California Children's Services Monitoring and Oversight Program



Agenda

Welcome and Meeting Information	3:00-3:10
Roll Call	3:10-3:15
March Meeting Summary	3:15-3:20
California Children's Services (CCS) Monitoring and Oversight Compliance Program Plan	3:20-3:50
Memorandum of Understanding (MOU) and Related Numbered Letters (NL)	3:50-4:10
Budget Proposal	4:10-4:30
Policy Updates	4:30-4:50
Public Comment	4:50-4:55
Next Steps	4:55-5:00

Housekeeping & Webex Logistics

Do's & Don'ts of Webex

- Participants are joining by computer and phone (link/meeting info on <u>CCS Monitoring and Oversight Program website</u>)
- Everyone has been automatically muted upon entry
- » CCS Monitoring and Oversight Workgroup Meeting members: 'Raise Your Hand' or use the Q&A box to submit questions
- Other participants: Use the Q&A box to submit comments/questions or 'Raise Your Hand' during the public comment period
- To use the "Raise Your Hand" function click on participants in the lower right corner of your chat box and select the raise hand icon
- » Live closed captioning will be available during the meeting

Note: Department of Health Care Services (DHCS) is recording the meeting for note-taking purposes

Authorizing Statute

Welfare & Institutions Code (WIC), Article 5.51 section 14184.600 (b) established CalAIM subsection (b), requiring DHCS to consult with counties and other affected stakeholders to develop and implement all of the following initiatives to enhance oversight and monitoring of county administration of the CCS program:

- » Establish statewide performance, reporting, and budgetary standards, and accompanying audit tools used to assess county compliance with federal and state requirements applicable to the CCS program
- » Conduct periodic CCS quality assurance reviews and audits to assess compliance with the established standards
- » Assess each CCS program to ensure appropriate allocation of resources necessary for compliance with standards, policies, guidelines, performance, and compliance requirements
- Determine and implement a process to inform each CCS program of, and make available on its internet website, the latest standards, policies, guidelines, and new performance and compliance requirements imposed
- Establish a statewide tiered enforcement framework to ensure prompt corrective action for counties that do not meet established standards
- » Require each county to enter into a Memorandum of Understanding (MOU) with DHCS to document each county's obligations in administering the CCS program.

Source: WIC Article 5.51, section 14184.600 (b)

California Advancing and Innovating Medi-Cal (CalAIM)

- » DHCS intends to provide enhanced monitoring and oversight of all 58 counties to ensure continuous, and unwavering optimal care for children
- To implement the enhanced monitoring and oversight of CCS in all counties, DHCS developed a robust strategic compliance program in coordination with the CCS Monitoring and Oversight Workgroup
- Effective compliance programs begin with ascertainable goals and metrics capturing federal and state requirements

CCS Monitoring and Oversight Workgroup Goals

- » DHCS has leveraged a comprehensive workgroup comprised of CCS stakeholders utilizing their experience, knowledge, and best practices to build a collaborative process that results in a finalized CCS Monitoring and Oversight Compliance Program Plan and metrics and standards
- The goal of the CCS Compliance, Monitoring, and Oversight Program, taking into consideration variations based on CCS county model type, is to promote accessibility, transparency, monitoring, and oversight for the CCS program statewide
- CCS Monitoring and Oversight Workgroup meeting discussions and associated NLs were used to create an MOU template, supporting attachments for the different county model types, and related guidance documents that will standardize and enhance compliance, monitoring, and oversight efforts to benefit beneficiaries, counties, providers, and DHCS
- » Workgroup meetings began January 2022 and concludes with this capstone meeting. County-state MOUs will be executed in advance of DHCS's monitoring and oversight on July 1, 2024.

CCS Monitoring and Oversight Workgroup at a Glance

- » To date, the workgroup, in partnership with DHCS, has developed and iterated on the following policies to establish the MOU and related documents:
 - 1. CCS Monitoring and Oversight Compliance Program Plan
 - 2. MOU outline, including MOU Roles and Responsibilities Table and Definitions documents
 - Grievance NL
 - 4. Training NL
 - CCS Reporting and Survey NL
 - 6. Compliance activities
 - 7. Forthcoming Enforcement and Corrective Action NL

