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 DHCSPress@dhcs.ca.gov. Be sure to follow DHCS on social media, too.

Thanks.

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DHCS Leadership Transition
On June 15, 2020, Governor Gavin Newsom appointed Will Lightbourne to serve as DHCS Director. Lightbourne returned to state service after leading the California Department of Social Services (CDSS) as Director from 2011 through 2018. He sees his new role as a chance to continue serving the people of California and pursuing social justice at a critical moment. He recently said in a published interview that he believes we must now insist that our publicly financed health care system partner with the state’s public health network and social safety net system to address community and population health, with emphasis on reducing health disparities, addressing structural inequities in how health care is delivered, and promoting social justice.

The Governor appointed Kirk Davis as Deputy Director of Health Care Delivery Systems. With over 35 years of professional experience in the health care industry in the post-acute setting – including acute rehabilitation, long-term acute care, skilled nursing and congregate living – Davis joined DHCS on August 3, 2020. Anastasia Dodson, who was serving as Acting Deputy Director of Health Care Delivery Systems, will resume her role as Associate Director of Health Policy in the Director’s Office.

The Governor appointed John Puente as Deputy Director and Chief Counsel of the Office of Legal Services. Puente specializes in providing legal counsel on administrative law,
public policy, regulatory transactions, compliance and licensing as well as Medicaid and Medicare issues. Puente, who replaces Jared Goldman, will join DHCS on August 10, 2020.

**COVID-19 Update**

As the COVID-19 public health emergency continues, many Californians are experiencing secondary impacts on their mental health. The directors of DHCS and the California Department of Public Health (CDPH) as well as the California Surgeon General collaborated to write a [letter](#) to all California medical and behavioral health providers, encouraging them to ask their patients the four “Ask Suicide-Screening Questions” developed by the National Institute of Mental Health.

The Medi-Nurse line continues to receive thousands of calls each week. Medical professionals staffing the line answer questions about COVID-19 for individuals who don’t have health insurance or for Medi-Cal beneficiaries who don’t have a regular doctor or managed care plan. Uninsured callers also are referred to a qualified provider in their county who can determine whether they qualify for “COVID-19 presumptive eligibility,” which provides individuals with temporary coverage to obtain COVID-19 testing and testing-related and treatment services. DHCS encourages stakeholders to continue helping to promote the Medi-Nurse advice line. For more information, including resources, such as flyers and social media content, visit the DHCS [website](#).

The federal Centers for Medicare & Medicaid Services (CMS) granted DHCS’ request for additional Section 1135 flexibilities related to the COVID-19 public health emergency. Following the approvals, DHCS issued a [revised notice](#) to inform providers of the additional flexibilities that will extend through the end of the COVID-19 emergency. DHCS also [issued guidance](#) related to the temporary suspension of Medi-Cal fee-for-service prior authorization (PA) requirements for certain benefits, as well as an extension of existing PAs, also through the end of the public health emergency.

On July 27, 2020, CMS [approved](#) modifications to DHCS’ Special Terms and Conditions for California’s Section 1115(a) Medicaid waiver, entitled Medi-Cal 2020. DHCS submitted the application to amend its Medi-Cal 2020 section to address the COVID-19 public health emergency on April 3, 2020. While some aspects of the requests are still pending, the already-approved modifications include:

- **Drug Medi-Cal Organized Delivery Systems (DMC-ODS):** Suspending certain limits on residential treatment for participating DMC-ODS pilots and modifications to the reimbursement methodology.
- **Public Hospital Redesign and Incentives in Medi-Cal (PRIME) program:** Modifications to methodology for distribution of incentive payments.
- **Global Payment Program:** Adjustments to the Public Health Care System thresholds.
The U.S. Department of Health and Human Services (HHS) announced a second extension of the application period for the Phase 2 general distribution to Medicaid, Medicaid managed care, Children's Health Insurance Program (CHIP) and dental providers. The new Provider Relief Fund deadline for applications is Friday, August 28.

DHCS posted a beneficiary letter, translated into 14 languages, that provides information and reminders about Medi-Cal services offered during the COVID-19 emergency, such as preventive care and vaccinations. The letters are posted here, under the section “Beneficiaries: Important Information About Medi-Cal and COVID-19”.

Additional updates will be posted to the DHCS COVID-19 resource page.

