



California Children's Services Program

Advisory Group Meeting
July 8, 2020



If you are having webinar difficulties...

For webinar link

- Send an email to CCSRedesign@dhcs.ca.gov

To join by phone

- +1-415-655-0001
- Access code: 145 649 5142

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- 1456495142@dhcs.webex.com
- You can also dial 173.243.2.68 and enter your meeting number



Agenda

Welcome and Introductions

Updates Regarding COVID-19

Medi-Cal Rx Update

California Children's Services Program Updates

Open Discussion

Public Comments, Next Steps, and Upcoming Meetings



Welcome and Introductions

Will Lightbourne

Director

Department of Health Care Services



Updates Regarding COVID-19

Anastasia Dodson

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



CCS COVID-19 Flexibilities

- CCS Program Flexibilities
 - Telehealth
 - Annual team conferences
 - State Fair Hearings
 - Prior authorization (PA)
 - Provider enrollment
 - Well-child visits
 - High-risk infant follow-up services
- Medical Therapy Program services



Medi-Cal Rx Update

Erica Bonnifield

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



Medi-Cal Rx CCS Discussion Agenda

- Opening Remarks
- COVID-19 Project Impact
- Project Activities & Implementation Updates
- Question & Answer Session



COVID-19 Impact on Medi-Cal Rx

- DHCS continues to closely monitor the evolving COVID-19 public health emergency.
- As of today's date, there are no changes to the implementation timeline. Implementation is expected by January 1, 2021.
- DHCS continues to monitor supply and access concerns for drugs identified in COVID-19 clinical trials for off-label use, and will issue guidance to providers and other partners, as needed, should any supply shortages or access concerns arise.
- DHCS will continue to keep the stakeholder community apprised of any developments relative to COVID-19.



Medi-Cal Rx Project Activities & Implementation Updates

Contract Drug List (CDL) & Managed Care Plan Formulary Gap Analysis

- High degree of alignment (~82% of all managed care claims as of April 2020) would NOT require PA under Medi-Cal Rx.
- Since April, DHCS efforts to reduce the number of drugs requiring PA has resulted in a drop from ~17% to ~8%.
 - Additions to the CDL include: generics within same drug class that are already on CDL, new contracts for insulin pens, inhalers, and migraine medications.
- DHCS continues to analyze remaining gaps, with the immediate focus on diabetes, Chronic Obstructive Pulmonary Disease, and asthma medications.



Medi-Cal Rx Project Activities & Implementation Updates (*cont.*)

- Medi-Cal Fee-For-Service (FFS) Pharmacy Network Update
 - 97.3% of managed care pharmacy claim volume comes from pharmacies currently enrolled in fee-for-service (FFS).
 - 0.7% of managed care pharmacy claim volume is from out-of-state pharmacies.
 - DHCS is looking at out-of-state pharmacies that serve managed care plan (MCP) members, including chains and mail order arms of in-state pharmacies (e.g., Walgreens, Costco, Kaiser), to find a path to continued service delivery and payment.
 - 100% of pharmacies serving managed care beneficiaries in 19 of the state's most rural counties are also currently enrolled Medi-Cal FFS providers.



Medi-Cal Rx Project Activities & Implementation Updates (*cont.*)

- Prior Authorization Processes & Supports
 - Medi-Cal Rx process steps
 - Requesting provider submits request for PA with supporting documentation.
 - Eligibility for CCS/Genetically Handicapped Persons Program (GHPP) is confirmed.
 - Request adjudicators review medical necessity for the prescribed medication as related to the client's CCS/GHPP-eligible condition(s).
 - If additional information is needed, it is requested directly from provider.
 - If medical necessity criteria are met, a PA is issued (typically within 1 business day).
 - If medical necessity is not met, a PA denial is issued (typically within 1 business day).
 - DHCS, in partnership with Magellan, has ensured that the Medi-Cal Rx process steps are substantively aligned with current CCS/GHPP processes.



Medi-Cal Rx Project Activities & Implementation Updates (*cont.*)

- Specialized Training / Knowledge for Magellan Staff
 - DHCS will engage with Magellan to ensure they are knowledgeable about DHCS/CCS policies, as well as the specialized health care needs of the CCS population.
 - In addition, DHCS CCS subject-matter experts (SMEs), inclusive of clinical staff, will participate in training of Magellan staff on CCS/GHPP specialized health care considerations.
 - As a reminder, Magellan will not set Medi-Cal coverage and/or adjudication policy. All pharmacy policy will be established by DHCS (collaboratively with Integrated Systems of Care Division medical staff, where appropriate to meet the specialized health care needs of the CCS population).
 - DHCS will be closely monitoring PA adjudication by Magellan post-implementation to ensure established policies are being followed, and will provide additional training to adjudicators as necessary.
 - All PA denials will be reviewed by DHCS.



May 29 CCS-AG meeting on Medi-Cal Rx: Action Items & Next Steps

- Some key follow-up items from the May 29 meeting include, but are not limited to:
 - Continuing ongoing stakeholder engagement through the CCS AG meeting and other standing Medi-Cal Rx stakeholder forums.
 - Magellan adjudicators will not have access to comprehensive medical record information; however, all requests for PA should be accompanied by sufficient documentation to support medical necessity.
 - If such documentation is absent or additional information is required, Magellan will work directly and proactively with submitting providers to help facilitate decisions and/or fill in gaps relative to PA decision-making, just as CCS adjudicators do today.



May 29 CCS-AG meeting Action Items & Next Steps (Cont.)

- Additional key follow-up items from the May 29 meeting include, but are not limited to:
 - Educating and working in close partnership with Magellan on training relative to Medi-Cal coverage policy for the specialized and complex health care needs of the CCS population.
 - Exploring the possibility of multi-year PAs under Medi-Cal Rx future forward.
 - Continuing to further refine outreach and noticing strategies, and sharing draft materials with MCP partners for feedback.



Question & Answer Session



Helpful Information & Resources

- 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.
 - *Note: Updated June 30, 2020.*
- Medi-Cal Rx [Pharmacy Transition Policy](#) – DHCS' multi-faceted pharmacy transition policy, inclusive of “grandfathering” previously approved PAs from managed care and FFS, as well as a 120-day period with no PA requirements for existing prescriptions, to help support the Medi-Cal Rx transition.
- DHCS invites stakeholders to submit questions and/or comments about Medi-Cal Rx via email to RxCarveOut@dhcs.ca.gov.



California Children's Services Program Updates

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California Children's Services (CCS) Updates

1

CCS Referrals

2

Whole Child Model (WCM) Regulations

3

WCM Dashboard

4

CCS Service Authorization Requests
(SAR) Process Improvements



Open Discussion

Will Lightbourne

Director

Department of Health Care Services



Public Comments, Next Steps, and Upcoming Meetings

Will Lightbourne
Director
Department of Health Care Services



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