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Workgroup Members

- 1. Alicia Emanuel, National Health Law Program
- 2. Anna Leach-Proffer, Disability Rights California
- **3. Ashley Worley,*** Stanislaus County CCS
- **4. Dawn Pacheco,** Glenn County CCS
- 5. Eileen (Chris) McSorley, Lake County CCS
- 6. Francis Chan, MD, Loma Linda University Health
- 7. Guillermina (Mina) Andres, Tulare County CCS
- 8. Hanna Awai, MD, Sacramento County CCS
- 9. Heidi Merchen, Napa County CCS
- 10. Holly Henry, Lucile Packard Foundation for Children's Health
- 11. Janet Peck, Butte County CCS
- 12. Jody Martin, Mono County CCS
- 13. Jolie Onodera, California State Association of Counties
- 14. Katherine Barresi, Partnership HealthPlan of California
- 15. Kathryn Smith, Children's Hospital Los Angeles

Workgroup Members (continued)

- 17. Katie Schlageter, Alameda County CCS
- **18. Lori Gardner,** Madera County CCS
- 19. Lorri McKey, Colusa County CCS
- **20.** Mary Doyle, MD, Los Angeles County CCS
- 21. Meredith Wolfe, Humboldt County CCS
- 22. Michelle Gibbons, County Health Executives Association of California
- 23. Michelle Laba, MD, Orange County CCS
- **24. Mike Odeh,** Children Now
- 25. Nancy Netherland, Caregiver Representative/California Children's Trust Caregiver Engagement
- 26. Norma Williams, Del Norte County CCS
- 27. Porchia Rich, MD,* San Diego County CCS
- 28. Richard Chinnock, MD, Loma Linda University Children's Hospital
- 29. Susan Skotzke, Parent/Family Advisory Committee, Central California Alliance for Health
- 30. Tamica Foots-Rachal, Family Voices of California
- 31. Tanesha Castaneda, Santa Barbara County CCS

DHCS Staff

- » Susan Philip, Deputy Director, Health Care Delivery Systems
- Pamela Riley, MD, Assistant Deputy Director, Quality and Population Health Management and Chief Health Equity Officer
- » Joseph Billingsley, Assistant Deputy Director, Integrated Systems
- » Cortney Maslyn, Division Chief, Integrated Systems of Care Division (ISCD)
- Jill Abramson, MD, Medical Consultant, ISCD
- Cheryl Walker, MD, Medical Consultant, ISCD
- » Megan Sharpe, MTP Specialist, ISCD
- » Annette Lee, Branch Chief, Quality and Monitoring, ISCD
- Sabrina Atoyebi, Branch Chief, Medical Operations, ISCD
- » Michael Luu, Section Chief, Monitoring and Oversight, ISCD
- » Katie Ramsey, Unit Chief, County Compliance, ISCD

Sellers Dorsey Staff

- » Mari Cantwell, Managing Director, California Services/Strategic Advisor
- Sarah Brooks, Director/Project Director
- » Meredith Wurden, Senior Strategic Advisor/Subject Matter Expert
- » Marisa Luera, Director/Subject Matter Expert
- » Alex Kanemaru, Senior Consultant/Project Manager

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March Meeting Summary

During the March meeting, the workgroup reviewed and provided feedback on the following topics:

- » CCS case management definition and core activities
- » Grievance, Training, Survey, and Enforcement and Corrective Action NLs
- » MOU development
- » CCS compliance activities
- » DHCS accountability proposal

Workgroup feedback during the March meeting and subsequent homework items are incorporated in today's presentation and discussion

Workgroup Discussion

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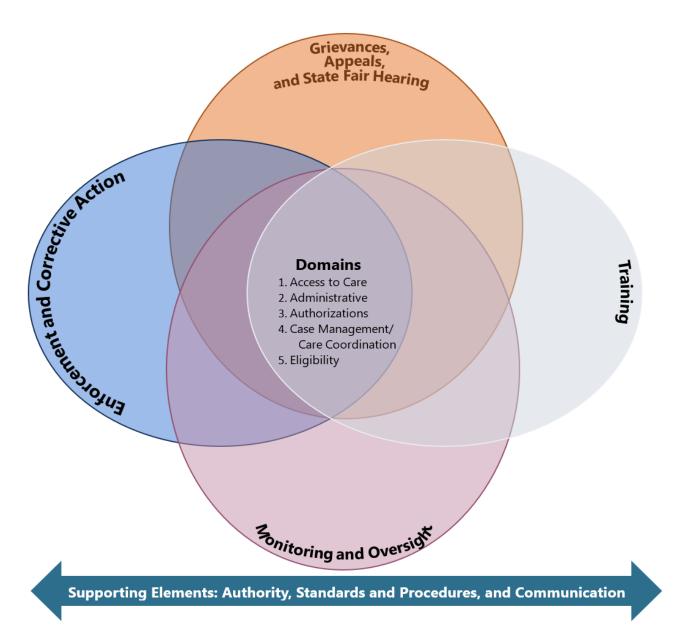
CCS Monitoring and Oversight Compliance Program Plan

