



# Stakeholder Communication Update

## June 2021

The [Department of Health Care Services](#) (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 [website](#). Check out the [Calendar of Events](#) for specific meetings and events, or visit the [Stakeholder Engagement Directory](#) for listings by program. You also can view our [State Plan Amendments \(SPA\)](#), and find the most [recent data](#) on Medi-Cal enrollment. For questions or suggestions, contact us at [DHCSCommunications@dhcs.ca.gov](mailto:DHCSCommunications@dhcs.ca.gov). Please also follow DHCS on social media. Thanks.



## Contents

### [Governor's May Revision](#)

[California Advancing and Innovating Medi-Cal \(CalAIM\)](#)

### [Program Updates](#)

[American Rescue Plan Act \(ARPA\) of 2021 – Increased Home and Community-Based Services \(HCBS\) Spending Plan](#)

[Behavioral Health Peer Support Services](#)

[CalHOPE Update](#)

[Dental Transformation Initiative \(DTI\)](#)

[Draft Dental Fiscal Intermediary-Dental Business Operations \(FI-DBO\) RFP Released](#)

[Draft Managed Care Plan \(MCP\) Procurement Released](#)

[Drug Medi-Cal Organized Delivery System \(DMC-ODS\)](#)

[Hearing Aid Coverage for Children Program \(HACCP\)](#)

[Medi-Cal Health Enrollment Navigators Project](#)

[Medi-Cal Rx Implementation and Project Status Updates](#)

[Medical Interpreters Pilot \(MIP\) Project](#)

[Medication Assisted Treatment \(MAT\) Expansion Project](#)

[Nonmedical Transportation \(NMT\)](#)

[Smile, California Campaign for Medi-Cal Dental Services](#)

[Tribal Federally Qualified Health Centers](#)

[Back to Top](#)

## **Stakeholder Meetings and Webinars**

[Behavioral Health Stakeholder Advisory Committee \(BH-SAC\) Meeting](#)  
[CalAIM Managed Long-Term Services & Supports \(MLTSS\) and Duals Integration](#)  
[June Workgroup Meeting](#)  
[Coordinated Care Initiative \(CCI\) Stakeholder Webinar](#)  
[Foster Care Model of Care Workgroup](#)  
[Medi-Cal Children's Health Advisory Panel \(MCHAP\) Meeting](#)  
[Medi-Cal Consumer Focused Stakeholder Workgroup \(CFSW\) Meeting](#)  
[Medi-Cal Managed Care Advisory Group \(MCAG\) Meeting](#)  
[Medi-Cal Rx Public Forums](#)  
[Stakeholder Advisory Committee \(SAC\) Meeting](#)

## **Reports**

[External Quality Review \(EQR\) Technical Report](#)

## **Governor's May Revision**

On May 14, Governor Newsom unveiled his \$267.8 billion fiscal year (FY) 2021-22 May Revision budget proposal, which stands in stark contrast to the budget of one year ago. Compared to a projected budget deficit of \$54 billion a year ago, the state now has a projected \$75.7 billion surplus. The Governor's May Revision proposes DHCS spending to be \$129.2 billion total funds (\$28.3 billion General Fund). The total amount is allocated between DHCS operations at \$1.2 billion and \$128 billion that supports funding for program costs, partners, and administration.

The effects of the COVID-19 pandemic are unprecedented in modern times from a public health and economic perspective and continue to impact the State of California. The May Revision reflects significant fiscal impacts on Medi-Cal related to COVID-19, including \$5.6 billion in total costs (\$1.7 billion General Fund savings) in FY 2020-21 and \$12.1 billion in total costs (\$598 million General Fund costs) in FY 2021-22. These amounts reflect the net impact of a variety of factors, including reduced estimated Medi-Cal caseload impact, testing in schools, vaccination administration costs, funding for county redeterminations, support for public safety net hospitals from the American Rescue Plan Act, telehealth, increased federal Families First Coronavirus Response Act funding, and other COVID-19 response impacts.

