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Medi-Cal Managed Care Plan Name:	AIDS Healthcare Foundation dba PHC California
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1. Describe how the MCP will provide evidence-based information to members, providers, community-based organizations (CBO), tribal partners, and other local partners about the COVID-19 vaccine to encourage vaccine uptake from all members. Character limit: 2,500 characters.

The MCP will continue to develop up-to-date, evidence-based health education messaging and materials regarding COVID-19 and the COVID-19 vaccines. This education is disseminated by way of the plan's website, provider newsletters, member newsletters, postcards, flyers, primary care clinic bulletins, member forums, and provider trainings. Information regarding COVID-19 and the vaccines is also discussed in several meetings amongst staff, providers, executives, members, community members, and stakeholders. The MCP will utilize resources adapted from evidence-based content from the CDC, California Department of Public Health, California Department of Health Care Services, Los Angeles Department of Public Health, and more. Furthermore, staff who have direct contact with members, such as the Care Management team and the Member Services call center team, have been trained and provided conversation scripts to utilize when speaking to members about the vaccines and the need to vaccinate. This will aid in supporting them if they need help making the vaccine appointments, completing the appointments, and/or securing transportation to the appointments. These communication channels are intended to help members to develop understanding, trust, and completion of the COVID-19 vaccines to prevent illness and reduce the spread of this public health pandemic.

2. Describe how the MCP will provide information on where to get the vaccine within the member's community. Character limit: 2,500 characters.

The MCP will continue to provide members with up-to-date information on where to get the COVID-19 vaccine through communication channels such as the plan's website, member newsletters, postcards, flyers, and healthcare center bulletins. The plan is also in the process of getting approval to send text messages regarding the need to vaccinate to members, who must first opt-in to this type of communication. This will add another method for the MCP to provide timely information to the members. All of the different messages will include a link to the pathway of the LA County Department of Public Health's COVID-19 Vaccine Hub. On this website, members can get health education regarding COVID-19, learn about the different vaccine options, receive updates and news to become more informed. The site also has a place for visitors to

find vaccination locations near them and make appointments based on their needs. MCP members can be directed to AHF'S COVID-19 vaccine website, where they will find available vaccines near them and make appointments. All of the AHF Healthcare Centers in Los Angeles County, which comprise the majority of the MCP's PCP network, are authorized and equipped to administer the COVID-19 vaccines to members. This will support members to complete their vaccines at the same place and time that they receive their primary care. Additionally, the MCP has trained the Member Services staff to support members who state that they have not been vaccinated to find vaccine clinics near them and make appointments when needed. If members want to speak with a clinician, they are also able to get support with finding where to get the vaccines from their providers, RN Care Team Managers, and the nurse advice line.

3. Describe the MCP's plans for a local media campaign to disseminate information to members about vaccines, resources, and availability. MCPs can consider amplifying existing media campaign efforts using a variety of media channels. Character limit: 2,500 characters.

The MCP will continue to utilize the current AIDS Healthcare Foundation (AHF) media campaigns created for COVID-19 and the vaccines, to disseminate information to members. Since the health plan is under the umbrella of AHF, the content is very relevant and specific to the member demographics. AHF has created a media plan called www.getcovidvax.org. This website is coupled with billboards, community ads, flyers, and more. The intention of this is to draw the targeted people and communities to go to the website, where they can read about AHF'S (PHC California's) stance on the COVID-19 vaccines and how to get a vaccine near them. The site also has information regarding vaccine safety and FAQs which aid to provide specific support to the needs and questions of the target population. The organization will continue to regularly update the information on the media channels as news progresses and keep readers informed with the most up-to-date reports. The plan will also support AHF with amplifying the campaign to ensure it is meeting the needs and attention of more plan members.

a. Describe how the local media campaign will counter misinformation. Character limit: 2,500 characters.

