

# Medi-Cal Children's Health Advisory Panel

Wednesday, May 1, 2024

# Webinar Tips

- » Please use either a computer or phone for audio connection.
- » Please mute your line when not speaking.
- » Medi-Cal Children's Health Advisory Panel (MCHAP) Members are required to turn on their camera during the meeting.
- » [Registered](#) attendees will be able to make oral comments during the public comment period.
- » For questions or comments, email: [MCHAP@dhcs.ca.gov](mailto:MCHAP@dhcs.ca.gov).



# Welcome and Introductions

Mike Weiss, M.D., Chair

# Director's Update

Michelle Baass, Director

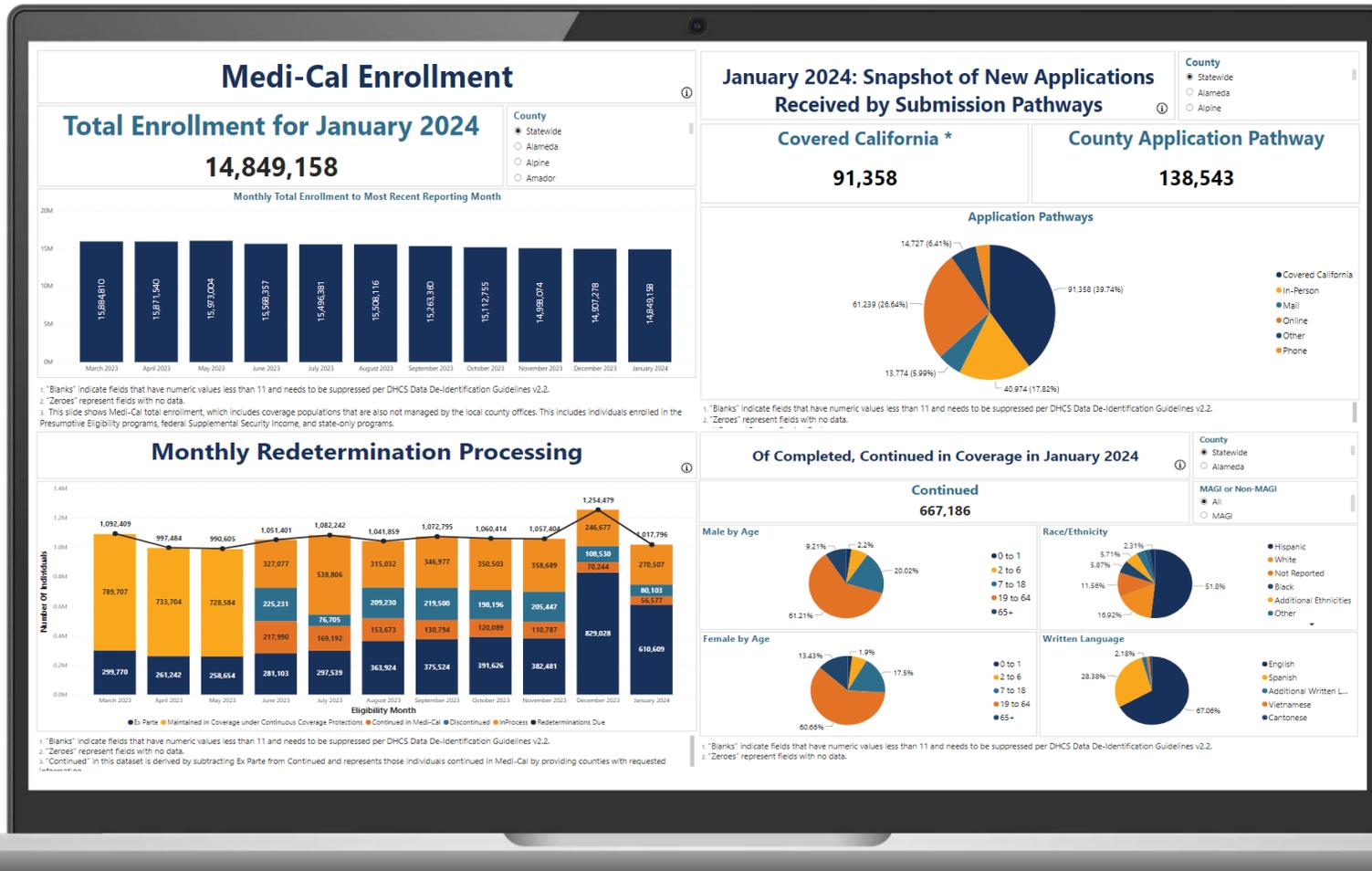
# **DHCS Response to California State Auditor Report on Barriers to Timely Access to Behavioral Health Services for Children**