**Medi-Cal 2020 1115 Waiver Update**

California is seeking a 12-month extension of the federal waiver under which a majority of the State’s Medicaid program, Medi-Cal, now operates. California’s Medi-Cal 2020 waiver was approved by the CMS on December 30, 2015, and is effective through December 31, 2020. Following the end of the waiver period, DHCS intended to launch California Advancing and Innovating Medi-Cal (CalAIM), a multi-year initiative to implement overarching policy changes across all Medi-Cal delivery systems. However, the COVID-19 public health emergency has greatly impacted all aspects of California’s health care delivery system. As a result, key partners and stakeholders, including managed care plans, providers, and counties, requested delaying the implementation of CalAIM to focus on addressing the pandemic.

While the goals and objectives of CalAIM continue to be a high priority, DHCS in May 2020 officially announced the delay of CalAIM. Because of the CalAIM delay, DHCS will submit a 12-month Section 1115 waiver extension request to CMS to ensure that important programs authorized through Medi-Cal 2020 continue and are eventually transitioned under CalAIM. The proposed Medi-Cal 2020 12-month extension request is available on the DHCS website.

Also, in coordination with the Medi-Cal 2020 12-month extension request, DHCS intends to submit a 12-month extension request for the existing 1915(b) Specialty Mental Health Services Waiver to align the terms of the waivers.

DHCS will host public hearings via webinar to solicit public comments:

- August 7, 2020, 3:30 p.m. – 5 p.m. – First Public Hearing
- August 10, 2020, 2 p.m. – 3:30 p.m. – Second Public Hearing

Stakeholders are also invited to submit written comments to 1115waiver@dhcs.ca.gov. The 30-day comment period closes on August 21, 2020.
Program Updates

Adverse Childhood Experiences (ACEs) Screenings
ACEs Aware is an initiative led by the Office of the California Surgeon General (CA-OSG) and the DHCS to train, guide and pay Medi-Cal providers to screen children and adults up to age 65 with full-scope Medi-Cal for ACEs. Eligible Medi-Cal providers must self-attest to completing the certified “Becoming ACEs Aware in California” training at Training.ACEsAware.org to receive payment for ACE screenings conducted after July 1, 2020. It’s not too late for providers to complete the training and self-attest at Medi-Cal.ca.gov/TSTA/TSTAattest.aspx.

On June 16, 2020, ACEs Aware awarded $14.3 million in grants to 100 organizations across the state of California. The grants will fund a range of activities that will inform and educate Medi-Cal providers about the importance of screening for ACEs and responding with trauma informed care.

Aged, Blind, and Disabled Federal Poverty Level (ABD FPL) Program Expansion
The ABD FPL program expansion will increase the program income limit to 138 percent of the FPL. To support implementation efforts, DHCS is developing a webpage to inform beneficiaries, stakeholders, and the public about the program expansion. Implementation of this benefit is expected to occur for the December 2020 Month of Eligibility. DHCS will continue to provide updates on the implementation of the ABD FPL program expansion through the DHCS Consumer Focused Stakeholder Workgroup.

Medicare Part B Buy-In Disregard – AB 1088
Subject to federal approval, AB 1088 (Chapter 450, Statutes of 2019) will allow an aged, blind, or disabled individual who becomes ineligible for the Medi-Cal ABD FPL program because of the state’s payment of the individual’s Medicare Part B premium to remain eligible for the program if their income and resources otherwise meet all eligibility requirements. DHCS is seeking federal approval via a Medicaid State Plan Amendment, which was submitted to CMS on February 14, 2020. Implementation of this benefit is expected to occur for the December 2020 Month of Eligibility. DHCS will continue to provide updates on the provisions of AB 1088 through the DHCS Consumer Focused Stakeholder Workgroup.

Behavioral Health (BH) Telehealth Request for Applications
As a result of COVID-19, DHCS used available federal funding from the Substance Abuse Prevention and Treatment Block Grant and Community Mental Health Services Block Grant to support behavioral health telehealth infrastructure improvement activities. The purpose of this project is to address the needs of individuals with substance use disorders (SUD) and/or mental health disorders, including youth and patients with serious emotional disturbances. A total of $50,000 will be available per site, with up to $5,000 available for...
Personal Protective Equipment. Applications were due on August 3, 2020, and applicants will be notified of funding selection by September 15, 2020. Project improvement activities must begin no later than September 30, 2020, and must be completed on or before June 30, 2021. For more information, view Behavioral Health Telehealth Request for Applications Overview. For general project questions and/or comments, email centergrants@shfcenter.org.

