



# California Children's Services Program

**Advisory Group Meeting**  
January 27, 2021



# If you are having webinar difficulties...

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- Send an email to [CCSRedesign@dhcs.ca.gov](mailto:CCSRedesign@dhcs.ca.gov)

To join by phone

- +1-415-655-0001
- Access code: 145 749 3635

To join by video system or application

- [1457493635@dhcs.webex.com](mailto:1457493635@dhcs.webex.com)
- You can also dial 173.243.2.68 and enter your meeting number



# Welcome and Introductions

**Will Lightbourne**

Director

Department of Health Care Services



# Agenda

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Welcome and Introductions

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California Children's Services (CCS) Referral Numbers in Whole Child Model (WCM) Counties

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Medi-Cal Rx Update

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CCS Updates: CCS COVID Guidance, CCS Program Letters, WCM Evaluation, WCM and CCS Dashboards

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CCS Advisory Group (AG) Membership Protocols and Orientation Materials

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Open Discussion

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Public Comments, Next Steps, and Upcoming Meetings



# CCS Referral Numbers in WCM Counties

**Autumn Boylan**

Assistant Deputy Director, Health Care Delivery Systems  
Department of Health Care Services



# CCS Referrals

- Updates - DHCS meetings with Medi-Cal managed care plans (MCP) and counties
- WCM All Plan Letter and Numbered Letter Updates – public comment through February 1, 2021



# CCS Referral – MCP Partner Updates

**Sophie Scheidlinger**

Health Plan of San Mateo

**Katherine Barresi**

Partnership HealthPlan of California

**Dr. Dale Bishop**

Central California Alliance for Health



# **CCS WCM Referrals Discussion/Next Steps**



# Medi-Cal Rx Update

**Erica Bonnifield**

Assistant Deputy Director, Health Care Benefits & Eligibility

**Steve Ruhnau**

Consultant, Pharmacy Benefits Division

Department of Health Care Services



# Project Status & Implementation Update

- On January 1, Magellan successfully launched the vast majority of various Transitional Supports and Services (TSS) they will be providing between now and full implementation of Medi-Cal Rx on April 1, 2021. These TSS include:
  - Medi-Cal Rx Customer Service Center, which is available to take calls 24/7/365.
    - Calls have been received from beneficiaries, pharmacies, prescribers, and MCPs. Through April 1, the call center is only providing information related to Medi-Cal Rx. They are NOT assisting with questions related to eligibility, claims, or prior authorizations.
  - Expanded web-portal functionalities for providers, health plans, and beneficiaries, such as the Medi-Cal Rx Provide Manual, Pharmacy Locator Tool, and Contract Drug List
  - Expanded outreach to health plans and prescribers, inclusive of targeted meetings and trainings. One key area is the series of health plan “meet and greets” with Medi-Cal Rx clinical liaisons.



# Project Status & Implementation Update (*cont.*)

- DHCS/Magellan continue planning and strategy sessions for operational readiness and full implementation of Medi-Cal Rx, including, among other functionalities, claims and prior authorization administration, on April 1, 2021.
- Magellan and DHCS continue to work closely with the health plans in developing, testing, and implementing the processes for exchanging claims data, including data submitted to Magellan to support the Pharmacy Transition Policy, and daily data feeds going to the health plans to support clinical and care coordination.



# Project Status & Implementation Update (*cont.*)

- DHCS, in partnership with Magellan, continues to focus on other key areas of interest, including, but not limited to:
  - **CDL Review & Updates:** Reviewing the CDL and adding medications on a regular basis.
  - **Clinical Collaboration:** Clinical leadership from Magellan and DHCS convening specialized workgroups to discuss various topics, with an emphasis on populations with specialized health care needs (e.g., enteral nutrition (1/19); CCS/GHPP (2/16)).
  - **Other State Department Collaboration:** Continue to work with the Department of Managed Health Care (DMHC) on regulatory compliance and the California Department of Social Services on State Fair Hearing preparations.
  - **Informing Materials/Outreach:** Preparing to release additional beneficiary notices in mid-to-late February, and targeting efforts to increase provider (pharmacy and prescriber) portal enrollment and training registration.



# Provider Actions & Analysis To Date

- **Pharmacy Provider Enrollment Collaborative Established** – In early 2019, DHCS established a targeted collaborative with internal subject-matter experts and data/analytics leaders from CA-MMIS, MCQMD, PBD, and PED to assess and, if needed, offer solutions on any potential FFS versus MC pharmacy provider enrollment challenges and/or gaps.
- **Initial Phases Focused on Identifying & Closing Gaps** – The focus was on pharmacies eligible to be enrolled in FFS, and ensuring appropriate pharmacy network coverage under FFS rules (e.g., in state, adjacent state, and sole source out of state).