- » A compliance program formalizes efforts to prevent, identify, and address inconsistencies with state and federal requirements, align programmatic and organizational values, and uphold program integrity by averting fraud, waste, and abuse
- The purpose of the CCS Monitoring and Oversight Compliance Program Plan (Compliance Plan), which is based on national best practices and stakeholder input, is to provide accessibility to and transparency of key CCS Program compliance activities in a single, dynamic document
- » The Compliance Plan outlines key compliance elements of the CCS Program including grievances and appeals, training, monitoring and surveying, and corrective action and enforcement
- » Additional elements may be added to the *Compliance Plan* as the program evolves

CCS Monitoring and Oversight Compliance Program Plan (continued)

After review of state and national best practices and as reflected by the NLs developed through this process, the following components of a comprehensive compliance program include:

- 1. Grievances, Appeals, and State Fair Hearing
- 2. Training
- 3. Monitoring and Oversight
 - a. Including Compliance Activities and Survey Process
- 4. Enforcement and Corrective Action



Outstanding Discussion Items

Discussion Item	Summary	Current Status
Updating Relevant DHCS Guidance Documents	» State guidance (e.g., NLs, CCS Case Management Manual, and the Plan and Fiscal Guidelines or PFGs) should be updated or retired, as needed, to align with the requirements set forth by the CCS Compliance, Monitoring and Oversight Program	 ISCD is working to align, update, or retire existing state guidance ISCD intends to retire the Administrative Due Process Manual and sections of the PFG
Funding for Compliance Program	 » Raised as a top priority throughout the CCS Monitoring and Oversight Workgroup process » Counties have expressed concerns about budgetary resources to complete compliance activities 	» ISCD is working on a budget proposal to address county budget and resource concerns

Outstanding Discussion Items (continued)

Discussion Item	Summary	Current Status
Sanction Amounts	 » Process was introduced to the workgroup in December and has since been a major topic of discussion and questions » Questions include what source of funding CCS programs will use to pay sanctions and how enforcement activities will be carried out 	» Sanctions/fiscal penalties will be included in the MOU effective July 1, 2027
Medi-Cal Managed Care Plan (MCP) and CCS Monitoring and Oversight Alignment	» County CCS programs have expressed that the Monitoring and Oversight Program is untenable, and in some instances, surpasses expectations of MCPs	» See following slides 21-22

MCP and CCS Monitoring and Oversight Crosswalk

Program Component	CCS Program	Medi-Cal Managed Care Plan
Grievance and Appeals	» Quarterly monitoring for indicators and potential program challenges/trends	» Monitored quarterly and through medical audits for signs and potential program challenges/trends
Training	 County CCS program and DHCS sponsored training Specialty staff training requirements Whole Child Model (WCM) and Independent county trainings 	» MCPs are required to complete similar trainings
Auditing/Surveying	 Triennial desk, virtual, or onsite survey Annual and Quarterly Reports Supplemental information requests 	 Annual in-depth medical audit of MCPs to evaluate compliance with the DHCS/MCP contract and WCM amendment Quarterly data submissions Ad hoc data submissions Facility site review/medical record review

MCP and CCS Monitoring and Oversight Crosswalk (continued)

Program Component	CCS Program	Medi-Cal Managed Care Plan
Performance Measures	» Part of the Annual and Quarterly Report process	» Annually reported set of performance measures that reflects the quality, accessibility, and timeliness of care provided by MCPs
Corrective Action and Enforcement	 Counties will be required to provide a Corrective Action Plan (CAP) upon when findings are identified (starting in year 3) DHCS will conduct CAP submission evaluations and provides technical assistance to ensure compliance DHCS will post compliance reports on webpage DHCS will provide tiered enforcement to support counties and drive change 	 MCPs are required to provide a Corrective Action Plan (CAP) upon the completion of a DHCS Medical Audit or any other monitoring activity where findings are identified DHCS conducts CAP submission evaluations and provides technical assistance to ensure compliance. DHCS posts Medical Audit Reports and CAPs

