

First 5 MOU Template Post-Release Webinar

Objectives for Today's Discussion



Review Updates to the First 5 MOU Template



Review Next Steps for Executing the MOU and the MOU Execution Timeline



Q&A Regarding the MOU Template and Execution Timeline

Goals of the Memorandums of Understanding (MOUs)

The 2024 Medi-Cal Managed Care Contract (Contract) requires all managed care plans (MCPs) to enter into MOUs with counties and third-party entities (Other Parties) to contractually ensure the provision of whole-system, person-centered care.

DHCS Goals for Requiring MOUs

- **Establish minimum requirements** around key Contract provisions for MOUs (e.g., training, data-sharing)
- Clarify **roles and responsibilities for coordination of the delivery of care and services** of all Members, including across MCP carved out services
- Establish **formal processes for how MCPs and Other Parties will collaborate and coordinate on population health programs**, including referring and linking Members to Community Supports
- Establish **data sharing pathways** between MCPs and Other Parties to support care coordination and enable robust monitoring
- Provide mechanisms to ensure **overall oversight and accountability** for MCPs to execute MOUs with Other Parties
- **Provide transparency** into roles/responsibilities and relationships between MCPs and Other Parties

MOU templates incorporate **existing service and program requirements into a single document** to support MCP/Other Party decision-making and relationship building. Templates are more robust where DHCS has promulgated detailed policies/guidance.

MOU Requirements & Structure

The First 5 MOU Template is part of a broader set of documents and additional items focused on the release and execution of the MOUs. These items include:

APL on MOU Requirements

APL 23-029 explains the Base MOU Template and Bespoke MOU Templates

- Explains the intent and purpose of the provisions set forth in the MOUs
- Sets expectations of MCPs, such as an annual review of the MOU
- Details requirements related to MOU execution and submission to DHCS
- Lays out a monitoring plan for how DHCS will oversee MCP compliance with the MOU requirements

Base MOU Template

Contains provisions that must be included in all MOUs

- Clarifies roles and responsibilities of MCP and Other Parties
- Establishes “rules of engagement” to cooperate and address disputes
- Includes DHCS recommended optional provisions that parties may consider for execution

Bespoke MOU Templates

Specific to MCP and Other Party’s relationship and programs applicable under the MOU (e.g., First 5)

- Contains the general **and** program-specific required provisions, including incorporating Other Party requirements based on existing guidance
- Contains DHCS recommended optional provisions that parties may consider for that particular MOU
- Links to specific policies incorporated in the MOU

Overview of MOU Resources

DHCS is releasing resources to assist MCPs and Other Parties with implementing the MOUs

» [DHCS MOU Webpage](#)

- Houses the DHCS issued APL 23-029, Base MOU Template and Bespoke MOU Templates
- [MOU FAQs](#)
 - Provide additional guidance on the APL, Base MOU, and Bespoke MOU Templates
 - Clarifies aspects of MOUs in response to stakeholder feedback
 - Examples of questions answered include: “What are the optional provisions?”; “How can the parties share data?”; and “How will the MOUs be enforced?”
- Other updates will also be posted on the webpage as they become available

» **Technical Assistance**

- DHCS will be providing technical assistance as needed
- DHCS MOU email address: MCPMOUs@dhcs.ca.gov



Purpose of the First 5 MOU Template

Level Setting

The First 5 MOU template seeks to improve care coordination between MCPs and First 5 County Commissions (First 5s) through the following:

- » Opening channels of and improving communication between MCPs and First 5s to coordinate care for individuals receiving services from both parties and to address concerns related to care coordination.
 - This coordination will occur at the local level.
- » Enhancing each party's understanding of the other's respective services, eligibility criteria, referral processes, and operations.
 - For instance, each party should provide training and educational resources for their respective services to the other party to increase timely coordination and decrease process inefficiencies.

Feedback on the First 5 MOU Template

Throughout the MOU development, DHCS gathered stakeholder feedback and worked to align the First 5 MOU with stakeholders needs and ensure current guidance was reflected in the MOU.

- » **DHCS received 83 stakeholder comments during the feedback period.** We reviewed these comments and revised the MOU to address these comments where possible.
- » **DHCS hosted a stakeholder webinar in July** during the feedback period to review the First 5 MOU.
- » **DHCS has consistently collaborated with the CA First 5 Association** throughout the stakeholder feedback period and on subsequent MOU revisions.