The AHF local media campaign makes a big effort to properly educate the visitors of the site by countering any misinformation that they may have learned elsewhere. On the site's header, it reads: "AIDS Healthcare Foundation (AHF) is working hard to vaccinate our staff, clients, and the general public. But we can't do it without your cooperation. AHF would not be advocating for the vaccine if it wasn't safe. There are many myths circulating about the COVID-19 vaccine. Read more below and remember, do your part and get your vaccine as soon as you can." This is then followed by a series of answers to frequently asked questions regarding the vaccines to provide awareness and assurance about the safety. These are the topics listed to

help encourage members in this direction: Vaccination Planning, Getting Vaccinated, What to Expect after the Vaccination, Vaccine Limitations, People Living With HIV and Vaccination, and Myths versus Facts. Each section contains common questions regarding the subjects and evidence-based answers for the members to be informed. The information on this website is available to the general community, plan members, staff, providers, and stakeholders. Providers and staff who have direct contact with members have also been trained and provided scripts to utilize when speaking to members about the vaccines and clarifying any misinformation they may have about them. The health plan will continue to work with the organization to provide updated information on this subject to reduce misinformation.

b. Describe how the MCP will engage trusted partners and tribal partners where applicable in the local media campaign. Character limit: 2,500 characters.

Under the umbrella of AHF, the MCP will continue to participate in the strategies around advocacy and vaccine equity for the communities in need. In regards to the COVID-19 vaccine, AHF has partnered with several community organizations to provide vaccines and rally against vaccine disparity. AHF has developed specialized Affinity groups to better reach underserved populations and enhance our community partnerships. These volunteer-staffed subgroups within AHF create messaging and events to promote and provide prevention and testing services, advocacy, medical treatment, and support. These groups have set up several vaccine events in LA County for the African-American, Latinx, LGBTQIA, transgender and other underserved communities throughout this pandemic and will continue to expand the efforts.

4. Describe how the MCP will collaborate with schools and colleges to target youth who are 12-25 years of age. Character limit: 2,500 characters.

N/A – The MCP does not have members who are in school/college. Medi-Cal beneficiaries under the age of 21 are excluded from the MCP's contract with DHCS.

5. Describe the MCP's strategy for countering misinformation and reaching vaccine hesitant individuals who may have a fear of vaccine side effects, have a mistrust of the government and/or vaccine makers, believe that vaccines are not needed for persons in good health or persons who have already had COVID-19, and/or have an insistence regarding a person's right to not be vaccinated. Character limit: 2,500 characters.

The AHF media campaign makes a big effort to properly educate the visitors of the <https://ahf.org/covax> website by countering any misinformation that they may have learned elsewhere. On the site's header, it reads: "AIDS Healthcare Foundation (AHF) is working hard to vaccinate our staff, clients, and the general public. But we can't do it without your cooperation. AHF would not be advocating for the vaccine if it wasn't safe. There are many myths circulating about the COVID-19 vaccine. Read more below and remember, do your part and get your vaccine as soon as you can." This is then followed by a series of answers to frequently asked questions regarding the vaccines to provide awareness and assurance about the safety. These are the topics listed to help encourage members in this direction: Vaccination Planning, Getting Vaccinated, What to Expect after the Vaccination, Vaccine Limitations, People Living With HIV and Vaccination, and Myths versus Facts. Each section contains common questions regarding the subjects and evidence-based answers for the members to be informed. The information on this website is available to the general community, plan members, staff, providers, and stakeholders.

In addition, the MCP's Care Management Team has been calling unvaccinated members and allowing for members to ask questions about vaccinations and to provide accurate information about vaccines and their safety. The local AHF Healthcare Centers, which also act as many of the MCP members' primary care sites, have put up educational material bulletins for members to read to counter misinformation.

6. Describe how the MCP will partner with trusted community organizations (e.g., Indian health facilities, faith-based partnerships, advocacy groups, food banks, race/ethnic based organizations) that can assist with outreach, communication content and messaging, and identify strategies as defined above, which can be used to also target Medi-Cal Fee-For-Service beneficiaries. Character limit: 2,500 characters.