The COVID-19 pandemic and movement for greater racial justice have again revealed the health disparities plaguing disadvantaged communities. Equity has been a key focus of the Administration's response to COVID-19. DHCS is committed to advancing diversity, equity, and inclusion both within our organization and on behalf of the Californians we serve. The Department will support future policy and program efforts to close health equity gaps, including, but not limited to, partnership on the California Health and Human Services Agency-wide Equity Dashboard; the implementation of the California Advancing and Innovating Medi-Cal (CalAIM) initiative, including establishing a Quality and Population Health Management program; the upcoming Medi-Cal managed care plan (MCP) procurement; payment reform efforts; and coverage of continuous glucose

[Back to Top](#)

monitors and permanent telehealth flexibilities as proposed in the Governor's January budget.

The Governor's May Revision builds on these efforts and includes funding for the following initiatives related to health equity: expanding Medi-Cal coverage to older (60+) undocumented adults, adding doula services as a preventive benefit in Medi-Cal, and adding Community Health Workers to the class of skilled and trained individuals who are able to provide clinically appropriate Medi-Cal covered benefits and services.

The May Revision also includes funding for the Children and Youth Behavioral Health Initiative, which will provide evidence-based, culturally competent, and equity-focused services to children and youth age 25 and younger. Services provided will address a range of issues affecting mental and emotional well-being, and will allow DHCS to implement statewide behavioral health services and supports. Investments include grants to build capacity and infrastructure for behavioral health services in schools; grants to support development and expand age-appropriate and evidence-based behavioral health programs for children and youth; grants to qualified entities to expand the community continuum of behavioral health treatment resources; one-time funding for pediatric, primary care, and other health care provider training; and a dyadic services benefit to provide integrated physical and behavioral health screening and services to the whole family. DHCS will also continue CalHOPE Student Support after current federal funding expires.

The May Revision continues support for CalAIM, with \$1.6 billion total funds (\$673 million General Fund) proposed for FY 2021-22, growing to \$1.5 billion total funds (\$746.6 million General Fund) in FY 2022-23. The May Revision adds key new components to the CalAIM proposal:

- Medi-Cal Population Health Management (PHM) Service – DHCS will procure a PHM service that will utilize DHCS data to provide standard risk assessment, risk stratification, and population health analytics for all Medi-Cal members. DHCS, health plans, counties, providers, and beneficiaries will have access to these services and analytics in order to effectively manage all beneficiaries by keeping them healthy via preventive and wellness services, assessing member risks to guide care management and care coordination, and addressing social determinants of health.
- Providing Access and Transforming Health (PATH) Supports – This will support a multi-year effort to shift delivery systems and advance the coordination and delivery of quality of care and services authorized in the Department's Section 1115 and 1915(b) waivers. Justice focused PATH supports are intended to provide on-the-ground capacity support to facilitate justice-involved initiatives, enabling coordination among justice-involved agencies, Medi-Cal managed care plans

(MCP), and providers to ensure effective pre-release care for justice-involved populations.

- **Medically Tailored Meals Pilot Program Augmentation** – The budget includes a one-time funding augmentation for medically tailored meal intervention services available through the pilot to be distributed to a broader population. The one-time budget allocation, which is separate from the funds allocated to the previous Medically Tailored Meals Pilot and will not be included in the pilot evaluation report, expands the eligible population to include Medi-Cal participants with diabetes, chronic obstructive pulmonary disease, renal disease, chronic kidney disease, cancer, HIV/AIDS, and malnutrition. The budget allocation also adds Contra Costa, Fresno, Kings, Madera, Santa Cruz, and Tulare counties to the pilot program service area.

The May Revision also included a budget proposal to restore dental fee-for-service (FFS) in Sacramento and Los Angeles counties, effective January 1, 2022. DHCS released a revised [draft transition plan](#) for stakeholder review and input, with comments due to [dentalmanagedcare@dhcs.ca.gov](mailto:dentalmanagedcare@dhcs.ca.gov) by close of business June 18. The transition plan will be used to guide the transfer of members from dental managed care to FFS and DHCS' stakeholder engagement for this initiative.

Please click [here](#) for the complete DHCS May Revision highlights and [here](#) for the Medi-Cal May 2021 local assistance estimate.

