



October 1, 2018

Dr. Bertram Lubin, Chair
Medi-Cal Children's Health Advisory Panel (MCHAP)
Delivered via MCHAP@dhcs.ca.gov

RE: Recommendations for the Medi-Cal Children's Dashboard

Dear Dr. Lubin;

We are writing to express our appreciation for the thoughtful effort that DHCS staff and the MCHAP Pediatric Dashboard Subcommittee members have put into establishing a Medi-Cal Children's Dashboard. We so strongly value the information a Children's Dashboard can provide to identify the extent to which children enrolled in Medi-Cal are receiving the care they need and where there are areas for improvement. It is in that vein, that we are also writing to request a renewed MCHAP focus on the Children's Dashboard, and provide the following recommendations for improvements to the Children's Dashboard. Specifically, we request that MCHAP work with DHCS to:

1. **Ensure regular release of the Children's Dashboard.** On their website, DHCS indicates that "The [Children's Health] dashboard will be updated on a quarterly basis (March, June, September and December)." The latest posted Children's Dashboard release is from [March 2018](#). MCHAP should request that DHCS explain why it has not adhered to the release schedule and how they will re-

commit to meeting future release date expectations.

- 1. Incorporate disaggregated race/ethnicity data and age group data into the Children's Dashboard.** MCHAP should request that DHCS incorporate race and ethnicity breakouts for all access, utilization, and quality data indicators in the dashboard; similar to the changes made in the [June 27, 2018 Managed Care Dashboard](#), but with a focus disaggregating the data on the Medi-Cal children's population, including by ethnic subpopulations. In addition, wherever possible and appropriate, the Children's Dashboard data should be broken out by age groups (e.g., 0-5, 6-11, 12-17) to determine possible access and utilization inequities across the child lifespan.
- 2. Incorporate data on pediatric network adequacy, including corrective action plans and certification updates, into the Children's Dashboard.** DHCS recently released [annual network certification reports](#) under a brand new monitoring system and methodology. For the first time ever, DHCS has reviewed the adequacy of pediatric primary care, pediatric specialty care, mental health care, and dental networks for Medi-Cal managed care health plans. MCHAP should request that DHCS incorporate the relevant pediatric network adequacy and compliance information into the Children's Dashboard, including updated information about health plans in corrective action for not meeting pediatric network adequacy or timely access standards.
- 3. Incorporate more data on mental and behavioral health services into the Children's Dashboard.** In addition to the Specialty Mental Health Services (SMHS) data included in the Children's Dashboard (Figures 8 and 9), data on non-SMHS mental health services for children should also be included in the Children's Dashboard. Although it is described as "mild-to-moderate mental health services" in the Managed Care Dashboard for all ages, since the impairment level (i.e., "mild-to-moderate") distinction does not apply for children, DHCS should include which non-SMHS services plans are providing, broken out by health plan and age. The Children's Dashboard should also include county and statewide data on the number of referrals from the managed care plans to the county mental health plans for children to receive SMHS (and vice versa), and the disposition of those referrals.
- 4. Re-incorporate consumer experience data into the Children's Dashboard.** Not since the [June 2017 release](#), which used data from the Medi-Cal Managed Care 2013 CAHPS Survey, has consumer satisfaction data been included in the Children's Dashboard. Consumer voice is incredibly important for gauging how well Medi-Cal is serving children, and therefore, MCHAP should request that DHCS include, at a minimum, the most recent CAHPS survey data for children. DHCS should also include other relevant metrics of consumer experience, such as: grievances and appeals claims for children, children's continuity of care requests, and other consumer satisfaction data available from health plans, enrollee surveys or focus groups, and/or the Office of the Patient Advocate.
- 5. Incorporate anticipated performance and child health quality metrics into the Children's Dashboard.** The Children's Dashboard currently includes three years of data on existing child-focused performance measures (Figure 5),

however a new federal requirement will require reporting on additional child health quality measures. Specifically, beginning in 2024, all states will be required to report data annually to the federal government on all Child Core Set indicators. Currently, California reports on about half of the required indicators, meaning that there are still about a dozen additional indicators the state will now need to report. We recommend that the “Performance” section of the Children’s Dashboard be used to identify current data as well as the on-boarding timeline for the anticipated child health quality metrics from the Child Core Set.

6. **Reconvene the Pediatric Dashboard Subcommittee of MCHAP.** The MCHAP Pediatric Dashboard Subcommittee has not met for a while for an in-depth review and discussion about the Children’s Dashboard with DHCS staff and other interested stakeholders. We strongly encourage MCHAP to reconvene the Dashboard Subcommittee for regular public meetings to periodically discuss changes, modifications, and adjustments to the established Children’s Dashboard structure and metrics, as well as a more robust discussion about how the Children’s Dashboard can best be used to gauge how well Medi-Cal is delivering care for California’s children.

We request that the Medi-Cal Children’s Dashboard be agendized for the October 18th MCHAP meeting in order to discuss these recommendations.

Sincerely,

American Academy of Pediatrics, CA
Asian Americans Advancing Justice – Los Angeles
California Children’s Hospital Association
California Children’s Trust
California Coverage & Health Initiatives
California Food Policy Advocates
California School-Based Health Alliance
California WIC Association
Center for Autism and Related Disorders
Children’s Defense Fund—CA
Children Now
Council for a Strong America
March of Dimes
Maternal and Child Health Access
National Health Law Program
The Children’s Partnership
The Los Angeles Trust for Children’s Health
United Ways of California
Western Center on Law and Poverty

cc: Dr. Kenneth Hempstead, Medi-Cal Children’s Health Advisory Panel
Members of the Medi-Cal Children’s Health Advisory Panel
Jennifer Kent, Director, Department of Health Care Services