

Whole Child Model Clinical Advisory Committee

Meeting Agenda

Wednesday, December 13, 2023

12:00 p.m. - 1:00 p.m.



Held Via Teleconference

1. Members of the public wishing to join the meeting may do so as follows:
Join on your computer, mobile app, or room device.

[Click here to join the meeting](#)

Meeting ID: 227 306 457 634

Passcode: pHrHwx

[Download Teams](#) | [Join on the web](#)

Or call in (audio only)

[+1 872-242-9041,,190066051#](#)

Phone Conference ID: 190 066 051#

[Find a local number](#) | [Reset PIN](#)

2. Members of the public wishing to provide public comment on items not listed on the agenda that are within jurisdiction of the Committee or to address an item that is listed on the agenda may do so in one of the following ways.
 - a. Email comments by 5:00 p.m. on Tuesday, December 12 to the Clerk of the Advisory Committee at tneves@ccah-alliance.org
 - i. Indicate in the subject line "Public Comment." Include your name, organization, agenda item number, and title of the item in the body of the e-mail along with your comments.
 - ii. Comments will be read during the meeting and are limited to five minutes.
 - b. Public comment during the meeting when that item is announced.
 - i. State your name and organization prior to providing comment.
 - ii. Comments are limited to five minutes.
3. Mute your phone during presentations to eliminate background noise.
 - a. State your name prior to speaking during comment periods.
 - b. Limit background noise when unmuted (i.e., paper shuffling, cell phone calls, etc.)

HEALTHY PEOPLE. HEALTHY COMMUNITIES.

1. **Call to Order by Chairperson Diallo 12:00 p.m.**
 - A. Roll call.
 - B. Supplements and deletions to the agenda.

2. **Oral Communications. 12:10 p.m.**
 - A. Members of the public may address the Committee on items not listed on today's agenda that are within the jurisdiction of the Committee. Presentations must not exceed five minutes in length, and any individual may speak only once during Oral Communications.
 - B. If any member of the public wishes to address the Committee on any item that is listed on today's agenda, they may do so when that item is called. Speakers are limited to five minutes per item.

Consent Agenda Items: 12:15 p.m.

3. **Approve WCMCAC Meeting Minutes of September 21, 2023.**
 - A. Reference materials: Minutes as above.
 - B. Grievance Update S. Sanders
 - C. WCM Referral Volumes J. Stromsoe, RN

Regular Agenda Items: 12:20 p.m.

4. **Old Business**
 - A. Redetermination G. Taboada
 - B. Transportation Update G. Taboada
 - C. ECM/CS Update J. Hampton

5. **Open Discussion: 12:50 p.m.**
 - A. Group may discuss any urgent items.

6. **Adjourn: 1:00 p.m.**

The next meeting of the Whole Child Model Clinical Advisory Group, after this December 13, 2023 meeting:

- Thursday, March 21, 2024 12:00-1:00 p.m.
Locations: Teleconference via MS Teams

Members of the public interested in attending should call the Alliance at (831) 430-5556 to verify meeting dates prior to the meetings.

The complete agenda packet is available for review on the Alliance website at: www.ccah-alliance.org bottom of page under Community – Meetings and Events.



Whole Child Model Clinical Advisory Committee



Meeting Minutes

Thursday, September 21, 2023

12:00 p.m. - 1:00 p.m.

Teleconference Meeting

Committee Members Present:

Cal Gordon, MD	Provider Representative
Patrick Clyne, MD	Provider Representative
Devon Francis, MD	Provider Representative
Allyson Garcia, MD	Provider Representative
Salvador Sandoval, MD	Provider Representative
John Mark, MD	Provider Representative
Lena Malik, MD	Provider Representative

Committee Members Absent:

Camille Guzel, MD	Provider Representative
Ibraheem Al Shareef, MD	Provider Representative
Sarah Smith, MD	Provider Representative
Jennifer Yu, MD	Provider Representative
James Rabago, MD	Board Representative

Staff Present:

Dianna Diallo, MD	Medical Director
Yasuno Sato, Pharm. D.	Clinical Pharmacy Manager
Luis Somoza	Member Services Director
Andrea Swan	QI & Population Health Director
Jennifer Mockus, RN	Community Care Coordination Director
Tammy Brass, RN	Utilization Management Director
Kristynn Sullivan	Program Development Director
Kelsey Riggs, RN	Pediatric Complex Case Mgmt. Manager
Jenna Stromsoe, RN	Complex Case Management Supervisor
Jacqueline Morales	Provider Relations Representative
Jessica Hampton	ECM/CS Manager
Sarah Sanders	Grievance & Quality Manager
Rosa Guerrero	Administrative Assistant

Other Representatives Present:

Kenny Ha	Aveanna Healthcare
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1. Call to Order by Chairperson Diallo.