# Medi-Cal Redeterminations

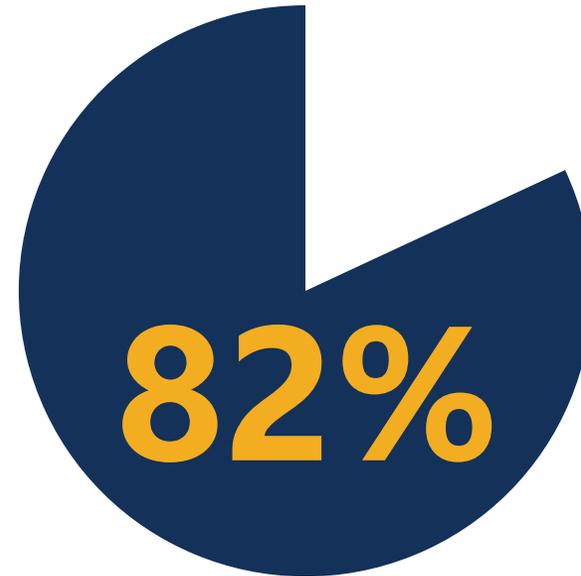


# Medi-Cal Continuous Coverage Unwinding Dashboard



# Unwinding Focus – Outstanding Renewals

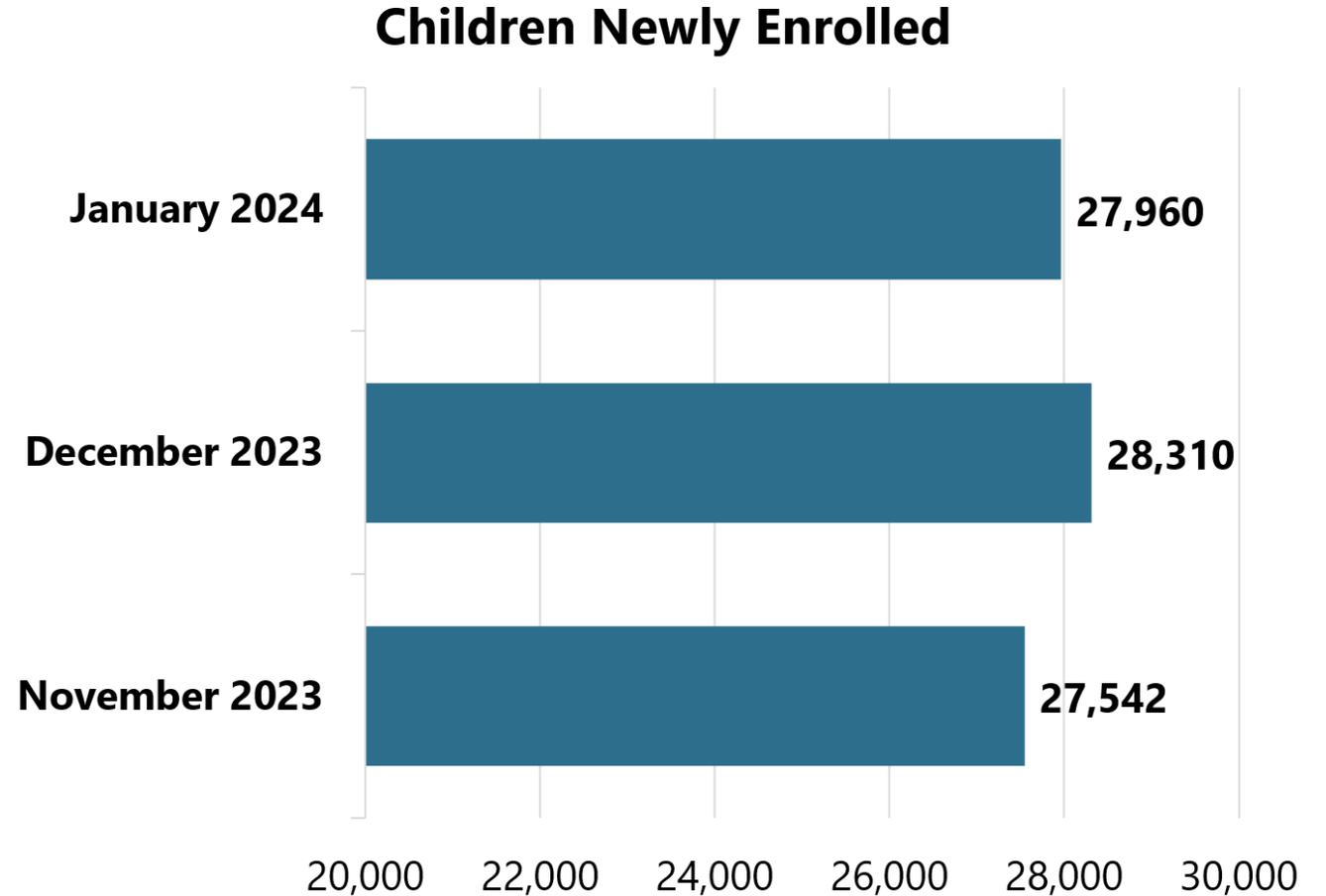
- » DHCS is working with all counties to ensure renewals are completed within the unwinding period
- » DHCS provides technical assistance during bimonthly county support calls and targeted assistance



Completion of renewals due  
June 2023 – December 2023

# Children Enrollment Data

- » Average monthly enrollment for children during the unwinding has been 26,846.
- » The last three months of data has indicated a slight increase in enrollment.