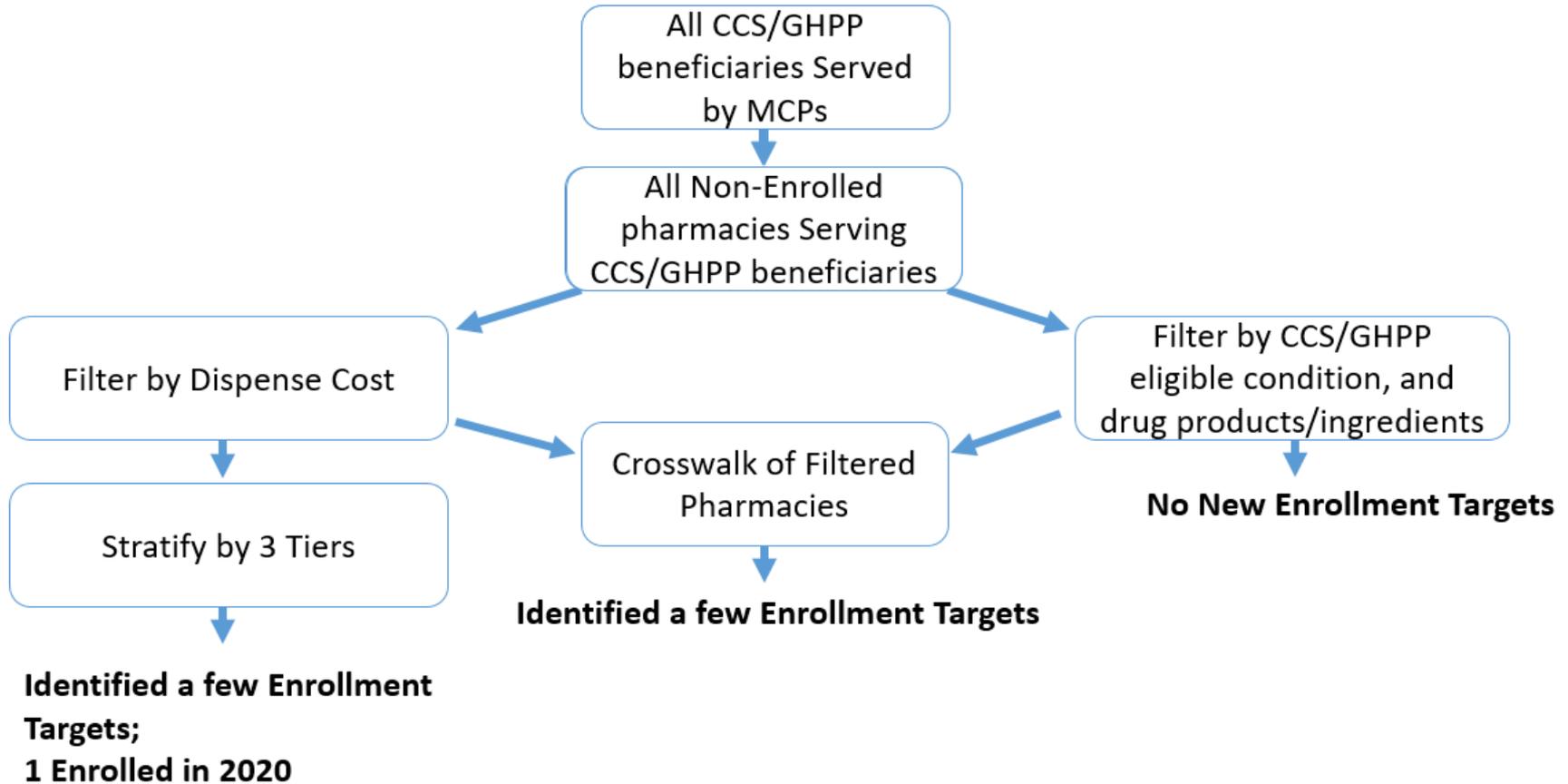
# Provider Actions & Analysis To Date *(cont.)*

- **Analysis Based on MCP Encounter Data from 2019** – Since existing FFS enrolled providers are not changing as a result of the transition to Medi-Cal Rx, the focus of DHCS’ analysis was on any potential access gaps for providers serving only the MC delivery system. DHCS worked internally, as part of its collaborative effort, to target any potential gaps and encourage provider enrollments. In making these determinations, DHCS focused on claim count, paid amounts, and individual lives impacted.
- **CCS Targeted Analysis Recently Performed** – In this space, DHCS’ analysis looked at all MCP 2019 pharmacy encounters for CCS/GHPP eligible beneficiaries, characterizing and stratifying drugs dispensed for enrolled and non-enrolled pharmacies (in both FFS and MC) to better identify CCS/GHPP eligible condition-related dispenses, dispense frequency, and targeted pharmacies for FFS enrollment. Here, there was a heightened focus on ensuring that no pharmacy providers actively serving the CCS/GHPP population were overlooked, as we recognize that any disruption in case/access can be particularly impactful to these populations.



# Provider Actions & Analysis To Date

## CCS Analysis





# CCS Updates

CCS COVID Guidance

CCS Program Letters

WCM Evaluation

WCM Dashboard

CCS FFS Dashboard



# CCS COVID Guidance

- State Fair Hearing clarifications
- CCS continuous coverage for Medi-Cal beneficiaries
- Durable Medical Equipment (DME) clarifications
- Pharmacy flexibilities
- Redirecting CCS program staff guidance



# CCS Program Letters

**Richard Nelson**

Chief, Integrated Systems of Care Division  
Department of Health Care Services



# Recently Posted

## CCS Information Notices

**20-03** Governor's Executive Order N-01-19, Regarding Transitioning Medi-Cal Pharmacy Benefits from Managed Care to Medi-Cal Rx