Chairperson Dr. Dianna Diallo called the meeting to order at 12:00 p.m.

Roll call was taken.

2. Oral Communications.

Chairperson Dr. Diallo opened the floor for any members of the public to address the Committee on items not listed on the agenda.

No members of the public addressed the Committee.

3. Consent Agenda Items.

A. Approval of WCMCAC Minutes

Minutes from the June 15, 2023 meeting were reviewed.

B. Grievance Update

Grievance data was provided to the Committee.

M/S/A Consent agenda items approved.

4. Regular Business.

A. Whole Child Model California Children's Services (CCS) Referral Updates

Jenna Stromsoe shared CCS referral data from Q2, Total referral approval rates by county for Q2 includes Merced – 77.7%, Monterey – 71.1% and Santa Cruz – 70.4%. Average approval rate is 73.3%.

CCS Referral Approval Counts by County:

Merced: 139

Monterey: 180

Santa Cruz: 71

Total Referrals: 390

B. Enhanced Care Management (ECM) and Community Supports (CS) Peds Update

Jessica Hampton provided an ECM Update. ECM Youth Populations of Focus:

- Homeless Families or Unaccompanied Children/Youth Experiencing Homelessness
 - Children, Youth, and Families with members under 21 years of age
- Children and Youth at Risk for Avoidable Hospital or ED Utilization
- Children and Youth with Serious Mental Health and/or Substance Use Disorder (SUD) Needs
- Children and Youth Enrolled in CCS or CCS WCM with Additional Needs Beyond the CCS Condition
- Children and Youth Involved in Child Welfare
- Birth Equity Population of Focus– January 2024
- Children and Youth Transitioning from a Youth Correctional Facility- January 2024
 - Post-release services will be offered by MCP on January 1, 2024
 - Pre-release services go-live timeline April 2024- March 2026
- Sub Populations:
 - Pregnant and Post-Partum
 - Individuals with Intellectual/Development Disabilities

The Community Supports offered was shared with the committee. Santa Cruz will open a sobering center beginning in January 2024. Youth providers by county was also shared with the committee. Currently 38,112 members are eligible for ECM. The majority of members are high-risk in the SMI/SUD categories. Current ECM authorization counts indicate homeless, high utilizers and SMI/SUD are the most active populations. The most requested CS services for youth include housing services, housing transition and navigation, housing deposits, housing tenancy, environmental accessibility adaptations (EAA) and meals. Currently, 52 members are enrolled. Authorization sources and trends were shared with an increase in May 2023. ECM

authorizations are mostly internal with CS external A provider asked about benchmarks. The Alliance is collecting data and working on internal goals. A factor that is taken into consideration is capacity and availability of providers. A provider asked about the criteria for high utilizers, It was noted, DHCS has specific eligibility criteria that the Alliance utilizes. Also noted was the youth population includes those individuals 20 years and under. Jessica encouraged providers to refer members if they believe they are eligible.

C. Pharmacy Update

Yasuno Sato presented a Pharmacy Update.

It was noted, Nirsevimab (Beyfortus) was approved by the US Food and Drug Administration (FDA) on July 17, 2023. Nirsevimab is a long-acting monoclonal antibody product intended for use in newborns and infants to protect against (medically attended) respiratory syncytial virus (RSV) disease. Nirsevimab is recommended for: All infants younger than 8 months born during or entering their first RSV season, including those recommended by the American Academy of Pediatrics (AAP) to receive palivizumab; Infants and children aged 8 through 19 months who are at increased risk of severe RSV disease and entering their second RSV season, including those recommended by the AAP to receive palivizumab.