Under the umbrella of AHF, the MCP will continue to participate in the strategies around advocacy and vaccine equity for the communities in need. Advocacy is one of the major roles that AHF plays in the communities in which it serves. They achieve this by providing a voice for those in need and pushing the boundaries in the name of basic human rights. AHF's campaigns work together to advocate for fundamental human rights that set the tone for health and wellness for the patients. In regards to the COVID-19 vaccine, AHF has partnered with several community organizations to provide vaccines and rally against vaccine disparity. AHF has developed specialized Affinity groups to better reach underserved populations and enhance our community partnerships. These volunteer-staffed subgroups within AHF create messaging and events to promote and provide prevention and testing services, advocacy, medical treatment, and support. These groups have set up several vaccine events in LA County for the African-American, Latinx, LGBTQIA, transgender and other underserved communities throughout this pandemic and will continue to expand the efforts.

7. Describe how the MCP will collaborate with local public health agencies to coordinate with vaccine response plans and learn best practices, including what has and has not worked. Character limit: 2,500 characters.

The MCP currently participates in several workgroups and committees with other local public health agencies, managed care plans, health education programs. This also includes groups that support the HIV/AIDS positive population and organizations that specialize in the needs of the LBGTQIA community. Moreover, the plan receives supportive resources from the DHCS Health Education and Cultural & Linguistics Workgroup (HECLW) and the MMCD Health Education group. The MCP will continue to work with these other groups to improve vaccine completion rates for this population based on their social determinates of health and specific needs. Collaborating with these groups will persist to help the MCP learn about the barriers that others may be facing and create solutions based on best practices learned. This type of collaboration has helped the plan gain insight and learn new methods from others with similar goals in an effort to be more innovative and not 'reinvent the wheel.'

8. Describe the MCP's efforts to build additional capacity to address member vaccination needs in future years (identification, education, and follow-up). Character limit: 2,500 characters.

The MCP developed and deployed an internal report based on DHCS-supplied enrollee-level COVID-19 vaccination data for its care management activities. The RN Care Team Managers (RNCTMs) pull this report weekly when the COVID-19 vaccination source data is uploaded to the MCP's data warehouse. They use this report to identify those enrollees who have not completed their two-step vaccinations or have not yet gotten vaccinated and make outbound contacts with them to encourage vaccinations, answer questions, offer transportation, etc. The RNCTMs document the outcome of the contacts and vaccination status into the MCPs care management system. MCP leadership can monitor Care Management Team outreach efforts through reporting. The MCP intends to augment its COVID-19 vaccination tracking capabilities.

The MCP is currently working with its care management application vendor to develop a solution where the MCP can upload the aforementioned vaccination data into a new COVID-19 vaccination tracking module in the MCP's care management application or add COVID-19 vaccine information into the system's existing medication tracking module. The intent of including COVID-19 vaccination information in the care management application allows the RNCTMs, care coordinators and Member Services staff to more easily track unvaccinated and partially vaccinated enrollees and provide the appropriate messaging to these enrollees to encourage vaccination or completion of vaccination. COVID-19 booster vaccination will also be accommodated and tracked in the care management system as will any future boosters. By adding COVID-19 vaccination details into the MCP's care management application, the MCP can also include COVID-19 vaccination information in care plans, provider feedback reports and overall performance reporting.

9. Describe how the MCP will provide information and support for members with access barriers, especially transportation, navigating appointment systems, and language needs. Character limit: 2,500 characters.

The MCP currently provides support services to members that are free of charge to help them access the care they need. The services include but are not limited to language assistance and translation, transportation, behavioral health, care management, pharmacy, and community resources. A majority of the members are affected by the social determinants of health and have been identified to have many barriers in improving their health conditions. Part of the MCP's goal is to keep its members healthy. This is done by constantly promoting routine primary care doctor and specialist visits. This gives members the tools they need to help them follow their doctors' care plans and improve their health outcomes. Each member gets his or her own Registered Nurse Care Team Manager to support him or her in his or her health journey. This nurse acts as a personal health coach, and he or she helps to coordinate the member's care. The plan makes sure every member can reach a nurse 24 hours a day, seven days a week. In addition to all of this, the Member Services and Care Management team has been trained to facilitate warm handoffs to connect members to outside agencies if they need to be transferred out of the plan's scope.

