



State of California—Health and Human Services Agency
Department of Health Care Services



ARNOLD SCHWARZENEGGER
Governor

DATE: August 24, 2007

MMCD All Plan Letter 07012

TO: Geographic Managed Care (GMC) Plans
 County Operated Health System (COHS) Plans
 Two-Plan Model Plans
 PHP Plans

SUBJECT: IDENTIFICATION OF REGIONAL CENTER CONSUMERS

PURPOSE:

The purpose of this All Plan Letter is to inform the GMC, COHS, Two-Plan Model and PHP plans of the availability of a new monthly data file that will identify health plan members who are also Regional Center consumers. The Medi-Cal Managed Care Division (MMCD) collaborated with the Department of Developmental Services (DDS) to provide this data file to health plans in order to facilitate the identification of health plan members also receiving services from a Regional Center. It is intended that the availability of this data will result in improved communication between the health plan and the Regional Center, ultimately improving coordination of care for plan members with, or at risk of, developmental disabilities.

BACKGROUND:

Exhibit A, Attachment 11, Provision 9(D) and Provision 10 of the Two-Plan Model and GMC contracts and Sections 7.7.6 and 7.7.7 of the COHS contract requires that plans identify and refer Members with, or at risk of, developmental disabilities to the local Regional Center. Contract requirements also mandate that the plans collaborate with their local Regional Centers in providing all medically necessary diagnostic, preventive and treatment services for such members (including children eligible for the Early Start Program).

Historically, Regional Centers have been reluctant to share consumer information with Medi-Cal managed care plans because of perceived restrictions pursuant to the Lanterman Developmental Disabilities Services Act of 1969 (Welfare and Institutions Code, Division 4.5, commencing with Section 4500, et.seq.). This Act extensively

defines how the confidentiality of information regarding persons with disabilities is to be protected. In November 2000, DDS issued "Program Advisory PSB 00-5: Release of Confidential Consumer Information to Medi-Cal Managed Care Health Plans" to the Regional Center Executive Directors. This advisory cited Welfare and Institutions Code Section 4514(c) as the authority for permitting the Regional Centers to share consumer information with the health plans. However, attempts made since 2000 to facilitate the sharing of consumer data were largely unsuccessful.

In early 2007, the Department renewed efforts to facilitate the sharing of data between plans and the Regional Centers and implemented a pilot project in San Francisco, Los Angeles and San Mateo counties (as well as with Access Dental). We will implement statewide in September 2007.

The following information is provided with respect to the new monthly data file:

TECHNICAL SPECIFICATIONS:

File Name: MRCD[MESHID]YYYYMM.zip (example: For MESH ID 001, the Sept07 file will be named MRCD001200709.zip)

File Delivery Date: Monthly, by the 10th of the month

Delivery Method: Each plan's data file is only available to the designated plan.

- COHS: retrieve from the DTS mainframe
- Non-COHS: MMCD is currently working on a solution to provide these files electronically via the Medi-Cal website. Until that delivery method is available, the files will be sent via secure encrypted email in a .zip file to the designated Medical Director for each of the Non-COHS Plans.

File Retention Period:

- COHS: 3 months of reports will be retained on the DTS mainframe
- Non-COHS: Once available electronically, 3 months of reports will be retained on the Medi-Cal website

Data File Layout: Fixed length record containing data fields listed below

Data File Layout Attachment: See Attachment A

Data File generated by: Plan Name/HCP Number

Data Elements:

- MEDS-ID per MEDS;
- Client Index Number (CIN) per MEDS;
- 7-digit numeric DDS Client ID per DDS;
- Last Name per MEDS;
- First Name per MEDS;
- Middle Initial per MEDS;

- Date of Birth (DOB) per MEDS;
- Gender per MEDS;
- Residence County Code per MEDS;
- Medicare Status for Current Month per MEDS (A,B,D);
- OHC code for Current Month per MEDS;
- Primary HCP Number per MEDS;
- Primary HCP Enrollment Status [capitated and uncertified SOC members (enroll status 01, 51, S1, 55) and hold status (enroll status 05 and 59)] per MEDS;
- 2-5 HCP Number per MEDS;
- 2-5 HCP Enrollment Status [capitated and uncertified SOC members (enroll status 01, 51, S1, 55) and hold status (enroll status 05 and 59)] per MEDS;
- Regional Center ID Number per DDS; and
- Regional Center Name (table provided below).

ID#	Regional Center Name
360	F.D. LANTERMAN
361	GOLDEN GATE
362	SAN DIEGO
363	FAR NORTHERN
364	ALTA
365	SAN ANDREAS
366	TRI-COUNTIES
367	CENT. VALL
368	ORANGE
369	INLANDS
370	REDWOOD CST
371	NORTH BAY
372	KERN
373	EAST L.A
374	SO. CENTRAL
375	HARBOR
376	WESTSIDE
377	VALLEY MT.
378	NORTH L.A.
379	SAN GAB/PO
380	EAST BAY

MMCD All Plan Letter 07012
Page 4 of 4
August 24, 2007

Sort by: CIN

Creation Date: Date of data file run.