## CalAIM

In early May, DHCS concluded a 30-day public comment period for the draft CalAIM Section 1115 demonstration application and section 1915(b) waiver overview. During the public comment period, DHCS held two public hearings, in addition to a hearing for Tribal organizations and Indian health programs. DHCS captured all spoken and written comments submitted during the hearing and is considering those as it develops the final Section 1115 demonstration renewal application. The application will include a synthesis of the issues raised by the public during the comment period and how the state considered the comments when developing the demonstration extension application. DHCS intends to submit the formal waiver applications to the Centers for Medicare & Medicaid Services (CMS) later in June.

DHCS released several documents that describe policy updates and guidance related to two components of the CalAIM initiative – Enhanced Care Management (ECM) and In Lieu of Services (ILOS). The documents include stakeholder feedback from MCPs, county associations, advocates, and other interested stakeholder organizations, and are posted on the DHCS [website](#).

On June 8, DHCS will also host a webinar to provide updates on the documents, ECM and ILOS policy development, and expected implementation timelines. [Registration](#) for the webinar is required. ECM and ILOS are foundational components of CalAIM that will

[Back to Top](#)

be implemented on January 1, 2022. For additional information on these initiatives, please visit the above DHCS website.

## Program Updates

### American Rescue Plan Act (ARPA) of 2021 – Increased Home and Community-Based Services (HCBS) Spending Plan

On March 11, President Biden signed into law [ARPA](#), a COVID-19 relief package that includes a provision ([Section 9817](#)) to temporarily increase Medicaid's Federal Medical Assistance Percentage (FMAP) by 10 percent for spending on HCBS. The increased FMAP provides additional support for HCBS during the COVID-19 emergency.

On May 13, CMS provided [additional clarification and guidance](#) to assist states with implementing ARPA's HCBS section. CMS clarified that states may use the enhanced funding on spending for both HCBS and HCBS-related administrative activities. States have until March 31, 2024, to expend the enhanced FMAP funding. In order to receive the enhanced FMAP funds, CMS requires states to submit an initial HCBS spending plan and narrative, as well as quarterly updates. The ARPA HCBS spending plan was posted on the California Health & Human Services Agency [website](#) on June 3 for additional stakeholder feedback due on June 7 before submission to CMS by June 12.

### Behavioral Health Peer Support Services

On April 29, DHCS held the Behavioral Health Stakeholder Advisory Committee (BH-SAC) meeting, which included an [update](#) on the peer support specialist certification process detailed in Senate Bill (SB) 803 (Chapter 150, Statutes of 2020). Peer support specialist information regarding the implementation of SB 803, including resources, listening session materials, and the peer support services implementation activities and timeline, is available on the DHCS [website](#).

### CalHOPE Update

CalHOPE is a Crisis Counseling Assistance and Training Program funded by the Federal Emergency Management Agency in partnership with the Substance Abuse and Mental Health Services Administration. CalHOPE's pandemic response includes an extensive array of resources and services offered through DHCS' CalHOPE [website](#), and through partnerships with more than 30 agencies throughout California.

Since June 2020, the CalHOPE website has received more than 2.6 million page views. DHCS partners at the California Mental Health Services Authority also launched a [website](#) called CalHOPE Connect, which provides valuable resources for Californians seeking crisis-counseling services, as well as targeted support, via a live-chat application. During the month of April, there were 17,207 unique chat interactions, averaging around 5,000 chats per week. Additionally, DHCS partners at the California Consortium for Urban Indian Health recently launched their [website](#) and phone line called the CalHOPE Red

[Back to Top](#)

Line. It provides phone, chat, and video chat services, along with national, state, and county resources, referrals, and trauma-informed support, to assist urban Indian and tribal populations.

CalHOPE launched a statewide media campaign last summer across digital, television, radio, and outdoor media outlets. CalHOPE advertisements have been viewed an estimated 1.8 billion times since the start of the media campaign, with 196 million views occurring between April 12 and 25. Additionally, a variety of social influencers, artists, and athletes have been sharing their personal stories through social media and on the [CalHOPE YouTube channel](#). In May, targeted events were held by the Sacramento Kings, San Francisco 49ers, and Los Angeles Kings to promote Mental Health Awareness Month. Additionally, three virtual *CalHOPE – Concerts for HOPE* were held at the end of May.