## CCS Numbered Letters

**05-1020** Coverage of Experimental and Investigational Services

**06-1120** Authorization of Insulin Infusion Pumps - Revised

**07-1120** Authorization of Restricted Treatment Drugs for Bleeding Disorders - Revised

**08-1120** Program coverage of treatment for Central Precocious Puberty - Revised

**09-1120** Policy on Palyniq (pegvaliase-pqpz) for Patients with Phenylketonuria- Revised

**10-1120** Authorization of Sapropterin Dihydrochloride (Kuvan) – Revised



# Recently Posted (*cont.*)

## CCS Numbered Letters (*cont.*)

**11-1120** Antisense Oligonucleotide Treatment of Duchene Muscular Dystrophy

**12-1120** Bone Conduction Hearing Devices

**13-1120** Cystic Fibrosis Transmembrane Conductance Regulator Modulator Drug Therapies

**14-1120** Documentation Standards for the CCS Medical Therapy Program

**15-1120** Treatment for Spinal Muscular Atrophy

## CCS Standards

**Chapter 3.34** Neonatal Surgery Standards

**Chapter 3.43** Hypertonicity Special Care Centers Standards



# In Queue for Posting

## CCS Numbered Letter

**01-0121** Cystic Fibrosis Transmembrane Conductance Regulator Modulator Drug Therapies (updated to reflect new age for Kalydeco and new FDA-approved mutations treatable by each drug therapy)

# Out for Public Comment

## CCS Numbered Letter

Whole Child Model – Revised



# In Queue for Public Comment

## CCS Numbered Letters

- Hearing Aides and Related Benefits
- Inter-County Transfer Policy
- Scope of Nurse Practitioners in the Special Care Center

## CCS Standards

- Aerodigestive Special Care Centers
- Endocrine Special Care Centers
- Community Neonatal Intensive Care Unit (NICU) Standards
- Intermediate NICU Standards
- Regional NICU Standards



# WCM Evaluation

**Nathan Nau**

Chief, Managed Care Quality and Monitoring Division  
Department of Health Care Services



# WCM Dashboard Update

**Nathan Nau**

Chief, Managed Care Quality and Monitoring Division  
Department of Health Care Services



# CCS Fee-for-Service (FFS) Dashboard\*

**Michael Whitehead**

Research Data Supervisor II

Quality Assurance and Reporting Section

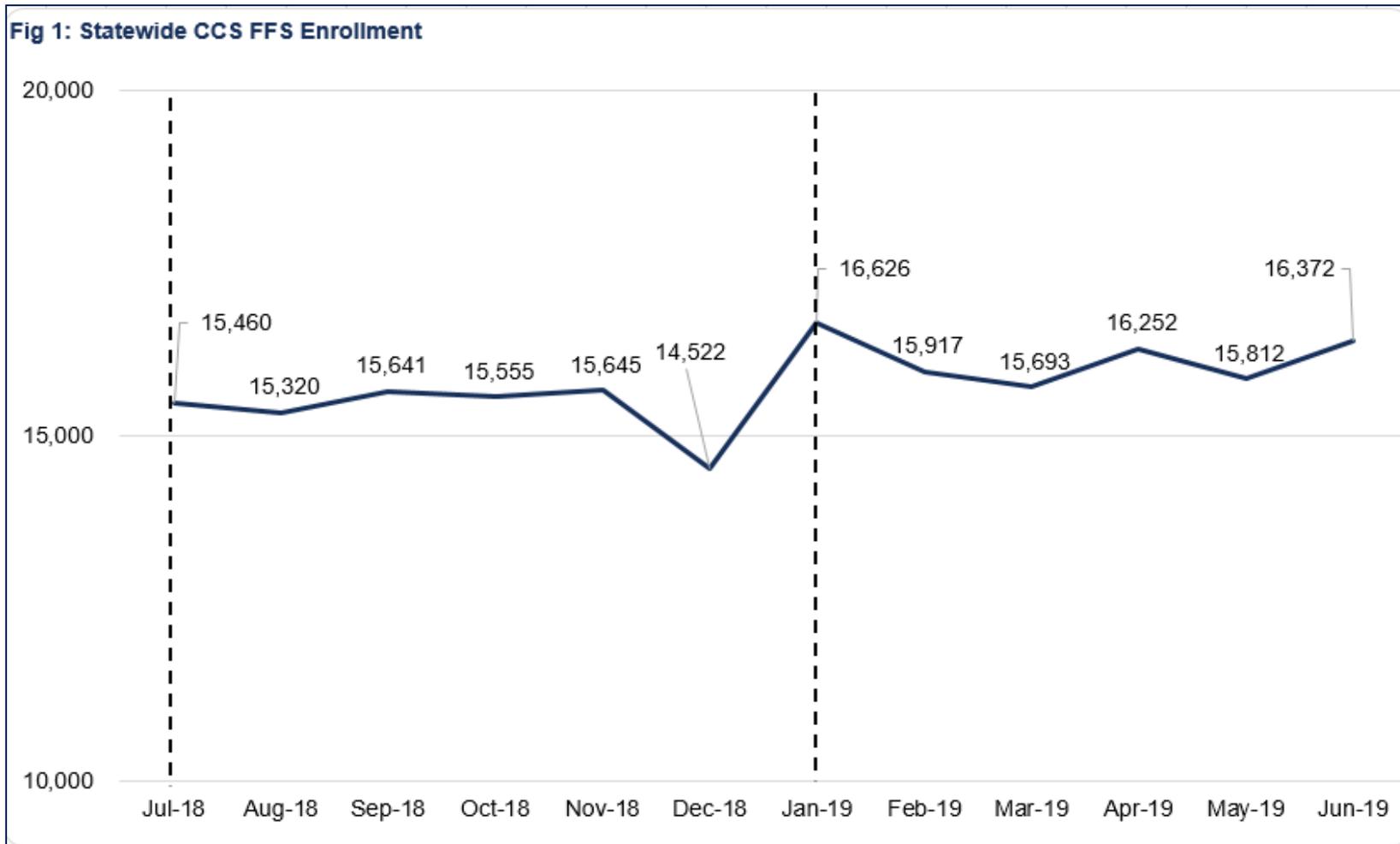
Integrated Systems of Care Division

Department of Health Care Services

**\* Slides do not present actual program data**



# FFS Statewide Enrollment



Note: This report contains data from July 2018 to June 2019.



