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Department of Health Care Services



GAVIN NEWSOM
GOVERNOR

**Department of Health Care Services (DHCS)
Managed Care Advisory Group
March 7, 2019 Meeting Notes**

1. Introductions

Brian Keefer, Chief, Plan Oversight Section, Managed Care Quality and Monitoring Division (MCQMD), called the Managed Care Advisory Group (MCAG) meeting to order at 10:05 a.m.

2. Managed Care Quality Update

Sarah Brooks, Deputy Director of Health Care Delivery Systems, provided an update on the Governor's focus on children's health outcomes and advancements in monitoring efforts for children served in managed care. Governor's requests of California's Medi-Cal managed care plans (MCPs) were the following:

- Expand Medi-Cal to cover undocumented youth up to 26 years old;
- Consolidate pharmaceutical purchasing under the Medi-Cal program;
- Fund behavioral health workforce training and programs that have a focus on prevention, early treatment and detection;
- Fund Whole Person Care Pilot Programs that have sought to develop and or expand supportive housing services;
- Continue support for Proposition 56 funds to be utilized to increase provider payments, family planning services, developmental screening and trauma screening; and
- Expand Valued Based Payment Programs to improve care for certain high need, high-cost populations.

[More information.](#)

A. *Quality Measures Survey*

Dr. Lisa Albers, Medical Consultant II, Policy and Medical Monitoring Branch, MCQMD, provided an update on quality measures and the External Accountability Set (EAS) modifications for measurement year (MY) 2019. Surveys were sent to MCPs and stakeholders for feedback on current EAS. Results were the following:

- Gaps in the current EAS consist of behavioral health, including opioid, measures, care coordination, member services, and child preventive services.
- DHCS should consider removing the following items from the current EAS:
 - Measures for which DHCS does not hold MCPs to the MPL
 - Measures where DHCS is doing well
 - Redundant measures
- DHCS should consider adding the following to the EAS:

- All CMS Child Core Set measures
- Colorectal Cancer Screening and Chlamydia Screening
- HIV related measures
- Prenatal Immunization Status
- Adult Immunization Status

B. Managed Care Accountability Set (MCAS)

DHCS has decided to switch from the current EAS to the MCAS which consists of Center for Medicare and Medicaid Services (CMS) Adult and Child Core Measurement Sets. This is effective for measurement year (MY) 2019. Brooks emphasized that DHCS current contracts require the Medi-Cal managed care plans (MCPs) to perform at least as well as the lowest 25% of Medicaid plans in the US. For MY 2019, DHCS will require MCPs to perform at least as well as the 50th percentile of Medicaid plans in the US.

C. Accountability & Timeline

Current accountability mechanism for assuring adherence to standards were described, in particular when MCPs do not meet the MPL and additional quality improvement work is required of MCPs. Brooks stated that, moving forward in instances when MCPs do not meet the MPL, the MCP will be placed under a corrective action plan (CAP) and sanctions will be imposed for not meeting the MPL and if the CAP milestones are not met. Quality improvement work will be necessary for MCPs in order to meet the conditions of the CAP and be in compliance with the MPL.

D. Quality Reports, Annual Compliance Report & Health Disparities

DHCS will continue with the on-going publication of the EQRO technical reports, MCP specific evaluation reports, CAHPS Survey Report and Health Disparities report. In addition, DHCS will publish an annual compliance report that summarizes the compliance of MCPs in meeting system wide performance standards.

3. Updates

A. Staffing Updates

Nathan Nau, Chief, Managed Care Quality and Monitoring Division, provided a staffing update with a new position, Health Equity Officer, who will be working with disparities reports.

B. Transitions and Implementations

Michelle Retke, Chief, Managed Care Operations Division and Dana Durham, Branch Chief, Policy and Medical Monitoring provided updates on statewide transitions: Pediatric Palliative Care, Whole Child Model, and Health Homes

Pediatric Palliative Care

The Pediatric Palliative Care Waiver is ending January 1, 2019 in 10 counties which will impact 250 beneficiaries through the waiver. The beneficiaries are being served through FFS or managed care through the MCP.

Whole Child Model

Phase 1 was implemented July 1, 2018, included CenCal Health, Central CA Alliance for Health, and Health Plan of San Mateo. Phase 2 was implemented January 1, 2019 in Partnership Health Plan of CA. CalOptima was delayed from Phase 2 to Phase 3 and is scheduled to be implemented on July 1, 2019.

Health Homes

Group 1 was implemented July 1, 2018 in San Francisco County for members with chronic physical conditions and SUD, and January 1, 2019 for members with serious mental illness. Group 2 was implemented January 1, 2019 in Riverside County and San Bernardino County for members with chronic physical conditions and SUD, and July 1, 2019 for members with serious mental illness. Group 3 counties of Alameda, Imperial, Kern, Los Angeles, Sacramento, San Diego, Santa Clara and Tulare implemented July 1, 2019 for members with chronic physical conditions and SUD, and January 1, 2020 for members with serious mental illness. Group 3 represents the largest wave of implementing counties for the Program.

HHP implementation in Orange County has been moved to a Group 4 and begins January 1, 2020 for members with chronic physical conditions and SUD, and July 1, 2020 for members with serious mental illness.

4. Ombudsman Report

Michelle Retke, Chief, Managed Care Operations Division, provided an update on last quarter's reports which were posted per Senate Bill 97 with the executive summary.

5. Sanctions

Nathan Nau, Chief, Managed Care Quality and Monitoring Division, provided an update noting two Medi-Cal managed care health plans that did not meet the public hospitals enrollment target per Assembly Bill 85. The two plans are still in the appeal phase and any additional details cannot be released at this time. Two other plans are appealing their sanctions and the hearings are in May.

6. All Plan Letters (APL) and Dual Plan Letters (DPLs)

Dana Durham, Chief, Policy and Medical Monitoring Branch, provided an update on APLs and DPLs issued from November 2018-January 2019. Lists of [APLs](#) and [DPLs](#) can be found online.

7. Open Discussion

Members discussed the oversight of what providers are including in Newborn Packets, provided to new mothers. All beneficiaries need to know they can make choice regarding their care and the care of their children. These packets are integral to family services, and families/individuals with newborns must receive information packets.

8. Next Meeting

The next MCAG is scheduled for Friday, June 7, 2019 at 1700 K Street, Sacramento, CA 95814 from 10:00 a.m.- 1:00 p.m. To request future agenda items or topics for discussion please submit to advisorygroup@dhcs.ca.gov by May 24, 2019.