



California Children's Services Program

Advisory Group Meeting
January 15, 2020



Agenda

Welcome, Introductions, and Federal and State Updates

Inter-County Transfer Numbered Letter Update

Medi-Cal Healthier California for All

Whole Child Model (WCM) Dashboard

WCM Evaluation: Telephone Survey with Parents and Guardians

Medi-Cal Rx Update

Open Discussion

Public Comments, Next Steps, and Upcoming Meetings



Welcome, Introductions, and Federal and State Updates

Richard Figueroa
Acting Director
Department of Health Care Services

Inter-County Transfer Numbered Letter Update

Meredith Wolfe

CCS Administrator

Health and Human Services Program Services Coordinator

Public Health Branch, County of Humboldt

Guiding Principle for Inter-County Transfers

- A California Children's Services (CCS) Program client receiving services is not to be denied because of relocation from one county to another in California.
- There is to be no lapse in services or interruption of services when an eligible client transfers from one county to another.

Recent Workgroup Activities

Inter-county Transfer Workgroup

- 5 WCM CCS Counties – (4 Independent/1 Dependent)
- 6 Classic CCS Counties – all Independent
- September 27, 2019 – Reviewed the proposed revisions to the Numbered Letter with MCPs.

Agreements from meeting with MCPs

When health plan code remains connected to client's case 30 – 60 days after transfer...

WCM to Classic

... Health Plan continues to provide case management and payment until client is no longer enrolled, even if the child is getting services in the new county (as long as the HP is getting capitation for the child).

Agreements from meeting with MCPs

When health plan code remains connected to client's case 30 – 60 days after transfer...

Classic to WCM

... the CCS county staff in WCM county will issue short-term SARs* as needed until the child is enrolled in the new health plan.

* Service authorization request

Agreements from meeting with MCPs

When health plan code remains connected to client's case 30 – 60 days after transfer...

... family or county CCS (if family needs help with this) staff request manual update from the Medi-Cal Managed Care Ombudsman.

Agreements from meeting with MCPs

Since CCS in a WCM county does not have the necessary information to give to new county...

WCM to classic

...the health plan will complete and return the WCM Inter-County Transfer Form (or equivalent)* and attach documents when their original county notifies them of the transfer, within 10 days.

*CalOptima created a form that they have been using that meets the same requirements.

Next Steps

- The revised Inter-County Transfer Numbered Letter was submitted to DHCS late November.
- County Welfare Directors Association—this ICT workgroup gave recommendations to DHCS regarding timely address changes.
- The workgroup plans to continue to meet in order to provide support to counties.
 - Guide to supplement the NL and Case Management Manual
 - Updates to FAQs
 - Training possibilities: webinar or workshop at conference

Questions



Medi-Cal Healthier California for All

Evelyn Schaeffer

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



Goals

1

Identify and manage member risk and need through Whole Person Care approaches and addressing social determinants of health

2

Move Medi-Cal to a more consistent and seamless system by reducing complexity and increasing flexibility

3

Improve quality outcomes and drive delivery system transformation through value-based initiatives, modernization of systems, and payment reform



Medi-Cal Healthier California for All and CCS





Additional Information

<https://www.dhcs.ca.gov/provgovpart/Pages/medi-calhealthiercaforall.aspx>

CaAIM@dhcs.ca.gov

Stay Involved

Updates



Whole Child Model Dashboard

Aaron Toyama

Data Analytics Branch, Chief
Department of Health Care Services



Whole Child Model Evaluation: Telephone Survey with Parents and Guardians

Carrie Graham, MGS, PhD

University of California, San Francisco



Survey Overview

- **Purpose:** To assess participant satisfaction, experiences with care, and perceived changes in access to care, quality of care, and coordination of care since transition into the WCM.
- **Analysis:** Descriptive statistics and comparisons between children who transitioned to the WCM program to those in non-WCM CCS comparison counties.
- **Sample size:** 3,000 respondents from each of two groups: Parents/guardians from WCM counties and CCS parents/guardians from select non-WCM counties.



Survey Development & Next Steps

- **Survey Development:** Draft survey instrument contains validated questions identified through literature review and new items informed by:
 1. 14 in-depth, qualitative interviews with WCM parents (8 in English and 6 in Spanish, conducted Oct.-Dec. 2019);
 2. 36 Key Informant interviews with providers, advocates and stakeholders (60 total key informants, conducted Sep.-Dec. 2019);
 3. 10 pilot tests with WCM parents using survey draft (ongoing).
- **Survey Finalization:** Survey instrument will be further modified based on:
 1. Input from the Advisory Group
 2. Further pilot testing
 3. Review for literacy and understandability
 4. Translation and pilot tests in Spanish
- **Survey Administered to Parents/Guardians April-June 2020.**
 1. Option of online or over the telephone.
- **Survey Analysis:** Preliminary findings available December 31, 2020.
 1. Comparisons between WCM vs. non-WCM
 2. WCM vs. Pilots (HPSM and Rady).