# FFS Enrollment by Demographics

CCS Fee For Service Enrollment and Demographics Figure 2 - 4: Breakdowns of Population as of June 2019

Fig 2: Enrollment by Race/Ethnicity

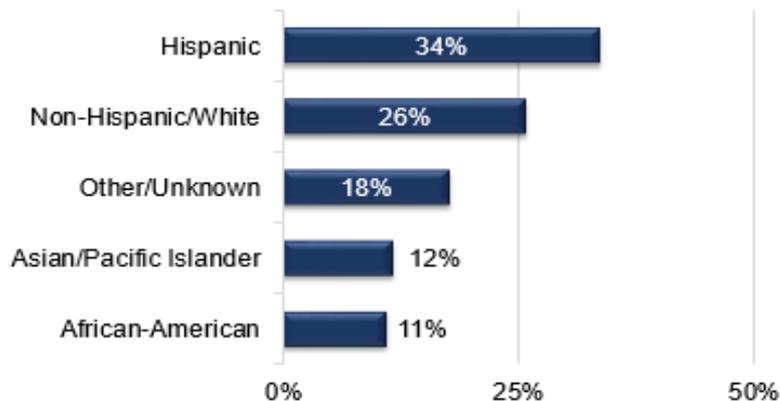


Fig 3: Enrollment by Sex

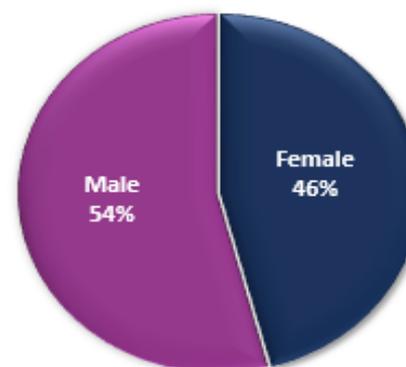
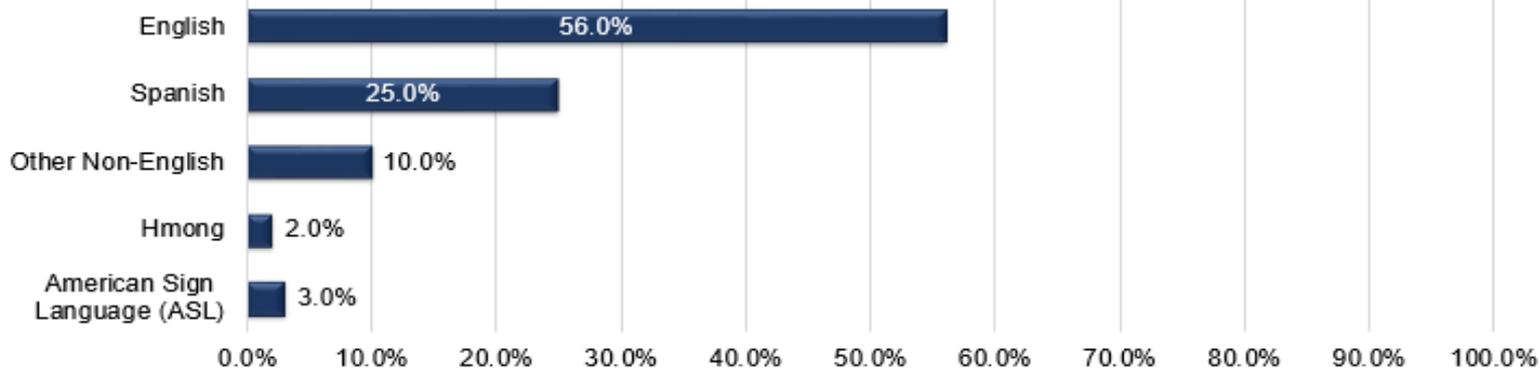