Per the FDA label, children who have received nirsevimab should not receive palivizumab for the same RSV season. On August 3, 2023, the Advisory Committee on Immunization Practices (ACIP) of the Centers for Disease Control and Prevention (CDC) voted unanimously in favor of recommending use of nirsevimab as indicated in its FDA package insert. The ACIP also voted unanimously for inclusion of nirsevimab in the Vaccines for Children (VFC) program. Equity in access to nirsevimab is of the highest priority to the AAP. As with any new product, nirsevimab may not be readily available in all clinical settings, including birthing hospitals and primary care settings, particularly in the first season of implementation of this recommendation. If nirsevimab is not available or not feasible to administer, high-risk infants who are recommended to receive palivizumab in the first or second year of life should receive palivizumab, as previously recommended, until nirsevimab becomes available. The Alliance will continue to cover Synagis and is looking forward to Beyfortus availability for infants.

It was noted, Stanford is committed to giving everyone Beyfortus. Another provider noted he is excited about this medication, and it could be a game changer for emergency departments. Stanford has had families asking for Beyfortus and for off label usage. It was noted, it may be an easier process for FQHCs to obtain Beyfortus. A provider expressed concerns with commercial plans obtaining the medication, and it being approved before the season. A provider noted an in-service for providers would be helpful.

D. Medi-Cal Redetermination & Continuous Coverage Unwinding

Luis Somoza presented on Redetermination & Coverage. Due to the COVID-19 public health emergency (PHE):

- On December 29, 2022, the Consolidated Appropriations Act was enacted, which included provisions affecting the continuous coverage requirement.
- Continuous coverage is no longer linked to the COVID-19 PHE as of April 1, 2023.
- Starting in April, members with a June renewal date began receiving redetermination paperwork in the mail.
- Counties have 14 months to complete their backlog of redeterminations.
- Members have 90 days to submit paperwork.

This is a new process for the Alliance. There are concerns about member awareness around the redetermination process. The Alliance response includes:

- Member Outreach Materials
- Alliance Website Updates
- Call Center Phone Tree
- County Partnership
- Member Texting Campaign
- Live Outreach
- Monitoring

Redetermination and disenrollment data was shared with the committee for June, July, and August for all Alliance counties. County partners currently have a backlog of redetermination packets. Counties are also going through a system change which is causing some issues. The California Department of Healthcare Services has estimated they expect about 21% of the state population to fall off of Medi-Cal, which would be approximately 7,000 Alliance members per month.

5. Open Discussion.

Chairperson Diallo opened the floor for the Committee to have an open discussion.

Dr. Mark noted Stanford is seeing more RSV and hospitalizations, there may be more around November. The Palliative Care division is up and running and a division chief is joining in November from St. Jude. There are 6 staff members with more outreach being conducted.

Dr. Gordon shared The Association of Bay Area Health Officials has released masking orders for the Bay Area. In Santa Cruz, masking will be required for acute county staff. The state is looking at listing flu and RSV each winter season. Dr. Sandoval noted Merced wastewater surveillance has been valuable. RSV rates have gone down in Merced. The First 5 Symposium was successful with several Alliance staff in attendance. Dr. Garcia noted in Monterey County there has been a COVID wave the last few weeks. Dr. Francis noted Santa Cruz County is seeing COVID and more illnesses with back to school.

The meeting adjourned at 1:00 p.m.

Respectfully submitted.

Ms. Tracy Neves
Clerk of the Advisory Committee

The Whole Child Model Clinical Advisory Committee is a public meeting.