10. Describe the MCP's current primary care vaccine access and how the MCP will collaborate with primary care providers (PCPs) to conduct direct outreach to unvaccinated members assigned to that clinic's/doctor's office.

- a. Describe the MCP's current primary care vaccine access, including an analysis of any pockets and/or regions that lack access. Character limit: 2,500 characters.**

Most of the MCP's members are assigned to AHF Healthcare Centers for their primary care. All of our LA County's AHF Healthcare Centers are available to provide vaccinations. In addition, many of our MCP's members fill their medications at AHF Pharmacies, which also have vaccines available.

- b. How will the MCP collaborate with PCPs to conduct outreach to members? Character limit: 2,500 characters.**

The MCP's Provider Relations Department has already sent notices to its PCPs about the availability and necessity of COVID-19 vaccinations because of the MCP's immunocompromised AIDS population. MCP PCPs, including those who are part of AHF Healthcare Centers, are encouraging unvaccinated members to get vaccinated. Most AHF Healthcare Centers offer COVID vaccinations on site.

The MCP's Care Management team shares enrollee-level COVID-19 vaccination gaps with PCPs so that they may also follow-up with enrollees and encourage vaccination. The source of vaccination gaps is the MCP's internal report based on DHCS-supplied enrollee-level COVID-19 vaccination data for its care management activities.

c. How will the MCP encourage more PCPs to enroll as vaccine providers? Character limit: 2,500 characters

AHF Healthcare Centers, which comprise the majority of the MCP's PCP network, offer COVID vaccination at its main sites and through AHF Wellness and STD Testing sites. The MCP has confirmed that its other network PCPs with the exception of one practice offer COVID vaccine onsite.

The MCP will encourage the one practice who does not offer COVID vaccination to enroll in CalVax.

11. Describe the MCP's strategy for supporting vaccination pop-up clinics and other vaccination sites, especially in communities of color and/or other communities with lower vaccination rates. Character limit: 2,500 characters.

In Los Angeles County, AHF offers COVID vaccinations to the public at four of its AHF Pharmacies, two of its AHF Wellness and STD testing sites and four of its AHF Healthcare Centers.

AHF is currently running an outdoor advertising campaign in greater Los Angeles promoting COVID vaccination.

12. Describe the MCP's strategy that can be used to make getting a vaccination as convenient and easily accessible as possible. Character limit: 2,500 characters.

The MCP's current strategy has been to have the vaccines available at all AHF Healthcare Centers and AHF Pharmacies so when members have been going in for their primary care visits or picking up their medications at AHF Pharmacies, our members have easy access to vaccinations. In addition, the MCP's Member Services and Care Management staff are available to help schedule appointments for Members as well as arrange for transportation to their vaccination appointments.

a. Describe how the MCP will collaborate with CBOs, trusted local partners, tribal partners, community health workers, promotoras, local health departments, and faith-based partnerships to serve the homebound population. Character limit: 2,500 characters.

With homebound populations, the MCP's Care Management team has already been visiting members in-person. At present, the MCP's RN Care Team Managers (RNCTMs) have not had to vaccinate homebound members in the home. However, should the occasion arise, the MCP intends to utilize its RN Care Team Managers (RNCTMs) to provide vaccinations to those who are homebound.

In addition, AHF is leveraging its affiliations and collaborating with HIV/AIDS service organizations and health advocacy groups such as Bienestar, Black Leadership AIDS Crisis Coalition, LOUD, AHF's Healthy Housing, and SPARK, and transgendered support organizations such as Flux, Unique Woman's Coalition, and TransLatin Coalition, to outreach the community to encourage vaccination including those who are homebound. Many of the MCP's enrollees are involved with the aforementioned groups.

13. Describe how the MCP will collaborate with pharmacies to share data on members' vaccine status or other efforts to use members' visits to the pharmacy as an opportunity to increase vaccination rates. Character limit: 2,500 characters.

