

Stakeholder Communication Update October 2018

The <u>Department of Health Care Services</u> (DHCS) is pleased to share this bimonthly update of important events and actions at the Department. If you are not a subscriber and would like to receive these updates, please sign up on the DHCS <u>website</u>. Check out the <u>Calendar of Events</u> for specific meetings and events, or visit the <u>Stakeholder Engagement Directory</u> for listings by program. You also can view our <u>State Plan Amendments (SPA)</u>, and find the most <u>recent data</u> on Medi-Cal enrollment. For questions or suggestions, contact us at <u>DHCSPress@dhcs.ca.gov.</u> And be sure to follow DHCS on social media, too. Thanks.









Contents

Program Updates

Assisted Living Waiver (ALW) Renewal

Dental Transformation Initiative (DTI)

Drug Medi-Cal Organized Delivery System (DMC-ODS) Waiver

Health Homes Program (HHP)

Medicaid State Plan and State Plan Amendments (SPAs)

Medication Assisted Treatment (MAT) Expansion Project (2.0)

Non-Medical Transportation (NMT)

Pediatric Palliative Care (PPC) Waiver Services

<u>Proposition 56 – Loan Repayment Programs</u>

<u>Proposition 56 – Supplemental Payment Programs</u>

Public Hospital Redesign and Incentives in Medi-Cal (PRIME) Conference

Smile, California Campaign for the Medi-Cal Dental Program

Whole Person Care (WPC) Pilot Program

Upcoming Stakeholder Meetings and Webinars

Assembly Bill (AB) 340 Trauma Screening Advisory Workgroup

Care Coordination Advisory Committee
Electronic Visit Verification (EVV) Phase II Stakeholder Meetings
Medi-Cal Children's Health Advisory Panel (MCHAP)
Medi-Cal Dental Stakeholder Meeting
Stakeholder Advisory Committee (SAC)

Reports

Access Assessment

Program Updates

Assisted Living Waiver (ALW) Renewal

On September 7, 2018, the Department of Health Care Services (DHCS) posted the draft ALW renewal application for a 30-day public comment period closing on October 7, 2018. The current ALW five-year term will expire on February 28, 2019. The application requests to renew the ALW for an additional five-year term. The ALW program serves Medi-Cal-eligible individuals age 21 and older in 15 counties and bridges the gap between independent living and nursing home care. The ALW offers an alternative to nursing facility placement and provides an opportunity for individuals to transition out of nursing facilities. The draft ALW renewal application is posted on the DHCS website and is also available in hard copy format upon request. Notification of the public comment period is posted in the California State Register, on the DHCS website, and through stakeholder email notifications. Upon closure of the public comment period, DHCS will review and assess all comments received and determine any necessary updates to the final ALW renewal application before submission to the Centers for Medicare & Medicaid Services (CMS) for review and approval. DHCS plans to submit the ALW renewal application to CMS on November 1, 2018, for the requested new waiver term of March 1, 2019, through February 28, 2024. Please visit the DHCS website for updates.

Dental Transformation Initiative (DTI)

DTI payments issued to date, across all domains, total approximately \$130 million.

| DTI Domain | Payments To Date |
|-----------------------------------|------------------|
| Domain 1 (Preventive Care) | \$99.2 million |
| Domain 2 (Caries Risk Assessment) | \$3.8 million |
| Domain 3 (Continuity of Care) | \$21 million |
| Domain 4 (LDPPs) | \$9 million |

For Domain 4, DHCS has executed 13 Local Dental Pilot Project (LDPP) contracts. The remaining two programs with approved applications will not operate, so the contracts have been withdrawn. As a result, there is an opportunity for the existing 13 LDPPs to request additional funding, made available by the contract withdrawals, to support or expand their efforts. Requests for additional funding are currently under DHCS review. Teleconferences with all LDPPs continue as an opportunity to educate, provide technical assistance, offer support, and address concerns. Additional information about the DTI is available on the DHCS website.

Drug Medi-Cal Organized Delivery System (DMC-ODS) Waiver

Currently, 19 counties are approved to deliver DMC-ODS services, representing nearly 75 percent of the Medi-Cal population statewide. There are 21 additional counties in various phases of implementation. DHCS is working with CMS to negotiate Phase 5 of the DMC-ODS, which will incorporate tribal and urban health providers of ODS services for American Indian and Alaskan Natives. Reports for the first external quality reviews for San Mateo and Marin counties have been posted on the California External Quality Review Organization (EQRO) webpage. The University of California, Los Angeles (UCLA) will release the Year Three evaluation in October 2018. The DMC-ODS provides a continuum of care modeled after the American Society of Addiction Medicine (ASAM) criteria for substance use disorder treatment services. ASAM designations continue to be processed for licensed residential alcohol and other drug program providers, with a current total of 647 ASAM designations. More information about the DMC-ODS is available on the DHCS website.