California Children’s Services (CCS) Service Authorization Request (SAR) Process
DHCS has updated its adjudication of SARs for dependent counties to streamline communication and internal routing with counties. A SAR fax cover sheet was developed to improve internal routing of SARs and consolidated email boxes to reduce confusion related to the submission of inquiries. Email inboxes have been consolidated as follows: Use CCSCriticalReview@dhcs.ca.gov (RightFax 916-440-5306) for all urgent and specialized SAR requests for transplants, cochlear implants, audiology consults, and out-of-state requests. Use CCSGeneralProcessing@dhcs.ca.gov (RightFax 916-440-5768) to process all other SARs, including, but not limited to, SARs for durable medical equipment, genetic testing, blood factor and Hemlibra, neonatal intensive care unit, and specialty drugs.

Dental Transformation Initiative (DTI)

<table>
<thead>
<tr>
<th>DTI Domains</th>
<th>Total Payments as of July 2020</th>
</tr>
</thead>
<tbody>
<tr>
<td>Domain 1 - Preventive Services</td>
<td>$210.5 million</td>
</tr>
<tr>
<td>Domain 2 - Caries Risk Assessment</td>
<td>$88.9 million</td>
</tr>
<tr>
<td>Domain 3 - Continuity of Care</td>
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<tr>
<td>Domain 4 - Local Dental Pilot Projects (LDPPs)</td>
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</tr>
<tr>
<td>Total</td>
<td>$481.8 million</td>
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The Domain 1 payment for July 2020 was $3.8 million. As of July 4, 2020, 2,902 Medi-Cal dental providers have opted to participate in Domain 2. The Domain 3 payment of $83.9 million for June 2020 was released the first week of July, and the next Domain 3 payment is scheduled for June 2021. In light of the COVID-19 emergency, DHCS has postponed additional onsite visits at LDPPs that were scheduled in 2020. DHCS has continued bimonthly teleconferences with all LDPPs as an opportunity to educate and support, provide technical assistance, and share best practices and lessons learned. The next Domain 4 teleconference is scheduled for August 20, 2020. The Domain 4 summary of LDPP applications is available on the Domain 4 webpage. In addition, fact sheets for all DTI domains are posted on the DHCS website.

Drug Medi-Cal Organized Delivery System (DMC-ODS) Update
The first regional DMC-ODS model in California went live on July 1, 2020, bringing the total number of counties participating in the DMC-ODS to 37. The regional model is a
collaboration between seven Northern California counties and Partnership HealthPlan. These 37 counties represent more than 90 percent of the Medi-Cal population. The DMC-ODS provides a continuum of care modeled after the American Society of Addiction Medicine (ASAM) criteria for substance use disorder treatment services. ASAM designations continue to be processed for licensed residential alcohol and other drug program providers. DHCS has issued 921 designations to alcohol and drug treatment providers in California. Of these providers, 654 are actively providing DMC-ODS services. More information about DMC-ODS is posted on the DHCS website.

DHCS contracts with an External Quality Review Organization (EQRO), which reviews DMC-ODS counties on an annual basis regarding access, timely access, and quality of care. The information is summarized in annual county reports. In Fiscal Year (FY) 2019-20, 20 DMC-ODS counties were reviewed; the individual reports can be found at https://www.caleqro.com/dmc-eqro.

**Home- and Community-Based Alternatives (HCBA) Waiver Renewal**
The five-year term for the HCBA waiver will expire on December 31, 2021. DHCS will apply to CMS to renew the HCBA waiver for a new 5-year term. In August, DHCS will host a kick-off webinar to launch the waiver renewal process and stakeholder discussions. Following the webinar, DHCS will convene a technical workgroup series to discuss potential improvements for the HCBA waiver. Additional details about the technical workgroup will be posted on the DHCS website. The HCBA waiver provides long-term services and supports to Medi-Cal-eligible beneficiaries in community settings. These services include private duty nursing, case management, and personal care services necessary to maintain the health and safety of an individual with a nursing level of care need.

**HIV/AIDS Waiver Renewal**
The five-year term for the HIV/AIDS waiver will expire on December 31, 2021. DHCS, in partnership with CDPH, will apply to CMS to renew the HIV/AIDS Waiver for a new five-year term. Additional information about the renewal of the HIV/AIDS waiver is forthcoming and will include ways to provide public input. The HIV/AIDS waiver provides long-term, community-based services and supports to Medi-Cal-eligible beneficiaries who have a written diagnosis of HIV disease or AIDS from his or her primary care provider. These services, provided in a community setting instead of an institution, include private duty nursing, case management, and personal care services necessary to maintain the health and safety of an individual with a nursing level of care need.