Fig 4: Enrollment by Language Spoken

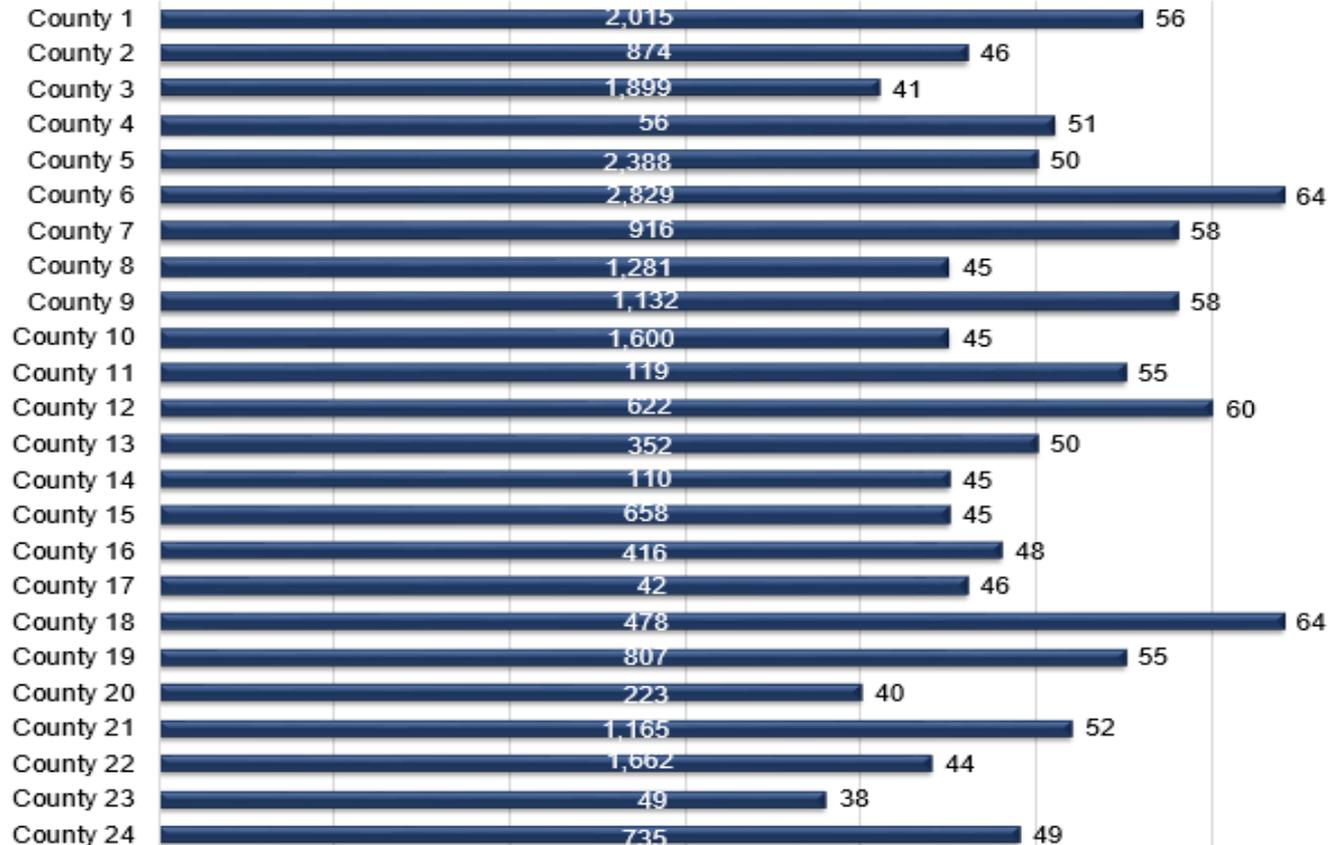




# FFS Enrollment by County

CCS Fee For Service Enrollment and Demographics Figure 5: Breakdowns of Population as of June 2019

Fig 5: Total CCS FFS Enrollment & CCS FFS Enrollment per 1,000 Children Enrolled in Medi-Cal, by County





# Outpatient Admissions: Enrollment and Demographics

CCS Fee For Service Enrollment and Demographics Figure 6 - 8: Breakdowns of Outpatient Admissions Utilization (Jul'18 - Jun'19)

Fig 6: Outpatient Visits per 1,000 Member Months by Sex

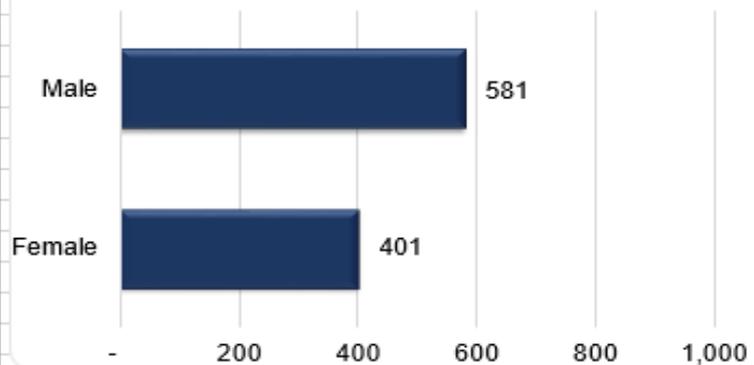


Fig 7: Outpatient Visits per 1,000 Member Months by Ethnicity

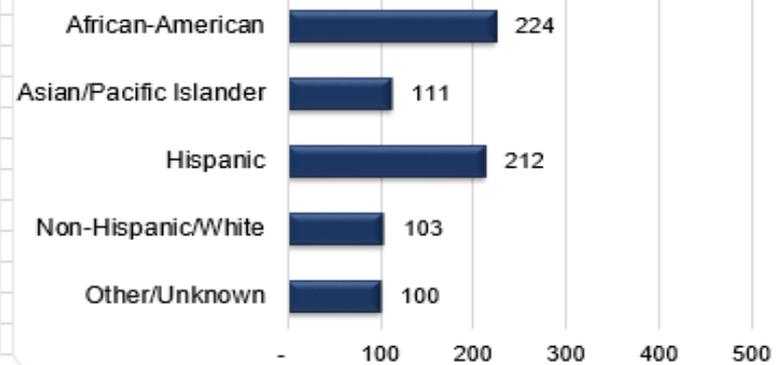
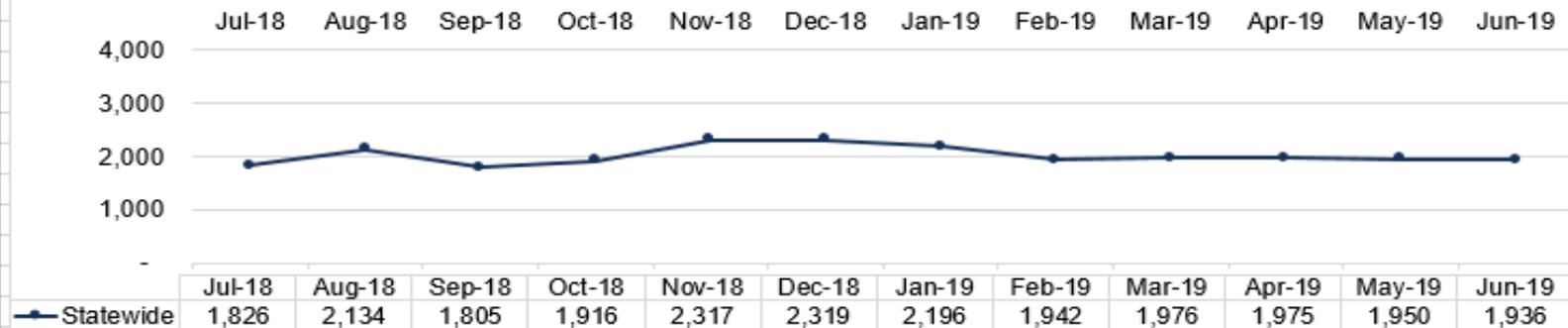