Health Homes Program (HHP)

On September 26, 2018, DHCS held a webinar on the HHP for interested stakeholders. The webinar provided updates on the HHP, including the recent implementation in San Francisco County, future phases of implementation, and the HHP Learning Collaborative. HHP is expected to be fully implemented across 29 counties by January 2020, and will provide services in the following core areas: comprehensive care management; care coordination (physical health, behavioral health, community-based long-term services and supports); health promotion; comprehensive transitional care; individual and family support; and referral to community-based and social support services. For more information, please visit the DHCS website.

Medicaid State Plan and State Plan Amendments (SPAs)

Additional SPA updates, including those related to Proposition 56 supplemental payments, have been posted to the DHCS <u>website</u>. DHCS maintains a public <u>website</u> featuring California's Medicaid State Plan, as well as SPAs and related public notices. DHCS posts SPA information on three key pages: SPAs recently submitted to CMS are on the Pending SPAs <u>page</u>; public notices of proposed SPAs that

would change statewide methods and standards for Medicaid payment rates are on the Proposed SPAs <u>page</u>; and SPAs approved by CMS are on the Approved SPAs <u>page</u>. DHCS also maintains the <u>Children's Health Insurance Program (CHIP) State Plan</u> (Title XXI), which includes pending, approved, and withdrawn CHIP SPAs. For questions or comments, please email <u>publicinput@dhcs.ca.gov</u>.

Medication Assisted Treatment (MAT) Expansion Project (2.0)

DHCS applied in August 2018 for the new federal State Opioid Response (SOR) grant, and received approval on September 19, 2018. Implementation of the 25 new projects is expected to begin in October 2018. DHCS held a webinar on October 1, 2018, to provide additional details about the 25 new project activities and opportunities. The SOR grant (\$140 million) builds upon efforts funded under the federal State Targeted Response grant (\$90 million). The two-year State Opioid Response grant will support treatment, prevention activities and education campaigns that target populations and regions with the highest overdose rates.

The first project to kick-off the new grant is scheduled to begin in October 2018, when DHCS will distribute \$20 million in naloxone to first responders, law enforcement, libraries, schools, colleges, homeless shelters, and other organizations. Requests for applications and information about the MAT Expansion Project 2.0 are available on the DHCS website.

Non-Medical Transportation (NMT)

Beginning July 1, 2018, NMT became fully available for fee-for-service (FFS) beneficiaries with appointments for medical, dental, mental health, and substance use disorder services, or who need to pick up prescriptions or medical supplies or equipment; beneficiaries must attest they do not have other forms of transportation available to them to use the services. On August 21, 2018, DHCS received CMS approval of SPA 17-017, which added NMT services to the California State Plan. DHCS expects to send a beneficiary notice to all eligible FFS beneficiaries by the end of October to inform them of this new benefit. DHCS is collaborating with transportation organizations and providers statewide and continues to encourage and provide technical assistance to transportation providers relating to Medi-Cal coverage, reimbursement policies, and provider enrollment processes. Please note that this is specific only to beneficiaries not enrolled in a Medi-Cal Managed Care Plan. All MCP enrollees receive all NMT services, even for FFS or other non-MCP covered Medi-Cal benefits, through their MCP. For more information related to DHCS' NMT policy, please visit the DHCS website. For questions about NMT policy, please email <u>DHCS-Benefits@dhcs.ca.gov</u>. For questions about the provider enrollment processes, please email PEDCorr@dhcs.ca.gov.

Pediatric Palliative Care (PPC) Waiver Services

DHCS will end the PPC waiver on December 31, 2018 due to the inability to come to consensus with CMS on an alternate workable structure for the waiver. As part of the process to end the PPC, DHCS has drafted a transition plan. The transition plan describes how a warm handoff for PPC waiver beneficiaries to either the managed care or FFS delivery systems will be facilitated prior to January 1, 2019. It provides freedom of choice while educating beneficiaries about managed care benefits, and notifies them of the upcoming transitions, including notices to current PPC waiver beneficiaries 60 and 30 days before year end. DHCS is working directly with stakeholders, including managed care plans and the current PPC waiver providers, county PPC waiver staff, and local FFS providers to facilitate the transition process. Please visit the DHCS website for additional information regarding the PPC waiver termination and transition.