Input on Survey Instrument

- Draft survey instruments were disseminated via email on January 8.
- High-level feedback is requested regarding any domains or types of questions missing from the draft survey instrument.
- Feedback is due by close of business on January 22 to DHCS at the email below:

CCSRedesign@dhcs.ca.gov



Medi-Cal Rx Update

Erica Bonnifield

Assistant Deputy Director, Health Care Benefits & Eligibility
Department of Health Care Services



Topics for Discussion

- Status & Implementation Updates
- Areas Without Impact to CCS
- Potential Areas of Impact to CCS
- Next Steps & Upcoming Activities



Status & Implementation Updates

- On December 12, 2019, DHCS officially awarded an administrative services contract to Magellan Medicaid Administration (MMA), with a contract effective date of December 20, 2019.
- Transition work has been initiated along 21 work streams, including education & outreach to program participants – managed care plans, counties, providers, and beneficiaries.
- DHCS will be integrating MMA staff into stakeholder workgroups to help further inform implementation activities.



Status & Implementation Updates (*cont.*)

Stakeholder Engagement

- On December 13, 2019, DHCS notified 30 individuals that they had been selected as members of the Medi-Cal Rx Advisory Workgroup.
- The Medi-Cal Rx Advisory Workgroup will meet in-person seven times from January 14, 2020, through April 2021 to help facilitate and further inform DHCS' ongoing Medi-Cal Rx implementation efforts.
- Throughout calendar years 2020 and 2021, DHCS will also host three larger Medi-Cal Rx Public Forums via webinar and in-person meetings. This will ensure that the broader stakeholder community stays up-to-date about Medi-Cal Rx implementation activities and timelines.



Areas Without Impact to CCS

- No changes to Medi-Cal covered pharmacy benefits or services.
- No change to CCS Paneled Provider process, or related requirements.
- No change to CMS-NET for CCS services billed on medical or institutional claims.
 - CMS-NET will continue to provide authorization support for those claims, as well as case management services and supports at the local level.



Potential Areas of Impact to CCS

- Beneficiaries should not experience a significant difference in how they receive Medi-Cal pharmacy services or benefits as a result of the transition to Medi-Cal Rx.
 - DHCS and contracted partners are working on a “no wrong door” approach to provide appropriate customer service supports to ensure continued access to medically necessary care during the transition, and will appropriately notice beneficiaries and provide helpful resources and tools to help navigate Medi-Cal Rx.



Potential Areas of Impact to CCS (*cont.*)

Area/Item	Current State	Future State (Post-1/1/21)
<p>Pharmacy Services billed on Pharmacy Claims</p> <ul style="list-style-type: none"> • Administration • Processing • Payment 	<ul style="list-style-type: none"> • Medi-Cal fee-for-service (FFS) via DHCS' Contracted Fiscal Intermediary (FI); or • Medi-Cal Managed Care Plans (MCPs) 	<ul style="list-style-type: none"> • Medi-Cal Rx Contractor
<p>Medi-Cal Rx Customer Service</p> <ul style="list-style-type: none"> • Telephone/customer service call center • Electronic portal access via DHCS website 	<ul style="list-style-type: none"> • DHCS (dependent counties) • County partners (independent counties) • Medi-Cal MCPs • DHCS' contracted FFS FI 	<ul style="list-style-type: none"> • Medi-Cal Rx Contractor, in collaboration with DHCS, will be responsible for operating a Customer Service Center 24 hours/day, 365 days/year to support all provider and beneficiary calls related to Medi-Cal pharmacy services, providing electronic portal access via DHCS' website, conducting outreach/training, and producing informing materials.



Potential Areas of Impact to CCS (cont.)

Area/Item	Current	Future (Post-1/1/21)
<p>Prior Authorizations (PAs)</p> <ul style="list-style-type: none">• Requests for Medi-Cal pharmacy benefits and/or services billed on pharmacy claims	<ul style="list-style-type: none">• DHCS (dependent counties)• County partners (independent counties)• Medi-Cal MCPs	<ul style="list-style-type: none">• Medi-Cal Rx Contractor will be responsible for 1st level adjudication of all PAs for pharmacy services billed on pharmacy claims, using existing medical necessity criteria pursuant DHCS policy as well as applicable state and federal requirements under the comprehensive Early and Periodic Screening, Diagnostic and Treatment (EPSDT) benefit.• DHCS will be responsible for 2nd level review of PA denials for these services.



Next Steps & Upcoming Activities

- DHCS will continue to evaluate the potential impacts that Medi-Cal Rx may have on CCS.
- DHCS will be sending out a survey in the coming weeks to better understand the identified potential Medi-Cal Rx areas of impact to CCS.
- As more information becomes available and policy approaches are further refined, DHCS will continue to reach out to engage members of this CCS Advisory Group for feedback and input to help inform Medi-Cal Rx implementation efforts.



Additional Information

- For more information about Medi-Cal Rx, please visit DHCS' dedicated Medi-Cal Rx website: [Medi-Cal Rx: Transition](#)
- [Medi-Cal Rx Frequently Asked Questions](#) (FAQs) - additional guidance and clarification to Medi-Cal beneficiaries, providers, plan partners, and other interested parties
- For questions and/or comments regarding Medi-Cal Rx, DHCS invites CCS AG participants to submit those via email to RxCarveOut@dhcs.ca.gov



Open Discussion

Richard Figueroa
Acting Director
Department of Health Care Services



Public Comments, Next Steps, and Upcoming Meetings

Richard Figueroa
Acting Director
Department of Health Care Services



CCS AG Meeting 1700 K Street

2020 Wednesday, April 15

Wednesday, July 8

Wednesday, October 7



Information and Questions

- For Whole Child Model information, please visit:
 - <http://www.dhcs.ca.gov/services/ccs/Pages/CCSWholeChildModel.aspx>
- For CCS Advisory Group 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 send them to CCSRedesign@dhcs.ca.gov