### **Dental Transformation Initiative (DTI)**

As of April 30, DHCS has paid approximately \$159.4 million in Domain 2 payments, and 3,295 providers have opted in to participate. The next Domain 3 payment is scheduled for release at the end of June 2021. For Domain 4, DHCS has paid \$103.9 million as of May 3, 2021. DHCS has received final invoices from all Local Dental Pilot Projects and is reviewing them to determine final payments. Fact sheets for all DTI domains are posted on the DHCS [website](#). DHCS received federal approval from CMS to extend the Medi-Cal 2020 Section 1115 waiver demonstration for one year, through December 31, 2021, which includes DTI Domains 1, 2, and 3.

### **Draft Dental Fiscal Intermediary-Dental Business Operations (FI-DBO) RFP Released**

On May 21, DHCS released a draft Request for Proposal (RFP) for a new FI-DBO contractor (currently known as the Administrative Services Organization). The dental FI-DBO contractor performs business service functions for dental services provided through the Medi-Cal FFS delivery system. The FI-DBO adjudicates claims and treatment authorization requests, enrolls providers, and oversees provider and member services, including the telephone service center. The draft RFP is posted on the DHCS [website](#) to solicit input from interested parties, including prospective bidders, providers, advocates, counties, and other stakeholders. The feedback received will be considered during the development of the final RFP. Comments should be sent to [CSBRFP3@dhcs.ca.gov](mailto:CSBRFP3@dhcs.ca.gov) and are due by 5 p.m. on June 11.

### **Draft Managed Care Plan (MCP) Procurement Released**

On June 1, DHCS released the draft MCP RFP 20-10029 to seek input from interested parties. Comments are due by 4 p.m. on July 1. DHCS will host a public webinar on June 10 at 2 p.m. to present the draft RFP. Attendees must [pre-register for the draft RFP webinar](#). Additional information is posted on the DHCS [website](#). For questions about the draft RFP, email [CSBRFP8@dhcs.ca.gov](mailto:CSBRFP8@dhcs.ca.gov).

[Back to Top](#)

## **Drug Medi-Cal Organized Delivery System (DMC-ODS)**

California's first regional DMC-ODS model began operating in seven counties on July 1, 2020, bringing the total number of counties statewide participating in the DMC-ODS to 37 and covering more than 96 percent of the Medi-Cal population. The regional model is a collaboration among seven Northern California counties and Partnership HealthPlan that allows access to screening, assessment, early intervention, and a continuum of substance use disorder (SUD) treatment. DHCS is currently engaging the remaining standard DMC counties to determine their level of interest in becoming DMC-ODS counties. Between April and August 2021, DHCS will conduct several webinars, including on individual and regional model options, Medication Assisted Treatment access, and fiscal implications and forecasting, to support implementation of DMC-ODS in small and small rural counties. The DMC-ODS provides a continuum of care modeled after the American Society of Addiction Medicine (ASAM) criteria for substance use disorder treatment services.

As of February 1, DHCS implemented SB 823 through [Behavioral Health Notice No.: 21-001](#), which requires DHCS' licensed alcohol and other drug (AOD) recovery treatment facilities to obtain at least one [DHCS Level of Care \(LOC\) Designation](#) and/or at least one residential [ASAM LOC Certification](#) consistent with all of its program services. DHCS has processed 1,127 total designations for AOD providers in California. Of the 1,127 designations, 835 are active for 366 providers. More information about DMC-ODS is posted on the DHCS [website](#).

DHCS also contracts with an External Quality Review Organization (EQRO) that reviews DMC-ODS counties annually regarding access, timely access, and quality of care. The information from these reviews is summarized in annual county reports. In FY 2019-20, 26 DMC-ODS counties were reviewed. For FY 2020-21, to date, the EQRO has completed 31 DMC-ODS county reviews, including one regional review of seven counties that contract with the Partnership HealthPlan. In April 2021, DHCS submitted the annual statewide technical report as well as performance improvement project reports to CMS. All EQRO reports can be found at <https://www.caleqro.com/dmc-egro>. Additionally, under contract with the University of California Los Angeles, Integrated Substance Abuse Programs (UCLA ISAP), DHCS is conducting annual DMC-ODS waiver evaluation activities to measure and monitor outcomes of the waiver. The evaluation focuses on access to care, quality of care, cost, and the integration and coordination of SUD care, both within the SUD system and with medical and mental health services. The latest DMC-ODS waiver evaluation report is posted on the UCLA ISAP [website](#).