Fig 8: Outpatient Visits per 1,000 Members Statewide, by Month

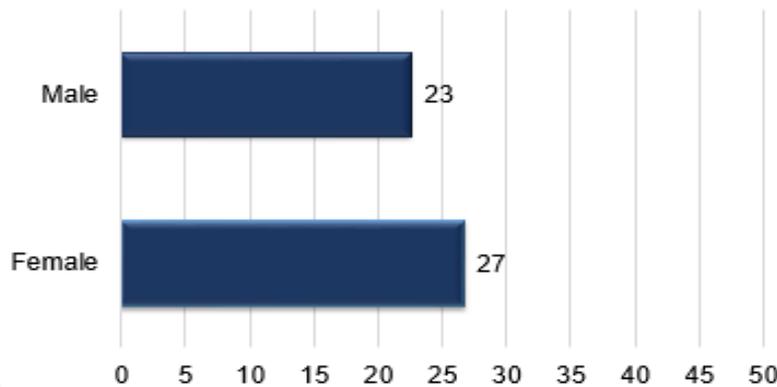




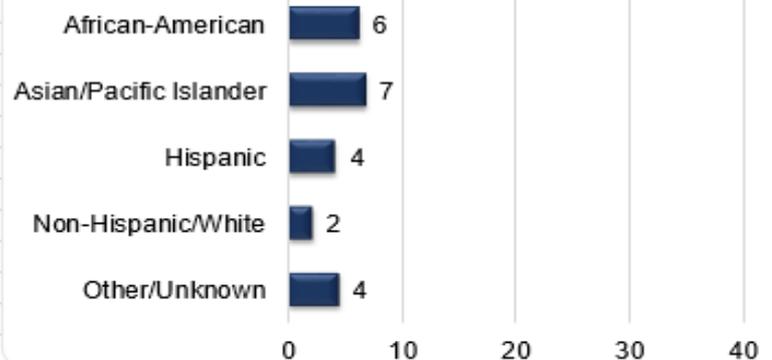
# Inpatient Admissions: Enrollment and Demographics

CCS Fee For Service Enrollment and Demographics Figure 9 - 11: Breakdowns of Inpatient Visits Utilization (Jul'18 - Jun'19)

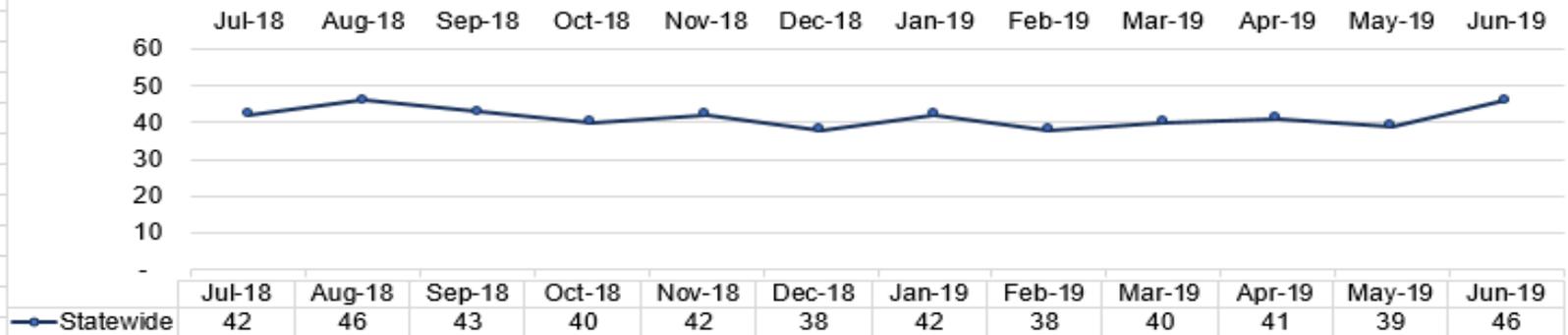
**Fig 9: Inpatient Admissions per 1,000 Member Months by Sex**