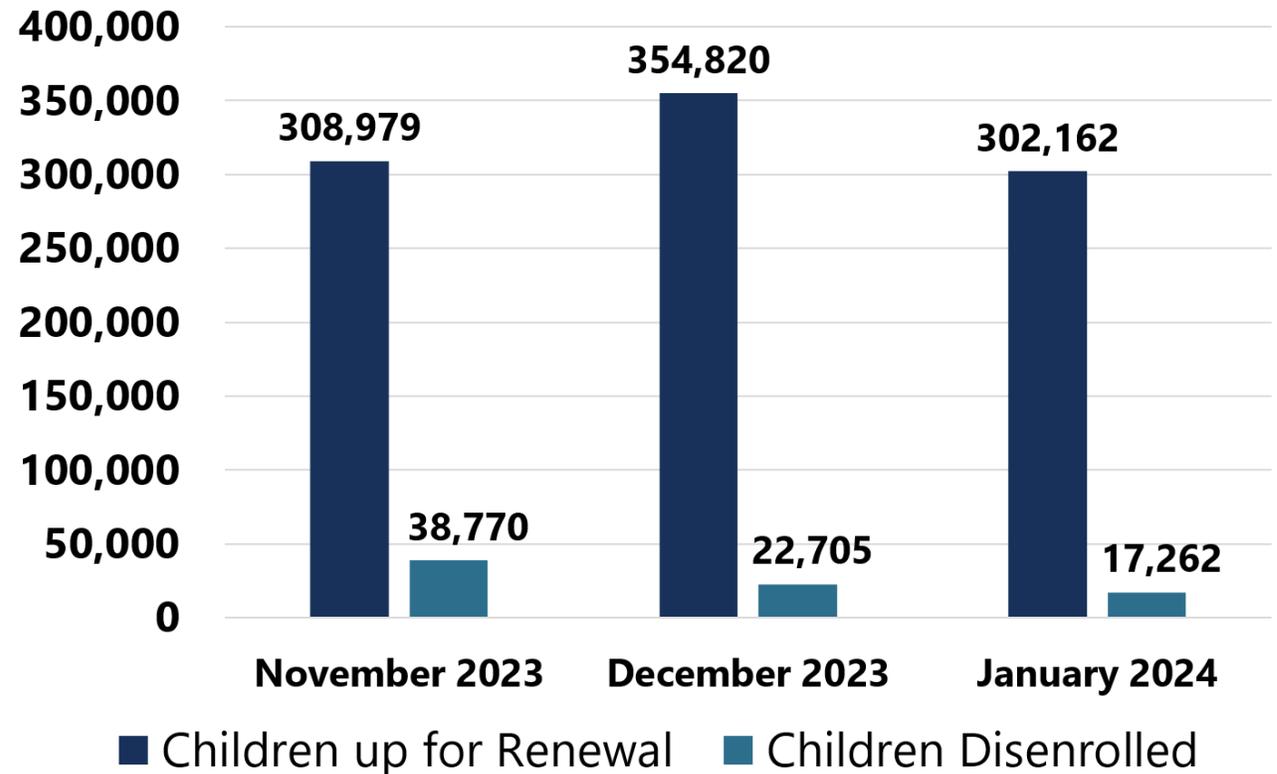


# Children Renewal Data

November 2023	12.5% Discontinuance Rate
December 2023	6.4% Discontinuance Rate
January 2024	5.7% Discontinuance Rate

» Discontinuance rate based upon monthly point-in-time date of children up for renewal and those disenrolled

## Children Due For Renewal and Children Discontinued

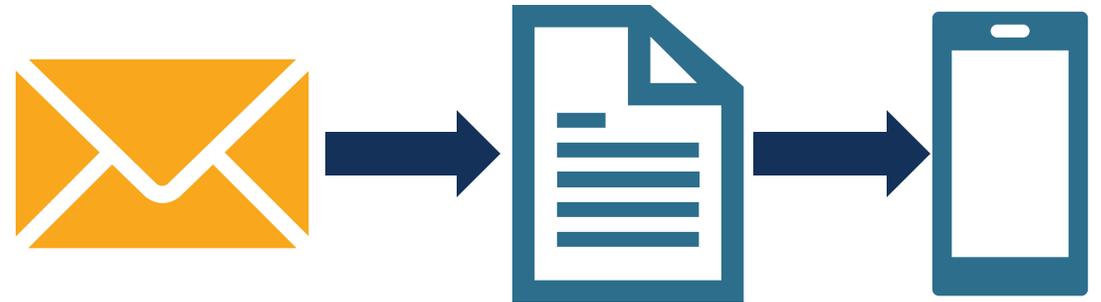


# Ongoing Renewal Enhancements

**Yellow Envelope**

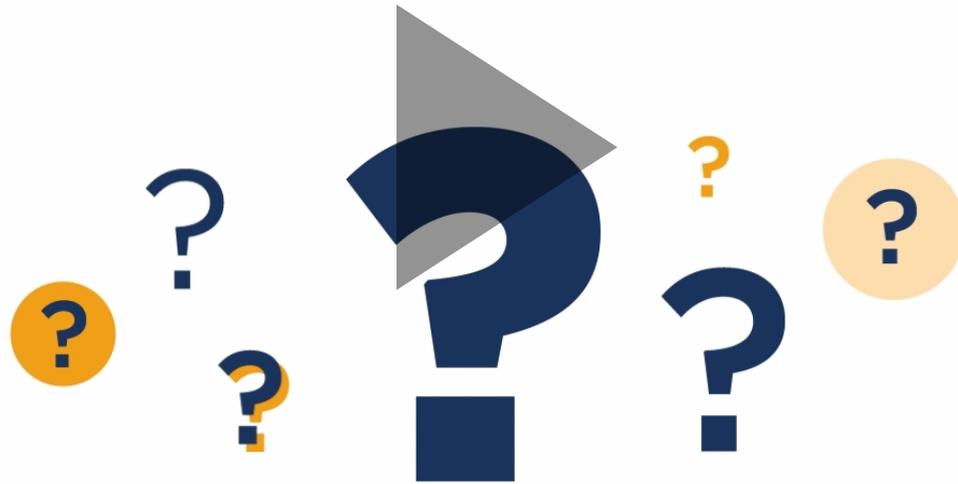


**Additional Contact**



# Income Video

**WHAT IS INCOME?**



# Discussion



# **Building a Healthy Foundation: How MCPs are Prioritizing Children's Health**

Sarah Brooks

Chief Deputy Director for Health Care Programs

# Panel Discussion

- » Robert Moore, MD, Chief Medical Officer, Health Services Department, Partnership HealthPlan of California
- » Chris Esguerra, MD, Chief Medical Officer, Health Plan of San Mateo
- » Ramiro Zuniga, MD, Vice President, Medical Director, Health Net

**Break**

The image features the word "Break" in a bold, dark blue font, centered horizontally. Below the text are two thick, wavy lines that span the width of the page. The top line is a teal color, and the bottom line is a darker blue. Both lines have a smooth, undulating shape, creating a decorative border at the bottom of the slide.