## **Hearing Aid Coverage for Children Program (HACCP)**

The Budget Act of 2020 established the HACCP to assist non-Medi-Cal children ages 0-17 with insufficient health coverage with the cost of hearing aids and related services. Children in households with incomes up to 600 percent of the federal poverty level are eligible to participate in the program. HACCP benefits mirror California Children's Services (CCS) benefits and include hearing aids, hearing aid batteries/supplies, and

[Back to Top](#)

certain hearing aid-related services not covered by the child's primary health insurance. The program will launch and begin accepting applications on July 1. DHCS is working with pediatric audiology stakeholders to establish policies, create a program application, and develop HACCP educational resources. DHCS will post additional program details on its website in the coming month.

## **Medi-Cal Health Enrollment Navigators Project**

DHCS is expanding and extending efforts to enroll hard-to-reach Medi-Cal populations. Effective July 1, 2019, Assembly Bill (AB) 74 (Chapter 23, Statutes of 2019) appropriated \$59.7 million for DHCS to partner with counties and community-based organizations (CBOs) to conduct Medi-Cal outreach, enrollment, retention, and navigation services for hard-to-reach Medi-Cal and potentially eligible Medi-Cal populations. Due to the community health impacts of COVID-19, navigator services are now more critical than ever. Project partners have implemented innovative and creative approaches to contact and enroll eligible populations in their local communities. DHCS has partnered with three additional CBOs to provide navigation activities to Mendocino, San Francisco, and Yuba counties. The current phase of the project allows CBOs and counties to incorporate new or expand existing activities for all participants, extend their project performance period to March 31, 2022, and continue adjusting their outreach and enrollment approaches due to the challenges presented by the COVID-19 emergency. The Navigators Project continues to receive proposals from CBOs interested in a dual partnership with counties to help reach the most vulnerable populations. Information and updates related to the Medi-Cal Health Enrollment Navigators Project is available on the DHCS [website](#).

## **Medi-Cal Rx Implementation and Project Status Updates**

In January 2021, Centene Corporation announced that it plans to acquire Magellan Health, Medi-Cal Rx's contracted vendor. Centene operates – through subsidiaries – MCPs and pharmacies that participate in Medi-Cal. This transaction was unexpected and requires additional time to explore the acceptable conflict avoidance protocols to ensure there will be acceptable firewalls between the corporate entities to protect the pharmacy claims data of all Medi-Cal beneficiaries and to protect other proprietary information. On February 17, DHCS announced the delay of the planned Go Live date of April 1 for Medi-Cal Rx because of the need to review new conflict avoidance protocols submitted by Magellan Health. In March, a third-party vendor was leveraged to provide expert analysis and create a revised Conflict Avoidance Plan that is currently under DHCS review. DHCS anticipates providing an update on the plan in the coming weeks. For project questions or comments, visit the DHCS [website](#) or email [RxCarveOut@dhcs.ca.gov](mailto:RxCarveOut@dhcs.ca.gov).

## **Medical Interpreters Pilot (MIP) Project**

Pursuant to SB 165 (Chapter 365, Statutes of 2019), DHCS is required to collaborate with stakeholders to establish a MIP at up to four sites to evaluate medical interpretation services (MIS) for limited English proficient (LEP) beneficiaries enrolled in Medi-Cal MCPs and FFS. The pilot project will perform MIS at the pilot sites to help determine whether the provision of those services improves outcomes for LEP Medi-Cal

[Back to Top](#)

beneficiaries and Medi-Cal providers. DHCS may spend up to \$5 million for the pilot project. Pursuant to AB 74 (Chapter 23, Statutes of 2019), the funds will be available until June 30, 2024. DHCS is developing a Request for Application (RFA) for pilot sites that is anticipated for release later this month, with a projected award date in July 2021.