**Thank you for
your valuable
feedback!**

Base MOU Template Requirements

Every MOU template contains the following provisions as required under the Contract:

- » **Definitions.** Sets forth the defined terms used in the MOU such as the "MCP-Agency Liaison." This section also provides that capitalized terms not otherwise defined have the meaning ascribed by MCP's Medi-Cal Managed Care Contract.
- » **Services Covered by This MOU.** Describes the services that MCP and the other party must coordinate for members.
- » **Party Obligations.** Describes each party's provision of services and oversight responsibilities (e.g., each party must designate a point of contact to act as the liaison for coordinating with the other party).
- » **Training and Education.** Requires MCP to provide education to members and Network Providers about covered services and other party's services available. MCP must also train employees who carry out responsibilities under the MOU and, as applicable, Network Providers, Subcontractors and Downstream Subcontractors on the MOU requirements and services provided by the other party.
- » **Referrals.** Requires the parties to refer to each other as appropriate and describes each party's referral pathways.
- » **Care Coordination.** Describes the policies and procedures for coordinating care between the parties, addressing barriers to care coordination, and ensuring ongoing monitoring and improvement of care coordination.
- » **Quarterly Meetings.** Requires the parties to meet at least quarterly to address care coordination, Quality Improvement (QI) activities, QI outcomes, and systemic and case-specific concerns, and to communicate with others within their organizations about such activities.

Base MOU Template Requirements

Every MOU template contains the following provisions as required under the Contract:

- » **Quality Improvement (QI).** Requires the parties to develop QI activities specifically for oversight of the MOU requirements, including any applicable performance measures and QI initiatives, such as those to prevent duplication of services, as well as reports that track referrals, Member engagement, and service utilization. MCP must document these QI activities in its policies and procedures.
- » **Data Sharing and Confidentiality.** Requires the MCP to have policies and procedure for sharing the minimum data and information necessary to ensure the MOU requirements are met and describes the data and information the other party may share with MCP to improve care coordination and referral processes. Requires the parties to implement policies and procedures for how the minimum necessary information and data (determined by the parties) will be shared in accordance with applicable law.
- » **Dispute Resolution.** Describes the policies and procedures for resolving disputes between the parties and the process for bringing the disputes to DHCS when the parties are unable to resolve disputes.
- » **Equal Treatment.** Provides that nothing in this MOU is intended to benefit or prioritize members over persons who are not members also receiving services from the other party.
- » **General.** Sets forth additional general contract requirements, such as the requirements that the MCP must publicly post the executed MOU, the MCP must annually review the MOU, and the MOU cannot be delegated.

First 5 MOU Template Requirements

The following First 5 MOU template provisions were revised to address stakeholder feedback.

- » **Definitions.** This section was revised to include the following definitions for First 5 Services and First 5 Providers. These definitions are intended to fully capture the various services provided by First 5s with differing organizational structures and First 5-provider relationships:
 - “First 5 Services” means the services, supports, and efforts made by First 5 to facilitate the creation and implementation of an integrated, comprehensive, and coordinated system to enhance optimal early childhood development. First 5 Services may include, as determined solely by First 5, care navigation, developmental screenings, pregnancy, postpartum supports as well as system investments and partnerships to improve access to quality services, reduce barriers to care, and evaluate and analyze related data to inform strategies to improve quality care and, therefore, the conditions of children prenatal to five (5) years old within their jurisdiction. *[This definition may include other services as appropriate.]*
 - “First 5 Providers” means organizations and individuals contracted with or receiving funding from First 5 to provide First 5 Services.

First 5 MOU Template Requirements

The following First 5 MOU template provisions were revised to address stakeholder feedback.

- » **Referrals Requirements.** The following provisions were revised to ensure applicability for differing types of First 5s, including those that are not direct service providers and those who may fund or have contracts with community-based providers (i.e., “First 5 Providers”). These provisions are also intended to clarify potential referral pathways between MCPs and First 5s, such as by allowing First 5s to direct referrals to other relevant community-based organizations as they deem appropriate.
 - The Parties must work collaboratively to develop policies and procedures that ensure Members who may be eligible for First 5 Services are referred to First 5 and First 5 Providers, as applicable.

First 5 MOU Template Requirements

The following First 5 MOU template provisions were revised to address stakeholder feedback.

» Referrals Requirements continued.