# Enhanced Care Management

Hope Neighbor

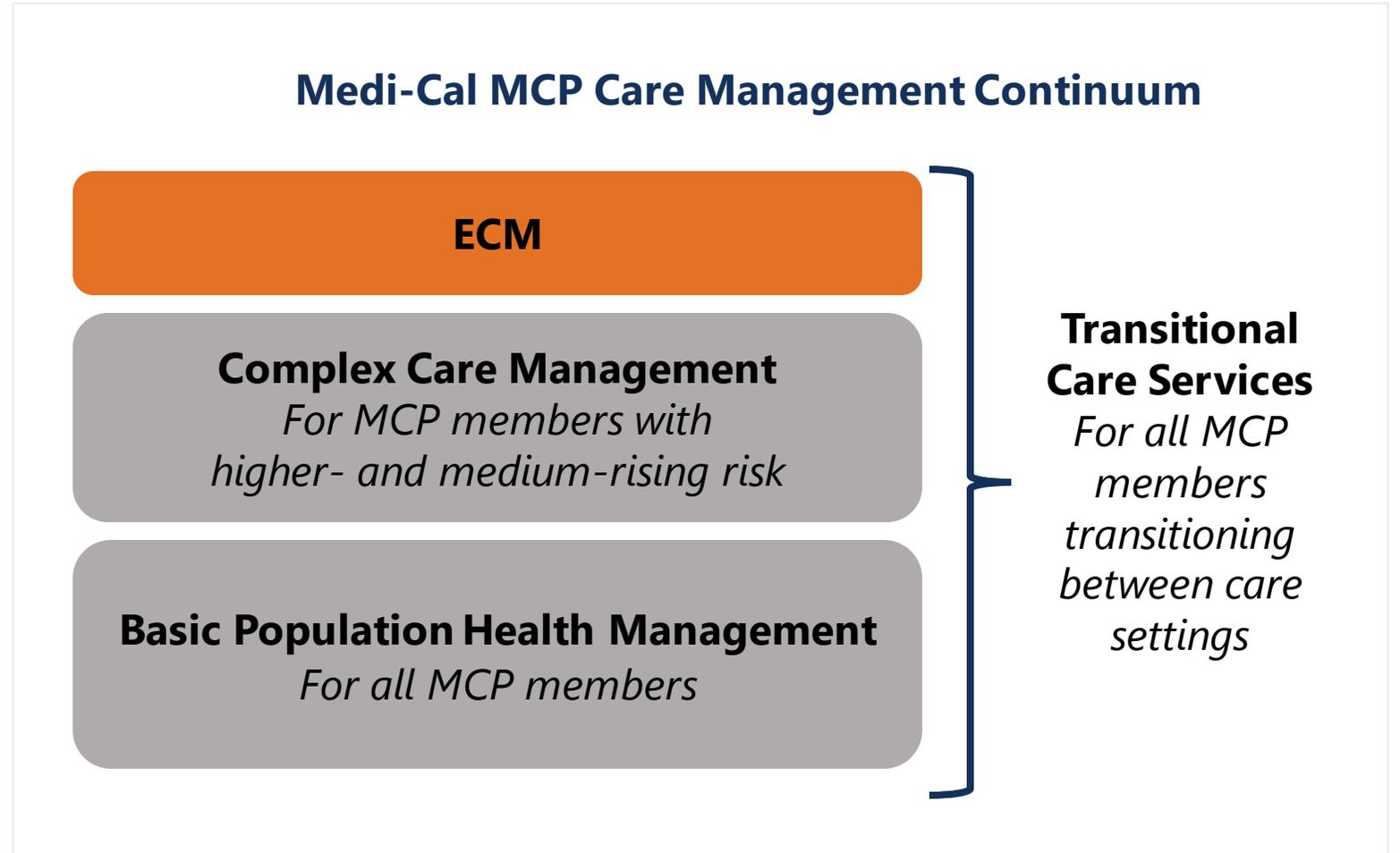
Chief, Population Health Management Division

# Objectives

- » Share DHCS' perspective on ECM Children and Youth Population of Focus (POF) implementation to date
- » Hear your views on what DHCS can do to strengthen Children and Youth POF implementation

# What is ECM?

ECM is a statewide Medi-Cal MCP benefit to support comprehensive care management for eligible members with the most complex needs



# Children and Youth POF Milestones

July  
2023

- » DHCS adjusts ECM program based on 1st 18 months' feedback
- » ECM launches Children and Youth POFs in all counties on July 1

Jan  
2024

- ECM launches in all counties for:
- » Individuals Transitioning from Incarceration
  - » Birth Equity Population of Focus

Today

# Who is Eligible for ECM?

**ECM is available to MCP members who meet ECM POF definitions.**

ECM Population of Focus		Children & Youth	Adults
1	Individuals Experiencing Homelessness	✓	✓
2	Individuals At Risk for Avoidable Hospital or Emergency Department Utilization	✓	✓
3	Individuals with Serious Mental Health and/or Substance Use Disorder Needs	✓	✓
4	Individuals Transitioning from Incarceration	✓	✓
5	Adults Living in the Community and At Risk for Long Term Care Institutionalization		✓
6	Adult Nursing Facility Residents Transitioning to the Community		✓
7	Children and Youth Enrolled in California Children's Services (CCS) or CCS Whole Child Model (WCM) with Additional Needs Beyond the CCS Condition	✓	
8	Children and Youth Involved in Child Welfare	✓	
9	Birth Equity Population of Focus	✓	✓

# What are the ECM Core Services?

Members in ECM receive seven core services based on their needs, tailored to their POF and individual needs.