## **Medication Assisted Treatment (MAT) Expansion Project**

Beginning July 1, approved eligible organizations will receive funding to support stimulant use prevention and education, as well as direct stimulant treatment and recovery services for communities disproportionately impacted by the war on drugs. On April 15, DHCS released the Stimulant Use Prevention and Treatment in Communities of Color funding opportunity. Applications were due on May 14. Highly qualified organizations will be eligible to receive up to \$100,000 for stimulant use prevention activities, including creating a local stigma-reduction campaign, developing and disseminating educational materials, and training for clinicians to incorporate stimulant prevention within their practice. Up to \$250,000 will be made available to support qualified organizations to provide stimulant use treatment and recovery services, including contingency management, community reinforcement approach, and motivational interviewing. The project period is July 1, 2021, through August 31, 2022. For more information about these and other MAT Expansion Project RFAs, please visit [www.CaliforniaMAT.org](http://www.CaliforniaMAT.org).

## **Nonmedical Transportation (NMT)**

As of May 4, DHCS has received 544 applications from transportation companies requesting enrollment as NMT providers in Medi-Cal. DHCS has so far approved 114 applications. A list of the approved NMT providers is posted on the DHCS [website](#), and is updated monthly as additional providers are approved. DHCS will continue to assist FFS Medi-Cal beneficiaries with NMT requests if there is no approved NMT provider in their area. FFS beneficiaries or their designees can email [DHCSNMT@dhcs.ca.gov](mailto:DHCSNMT@dhcs.ca.gov) to request transportation assistance. Requests should be sent at least five business days in advance of the appointment if the provider is unable to arrange NMT or if all other transportation options have been exhausted. Beneficiaries should not include personal information in their first email; DHCS staff will reply with a secure email asking for their appointment information.

## **Smile, California Campaign for Medi-Cal Dental Services**

In April, Smile, California partnered with the California Department of Public Health's Office of Oral Health and the Rethink Your Drink campaign to develop a [social media carousel image](#) with facts about the effects of sugar-sweetened beverages on children's oral health.

On March 30, Smile, California hosted an English-language [Facebook Live Medi-Cal member presentation](#) that covered dental services for Medi-Cal members of all ages and answered questions about the Medi-Cal dental benefit. To date, this presentation has been viewed 578 times and received more than 100 comments, reactions, and shares. Due to the success of this presentation, Smile, California will host a Spanish-language

[Back to Top](#)

Facebook Live presentation at the end of June and partner with Vision y Compromiso to promote the event to Spanish-speaking Medi-Cal eligible and enrolled Californians.

By end of March, the Smile, California [website](#) had 55,054 new visitors, of which 37,372 used the “Find a Dentist” tool.

## **Tribal Federally Qualified Health Centers**

On June 11, DHCS will host a webinar for Tribes and Tribal health programs to share details about the Tribal Federally Qualified Health Center (FQHC) provider type. DHCS released guidance on the implementation of the Tribal FQHC provider type in [All Plan Letter 21-008](#) and the [Medi-Cal Provider Manual](#). The new Tribal FQHC provider type allows Tribal health programs operating under the authority of the Indian Self-Determination and Education Assistance Act to expand service locations (i.e., in the patient’s home), receive reimbursement for different combinations of visits on the same day, and bill for chiropractic services for all Medi-Cal recipients seen at the Tribal health program. The Tribal FQHC provider type designation in Medi-Cal became effective January 1, 2021.

## **Stakeholder Meetings and Webinars**

### **Behavioral Health Stakeholder Advisory Committee (BH-SAC) Meeting**

On July 29, DHCS will host the next BH-SAC meeting via webinar. The purpose of the BH-SAC is to advise DHCS on the behavioral health delivery system. This includes behavioral health, prevention, treatment, recovery services, and related waivers for mental health and SUD services. The agenda and registration link for the July 29 meeting will be posted on the DHCS [website](#) closer to the meeting date. Please email [BehavioralHealthSAC@dhcs.ca.gov](mailto:BehavioralHealthSAC@dhcs.ca.gov) with any questions.

### **CalAIM Managed Long-Term Services & Supports (MLTSS) and Duals Integration June Workgroup Meeting**

On June 10, DHCS will hold the CalAIM MLTSS and Duals Integration Workgroup meeting via webinar. Agenda items include a review and discussion of lessons learned and promising practices from care coordination in Cal MediConnect (CMC) and the Coordinated Care Initiative. Please [register](#) for the June 10 meeting. Background materials, transcripts, and video recordings of the previous workgroup meetings, along with additional information about the workgroup, are posted on the DHCS [website](#).