**Fig 10: Inpatient Admissions per 1,000 Member Months by Ethnicity**

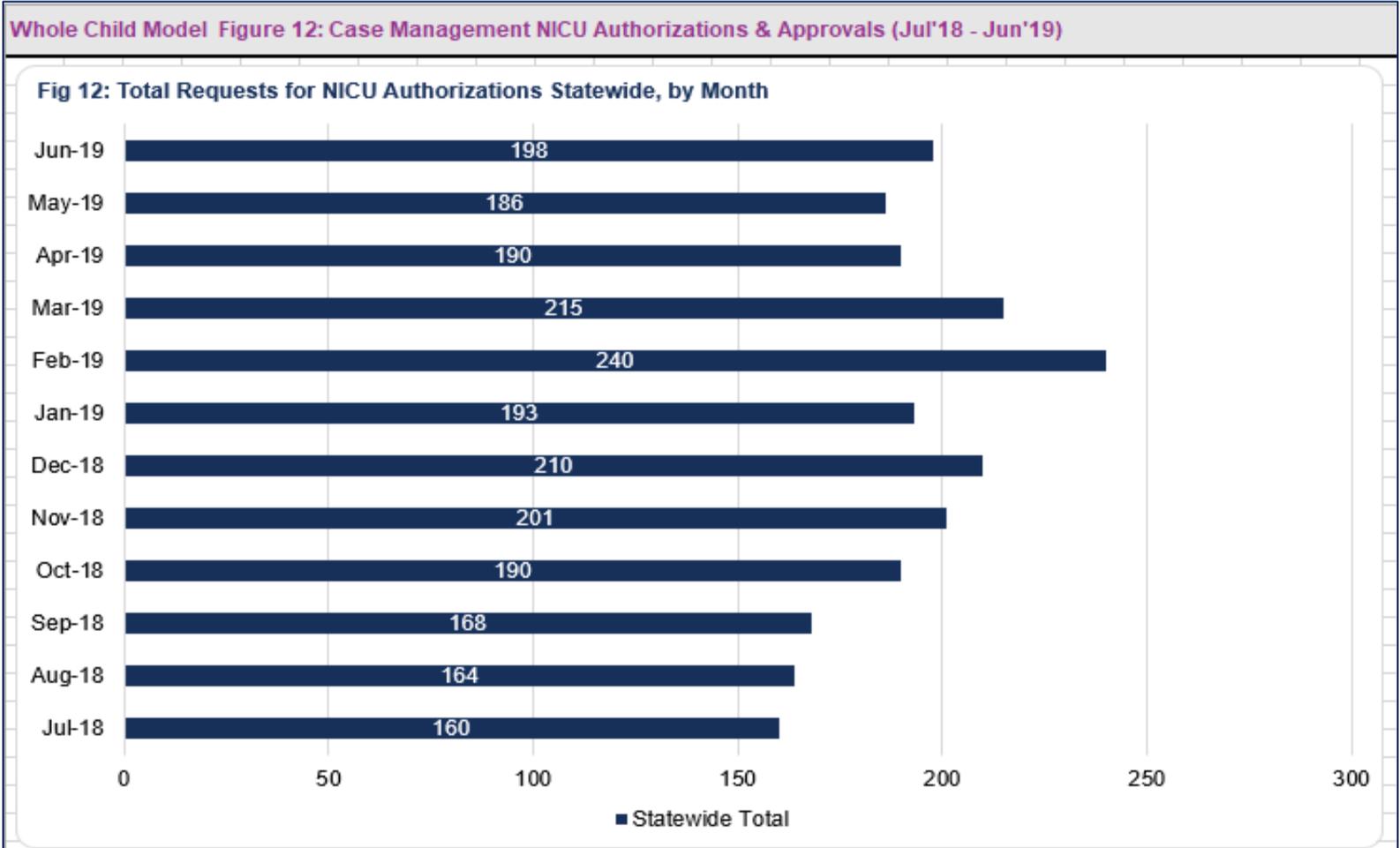


**Fig 11: Inpatient Admissions per 1,000 Members Statewide, by Month**





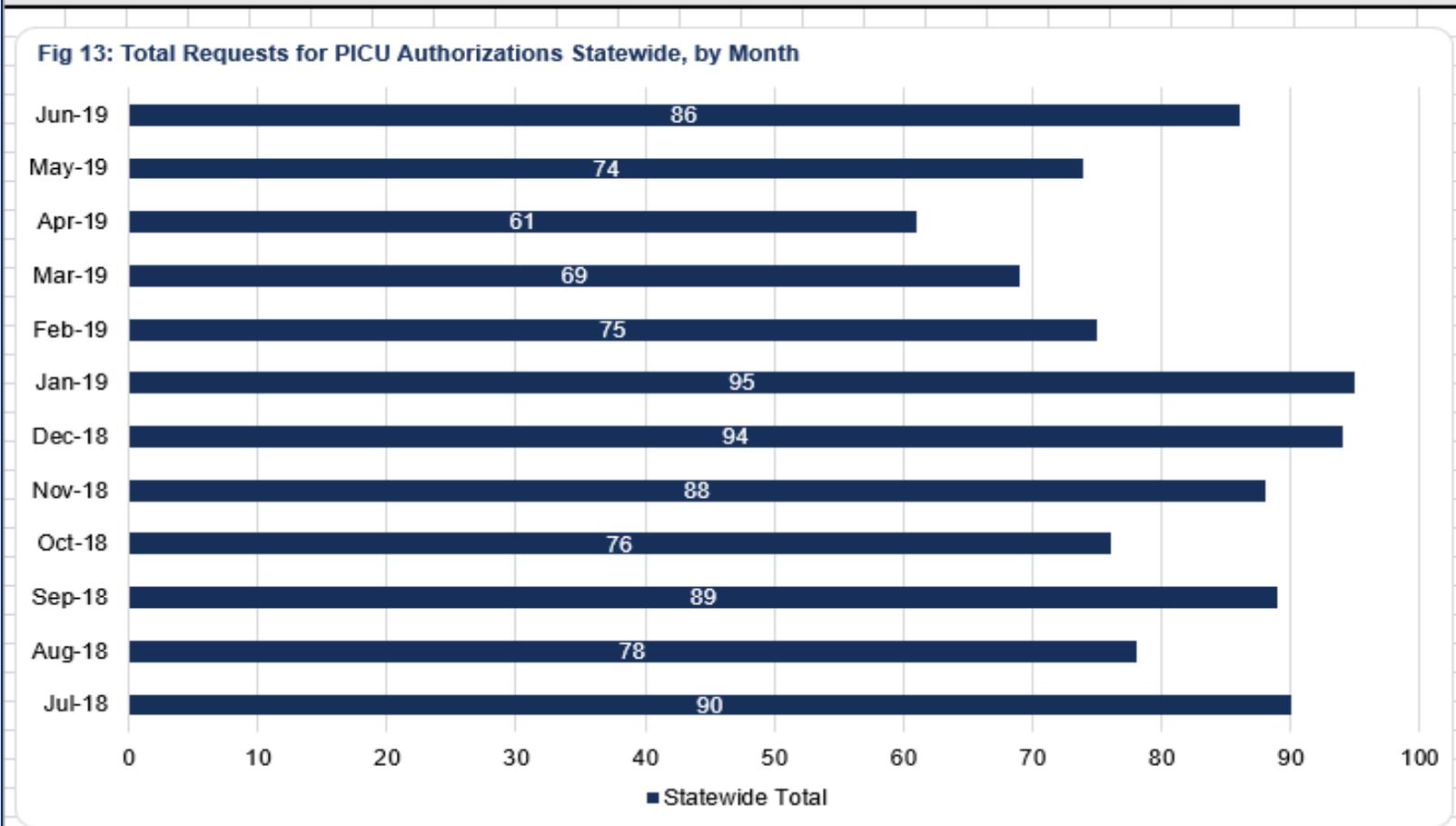
# NICU Authorizations and Approvals by Month