DHCS Support to County CCS Programs

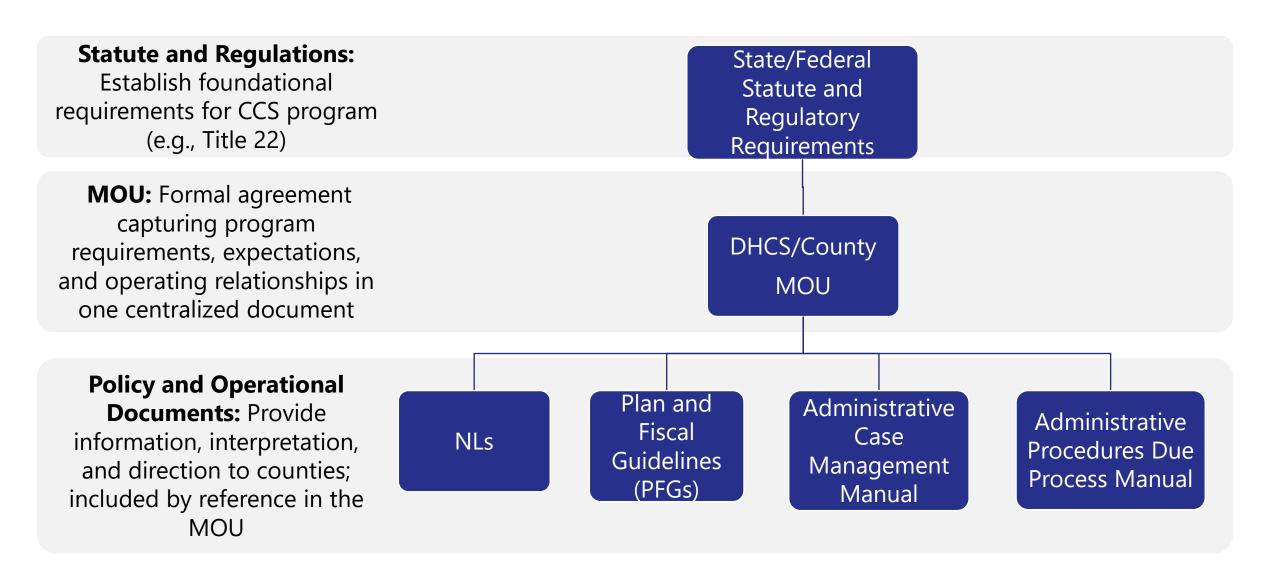
- » DHCS will post Technical Assistance Guides (TAG) for Quarterly and Annual Reports and Surveys
- » DHCS will provide Quarterly and Annual Report Templates
- » DHCS will pull reports for counties