**Long-Term Care at Home Benefit**
DHCS and the California Department of Aging (CDA) announced a potential new Long-Term Care at Home benefit. This model of care was initially envisioned to address the need to decompress California’s skilled nursing facilities (SNFs) in response to the COVID-19 public health emergency. DHCS believes that this benefit also will provide a more holistic, coordinated, and bundled set of medical and home- and community-based
services (HCBS), offering Medi-Cal beneficiaries an option to stay healthy at home. DHCS updated its proposal for a new Long-Term Care at Home benefit to reflect input from stakeholders, which is available on the DHCS website. The second draft provides additional details on the benefit and highlights recent changes to the benefit based on extensive stakeholder feedback. DHCS has extended the timeframe for developing and implementing the Long-Term Care at Home benefit, which will allow DHCS to facilitate additional rounds of stakeholder engagement prior to requesting approval from CMS. DHCS aims to implement this new benefit in Calendar Year 2021. Send your comments on Medi-Cal’s Long-Term Care at Home benefit to LTCatHome@dhcs.ca.gov.

**Medi-Cal Health Enrollment Navigators Project**

Effective July 1, 2019, Assembly Bill (AB) 74 (Chapter 23, Statutes of 2019) appropriated $59.7 million for DHCS to partner with counties and/or community-based organizations (CBOs) for 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 more important than ever. Project partners have implemented innovative/creative approaches to contact and enroll the eligible hard-to-reach populations in their local communities. As of July 2020, DHCS has approved funding to 36 counties and seven CBOs (serving 17 counties) to provide Navigators Project services within those 53 counties. DHCS continues to work with these counties and CBOs to assess and fund the delivery of additional Navigators Project activities. DHCS is working to distribute the remaining funds to current awardees and prospective CBOs by October 2020.

**Medi-Cal Rx**

DHCS continues implementation activities per Governor’s Executive Order N-01-19, which, in part, requires DHCS to transition pharmacy services from Medi-Cal managed care to FFS by January 1, 2021. Since December 20, 2019, DHCS has worked closely with its contracted vendor to gather and validate system requirements, work on system configuration, and most recently, completed the first stage and began the second stage of system testing as the vendor moves toward a successful assumption of operations on January 1, 2021.

Additionally, DHCS and its vendor created a Medi-Cal Rx website. This website launched in June with limited functionalities and serves primarily as a platform to educate, provide available resources and information, and communicate changes to interested parties. The entire website will be fully operational by January 1, 2021. In the meantime, a Medi-Cal Rx subscription service is available to allow interested parties to sign up and receive Medi-Cal Rx updates by email.

For general project questions and/or comments, please visit the DHCS website or email RxCarveOut@dhcs.ca.gov. In addition, DHCS encourages stakeholders to review the Medi-Cal Rx Frequently Asked Questions (FAQ) document, which was updated on June 30, 2020.

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Medication Assisted Treatment (MAT) Expansion Project Update
On March 19, 2020, the Substance Abuse and Mental Health Services Administration released the State Opioid Response (SOR) 2 Funding Opportunity Announcement, allocating to DHCS $105,819,731 per year from September 1, 2020, through August 31, 2022, for a total of $211,639,462. SOR 2 aims to address the opioid crisis by increasing access to MAT using the three FDA-approved medications (buprenorphine, methadone, and naltrexone) for the treatment of opioid use disorder (OUD), reducing unmet treatment needs, and reducing opioid overdose-related deaths through prevention, treatment, and recovery activities. SOR 2 also supports evidence-based prevention, treatment, and recovery support services to address stimulant misuse and use disorders, including methamphetamine.

DHCS will continue MAT Expansion Project efforts initiated through the State Targeted Response to the Opioid Crisis and SOR 1 grants, while implementing and expanding evidence-based treatment for opioid use and stimulant use disorders. Priority populations include American Indian and Alaskan Natives (AI/AN), youth and individuals experiencing homelessness. An estimated 10,000 underinsured or uninsured individuals will be directly served, and an additional 300,000 will be influenced through prevention and education. For more information, visit www.CaliforniaMAT.org.