The MCP will share the vaccination data with its pharmacies. Because all of our AHF Pharmacies have vaccines available, AHF Pharmacies will be able to utilize this information to recommend that unvaccinated members get vaccinated when they come in to pick up their medications.

14. Describe the MCP's efforts that will bring vaccinations to members, such as mobile units or home vaccinations. Character limit: 2,500 characters

The MCP plans to utilize its RNCTMs to provide vaccinations to its homebound members should the need arise.

In addition, the MCP plans on providing pop-up clinics in areas identified as populations of focus with food and other incentives for members to attend.

15. Describe how the MCP will use data obtained from DHCS to track vaccination data in real time and at granular geographic and demographic levels and identify members to outreach.

Currently, the MCP uses the weekly data update supplied by DHCS to track enrollee vaccination rates and identify gaps. Every week the report is refreshed and the MCP downloads the information from the DHCS FTP and uploads the information to the MCP's data warehouse.

Because the MCP is an AIDS-specialty plan, all of its enrollees are at risk because they are immunocompromised. The MCP's Care Management team analyzes vaccination gaps by enrollee, PCP assignment, enrollee zip codes, race/ethnicity, and language.

Because the MCP has 431 non-duals and 306 duals as of Sep. 1, the Care Management team is able to individually call unvaccinated enrollees to encourage vaccination, answer questions about the vaccine, offer transportation, etc. If the Care Management team is not able to reach the unvaccinated enrollee over the phone or through the PCP's office, the RN Care Team Manager (RNCTM) will conduct a residence drive by to attempt to reach the enrollee. If needed, the RNCTM will mail follow-up correspondence to the enroll encouraging vaccination.

Care Management team contacts with enrollees are documented in the MCP's care management application as described in the answer to question 8 above.

- a. Describe how the MCP will share data with providers, trusted partners, or tribal partners, where applicable to drive outreach. Character limit: 2,500 characters.**

The MCP internally shares the vaccination data with its Care Management team for member outreach. The MCP also shares the vaccination data with the different committees in the Managed Care Division. In addition, the Plan will utilize this information for our Public Policy and Community Advisory Committee (PPCAC) meetings to disseminate this information to members and MCP Providers who attend the meetings. The MCP will also share vaccine rate data with AHF Pharmacies so they can perform outreach campaigns.

- 16. Describe how the MCP will use data obtained from other sources to track vaccination data and identify members to outreach. Character limit: 2,500 characters.**

The MCP has been utilizing data from several creditable sources such as DHCS CAIR 2 COVID Data report. This report displays the percent of certified eligible Medi-Cal beneficiaries age 12 and older who have been administered at least one dose of a COVID-19 Vaccine each month. This file is meant to provide managed care plan partners with a snapshot of comparative performance concerning COVID-19 vaccination rates amongst MCPs, counties, and delivery systems. The MCP also receives internal data from the pharmacy reports and healthcare center data from members who completed their vaccine in our facilities or reported to have completed it elsewhere. We also have plans to survey members regarding their vaccine completion status using mail-in questionnaires and text message, once they have been approved for use.

- 17. Describe how the MCP will determine local misinformation trends and root causes for low vaccination rates/vaccine hesitancy. Character limit: 2,500 characters.**

The MCP will continue to work with AHF and local community partners to complete periodic needs assessments on the community to determine their health needs including COVID-19 and the vaccines. This includes peer-reviewed articles, local data collection, and key informant interviews. The MCP will utilize the participation of members in the Public Policy Community Advisory Committee (PPCAC) to get a first-hand insight into the members' perceptions of the COVID-19 vaccines and other related matters. This is held to provide understanding to vaccine completion rates, vaccine hesitancy, and root causes of misinformation amongst the members. The Utilization Management team is also compiling data of responses from members who stated that they did not want to complete the vaccine and the reason. This information is shared internally to understand vaccine hesitancy amongst this group. By obtaining information from members and stakeholders, the plan will be better equipped to create member-centered solutions, evaluate effectiveness, and as a result, have more positive outcomes.

