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Department of Health Care Services



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GOVERNOR

**DEPARTMENT OF HEALTH CARE SERVICES (DHCS)
California Children's Services (CCS)
Monitoring and Oversight Workgroup
April 25, 2022
12 p.m. – 4 p.m.**

MEETING SUMMARY

CCS Monitoring and Oversight Workgroup Members Attended:

Alicia Emanuel, Anna Leach-Proffer, Beverly Eldridge, Dawn Pacheco, Eileen Christine McSorley, Francis Chan, MD, Hannah Awai, MD, Heidi Merchen, Holly Henry, Janet Peck, Jody Martin, Katherine Barresi, Kathryn A Smith, Katie Schlageter, Kristen Dimou, Lori Gardner, Lorri McKey, Mary L. Doyle, MD, Meredith Wolfe, Michelle Gibbons, Mike Odeh, Nancy H Netherland, Norma Williams, Richard Chinnock, MD, Susan Skotzke, Tanesha Castaneda, Teresa Jurado

CCS Monitoring and Oversight Workgroup Members that Did Not Attend:

Farrah McDaid-Ting, Michelle Laba, MD, Pip Marks

DHCS Staff Presenters: Susan Philip, Joseph Billingsley, and Michael Luu

DHCS Consultants, Sellers Dorsey Presenters: Sarah Brooks, Meredith Wurden, Marisa Luera, Alex Kanemaru

Public Attended: 27

CCS Monitoring and Oversight Workgroup Materials: Agenda and Slide Deck

I. Welcome and Meeting Information

Sarah Brooks, DHCS Consultant with Sellers Dorsey

Welcomed members, shared meeting information, and reviewed housekeeping items

II. Roll Call

Sarah Brooks

Conducted roll call of CCS Monitoring and Oversight Workgroup members and DHCS staff, and introduced the Sellers Dorsey team

III. Status Updates and Meeting Goals

Sarah Brooks

Overview of the Monitoring and Oversight Workgroup’s charge as it relates to California Advancing and Innovating Medi-Cal (CalAIM) and Assembly Bill (AB) 133

***Michael Luu, Section Chief
Monitoring and Oversight***

Provided meeting summary and status updates from the March workgroup meeting

Sarah Brooks

Discussed April workgroup meeting goals

IV. Problem Statement and Workgroup Goals

Sarah Brooks

Presented problem statement, discussed the workgroup goals, and opened the discussion for workgroup member feedback

Summary of Discussion:

- Members commented that the problem statement should address how workgroup members will engage in this process
 - **DHCS Response:** The workgroup’s goal is to create a clear compliance framework and Memorandum of Understanding (MOU) with roles and responsibilities defined across county, DHCS, and Medi-Cal managed care plans (MCPs) within the existing guidance and requirements
- Members asked if the workgroup and DHCS are building the MOU off of existing guidance or updating existing guidance, such as Numbered Letters (NLs)

- **DHCS Response:** DHCS is focusing on existing policies currently in place for CCS oversight and monitoring. While there is parallel work going on to update NLs as needed, the current focus is on existing CCS policies. If workgroup members have input, updates, or corrections to any CCS NLs, contact the CCS policy team at CCSprogram@dhcs.ca.gov

V. Approach and Assumptions

Meredith Wurden, DHCS Consultant with Sellers Dorsey

Reviewed the approach and assumptions associated with the workgroup's charge, the concept of parking lot items, and opened the discussion for workgroup member feedback

Summary of Discussion:

- Members asked if case management could be defined and if CalAIM efforts for Enhanced Care Management intersect with the efforts in this workgroup
 - **DHCS Response:** DHCS acknowledged the overlap and need to define case management
- Members stated respite rates for registered nursing (RN) services are not equitable
 - **Action Item:** The respite rates for RN services will be added to the parking lot
- Members asked if there will be different MOU templates for the varying county models, including classic, Whole Child Model (WCM), dependent, and independent
 - **Action Item:** DHCS to add different templates per county model to the assumptions list

VI. Compliance Program Elements

Marisa Luera, DHCS Consultant with Sellers Dorsey

Discussed the compliance program framework

***Susan Philip, Deputy Director
Health Care Delivery Systems***

Discussed the compliance program outline

Marisa Luera

Discussed the compliance program approach

Summary of Discussion:

- Members discussed the need for more CCS paneled physicians and to make the paneling process smoother and more transparent
 - **DHCS Response:** DHCS will look further into the process for physicians to become CCS paneled providers
 - **Action Item:** DHCS followed-up with workgroup members regarding the process and challenges for CCS paneled providers
- For implementation, members requested that DHCS train counties on new and existing CCS program guidance
 - **DHCS Response:** DHCS will look into training opportunities and technical assistance as part of the CCS program guidance
- Members commented that “availability of resources” and “fiscal” implications need to be considered for the compliance program framework
 - **Action Item:** DHCS requests a follow-up conversation regarding the development of AB 133 initiatives
- Members asked about delineating roles and responsibilities between counties and DHCS, as well as documenting county outreach and DHCS responses
 - **Action Item:** Sellers Dorsey to add to the county/DHCS implementation workplan

VII. CCS Documents and Other Relevant Materials

Sarah Brooks

Discussed initial criteria for NLs inventory from March meeting, CCS documents and other relevant materials, and assessing the CCS administrative structure for compliance purposes

Summary of Discussion:

- Members asked why the inventory list of NLs did not include notices with Special Care Centers and provider responsibilities
 - **Action Item:** DHCS will look into this and provide a response to workgroup members
- Members requested the five performance measures be added to the discussion for this workgroup
 - **Sellers Dorsey Response:** These performance measures will be reviewed in a later workgroup meeting
- Members expressed inaccuracy of the WCM dashboard
 - **Sellers Dorsey and DHCS Response:** The intent is to include a comprehensive list of CCS program documents and other materials to review for preliminary research purposes

VIII. Updated Timeline

Alex Kanemaru, DHCS Consultant with Sellers Dorsey

Reviewed the updated workgroup timeline and preliminary DHCS MOU timeline

Summary of Discussion:

- Members asked about the process moving forward and if there will be an opportunity for the workgroup to be divided into groups based on expertise, such as administrators and medical
 - **Sellers Dorsey Response:** Sellers Dorsey will look into this and determine if sub-workgroups are needed through continued discussions and dialogue with the workgroup
- Members asked to be more involved in the oversight and monitoring process, and suggested giving members homework or other materials to review and provide feedback on between meetings
 - **Action Item:** Sellers Dorsey will assign additional tasks, as needed, between workgroup meetings
- Members requested time built in for county board of supervisors, county counsel, and county director to review and sign the MOU
 - **Action item:** Sellers Dorsey to review timeline and include these steps into the county/DHCS implementation workplan

IX. Public Comment
Sarah Brooks

No public comments received

X. Next Steps
Sarah Brooks

Provided information on next steps and relayed contact information for questions or feedback

XI. Other DHCS Updates
Joseph Billingsley, Assistant Deputy Director
Health Care Delivery Systems

Reiterated the public health emergency (PHE) unwinding information, DHCS top goal, how members can help, and phases for the unwinding communication strategy

Summary of Discussion:

- Members asked about gaps in the system during the PHE unwinding and how DHCS is going to ensure member continuity of services
 - **Action Item:** DHCS will further look into this and provide a response