Nonmedical Transportation (NMT)
As of July 14, 2020, DHCS received 397 applications from transportation companies requesting to enroll as NMT providers in FFS Medi-Cal. Of the total, DHCS approved 64 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. Beneficiaries or their designees may email DHCS-Benefits@dhcs.ca.gov to request transportation assistance. Requests should be sent at least five business days in advance of the appointment if their provider is unable to arrange NMT or if they have exhausted all other transportation options. Beneficiaries should not include personal information in their first email; DHCS staff will reply with a secure email asking for their appointment information.

Outpatient Prescription Drug Rule – Blood Factor Reimbursement
Effective July 1, 2020, DHCS implemented its new methodology for blood factor reimbursement for Hemophilia Treatment Centers (HTCs) and non-HTC specialty pharmacies. This new reimbursement methodology was approved via SPA 19-0015. Prior to the SPA submission for federal approval, DHCS engaged extensively with stakeholders regarding the reimbursement methodology for both HTCs and non-HTCs. The following link is a list of Medi-Cal contracted specialty pharmacy locations for blood factors as of July 1, 2020.
Proposition 56 Loan Repayment Program – CalHealthCares
In July 2020, DHCS announced its commitment to pay $58,552,917 million in student loans to 276 physicians and $10,704,219 million in student loans to 41 dentists under the program to expand access to care for Medi-Cal patients under a second cohort of awardees. The physicians represent 56 specialties and serve 41 counties. The Dentists will serve 31 counties. The awardees have agreed to maintain a patient caseload of at least 30 percent Medi-Cal patients. A total of $340 million has been allocated to the program (CalHealthCares). A third cohort is scheduled for 2021. For more information, please visit the CalHealthCares website.

Provisional Postpartum Care Extension
Senate Bill (SB) 104 (Chapter 67, Statutes of 2019) authorized DHCS to implement the Provisional Postpartum Care Extension, which will extend Medi-Cal or Medi-Cal Access Program coverage for an additional ten months for pregnant or postpartum individuals who have been diagnosed with a maternal mental health condition during their pregnancy, postpartum period, or 90-day cure period. DHCS has prepared an informational flyer for distribution to beneficiaries, conducted stakeholder workgroups with advocates and counties, and has prepared an All County Welfare Director’s Letter (ACWDL) to provide counties guidance for PPCE-eligible beneficiaries. The Provisional Postpartum Care Extension was implemented on August 1, 2020.

Preventive Care Outreach Project for Children in Medi-Cal
Access and utilization of preventive services are a high priority for DHCS, and the Department has resumed the outreach activities for preventive services for children. The effects of the COVID-19 emergency resulted in a shift in focus of the targeted call campaign to inform beneficiaries about the Early and Periodic Screening, Diagnostic, and Treatment Services (EPSDT) benefit. The Phase 1 call campaign by Medi-Cal managed care plans (MCP) will resume on August 3, 2020, with a focus on immunizations and blood lead level screening for children ages 0-6. MCPs will have until September 30 to complete the targeted call campaign using the modified guidance provided by DHCS. Phase 2 of the outreach project was also delayed, but is anticipated to begin later this summer/fall. Phase 2 activities will include surveying MCPs and beneficiaries, involving stakeholders to design new outreach materials, and creating new approaches to reach this population. The schedule has not yet been finalized, but DHCS will keep MCPs and stakeholders apprised of the status and when the surveys will be released.

Self-Determination Program (SDP) Waiver for Individuals with Developmental Disabilities
On June 30, 2021, the three-year pilot term for the California SDP Waiver for Individuals with Developmental Disabilities will expire. DHCS, in partnership with the California Department of Developmental Services, will submit a request to CMS to renew the SDP waiver for a new five-year term. Renewal information and ways to provide public input are forthcoming. The SDP waiver provides long-term, community-based services and
supports for Medi-Cal-eligible beneficiaries who meet the state’s definition of “developmentally disabled” and “substantial disability”, as defined in the California Lanterman Developmental Disabilities Services Act. These services include private duty nursing, case management, and personal care services necessary to maintain the health and safety of an individual with a nursing level of care need, and in a community setting instead of an institution.

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

DHCS continues to adapt its *Smile, California* outreach efforts in light of the COVID-19 emergency and the resulting restricted access to dental care. For member outreach, DHCS updated and developed new materials to help minimize confusion around available Medi-Cal dental services during dental office closures and re-openings. Specifically, this included new images and captions added to the *Smile, California* social media gallery as well as the development of a short video and downloadable flyer entitled, “What You Should Know About Returning to the Dentist.” DHCS developed a welcome visit presentation to be used virtually by the *Smile, California* outreach team in lieu of in-person office visits.