Outreach and Engagement



Member and Family Supports



Comprehensive Assessment and Care Management Plan



Health Promotion



Enhanced Coordination of Care



Comprehensive Transitional Care

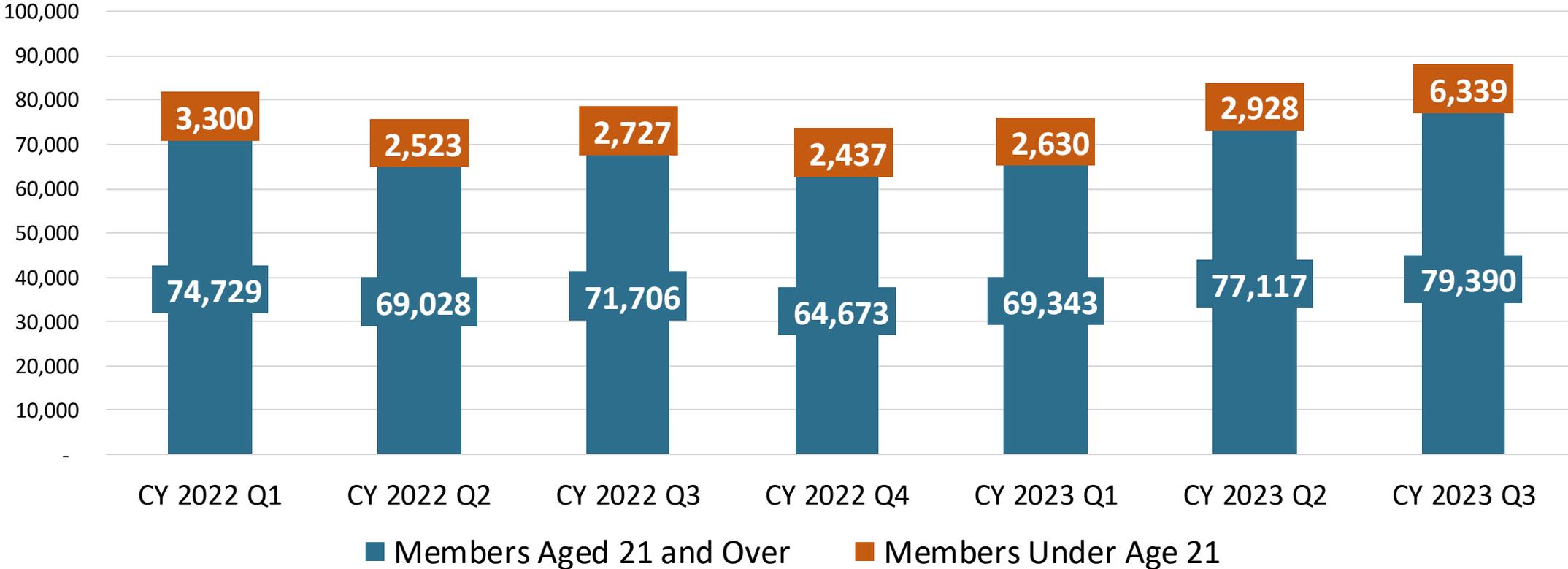


Coordination of and Referral to Community and Social Support Services

# Highlights from Latest Public Data Release

## *ECM Children & Youth Members*

Total Number of Members Who Received ECM in Any County



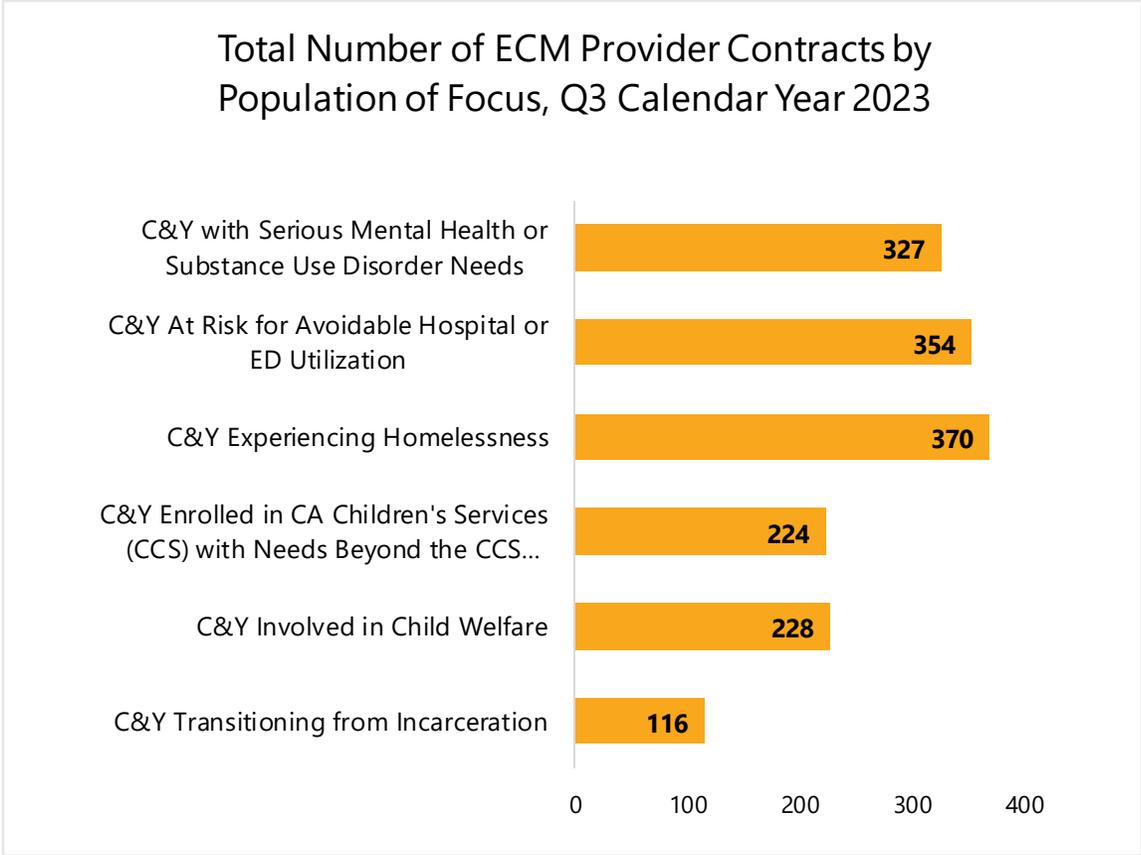
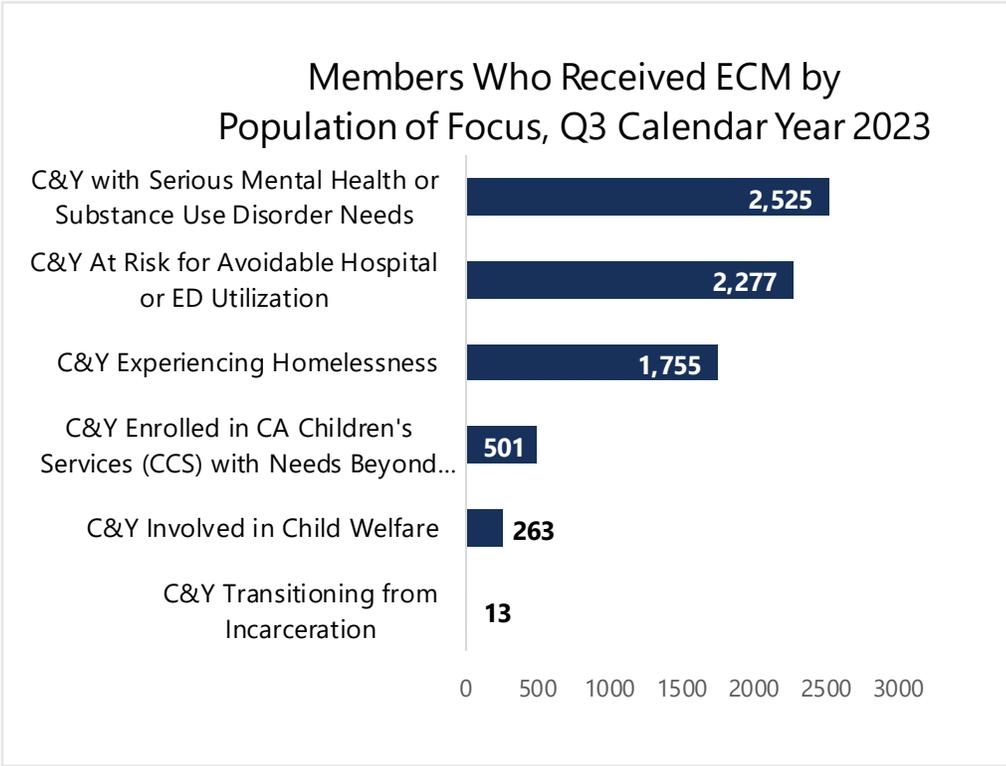
Source: [ECM and Community Supports Quarterly Implementation Report for Q3 2023](#)

# Challenges

- » Complex landscape with many service providers
- » ECM for children and youth is in early stages of rollout
  - Whole Person Care pilots and Health Homes focused on adults
  - It takes time to build networks and trust
- » Complexities of community-based organizations (CBOs) and MCPs working together

# Highlights from Latest Public Data Release

## ECM Children & Youth (C&Y) Members



A "Provider Contract" is a unique combination of NPI, provider type, MCP, and county.