Proposition 56 – Loan Repayment Programs

The Budget Act of 2018 appropriated DHCS a specified portion of revenue from the California Healthcare, Research and Prevention Tobacco Tax Act (Proposition 56) for use as the nonfederal share of health care expenditures, per the annual state budget process. Senate Bill (SB) 849 (Chapter 47, Statutes of 2018) established the Proposition 56 Medi-Cal Physicians and Dentists Loan Repayment Act Program and appropriated \$220 million for a loan assistance program for recently graduated physicians and dentists. Of this amount, DHCS will allocate approximately \$30 million for the dental loan repayment program. Physicians and dentists will be selected for participation based on DHCS' eligibility criteria, ensuring quality care in the Medi-Cal program, and committing to participate for a minimum number of years.

Proposition 56 – Supplemental Payment Programs

DHCS received CMS approval for five SPAs to extend supplemental payment programs related to the use of proceeds from Proposition 56. The approved SPAs are for:

- Physicians services (<u>18-0033</u>)
 - For newly added Current Procedure Terminology codes for physician services and for codes with changes to the supplemental payment amounts, payment was expected to begin on September 24, 2018. Retroactive payments will process in the first half of 2019, and there will be no additional action required by providers.
- Intermediate Care Facilities for the Developmentally Disabled (18-0029)
 - The supplemental payments are effective for the period of August 1, 2018, through July 31, 2019. Since the supplemental payments continue the existing 2017-2018 supplemental payment amounts and already were in

effect as of August 1, 2018, there are no retroactive payments due, and there is no additional action required by providers.

Dental (18-0024)

- For newly added dental codes and for codes with changes to the supplemental payment amounts, DHCS is working on the timing of when the payments will occur as well as the timing to process the applicable retroactive payments. Providers will not have to take any additional actions for the retroactive payments to occur. This information will subsequently be shared in dental provider bulletins. Additional information about Proposition 56 and the list of dental codes with supplemental payment amounts is available on the DHCS website.
- Family Planning, Access, Care, and Treatment Program (18-0031)
 - Extend supplemental provider payments for the Family Planning, Access,
 Care, and Treatment program.
- Home Health Agency services (<u>18-0037</u>)
 - Increase reimbursement rates by 50 percent for State Plan Home Health Agency services (and sunset the current 1 percent payment reduction) and certain Pediatric Day Health Center services.

Public Hospital Redesign and Incentives in Medi-Cal (PRIME) Conference

As part of the PRIME quality improvement program, the 2018 PRIMEd annual conference will be held on October 29 and 30 at the Holiday Inn Sacramento. Participating PRIME entities will convene to hear from quality improvement experts, collaborate on shared improvement projects, and chart collective progress on PRIME implementation. This year's conference will feature nationally recognized speakers who reflect the PRIME program mission of health care delivery system transformation and clinical quality improvement. For questions or comments, please contact PRIME@dhcs.ca.gov.

Smile, California Campaign for the Medi-Cal Dental Program

DHCS and its partners are launching the *Smile*, *California Campaign* to build positive momentum and drive increased utilization of dental services for Medi-Cal beneficiaries. The outreach campaign framework has three components – awareness, activation, and access, which represent various activities, resources, events, and more that will soon be available statewide. The goal is to work with a wide range of organizations that will promote the campaign and connect beneficiaries to providers and services in their area. Additionally, the campaign aims to increase providers across the state and educate

Medi-Cal beneficiaries about the dental benefit and steps they can take to receive care. Training and education will be offered to providers to improve the provider and beneficiary experience, and dentists will be asked to share promotional messages with beneficiaries.

The campaign includes four promotions: Medi-Cal Has Dental Covered; First Tooth, First Birthday; Seal Today to Prevent Decay; and, It's Time to Smile! The campaign will be launched in October 2018 at SmileCalifornia.org, which will be available in English and Spanish. All campaign efforts will direct Medi-Cal dental beneficiaries to this new, user-friendly online resource, which offers information in short video formats.

Whole Person Care (WPC) Pilot Program

DHCS held the third meeting of the 25 WPC lead entities on October 1, 2018. The goal of the WPC pilot program is to coordinate physical health, behavioral health, and social services. This meeting included keynote speakers from Fjord Consulting Group and UCLA, plenary sessions, and a discussion on HHP and WPC interaction. For more information, please visit the DHCS <u>website</u>.

Upcoming Stakeholder Meetings and Webinars

Assembly Bill (AB) 340 Trauma Screening Advisory Workgroup

On September 13, 2018, DHCS hosted the third meeting of the Trauma Screening Advisory Workgroup in Sacramento. AB 340 (Chapter 700, Statutes of 2017) requires DHCS, in consultation with the California Department of Social Services (CDSS) and other partners, to convene a workgroup to update, amend, or develop, if appropriate, tools and protocols for screening children for trauma as defined within the EPSDT benefit. To view meeting information, materials, or historical documents, please visit the DHCS website. For any questions or comments, please email AB340@dhcs.ca.gov.

