

Follow-Up Items from October 20, 2022

Directors Update

1. *Andy Imparato, Disability Rights California:* Is there data on vaccines and boosters for children?

Linnea Koopmans, Local Health Plans of California: I want to follow up on the earlier question related to childhood vaccination data being incorporated into MCPs' HEDIS scores from public health efforts. COVID 19 vaccinations are not part of the childhood immunization status.

DHCS Response: *Jacey Cooper, DHCS:* A vaccination report by age is posted on the website. I will send that link to the group.

DHCS Follow-Up: The vaccination report is available here: <https://www.dhcs.ca.gov/Documents/COVID-19/DHCS-COVID-19-Vaccine-Stats.pdf>

2. *Rosemary Veniegas, California Community Foundation:* On the California State Auditor's report, given the timing of the 2018 report period and the impacts of COVID during 2020, it seems that the Bright Futures assessments mentioned in the reports include drug use assessments as one of the domains, but that's not part of the Medicaid pediatric core measures. I have not seen drug use assessment listed in some of the past performance evaluations. Is drug use assessment now included, and will there be data that are reported out from the utilization management as listed in recommendations?

DHCS Response: *Jacey Cooper, DHCS:* Between the 2018 report and this 2022 follow up, an SBIRT screening on drug use was added as a requirement. I need to verify the applicability for kids and follow up.

DHCS Follow-Up: Managed care plans (MCPs) should be screening for drug use for all members ages 11 and older: <https://www.dhcs.ca.gov/formsandpubs/Documents/MMCDAPLsandPolicyLetters/APL2021/APL21-014.pdf>

PHE Unwinding and Implementation with Health Plans

3. *Linnea Koopmans, Local Health Plans of California:* I am glad to hear about the readiness work with counties to prepare them to begin redeterminations as the PHE ends. Is there additional work happening in 2024, given the expansion of coverage to undocumented adults at the same time as the migration of county eligibility systems?

DHCS Response: *Yingjia Huang, DHCS:* This is a large system migration from CalWIN to CalSAWS that will happen in waves. Placer and Yolo counties will begin next week. We do have a model from previous eligibility expansions, and there will be extensive training for counties. DHCS is currently in application design sessions to coordinate the expansion of eligibility to undocumented individuals 26-49 years of age as a carve-out from the PHE work. We are tracking this very closely and will be able to see from initial waves what issues arise.

Jacey Cooper, DHCS: We will share the schedule with the group. We also learned from the process of turning everything off as the PHE began and will use those lessons as we prepare to turn systems on. It is no doubt that the multiple systems and migrations are a risk for smooth implementation.

DHCS Follow-Up: The 2022-23 CalSAWS deployment schedule is available here: https://www.calsaws.org/wp-content/uploads/2023/01/2022-2023-Deployment-Schedule_COLA_Final.pdf

4. *Laura Sheckler, California Primary Care Association:* The Alternative Payment Mechanism (APM) will go live in 2024 at the same time as the MCP changes due to procurement. Is there anything in the readiness process related to criteria for engagement with health centers joining the APM? The application process for health centers includes MCP readiness and engagement. The APM will impact rate setting because there won't be any historical utilization for the MCPs that are changing. The APM applications will be released in December and health centers in counties with plan changes are concerned about whether they can apply or not without knowing these details.

DHCS Response: *Susan Philip, DHCS:* Readiness does include broad engagement with FQHCs and clinics; however, it is not specific to the APM.

DHCS Follow-Up: Federally Qualified Health Centers should begin working now with MCPs that will be in their counties, effective January 1, 2024. For a list of MCPs that will be in counties as a result of the DHCS direct contract with MCPs, see: <https://www.dhcs.ca.gov/CalAIM/Pages/MCP-RFP.aspx>.

For a list of MCPs which will be in counties are a result of county plan model changes, see:

<https://www.dhcs.ca.gov/services/Documents/MMCD/Managed-Care-Plan-County-Plan-Model-Change-Update-12-07-2021.pdf>.

CalAIM Update

5. *Chris Stoner Mertz, California Alliance of Child and Family Services*: Given that MCPs offer different Community Supports (CS) across the counties, is there more detailed information about what CS each plan provides?

DHCS Response: *Susan Philip, DHCS*: There is a summary by MCP and by county we can provide.

DHCS Follow-Up: The summary of Community Supports elections by MCP and county is available here:

<https://www.dhcs.ca.gov/Documents/MCQMD/Community-Supports-Elections-by-MCP-and-County.pdf>

6. *Brenda Grealish, California Department of Corrections and Rehabilitation*: It would be very useful for DHCS to post grantees for all PATH initiatives.

DHCS Response: *Susan Philip, DHCS*: Thank you, I will take that back for discussion.

DHCS Follow-Up: [Awarded applicants](#) for the PATH CITED Round 1A grants have been posted on the [PATH website](#).

Behavioral Health Open Forum

7. *Chris Stoner Mertz, California Alliance of Child and Family Services*: I want to underscore the comments made previously that it is important to attend to the substance use continuum of care, that is often not a focus at the same level as mental health. In particular, highlighting the youth substance use crisis we are facing currently is important. Is information for the former advisory groups still available publicly?

DHCS Follow-Up: The former advisory groups are listed on the [BH-SAC webpage](#).