18. Describe the MCP's plan for administrative oversight of the coordination activities (including controls to ensure no duplicative member incentives). Character limit: 2,500 characters.

Using the vaccination data the MCP receives from DHCS and our PBM, the MCP will crosscheck the data to confirm when members have completed their vaccination series (for those who have only received one dose of the Pfizer/Moderna vaccine) and when members have received their first dose of the Pfizer/Moderna or the J&J vaccine.

If for some reason, a member attests that they have received a first dose or completed their vaccination series, but the DHCS or PBM records do not have records to this, the MCP will require members to provide verification (copy of the vaccination card, etc.)

The MCP will provide incentives to newly vaccinated members on a weekly basis using the DHCS and PBM data. Once an incentive is issued to the member, the MCP will internally keep track with a report that is refreshed weekly.

19. Describe the MCP's intentional efforts to avoid negative unintended consequences, including but not limited to vaccine coercion. Character limit: 2,500 characters.

The MCP is continuing to follow the approved national guidelines that have been set based on evidence and best standard practices. All the education and training that is provided to staff and providers are in compliance with this federal guideline and not on personal opinions. All member education and media campaigns developed will continue to follow the direction of the federal orders and will only be intended to provide information based on such. Members will also have the option to decline participation in the member incentive programs and to opt-out of text messages at any time. All communication to members will be in the tone of suggested actions based on medically-approved information. This will continue to be monitored to prevent member grievances,

complaints, or accusations of COVID-19 vaccine coercion. Member surveys will be administered to evaluate members' satisfaction with communication they received regarding COVID-19 vaccines.

20. Describe the MCP's plan to partner with Subcontractors (i.e., delegated health plans) to increase vaccination rates, coordinate strategies, and implement this Vaccination Response Plan. Character limit: 2,500 characters.

N/A – MCP has no delegated health plans.

21. Are direct member vaccine incentives a planned strategy? If so, please explain the strategy. Character limit: 2,500 characters.

The MCP plans on implementing a member incentive program to encourage members to complete the COVID-19 vaccines. This strategy will be based on the same framework from other MCP member incentive programs, to educate members on the need to complete the action and increase their willingness to do so with a monetary incentive. The MCP currently offers gift cards to members who complete their HEDIS screening for diabetic retinal eye exams and colorectal cancer exams. These member incentive plans have successfully helped the plan to improve these HEDIS rates and improve members' health. It is a strong belief that this program can also be beneficial for members who are still in need of completing a COVID-19 vaccine. The incentive will be in the form of a gift card and will contain restrictions to ensure members do not use them for lottery, alcohol, or tobacco. The plan will also provide incentives in the form of food and free promotional items ("swag") at pop-up vaccine events, in an effort to motivate the members to participate. The program strategies will be based on best practices and currently approved education for members regarding the vaccines.

- a. If direct member vaccine incentives are used as a vaccination strategy, demonstrate how the MCP will meet DHCS guidelines for member incentives below and verify member incentives do not exceed \$50 per member (single or multi-dose). Character limit: 2,500 characters.**

The MCP plans on implementing a member incentive program to encourage members to complete the COVID-19 vaccines. This strategy will be based on the same framework from other plan member incentive programs, to educate members on the need to complete the action and increase their willingness to do so with a monetary incentive. PHC California currently offers gift cards to members who complete their HEDIS screening for diabetic retinal eye exams and colorectal cancer exams. These member incentive plans have successfully helped the plan to improve these HEDIS rates and improve members' health. It is a strong belief that this program can also be beneficial for members who are still in need of completing a COVID-19 vaccine. The incentive will be in the form of a gift card and will contain restrictions to ensure members do not use them for lottery, alcohol, or tobacco. The plan will also

provide incentives in the form of food and free swag at the pop-up vaccine events, in an effort to motivate the members to participate. The program strategies will be based on best practices and currently approved education for members regarding the vaccines.

The MCP will be offering \$50 incentives for unvaxed enrollees who complete a single J&J or two dose Pfizer/Moderna vaccination.