Workgroup Discussion

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Hierarchical Flow



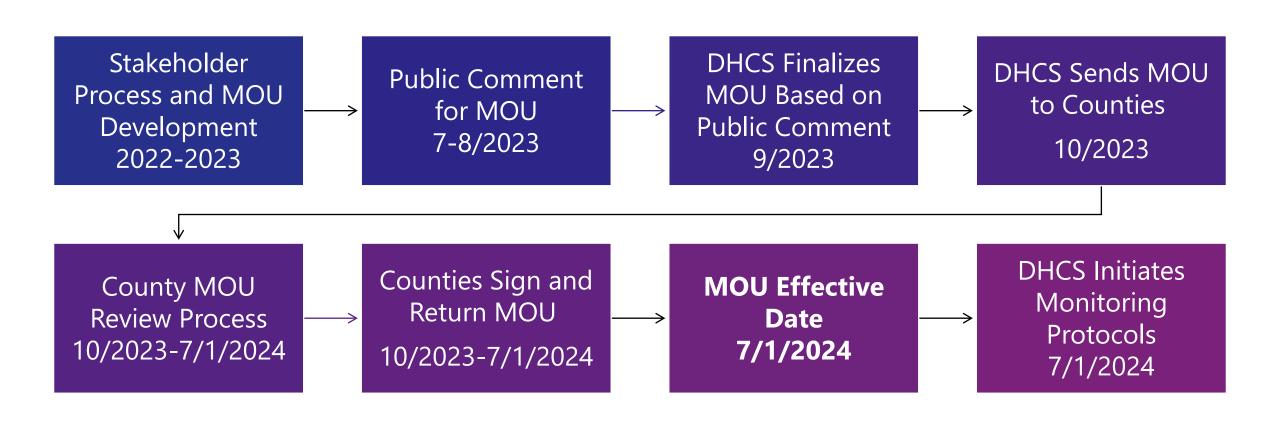
MOU Standard Language

- I. Background
- II. Purpose
- III. Scope of Work
- IV. Organizational Structure
- V. Term
- VI. Data and Information Sharing
- VII. Oversight and Monitoring
 - a) Training
 - b) Grievance Process
 - c) CCS Reporting and Surveying
 - d) Enforcement and Corrective Action
- VIII. Confidentiality
- IX. Liability and Indemnity
- X. Amendments

- XI. Liaisons
- XII. Privacy and Information Security Provisions
- XIII. Attachments
 - a) Data and Information Systems
 - b) Privacy and Information Security Provisions
 - 1. Attachment B-1
 - Attachment B-2
 - Attachment B-3
 - c) MOU Roles and Responsibilities
 Table (County Model Specific)
- XIV. Appendices
 - a) Definitions

Items in black are standard MOU sections **Bold** items have been previously shared and reviewed by workgroup members

MOU Development



Workgroup Discussion

Related NLs

Policy Document	Discussion Item: CCS Monitoring and Oversight Workgroup	Status	Next Steps
Grievance Numbered Letter (NL) Grievance Flowchart Grievance Form	 2022: September, November, December 2023: January, March 	 Released for public comment on December 23, 2022 Shared with CHEAC for review and feedback; due on June 21, 2023 	• Final release in third quarter 2023
Appeals and State Fair Hearing NL	2022: September2023: January, March	 Anticipated release date for public comment July 	 Final release in third quarter 2023
CCS Program Reporting and Survey NL	 2022: June, July, August, November, December 2023: January, March 	 Released for public comment on January 24, 2023 	 Anticipated for another round of public comment in June Final release in third quarter 2023

Related NLs (continued)

Policy Document	Discussion Item: CCS Monitoring and Oversight Workgroup	Status	Next Steps
Training NL	2022: November2023: January	 Released for public comment on January 27, 2023 	 Final release in third quarter 2023
Electronic Visit Verification (EVV) NL	• 2023: January, March	 Released for public comment on December 14, 2022 	 Anticipated for another round of public comment in June/July Final release in third quarter 2023
 Memorandum of Understanding (MOU) Roles and	 2022: January, May, June, July, August, September, November, December 2023: January, March 	 Anticipated release date for public comment, July- August 2023 	• Final release in October 2023

Updated Grievance Process

CCS Programs

- » Based on feedback throughout this process, the grievance process has been updated as follows:
 - Independent counties (Classic and WCM) will intake all grievances, refer if necessary, and resolve those applicable to the county
 - DHCS will intake all grievances for Dependent counties (Classic and WCM), refer if necessary, and resolve those applicable to DHCS

CCS Beneficiaries and Families

- » As previously requested, DHCS is preparing flyers to inform CCS beneficiaries, applicants, and families of the grievance process based on county model type
- Flyers will be shared with counties to add their contact information and share with beneficiaries during the first quarter 2024

Workgroup Discussion

Training Implementation Details

- Ahead of July 1, 2024, DHCS will conduct the following to ensure all county and DHCS staff are prepared to administer the CCS Program in alignment with the CCS Monitoring and Oversight Program:
 - DHCS will develop or sponsor trainings for local CCS Programs
 - Create a CCS training website to post training materials, recordings, and training calendar
 - DHCS will include managed care representatives and other CCS operational partners as needed
 - DHCS staff will also attend DHCS led trainings
 - Establish post training feedback surveys to assist with improving future trainings
- » Based on county survey results and workgroup feedback, the following trainings will be made available:
 - Onboarding Training
 - Technical Trainings
 - CCS Program Oversight Trainings
 - Specialty Staff Training (i.e., Clinical, MTP, Nurse Evaluator)

Training Timeline

June 2023

 Identification, Compilation, and Review of Existing Training Materials and Resources

