



**DEPARTMENT OF HEALTH CARE SERVICES (DHCS)
California Children's Services (CCS)
Monitoring and Oversight Workgroup
March 13, 2023
12 p.m. – 4 p.m.**

MEETING SUMMARY

CCS Monitoring and Oversight Workgroup Members Attended:

Alicia Emanuel; Ashley Worley; Dawn Pacheco; Francis Chan, MD; Guillermina (Mina) Andres; Hannah Awai, MD; Heidi Merchen; Janet Peck; Jody Martin; Jolie Onodera; Kathryn Smith; Katie Schlageter; Kristen Dimou; Lorri McKey; Mary Doyle, MD; Meredith Wolfe; Michelle Gibbons; Michelle Laba, MD; Nancy Netherland; Norma Williams; Susan Skotzke; Tanesha Castaneda

CCS Monitoring and Oversight Workgroup Members that Did Not Attend:

Anna Leach-Proffer; Eileen (Chris) McSorley; Holly Henry; Katherine Barresi; Lori Gardner; Mike Odeh; Pip Marks; Richard Chinnock, MD

DHCS Staff Attended: Pamela Riley, MD; Joseph Billingsley; Cortney Maslyn; Annette Lee; Sabrina Atoyebi; Michael Luu; Barbara Sasaki; Katie Ramsey; Cheryl Walker, MD; Jill Abramson, MD; Megan Sharpe

DHCS Consultants, Sellers Dorsey Attended: Sarah Brooks; Alex Kanemaru; Marisa Luera

Public Attended: 111

CCS Monitoring and Oversight Workgroup Materials: Agenda and Slide Deck

I. Welcome and Meeting Information

Sarah Brooks, DHCS Consultant with Sellers Dorsey

Welcomed members and shared meeting information

Alex Kanemaru, DHCS Consultant with Sellers Dorsey

Reviewed housekeeping items

II. Roll Call

Sarah Brooks

Conducted roll call of CCS Monitoring and Oversight Workgroup members, DHCS staff, and the Sellers Dorsey team

III. January Meeting Summary and Workgroup Feedback

Sarah Brooks

Provided the January meeting summary and reviewed January homework items

IV. Grievance Numbered Letter (NL)

***Katie Ramsey, Chief
County Compliance Unit***

Provided an update on the draft Grievance NL, next steps, grievance definitions, and flowcharts for informal and formal grievances

Summary Discussion:

- Members requested additional funds for county allocations in order to stand up and intake grievances
 - **Response:** DHCS acknowledges request
- Members highlighted the importance of this process and requested materials to be developed for beneficiaries and families to understand the differences between grievances, appeals, and State Fair Hearings

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- **Response:** DHCS will develop a flyer to educate beneficiaries and families on their rights and the differences between grievances, appeals, and State Fair Hearings
- Members requested to review the updated Grievance NL before it is finalized
 - **Response:** DHCS will take this into consideration
- Members expressed the grievance process is important and commented it can be frustrating when services are not timely and are glad the grievance process will help beneficiaries
 - **Response:** DHCS acknowledges comment
- Members requested a statewide portal to intake grievances
 - **Response:** Counties will be responsible for intaking and resolving grievances based on their roles and responsibilities outlined in the Roles and Responsibilities Table Grievance are respective to the different county model types

V. Training NL
Sabrina Atoyebi, Chief
Medical Operations Branch

Provided an update on the Training NL, next steps, feedback received, and training implementation timeline

Summary Discussion:

- Members requested clarification on if Diversity, Equity, and Inclusion (DEI) trainings led by the county's Human Resources (HR) team would be sufficient for the training requirement
 - **Response:** DEI trainings developed at the county HR level are sufficient for this requirement
- Members requested DHCS create a centralized place for trainings to be accessed, and that Whole Child Model (WCM) Medi-Cal Managed Care Plans (MCP) also be required to complete these trainings
 - **Response:** DHCS will take this into consideration
- Members asked for clarification on how DHCS will ensure counties adhere to training requirements, if a tracking log will be developed
 - **Response:** DHCS developed a template to ensure counties adhere to training requirements

VI. Memorandum of Understanding (MOU) Development
Katie Ramsey

Reviewed the MOU development timeline, MOU outline updates, standard language, summary of the Roles and Responsibilities Table, feedback received, revisions made, and next steps

Summary of Discussion:

- Members inquired if Counties, due to different legal staff, can edit the MOU template
 - **Response:** There is room for slight customization to the standard language for the MOU, but the requirements cannot be amended

VII. Compliance Activities and Performance Measures NL
Katie Ramsey

Reviewed the timeline for the compliance activities, feedback received, and overview of Performance Measures NL

Summary of Discussion:

- Members commented the implementation of the compliance activities may create budgetary challenges for small, rural, and dependent counties
 - **Response:** DHCS will take this into consideration

Summary of Discussion: Performance Measures

- Members requested DHCS consider using sample sizes like the previous performance measure sample size
 - **Response:** DHCS will take this into consideration
- Members expressed performance measures may need reframing as counties are challenged with limited staffing to meet performance measure guidelines and to ensure services are not delayed for beneficiaries
 - **Response:** DHCS will take this into consideration
- Members commented that Children’s Medical Services (CMS) Net does not capture whether beneficiaries have a Specialty Care Center (SCC) visit within 90 days, it only captures the date the referral was received and when it was authorized

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- **Response:** DHCS will take this into consideration
- Members asked DHCS to take another look at performance measures, MOU purpose, and be mindful not all kids can be seen in 90 days of referral due to limited SCC resources
 - **Response:** DHCS will take this into consideration
- Members suggested to build out CMS Net to capture information SCCs could provide to DHCS to see if the beneficiary attended the appointment
 - **Response:** DHCS will take this into consideration
- Members suggested reframing performance measures because some activities are unrelated to county performance and pertain to gathering data to use as baseline information
 - **Response:** DHCS will take this into consideration

Summary of Discussion: Quarterly Reports

- Members asked how DHCS will track “receipt of all necessary documentation” in CMS Net because it currently only captures the initial day the Service Authorization Request (SAR) is received
 - **Response:** DHCS will take this into consideration
- Members asked how “documented efforts” will be pulled from CMS Net because it is not set up to capture the information in an easy manner
 - **Response:** DHCS will take this into consideration

Summary of Discussion: Survey Metrics

- Members asked how the survey metric for after-care services is going to be surveyed
 - **Response:** DHCS will review county policies and procedures to determine the county’s internal process and do a sample chart audit during the triennial survey, acknowledging that coordination of activities is going to be different from child to child depending on the need
- Members expressed the Electronic Visit Verification NL language is vague and asked what county expectations will be from the finalized NL
 - **Response:** DHCS will take this into consideration

VIII. Break

Sarah Brooks

A 10-minute break commenced

IX. Survey NL
Katie Ramsey

Provided an update on the draft Survey NL, table of contents, and feedback received during the public comment period

X. Enforcement and Corrective Action NL
Katie Ramsey

Reviewed overview of the Enforcement and Corrective Action NL

Summary Discussion:

- Members requested DHCS to include the methodology DHCS will use to calculate sanctions be included in the NL
 - **Response:** The NL will include numerous factors DHCS will consider when determining sanctions, such as good faith efforts made

XI. Department of Health Care Services Accountability Proposal
Cortney Maslyn, Chief
Integrated Systems of Care Division

Reviewed the DHCS accountability proposal and objectives of the CCS monitoring and oversight program

XII. Policy Updates
Sabrina Atoyebi

Reviewed updates on the Public Health Emergency (PHE) unwinding developments

Summary of Discussion

- Members requested that CCS-only beneficiaries not receive information on Medi-Cal redeterminations as they were not affected by the PHE federal changes and will be confused
 - **Response:** DHCS will take this into consideration

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- Members suggested CCS families be given a grace period for their CCS-eligible conditions since some families are currently impacted by the federal emergency with the floods in addition to the pandemic
 - **Response:** DHCS will take this into consideration

Katie Ramsey

Provided an update on the CCS case management definition and core activities

Summary of Discussion

- Members asked for the term “directed by licensed professionals” be added to the CCS case management definition so CCS nurses are not pulled to support other county programs
 - **Response:** DHCS will take this into consideration

XIII. Public Comment

Sarah Brooks

- Public asked who receives CCS beneficiary information that is aging out of CCS currently
 - **Response:** Once implemented the transition information will be shared with the primary care physician, adult specialist, medical group, or medical group, and MCP

XIV. Next Steps

Sarah Brooks

Provided information on next steps, workgroup meeting logistics, and relayed contact information for questions or feedback

Cortney Maslyn

Provided closing remarks and what workgroup members can expect in the coming months

Meeting adjourned at 3:24 p.m.