Community partners also can review and download the recently released PowerPoint, “Medi-Cal Covers Dental During Pregnancy,” to use when engaging with members about the importance of seeing a dentist while pregnant. This easy-to-use presentation complements the existing “Medi-Cal Covers Dental During Pregnancy” video, brochure, and flyer located on the Partners & Providers page of *Smile, California*. To sign up for Smile Alerts, please visit the Smile, California website. Follow *Smile, California* on Instagram for the latest information and resources at @SmileOnCalifornia.

**Specialty Mental Health Services Provider Enrollment Changes**

DHCS is continuing to implement enrollment requirements for Specialty Mental Health Services (SMHS) providers to ensure that these providers comply with all federal laws related to Medicaid enrollment requirements, including the Managed Care Final Rule and the 21st Century Cures Act. DHCS has identified enrollment requirements that must be updated to bring SMHS providers into compliance with federal law. DHCS will hold a second stakeholder call with counties on August 25, 2020, to discuss changes to SMHS enrollment and review updates that will be made to the existing SMHS forms to align providers with enrollment requirements. The WebEx login information will be emailed to stakeholders through the Listserv in early August and it will be added to both the DHCS Calendar of Events and the Provider Resources website.

On July 8, 2020, DHCS hosted a training webinar for counties and providers about the requirements to become an enrolled Medi-Cal behavioral health provider through the Provider Application and Validation for Enrollment portal. This webinar will be repeated on September 16 and December 9, 2020, and information on how to join these webinars will be provided in advance. The webinar includes presentations by the DHCS Provider
Spinal Muscular Atrophy (SMA) Added to California Newborn Screening (NBS) Program

SMA is an autosomal recessive neuromuscular disorder associated with the Survival Motor Neuron 1 gene (SMN1). In California, newborn screenings will be able to identify newborns who have homozygous deletions in the SMN1 gene, which are found in approximately 90-95% of newborns with SMA. CDPH estimates that 50 infants will be diagnosed each year in California. More information about the California Newborn Screening Program can be found at the Genetic Diseases Screening Program website. In mid-August, DHCS will add instructions on how to bill using a new code for Onasemnogene Abeparvovec (Zolgensma), a drug used to treat SMA in certain children up to age 2.

Waiver Personal Care Services (WPCS) Sick Leave

Beginning on July 1, 2020, paid sick leave is available for current, active WPCS program providers. New and existing WPCS providers will receive 16 hours of paid sick leave after providing 100 hours of authorized services for a WPCS and/or In-Home Supportive Services (IHSS) recipient. The accrued paid sick leave cannot be used until an additional 200 hours of authorized services have been worked, or until after 60 calendar days has passed, whichever comes first. These are one-time requirements that must be completed to accrue and use paid sick leave. A provider who completes the hours or time requirements will continue to accrue 16 hours of paid sick leave each state FY as they continue to work as an active WPCS or IHSS provider. At the end of each FY, any unused paid sick leave will expire. Accrual will be increased to 24 hours of paid sick leave during the year in which the state minimum wage reaches $15 per hour (currently scheduled for January 1, 2022).

Stakeholder Meetings and Webinars

Behavioral Health Stakeholder Advisory Committee (BH-SAC) Meeting

DHCS will hold the next BH-SAC meeting via webinar on October 28, 2020. On July 16, DHCS held a BH-SAC webinar and provided updates on COVID-19, Medi-Nurse, CalHOPE, and extension plans for the section 1115 (Medi-Cal 2020) waiver. The webinar also included a listening and planning discussion on children’s behavioral health issues for future BH-SAC meetings. The purpose of the BH-SAC is to advise DHCS about the behavioral health delivery system. This includes behavioral health, prevention, treatment, recovery services, and related waivers for mental health and substance use disorder services. To view meeting information and materials, please visit the DHCS website.
California Children’s Services (CCS) Advisory Group (AG) Meeting
On July 8, 2020, DHCS held the third-quarter CCS AG meeting. Agenda topics included CCS-related COVID-19 topics, a formal Medi-Cal Rx presentation, and CCS program updates, including a discussion of the status of Whole Child Model (WCM) regulations, the WCM dashboard, and significant improvements in SAR processing for dependent CCS counties. The next CCS AG meeting is scheduled for October 7, 2020. To view CCS AG meeting agendas, presentations, webinar information, and meeting materials, please visit the DHCS website.