Care Coordination Advisory Committee

The next Care Coordination Advisory Committee meeting is scheduled October 5, 2018, in Sacramento. The September 25, 2018 meeting included review of eligibility barriers and concerns, and a discussion of FFS-only and voluntary FFS aid codes applied to certain populations or geographical areas. The Care Coordination Assessment Project began in 2018 with a systemic review of care coordination across the Medi-Cal delivery system, including an internal review of rules and regulations, and a series of site visit interviews with key informants across the state. The project encompasses the full spectrum of care coordination, including screenings, health assessments, care management, data sharing, transitions in care, governance, monitoring through

meaningful metrics, funding flexibility and other issues. DHCS is convening the Advisory Committee meetings through October to discuss DHCS findings and formulate policy recommendations. After completion of the meetings, DHCS will draft a concept paper of proposed policy changes, vet the proposals with stakeholders, and work to implement policy changes. To view meeting information and other materials, please visit the DHCS website.

Electronic Visit Verification (EVV) Phase II Stakeholder Meetings

EVV is a telephone and computer-based system that electronically verifies that in-home service visits occurred. The federal government requires that all states implement EVV for Medicaid-funded personal care services (PCS) by January 2020 and home health care services (HHCS) by January 2023. The first EVV Phase II meeting with stakeholders was October 2, 2018. The EVV Phase II stakeholder process will build upon the discussions led over the past two years by CDSS for EVV for Medicaid-funded PCS, known as "Phase I: EVV Self-Directed Model for In-Home Support Services and Waiver Personal Care Services." Further information about Phase I is available on the CDSS website. EVV Phase Il is focused on identifying either an existing system(s) or a new system to implement EVV for non-Case Management Information Payrolling System and agency personal care services, and self-directed and agency home health services, including programs administered by CDSS, the California Department of Aging, California Department of Developmental Services, and California Department of Public Health. For inquiries regarding the Phase II EVV stakeholder meeting or to be added to the stakeholder interested parties e-mail list, please contact EVV@dhcs.ca.gov. For more information about EVV Phase II, please visit the DHCS website.

Medi-Cal Children's Health Advisory Panel (MCHAP)

The next MCHAP meeting is scheduled October 18, 2018, in Sacramento. The meeting will include DHCS Director Jennifer Kent's updates on federal and state developments, continued discussions to identify areas for improvement on the DHCS website, and a discussion of the myMedi-Cal publication. The MCHAP is a 15-member independent statewide advisory body that advises DHCS on matters relevant to children enrolled in Medi-Cal. To view meeting information, materials, or historical documents, please visit the DHCS website.

Medi-Cal Dental Stakeholder Meeting

The quarterly Sacramento Medi-Cal Dental Advisory Committee meeting was held October 4, 2018, and the next Medi-Cal Dental Los Angeles Stakeholder meeting is scheduled October 18, 2018. Additional stakeholder information is available on the DHCS website.

Stakeholder Advisory Committee (SAC)

The next SAC meeting is scheduled October 25, 2018. The meeting will provide updates on the Proposition 56 physician and dental supplemental payments and loan repayment program, and a discussion on the PPC waiver renewal. The meeting will also include an update on the AB 340 Trauma Screening Advisory Workgroup. The purpose of the SAC is to provide DHCS with feedback on health care policy issues affecting the Department, including Section 1115 waiver implementation efforts. SAC members are recognized stakeholders/experts in their fields, including, but not limited to, member advocacy organizations and representatives of various Medi-Cal provider groups. To view meeting information, materials, or historical documents, please visit the DHCS website.

Reports

Access Assessment

California's Medi-Cal 2020 waiver Special Terms and Conditions requires DHCS to conduct an Access Assessment to evaluate primary, core specialty, and facility access to care for Medi-Cal managed care beneficiaries based upon requirements set forth in the Knox-Keene Health Care Service Plan Act of 1975 and DHCS' managed care health plan contracts. The assessment will consider State Fair Hearing and Independent Medical Review decisions and grievances and appeals/complaints data. DHCS has amended its contract with its External Quality Review Organization (EQRO) to conduct the assessment. As a part of the assessment process, DHCS established an advisory committee that provided input into the structure, draft design, and recommendations of the assessment. DHCS obtained approval on the draft design from CMS on September 12, 2018 and subsequently the EQRO began work on it. Questions about the assessment may be directed to AccessAssessment@dhcs.ca.gov. Additional information about the assessment is available on the DHCS website.