- First 5 should facilitate referrals from MCP to First 5 Providers if First 5 services are appropriate and assist MCP with identifying the appropriate First 5 Providers for such referrals as needed.
 - Optional: *First 5 may facilitate referrals from MCP to other community-based services and organizations as identified by First 5 that may be able to serve the Member. If First 5 or First 5 Providers make referrals to other community-based services or organizations, First 5 or First 5 Providers must notify the MCP that the referral was made.*
- The Parties should establish policies and procedures for how First 5 will notify MCP if First 5 and/or First 5 Providers are at capacity and are unable to accept Member referrals for First 5 Services. The policies and procedures should include notification to referred Members that First 5 Services are not currently available.
- First 5 should recommend best practices for successful engagement of eligible Members to MCP for MCP's Covered Services and Community Supports services or care management programs for which Members may qualify, including Enhanced Care Management ("ECM") or Complex Care Management ("CCM"). However, if First 5 is also an ECM Provider, provides Community Supports, or provides other services pursuant to a separate agreement between MCP and First 5, this MOU does not govern First 5's provision of ECM, Community Supports, or other services.
 - Optional: *The Parties must work to identify and address barriers to eligible Members' use of Medi-Cal benefits for the prenatal to five (5) individuals and their families based on information provided and best practices recommended by First 5s.*

First 5 MOU Template Requirements

The following First 5 MOU template provisions were revised to address stakeholder feedback.

» **Care Coordination.** The following provisions were revised to clarify each party's role and responsibilities, such as:

- The Parties must discuss and address systematic and, to the extent possible, individual care coordination issues or barriers to care coordination efforts at least quarterly.
- MCP must have policies and procedures in place to maintain collaboration with First 5 and to identify strategies to monitor and assess the effectiveness of this MOU.
 - *Optional: For example, MCP and First 5 should collaborate to leverage First 5's expertise at connecting and integrating systems of care to ensure Members are being linked to the appropriate services, such as connecting Members and their families to their medical home, social services, and other supports for the prenatal to five (5) population.*
- When a Member enrolled in ECM also receives First 5 Services, the ECM Provider shall coordinate services with First 5 (as appropriate) or First 5 Providers to ensure the Member's needs are addressed. To support the ECM Provider, MCP must ensure that the Member's ECM Providers are aware of First 5 agencies and contacts and consult with, keep informed (as appropriate), and share data with (as appropriate) First 5 or the First 5 Provider that provides First 5 Services to the Member.

First 5 MOU Template Requirements

The following First 5 MOU template provisions were revised to address stakeholder feedback.

- » **Data Sharing and Confidentiality.** This section was revised to clarify that data sharing is expected only as applicable, appropriate, and feasible and to clarify how shared data may be used, such as how it relates to Risk Stratification and Segmentation processes:
 - **Use of Data by MCP.** MCP must carefully consider data and information, including community and Member feedback, made available by First 5 to address Member needs, provide a broader understanding of the health needs and preferences of Members, and support more meaningful Member engagement.

First 5 MOU Template Requirements

The following First 5 MOU template provisions were revised to address stakeholder feedback.

» Additional Changes.

- The recommended term was updated from three years to one year or a longer term.
- The Services Covered by This MOU and Provision of Services sections were updated to provide that First 5 Services and supports will be made available as appropriate and as resources allow.
- The notification requirement for changes to the First 5 Liaison was updated to be as soon as reasonably practical but no later than the date of change, except when such prior notification is not possible, in which case, notice should be provided within five (5) Working Days of the change.
- The following example was added to the Training and Education section for clarity:

For example, MCP and Network Providers should inform Members about First 5 programs and events. In turn, First 5 should share information about MCP open enrollment and services, such as through Medi-Cal for Kids and Teens.

2025 MOU Execution Timeline

- » 1/1/2025 Requirement to Have Executed MOUs Go Live
 - » MCPs submit executed MOUs on a rolling basis
 - » MCPs are required to submit quarterly reports demonstrating good faith effort and executed MOUs
 - » Beginning on January 31, 2025, MCPs must begin reporting on the First 5 MOUs in the MOU Quarterly Report.

Quarter/Year	Quarterly Submission Reporting	Submission due to DHCS
Q1: 2025	January 1 – March 31	Last business day of April
Q2: 2025	April 1 – June 30	Last business day of July
Q3: 2025	July 1 – September 30	Last business day of October
Q4: 2025	October 1 – December 31	Last business day of January

Questions?