July 2023-November 2023

Content
 Development:
 Onboarding
 and Selected
 High Priority
 Topical Training

December 2023-June 2024

Production

May 2024

Ongoing
 Program
 Development
 and
 Maintenance

Workgroup Discussion

Updated CCS Reporting and Survey Process

- After compiling and reviewing workgroup feedback, DHCS has adjusted the compliance activities and Performance Measure process to better align with feedback received throughout the workgroup process
- The following adjustments have been made:
 - Performance Measures were moved to annual and quarterly reporting
 - Compliance activities were revised to remove duplications, updated to reflect county and DHCS feasibility, and incorporated workgroup feedback
 - Annual and Quarterly Report requirements outlined in the CCS Reporting and Survey NL

Compliance Activities Timeline

- Counties will be required to report data to DHCS on Quarterly and Annual Reports
- DHCS will review and report results

FYs 2024-2025

FY 2026

- Counties will continue to report data to DHCS on Quarterly and Annual Reports
- DHCS will review, report results, begin surveying counties, and require corrective action as needed

- DHCS will determine if new or revised compliance activities should be implemented
- DHCS will revise MOU and release for county review and signature

FY 2029

DHCS
 will review
 compliance
 activities
 every two (2)
 years
 thereafter

FY 2027

Enforcement and Corrective Action NL

Background

- Proposed process was introduced to the workgroup in December 2022 and has since been a topic of discussion
- » Questions include CCS program sanction funding sources and how enforcement activities will be carried out

Updated Proposal

Sanctions will not be included in the MOU effective July 1, 2024, however, will be included in the MOU effective July 1, 2027

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Budget Proposal

- » Counties expressed budgetary resources concerns to complete compliance activities. To address some of these concerns, DHCS is conducting the following activities:
 - Intaking all grievances for Dependent counties
 - Pulling reports available through CMS Net
 - Conducting an internal landscape of the county budget allocation
- » County CCS programs are responsible for the following activities:
 - Intaking grievances for Independent counties
 - Submitting items not found in CMS Net such as:
 - County policies and procedures
 - Grievances and appeals
 - Transition planning
- » DHCS will continue to meet with key stakeholders to discuss the CCS budget

Budget Proposal (continued)

Based on a survey of selected county CCS programs, DHCS developed an internal methodology to calculate the estimated FTE that would be required to conduct monitoring and oversight activities:

Los Angeles County					
Report	Туре	Mins to	Quantity/	Mins/	Hrs/
Туре		Complete	Year	Year	Year
Quarterly	Grievances	90	56	5040	84
	Appeals	90	30	2700	45
	Transition Planning (17)	15	216	3240	54
	Transition Planning (20)	15	216	3240	54
Annual	Full Report	60	1	60	1
-	Totals	270	519	14280	238

Caseload	Estimate	County	Caseload
Range	Hrs/Year	Example	
1-249	8 hrs	Alpine	5
250-499	9 hrs	Lake	433
500-999	10 hrs	Yolo	750
1,000-1,599	9 12 hrs	Butte	1,014
1,600-1,999	9 13 hrs	San Francisco	1,621
2,000-2,999	9 15 hrs	Monterey	2,650
3,000+	42 hrs*	Sacramento	8,297

^{*} For caseloads of 3,000+, multiply the caseload by .00505351

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Upcoming DHCS Website Changes

- » CCS Monitoring and Oversight website will continually be updated with compliance information and include documents such as:
 - Beneficiary Grievance, Appeal, and State Fair Hearing flyer
 - Training materials
 - TAGs
 - Quarterly/Annual Report templates
 - Compliance activity reports (county and state)
 - Links to CCS information such as NLs, WCM, MTP, etc.

CCS Case Management Definition

CCS Case Management Definition

The California Children's Services (CCS) case management is¹ a beneficiary- and family-centered care approach to ensure needed clinical and non-clinical services for² the CCS eligible condition,¹ are made available to each CCS beneficiary through comprehensive, interdisciplinary, and person-centered care management and care coordination² to ensure that¹ CCS³ children and young adults have access to¹ CCS paneled providers,³ equipment, and services necessary for treatment of the CCS eligible condition.¹

Definition Color Legend

- » 1 Counties via the CCS Executive Committee
- » 2 WCM MCPs
- » 3 DHCS

Next Steps

This will be added to:

- WCM NL
- WCM APL
- CCS Monitoring and Oversight Workgroup MOU

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Contact Information

» For more information, questions, or feedback regarding the CCS Compliance, Monitoring, and Oversight Program, please email CCSMonitoring@dhcs.ca.gov.