

October 11, 2023

Chat Log

15:04:17 From Amy Salerno To Everyone:

Maya Petersen mayaliv@berkeley.edu

15:17:04 From Alice H - Events To Everyone:

For both English and Spanish captioning:

[https://www.streamtext.net/player?event=DHCS PHM Advisory Group Meeting](https://www.streamtext.net/player?event=DHCS%20PHM%20Advisory%20Group%20Meeting)

15:17:31 From Alice H - Events To Everyone:

For both English and Spanish captioning:

[https://www.streamtext.net/player?event=DHCS PHM Advisory Group Meeting](https://www.streamtext.net/player?event=DHCS%20PHM%20Advisory%20Group%20Meeting)

15:25:44 From Mike Odeh To All Panelists:

Can you please remind me when PHM Service is expected to be available?

15:32:44 From Jessica Mosher To All Panelists:

I do not see any Tribal Health Providers on this list.

15:41:44 From Tangerine Brigham To Everyone:

What was the rationale for not categorizing SPD population separately?

15:41:56 From Mike Odeh To All Panelists:

Is dental captured in physical health?

15:44:25 From Erin Slack To Everyone:

Will we be able to access of all the predictor variables values for our membership from the PHM Service?

15:49:22 From B. Yoshi Laing To All Panelists:

@Mike Odeh - PHM Service will not be available until 2nd half of 2024 at the earliest.

15:50:01 From B. Yoshi Laing To All Panelists:

we'll release a more definitive timeline as soon as we can

15:50:07 From B. Yoshi Laing To All Panelists:

@Erin Slak - Good question, TBD

15:50:07 From Mike Odeh To All Panelists:

thanks

15:50:32 From Kristen Golden testa To All Panelists:

How do you capture underutilization in the predictor variables: not receiving a well-child visit in a year?

15:51:25 From Caroline Sanders To All Panelists:

When will you be determining the social risk factors for family and community? Will we have a chance to review?

15:53:14 From Mike Odeh To All Panelists:

WIC for pediatric social risk will miss kids over 5, why not also use CalFresh?

15:53:56 From Tracey Rattray To All Panelists:

Will you be using the Healthy Places Index as a source of data for the geographic domain?

15:54:47 From Carolina Wroblewski To Everyone:

for birthing indicator of underutilization, doula seems less important than no prenatal care by OBGYN. What is the rationale for picking doula services as an indicator for underutilization for the birthing population?

15:56:18 From Amelia Grover To Everyone:

social risk: low income resources for aging (affordable RCFEs, memory care availability/capacity, geriatric psych, etc.)

15:57:37 From Jesus Parra To All Panelists:

How do ACEs screenings fit in terms of risk identification?

15:58:19 From Caroline Sanders To All Panelists:

Appreciate the focus on equity and social risk factors. What steps are DHCS/MCPs taking to ensure there is accurate/complete demographic data in order to mitigate algorithmic bias?

15:58:58 From Mike Odeh To All Panelists:

thanks for the clarification

15:59:12 From Tao Le To Everyone:

I assume you will be using Pharmacy data in your RSST?

16:02:33 From Jessica Jew To All Panelists:

Will the subdomain or domain scores for each member be visible as well so MCPs can get an idea of what their highest priority needs are?

16:02:40 From Amy Salerno To Everyone:

Yes for pharmacy data and also dental data, including dental care as an outcome under underutilization.

16:03:49 From B. Yoshi Laing To All Panelists:

Here is a link to the draft of the Member Contact & Demographic Data (MCDI) Strategy

<https://www.dhcs.ca.gov/CalAIM/Documents/MCDI-Initiative-Strategy.pdf>

16:04:47 From Caroline Sanders To All Panelists:

Good to hear that!

16:04:50 From Caroline Sanders To All Panelists:

Thanks!

16:10:23 From Kristen Golden testa To All Panelists:

Isn't a health-related social needs screening needed to capture an individual's social needs, especially if there is not social services utilization data available for an individual?

16:13:46 From Tracey Rattray To Everyone:

2. How will you incorporate data from Healthy Places Index, which includes indicators of community conditions, into this system?

16:16:29 From Joel Ervice To Everyone:

Can that just-referenced detailed list be posted on the DHCS website for broader dissemination?

16:17:12 From Tracey Rattray To Everyone:

Could you please put contact information for PHM from the previous slide in the chat? Thank you.

16:18:41 From Amy Salerno To Everyone:

PHMSection@dhcs.ca.gov

16:21:32 From Dipa Patolia To Everyone:

Is there consideration for standardizing a social health screener across all hospitals?

16:22:20 From David Tian To Everyone:

Hello, all. Thanks for your engagement today! Wanted to lift up that we've received some follow-up questions regarding what information will be shared publicly about the RSST predictors and outcomes and when.

At this time, we welcome all feedback on RSST via the email address PHMSection@dhcs.ca.gov. Once we move to a more mature form of the predictor variables and outcomes, this information will be posted publicly for all to provide further input on more detailed information.

16:32:48 From Natalie Monden To All Panelists:

How will we ensure discharge care managers are aware of these resources and expectations. There is a gap in communication and

knowledge. Mostly due to employee turnover and/or lack of a shared resource database. We need a standardized system where all available services post discharge are listed.

16:34:37 From Natalie Monden To All Panelists:

ED team members should have access to PCP. Hoping for a centralized electronic health record system in the future. Happy to see all of our initiatives moving to that vision.

16:38:29 From Natalie Monden To All Panelists:

Using existing caregivers within the homes to become CHW. They have lived experience

16:42:18 From Natalie Monden To All Panelists:

You got it. Not sure how to unmute. Thank you

16:43:30 From Dipa Patolia To Everyone:

I asked the question above. Is there consideration for standardizing a social health screener across all hospitals? Will this be included in the discharge risk assessment? For example, hospitals may identify a member who is unhoused or experiencing housing instability - how are we standardizing the expectation that hospitals inform MCPs of the patient's social needs prior to discharge so that we can proactively support? Through ADT we are getting some social data but not all.

16:45:41 From Katherine Haynes To All Panelists:

Thank you this was very helpful and clear.

16:45:51 From Palav Babaria To Everyone:

No plan at present for a standardized social screener!

16:46:27 From Palav Babaria To Everyone:

The Policy Guide will make it post-decisional!

16:46:44 From Bernadette Gates To Everyone:

Thank you!