Foster Care Model of Care Workgroup
The inaugural Foster Care Model of Care Workgroup meeting was held via webinar on June 26, 2020. Workgroup members and members of the public discussed the workgroup’s guiding principles and charter, as well as the path of a child through the foster system. The second meeting was held via webinar on July 24, 2020, and members discussed different options for improving the foster care system in California and explored other states' approaches. The next meeting is scheduled via webinar for August 21, 2020.

This workgroup is part of DHCS' California Advancing and Innovating Medi-Cal (CalAIM) initiative, and is hosted in partnership with CDSS. The purpose of this workgroup is to create a long-term plan for how children and youth in foster care receive health care services (physical health, mental health, substance use disorder treatment, social services, and oral health) and serve as a venue for stakeholders to provide feedback on ways to improve the current system of care for children and youth in foster care. The workgroup also will determine if a new system of care should be developed and, if so, how it would be established.

Information on meeting dates is on the DHCS website. For questions or comments about this workgroup, please email CalAIMFoster@dhcs.ca.gov.

Medi-Cal Children’s Health Advisory Panel (MCHAP) Meeting
The next MCHAP meeting is scheduled for October 14, 2020, via webinar. The June 5 webinar included a discussion of the Governor’s May Revision to the 2020-21 budget, including the review and approval of a letter to the Director and legislative leaders on FY 2020-21 budget recommendations, and COVID-19 updates. 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
The next CFSW meeting is scheduled via conference call for August 7, 2020, from 10 a.m. to Noon. The purpose of the CFSW is to provide stakeholders an opportunity to review and provide feedback on a variety of consumer messaging materials. The forum focuses on eligibility- and enrollment-related activities and strives to offer an open
discussion on Medi-Cal policies and functionality. Additional stakeholder information is available on the DHCS website.

**Medi-Cal Dental Statewide Stakeholder Meeting**
The next Medi-Cal Dental Statewide Stakeholder meeting is scheduled for August 27, 2020, via webinar. The purpose of the meeting is to provide dental stakeholders throughout the state a forum to share feedback related to Medi-Cal dental services, and for DHCS to share updates and information on new and/or upcoming work efforts. Additional details can be found on the Medi-Cal dental stakeholder engagement website.

**Medi-Cal Rx Advisory Workgroup**
On July 29, 2020, DHCS held, via webinar, the fourth of seven sessions of the Medi-Cal Rx Advisory Workgroup. These sessions are intended to help facilitate and further inform DHCS’ ongoing efforts to implement pharmacy services improvements through the Medi-Cal Rx initiative. The workgroup is composed of such organizations and entities as hospitals, clinics, health plans, counties, pharmacies, tribal health programs, and consumer advocates. The next session is scheduled for October 21, 2020. For more information, please visit the DHCS website.

**Medi-Cal Rx Public Forums**
On June 17, 2020, DHCS held the most recent Medi-Cal Rx public forum via webinar. These forums are intended to keep the broader stakeholder community up to date about Medi-Cal Rx implementation activities and timelines. The next public forum webinar is scheduled for September 22, 2020. Information on how to join the webinar will be posted on the DHCS website as the meeting date approaches. For questions or comments related to Medi-Cal Rx, please email RxCarveOut@dhcs.ca.gov.

**Office of Family Planning Stakeholder Meeting**
The next family planning stakeholder meeting is scheduled for September 2020 (exact date to be determined) via conference call. The meeting announcement and details will be posted on the DHCS website in mid-August 2020.

**Stakeholder Advisory Committee (SAC) Meeting**
DHCS will hold the next SAC meeting via webinar on October 28, 2020. On July 16, DHCS held a SAC webinar, providing updates on COVID-19, Medi-Nurse, Medi-Cal enrollment numbers, and extension plans for the section 1115 (Medi-Cal 2020) waiver. The webinar also included an overview of the Long-Term Care at Home concept paper and the stakeholder process for the proposed new benefit. The purpose of the SAC is to provide DHCS with feedback on health care policy issues affecting the Department, including section 1115 waiver implementation efforts. SAC members are recognized stakeholders/experts in their fields, including member advocacy organizations and representatives of various Medi-Cal provider groups. To view meeting information, materials, or historical documents, please visit the DHCS website.