30/24	Second Quarterly Report Due (same submission) » MCPs follow the same submission and review process
As of 9/30/24	Third Quarterly Report Due (same submission) » MCPs follow the same submission and review process

MCP MOU Execution Next Steps

To comply with the 2024 Medi-Cal Managed Care Contract requirement to enter into MOUs with Regional Centers, MCPs should take the following actions:

- MCPs should be reaching out and forming relationships with Regional Centers
- MCPs and Regional Centers should commence discussions regarding executing the MOUs
- » DHCS is aware that executing the MOUs will take time and that Regional Centers have certain processes that need to be followed, thus MCPs must demonstrate a good faith effort to meet the MOU requirements of APL 23-029 and the MCP Contract
 - i.e., MCPs that are unable to execute the required MOUs by the January 1, 2024, execution date must submit quarterly progress reports to DHCS demonstrating evidence of their good faith effort to execute the MOUs

(Timeline of Quarterly Reports on next slide)

Note: Regional Centers are not required to sign or submit the quarterly reports to DHCS

Questions?