### **Coordinated Care Initiative (CCI) Stakeholder Webinar**

On June 30 at Noon, DHCS will host the next quarterly CCI stakeholder update webinar. It will include DHCS program updates and an overview of the updated CMC Dashboard. Please [register](#) in advance.

Materials from the March 25 CCI quarterly meeting, including the webinar recording, slides, and transcript, are now available on the CalDuals [website](#). During the meeting, DHCS provided program updates and discussed the latest version of the [CMC Dashboard](#). In addition, Blue Shield of California Promise Health Plan and LA Care Health Plan representatives shared their COVID-19 response efforts.

### **Foster Care Model of Care Workgroup**

This workgroup has provided valuable, extensive input. DHCS and the California Department of Social Services will use the input to develop a proposal to bring back to the group. The meeting scheduled for June 18 is being postponed until September (exact date to be determined).

The April 23 meeting included discussions on the regional approach and ways the CalAIM model can improve the delivery system of health services for children and youth in foster care. The background material and papers presented are available on the DHCS [website](#). The agenda and link for the September meeting will be posted on the DHCS website closer to the meeting date. Please email [CalAIMFoster@dhcs.ca.gov](mailto:CalAIMFoster@dhcs.ca.gov) with any questions or comments about this workgroup.

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

On June 24, DHCS will host the next MCHAP meeting via webinar. The meeting is expected to include a discussion on quality and population health management key indicators, DHCS' collaboration with other state departments, and updates on the Family First Prevention Services Act draft plan. The meeting will also provide status updates on COVID-19, DHCS' telehealth policy, and the draft release of the MCP procurement. 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 Consumer-Focused Stakeholder Workgroup (CFSW) Meeting**

On June 4, DHCS hosted the CFSW meeting via Webex. Additional information about the workgroup is available on the DHCS [website](#).

### **Medi-Cal Managed Care Advisory Group (MCAG) Meeting**

On June 3, DHCS hosted the quarterly MCAG meeting via webinar. The purpose of the MCAG is to facilitate communication between DHCS and all interested parties and stakeholders. DHCS provides program updates, and stakeholders are able to ask questions about issues that affect managed care beneficiaries. MCAG members generally consist of stakeholders and advocates, legislative staff, health plan association representatives, and providers. The meeting focused on updates requested from stakeholders through the Advisory Group inbox. To request agenda items for future meetings, please email [advisorygroup@dhcs.ca.gov](mailto:advisorygroup@dhcs.ca.gov). To view meeting information, materials, and historical documents, please visit the DHCS [website](#).

[Back to Top](#)

## Medi-Cal Rx Public Forums

Due to the delayed April 1 Go Live date for Medi-Cal Rx, the May 19 public forum was postponed. Information about upcoming public forum webinars will be posted on the DHCS [website](#). For questions or comments related to Medi-Cal Rx, please email [RxCarveOut@dhcs.ca.gov](mailto:RxCarveOut@dhcs.ca.gov).

## Stakeholder Advisory Committee (SAC) Meeting

On July 29, DHCS will hold the next SAC meeting via webinar. SAC members are recognized stakeholders/experts in their fields, including member advocacy organizations and representatives of various Medi-Cal provider groups. The agenda and registration link for the July 29 meeting will be posted on the DHCS [website](#) closer to the meeting date. Please email [SACInquiries@dhcs.ca.gov](mailto:SACInquiries@dhcs.ca.gov) with any questions.

## Reports

### External Quality Review (EQR) Technical Report

On April 27, DHCS published on its [website](#), and submitted to CMS, the federally-mandated Managed Care 2019-20 EQR Technical Report. This annual report contains three volumes: Main EQR Technical Report, Plan-Specific Evaluations (PSERs), and Alternative Access Tables. In the main Technical Report, the EQRO summarizes assessment results on access and quality of care provided by DHCS and its MCPs for Medi-Cal members. The PSERs include a plan-specific evaluation of each of DHCS' 29 MCPs and three dental managed care plans. The PSERs include recommendations for each plan to improve the quality, timeliness, and accessibility of health care services. The Alternative Access Assessment Tables are a new section, mandated by state law, to display information regarding Medi-Cal member access to care.