# Pediatric Intensive Care Unit (PICU) Authorizations and Approvals by Month

Whole Child Model Figure 13: Case Management PICU Authorizations & Approvals (Jul'18 - Jun'19)



Note: This report contains data from July 2018 to June 2019.



# CCS Dashboards

## WCM – FFS Crosswalk

Whole Child Model - Classic CCS Dashboard Cross-Walk	
Content	Comments
Enrollment	
Enrollment by Demographics	
Enrollment per 1,000 by County, by Plan	
Enrollment and Demographics - ER Utilization	ER data not available in CMS Net. Checking MIS/DSS for claims
Enrollment and Demographics - Outpatient Utilization	
Enrollment and Demographics - Inpatient Visits	
Enrollment and Demographics - Prescriptions	N/A
Enrollment and Demographics - Non-specialty Mental Health	N/A
Enrollment and Demographics - ER Visits with Inpatient Admission	N/A
Continuity of Care - Requests by Plan, by Month	N/A
Continuity of Care - Requests by Plan, by Month and Request Categories	N/A
Continuity of Care - Denial Reasons	N/A
Continuity of Care - Requests per 1,000 and Percentage Approval by Plan by County	N/A
Requests for NICU Authorizations by Plan, by Month	
Requests for NICU Authorizations and Percentage Approved by Plan, by Month	N/A
Request for PICU Authorizations by Plan, by Month	
Requests for PICU Authorizations and Percentage Approved by Plan, by County	N/A
Requests for Inpatient Facilities and Specialty Care Centers Authorizations by Plan, by Month	
Requests for Inpatient Facilities and Specialty Care Centers Authorizations and Percentage Approved by Plan, by County	
Requests for Specialized or Customized DME Authorizations by Plan, by Month	Not in CMS Net. Possible in claims MIS/DSS
Requests for Specialized or Customized DME Authorizations and Percentage Approved by Plan, by County	N/A
Percent of High and Low Risk Members who received an Assessment, by Plan	N/A
Grievances and Appeals	"Grievances" do not occur in CCS. Appeals need more research. Barbara Sasaki
Grievances by Category, by Plan	N/A



# **CCS Advisory Group Membership Protocols and Orientation Materials**

**Autumn Boylan**

Assistant Deputy Director, Health Care Delivery Systems  
Department of Health Care Services



# CCS AG Membership

- New membership requests
- DHCS proposes to establish a membership subcommittee to develop membership protocols, procedures, applications, etc.



# New Member Orientation

- Welcome packet content recommendations:
  - CCS AG roster
  - List of abbreviations/key terms
  - Information about language accessibility and disability accommodation
  - CCS AG charter/goals
  - Background Information
  - DHCS contact information
  - Participation guidelines/meeting etiquette
  - Table of WCM implementation dates/plans and counties



# Open Discussion

**Will Lightbourne**

Director

Department of Health Care Services



# **Public Comments, Next Steps, and Upcoming Meetings**

**Will Lightbourne**  
Director  
Department of Health Care Services



# CCS AG Meetings

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2021      Thursday, April 22

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Wednesday, July 14

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Wednesday, October 27

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# Information and Questions

- For WCM information, please visit:
  - <http://www.dhcs.ca.gov/services/ccs/Pages/CCSWholeChildModel.aspx>
  
- For CCS AG information, please visit:
  - <http://www.dhcs.ca.gov/services/ccs/Pages/AdvisoryGroup.aspx>
  
- If you would like to be added to the DHCS CCS interested parties email list, or if you have questions, please email [CCSRedesign@dhcs.ca.gov](mailto:CCSRedesign@dhcs.ca.gov).