Trailer Record: Standard HCP/FAME format to supply the plans with a count of their members on the file.

Should you have any questions or require additional information regarding this letter, please contact your Contract Manager.

Sincerely,

A handwritten signature in blue ink that reads "Vanessa M. Baird". The signature is written in a cursive style with a large initial "V".

Vanessa M. Baird, MPPA, Chief
Medi-Cal Managed Care Division

Attachment

DEPARTMENT OF HEALTH SERVICES
INFORMATION TECHNOLOGY SERVICES DIVISION

RECORD LAYOUT

LAYOUT NAME: FAMEOUT
 LAYOUT NUMBER: 1 REVISION: 1
 FORMAT - FIXED, VARIABLE, ETC. (SPECIFY): FIXED
 LABELS - IBM STANDARD, ETC. (SPECIFY): IBM STANDARD
 RECORD LENGTH: 134
 ASCII OR EBCDIC: EBCDIC

SYSTEM NAME: MEDS
 ORIGINATOR: HIRO KOSHIGOE
 REVIEWER: _____
 DESCRIPTION: REGIONAL CENTER DATA FILE

DATA ELEMENT NAME	LENGTH	LOCATION		FORMAT	DESCRIPTION
		START	END		
05 WS-FAMEOUT-REC	134	1	134		
10 WS-FO-HEADER	134	1	134		
15 FILLER	2	1	2		SPACES
15 WS-FO-SSN	9	3	11		MEDS-ID PER MEDS
15 WS-FO-CIN	9	12	20		CLIENT INDEX NUMBER PER MEDS
15 WS-FO-DDS-CLIENT-ID	7	21	27		DDS CLIENT ID
15 WS-FO-LAST-NAME	20	28	47		LAST NAME PER MEDS
15 WS-FO-FIRST-NAME	15	48	62		FIRST NAME PER MEDS
15 WS-FO-MI	1	63	63		MIDDLE INITIAL PER MEDS
15 WS-FO-DOB	8	64	71	CCYYMMDD	DATE OF BIRTH PER MEDS
15 WS-FO-SEX	1	72	72	F O R M	GENDER PER PER MEDS
15 WS-FO-RESI-CNTY	2	73	74		RESIDENT COUNTY CODE PER MEDS
15 WS-MEDICARE-STAT	3	75	77		MEDICARE STATUS FOR CURRENT MONTH (A,B,D)
15 WS-FO-OHC-CODE	1	78	78		OHC CODE FOR CURRENT MONTH
15 WS-FO-HCP1-NUM	3	79	81		PRIMARY HEALTH CARE PLAN NUMBER PER MEDS
15 WS-FO-HCP1-STATUS	2	82	83		PRIMARY HEALTH CARE PLAN ENROLLMENT STATUS PER MEDS
15 WS-FO-HCP2-NUM	3	84	86		2ND HEALTH CARE PLAN NUMBER PER MEDS
15 WS-FO-HCP2-STATUS	2	87	88		2ND HEALTH CARE PLAN ENROLLMENT STATUS PER MEDS
15 WS-FO-HCP3-NUM	3	89	91		3RD HEALTH CARE PLAN NUMBER PER MEDS
15 WS-FO-HCP3-STATUS	2	92	93		3RD HEALTH CARE PLAN ENROLLMENT STATUS PER MEDS
15 WS-FO-HCP4-NUM	3	94	96		4TH HEALTH CARE PLAN NUMBER PER MEDS
15 WS-FO-HCP4-STATUS	2	97	98		4TH HEALTH CARE PLAN ENROLLMENT STATUS PER MEDS
15 WS-FO-HCP5-NUM	3	99	101		5TH HEALTH CARE PLAN NUMBER PER MEDS
15 WS-FO-HCP5-STATUS	2	102	103		5TH HEALTH CARE PLAN ENROLLMENT STATUS PER MEDS

DEPARTMENT OF HEALTH SERVICES
 INFORMATION TECHNOLOGY SERVICES DIVISION

RECORD LAYOUT

	15	WS-FO-REGIONAL-ID	3	104	106		REGIONAL CENTER ID NUMBER PER DDS
	15	WS-FO-REGIONAL-NAME	25	107	131		REGIONAL CENTER NAME (HARD CODED PER USER'S SPEC)
	15	WS-FO-HCP-CODE	3	132	134		HEALTH CARE PLAN CODE PER HCPEXT

PROGRAMS AND FILES USING THIS LAYOUT				
PROGRAM	DDName	USE *	SOURCE / DESTINATION	FILE NAME / DESCRIPTION

*USE CODES: Input - I Output - O Update - I/O