# Increasing Children and Youth in ECM

## *Priorities for increasing ECM with Children and Youth*

- » Referral standards to streamline process and encourage presumptive authorization
- » Simplified contracting for community-based ECM providers
- » Community referrals for Children and Youth
  - Children & Youth Involved in Child Welfare and Transitioning from Incarceration
- » ECM provider networks specialized in supporting Children and Youth
- » TA on blending ECM with existing care management for children
  - e.g. How ECM blends with CCS, Home Visiting Models, DSS Social Workers
- » Continued release of data, monitoring and strengthening of ECM

# How You Can Help



## Actions Providers and Others Can Take

- » Spread the word about ECM and how it can benefit children in your community
- » Refer individuals to their managed care plan for ECM services
- » Contract with MCPs to become an ECM Provider
- » Identify ECM Providers in your community and partner with them to serve children receiving ECM



## Additional Resources for Prospective and Contracted ECM Providers

- » Investigate the [Technical Assistance Marketplace](#) to help you get started
- » Reach to your local MCP(s) to explore contracting for ECM
- » Join your regional CalAIM [Collaborative Planning and Implementation groups](#)
- » For more, see the [ECM Provider Toolkit](#)

# Spotlight on ECM for Children and Youth

## *Resource for Learning More*

- » [ECM for Children and Youth Populations of Focus Spotlight](#)
- » Identifies key DHCS policies and resources for serving Children and Youth in ECM
- » Includes Member vignettes that show how ECM can support specific Children and Youth Populations of Focus:
  - **Teens in foster care who receive Intensive Care Coordination**
  - **Children with cerebral palsy enrolled in California Children's Services**
- » Explains how Community Supports can be integrated to serve children and youth alongside their families and caregivers



# Commitment to Transparency



***Q4 2023 data  
release planned for  
June / July 2024***

- » **ECM and Community Supports Quarterly Implementation Report** provides 1st public release of Children & Youth POF data, with data through Q3 2023
- » Provides key public updates about ECM implementation
  - Enabling MCPs to understand performance relative to their peers
  - Supporting collaboration between stakeholders on ECM and CS implementation
- » **Includes state-, county-, and plan-level data. Summarizes cumulative and quarterly enrollment trends for the two programs**
  - Total members and members under age 21 (the age cut-off for most Children & Youth POFs) utilizing ECM in each quarter

# Outreach

- » MCPs are required to train providers on ECM and report back to DHCS
  - [Provider toolkit](#)
- » MCPs are required to post ECM information on member-facing websites
- » DHCS working with ethnic media to hold community engagement events and media briefings to raise awareness about CalAIM, including ECM, featuring MCPs and trusted community members



Enhanced Care  
Management (ECM)

## Provider Toolkit

DECEMBER 2021

# Discussion questions

- » Where do you see opportunity for DHCS to strengthen implementation?
- » What are 2 – 3 major areas you would like MCPs to consider changing as they implement ECM for Children and Youth?
- » What are 2 – 3 key areas where providers could be better supported in offering ECM for Children and Youth?

# Questions?



# Child Health and Disability Prevention Program Transition Update

Joseph Billingsley, Assistant Deputy Director, Health Care Delivery Systems

Cortney Maslyn, Chief, Integrated Systems of Care Division

# **Child Health and Disability Prevention Program (CHDP) Program Transition Overview**



# Purpose

- » The transition of the CHDP program aligns with DHCS' goal under California Advancing and Innovating Medi-Cal (CalAIM) to reduce administrative complexities.
- » DHCS will sunset and/or fully transition components of the CHDP program that already exist in other Medi-Cal delivery systems.

# CHDP Program Stakeholder Engagement



# CHDP Program Transition Workgroup

- » Throughout 2023, the CHDP Program Transition Workgroup convened to discuss the following topics:
  - January: Children's Presumptive Eligibility
  - February: Monitoring and Oversight Activities
  - March: Transition of CHDP Program Resources
  - May: CHDP- Childhood Lead Poisoning & Prevention Program (CLPP) Activities
  - June: Health Care Program for Children in Foster Care (HCPCFC) as a Standalone Program
  - September: CHDP Program Transition Capstone Meeting

# County/Managed Care Plan (MCP) Guidance and Communication

- » In December 2023, DHCS published CHDP Provider Notice 23-04, [CHDP Program Activities in Fiscal Year 2023-2024](#), to provide counties and relevant stakeholders with guidance on post-CHDP program transition activities
- » In March 2024, DHCS published CHDP Program Letter 24-01, [Deadline to Submit CHDP Provider Data Sheet \(PM 177\) Form](#), to provide counties and relevant stakeholders with guidance related to the deadline to submit the PM 177 form
- » DHCS notified all Medi-Cal MCPs of the CHDP sunset and asked that they work with their counties on the transition

# County and Stakeholder Engagement

- » Outside of the CHDP workgroup meetings, DHCS communicates with CHDP program stakeholders
- » DHCS conducts ad hoc meetings with county CHDP programs for in-depth discussions and support leading up to the transition
- » DHCS facilitated meetings with smaller groups of stakeholders to discuss aspects of the CHDP program transition, including the reallocation of CHDP funds
- » DHCS continues to attend HCPCFC Statewide Foster Care Subcommittee Quarterly Meetings and other regular stakeholder meetings
- » DHCS hosts bimonthly HCPCFC Standalone Workgroup meetings to help stand up local HCPCFC programs

# CHDP Program Transition Plan



# Timeline and Status

**SEPTEMBER 2023 –  
OCTOBER 2023**

Transition plan (draft)  
was released for  
public comment



Hundreds of  
comments  
received

**MARCH 2024**

CHDP Program  
transition plan and  
certification finalized  
and released

# Key Components

- » Children's Presumptive Eligibility
- » Early and Periodic Screening, Diagnostic and Treatment
- » Health Care Program for Children in Foster Care
- » CHDP- Childhood Lead Poisoning & Prevention Program
- » Newborn Hearing Screening Program

# Children's Presumptive Eligibility (CPE)

- » The CHDP transition expands and renames the function of the CHDP Gateway to CPE
- » An expanded list of qualified Medi-Cal providers will have access to CPE and can conduct Presumptive Eligibility (PE) determinations
- » The transition from the CHDP Gateway to CPE will allow for the continued provision of PE services to eligible children and is expected to increase access to services among the PE population
- » For fiscal year 2022-2023, CHDP Gateway served 91,435 children

# Early and Periodic Screening, Diagnostic, and Treatment (EPSDT) Services

- » MCPs and Fee-for-Service (FFS) providers will maintain responsibility for the provision of EPSDT to their members and enrollees, respectively
- » By July 2024, most children and youth under age 21 will be enrolled in MCP
- » DHCS currently monitors MCPs' provision of required services through facility site reviews, reporting requirements, and other mechanisms

# Health Care Program for Children in Foster Care (HCPCFC)

- » HCPCFC as a standalone program with the funding and staff necessary to conduct its own program administration
- » The new HCPCFC administrative allocation will cover Supervising Public Health Nurse positions and administrative classifications
- » Minimum staffing requirements are needed for each county to ensure program efficacy
- » The HCPCFC Program Manual and Financial Policy and Procedures were sent out for public comment. The Department is currently reviewing the comment logs received.
- » DHCS will begin collecting performance measures from counties to monitor the implementation of HCPCFC as a standalone program

# Child Health and Disability Prevention - Childhood Lead Poisoning Prevention Program

- » California Department of Public Health (CDPH) is responsible for CLPP activities for the FFS population.
- » CDPH's Childhood Lead Poisoning Prevention Branch (CLPPB) will continue existing lead screening-related activities and to offer resources to parents/families by distributing Lead Education Materials to local health jurisdictions
- » DHCS and CDPH will match up Medi-Cal children meeting criteria for applicable lead screening requirements during a certain period (e.g., calendar year) with lab data to identify which children did not receive a lead screening who should have and notify them.
- » MCPs are already required to comply with CLPP program requirements, including the provision of blood lead screenings and medical record reviews for its members

# Newborn Hearing Screening Program (NHSP)

- » NHSP helps identify hearing loss in infants and is offered to every baby born in a California Children's Services (CCS) program-approved hospital, regardless of insurance
- » DHCS will assume previous CHDP responsibilities. DHCS and Hearing Coordination Centers (HCCs) will continue following up with families of babies who did not pass their initial hearing screening
- » CHDP program staff assisted the HCCs in providing updated family contact information from the Medi-Cal Eligibility Data System (MEDS) for 398 babies
- » DHCS is making changes to the procedures for NHSP family follow-ups to ensure there are no gaps between how these functions are carried out today, as these responsibilities will transition to DHCS

# **Post-CHDP Program Transition Activities**



# Post-CHDP Program Transition Activities

- » DHCS will continue engaging with stakeholders, release additional communications, and track relevant data leading up to and following July 1, 2024, to ensure a successful transition
- » Communications and resources
- » DHCS monitors the [CHDPprogram@dhcs.ca.gov](mailto:CHDPprogram@dhcs.ca.gov) inbox and will continue to do so in the months following the CHDP Program transition
- » Additional detail regarding post-CHDP Program transition activities can be found on pages 29–34 of the CHDP Program Transition Plan

# Questions?



# Public Comment

# Member Updates

# Upcoming MCHAP Meetings and Next Steps

# Upcoming 2024 Meeting Dates



- » Thursday, September 12, 2024
- » Thursday, November 7, 2024

**Questions?**  
**[MCHAP@dhcs.ca.gov](mailto:MCHAP@dhcs.ca.gov)**



**Thank You.**



# APPENDIX



# CHDP Background - Authorizing Statute

- » Senate Bill (SB) 184 requires DHCS to take specific steps before July 1, 2024:
  - Conduct a stakeholder engagement process
  - Develop a transition plan
  - Provide an update to the Legislature during the 2023-24 budget hearings
  - Continue Medi-Cal presumptive eligibility for children under 19 by expanding access within the Children's Presumptive Eligibility program
  - Consult with California Department of Social Services to continue the Health Care Program for Children in Foster Care (HCPCFC)
  - Consult with the California Department of Public Health to continue Childhood Lead Poisoning Prevention Program activities

# Authorizing Statute

- » Per SB 184, the CHDP Program Transition Plan includes:
  - A post-transition oversight and monitoring plan for Medi-Cal children currently served through CHDP, including those in fee-for-service and foster youth
  - A plan for how managed care plans will monitor providers' adherence to Bright Futures Guidelines and the Early and Periodic Screening, Diagnostic, and Treatment Program standards
  - CHDP-CLPP program activities through existing Medi-Cal delivery systems
  - A plan to fund administrative and service costs for the HCPCFC
  - An analysis and plan for retaining existing local CHDP positions through the exploration of new partnerships and roles, bolstering existing programs that can leverage CHDP expertise, or both

# Glossary

- » California Advancing and Innovating Medi-Cal (CalAIM)
- » California Children's Services (CCS)
- » California Department of Public Health (CDPH)
- » Child Health and Disability Prevention Program (CHDP)
- » CHDP- Childhood Lead Poisoning & Prevention Program (CLPP)
- » Department of Health Care Services (DHCS)
- » Early and Periodic Screening, Diagnostic, and Treatment (EPSDT)
- » Enhanced Care Management (ECM)

# Glossary

- » Health Care Program for Children in Foster Care (HCPCFC)
- » Newborn Hearing Screening Program (NHSP)
- » Medi-Cal Eligibility Data System (MEDS)
- » Medi-Cal Children's Health Advisory Panel (MCHAP)
- » Medi-Cal Managed Care Plan (MCP)
- » Population of Focus (POF)
- » Presumptive Eligibility (PE)
- » Whole Child Model (WCM)