Whole Child Model Grievances

Whole Child Model Clinical Advisory Committee: WCMCAC

Prepared by: Sarah Sanders, Grievance and Quality Manager

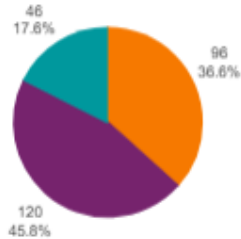
December 13, 2023

WCM Q3 2022– Q3 2023 GRIEVANCES by LOCATION

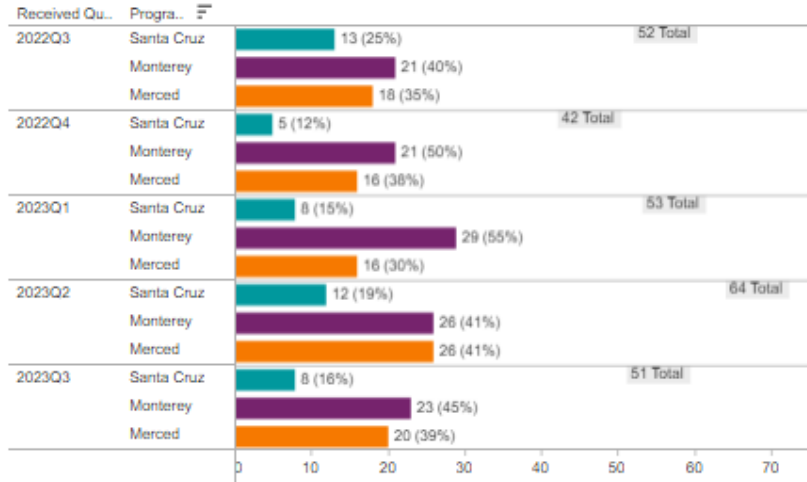
ProgramCounty

- Santa Cruz
- Monterey
- Merced

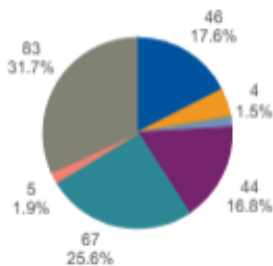
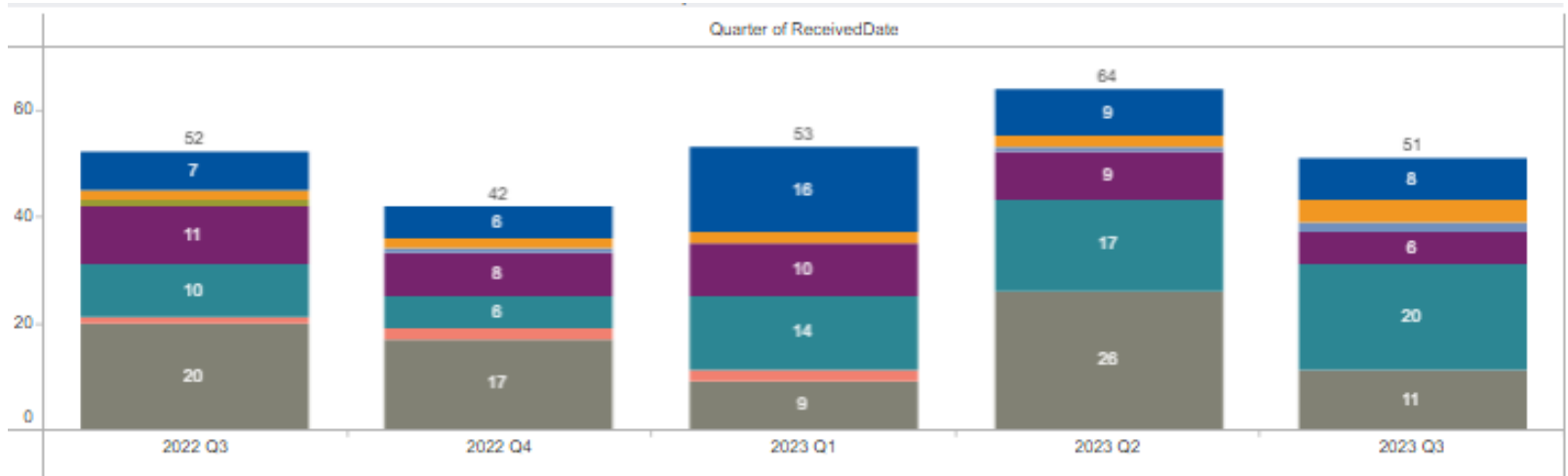
WCM Grievances by Member Location
Last update: 12/8/2023 7:55:13 AM



WCM Grievances by Member Location by Quarter
Last update: 12/8/2023 7:55:13 AM



WCM Q3 2022 through Q3 2023 GRIEVANCES by TYPE



- Appeal
- Benefits-Claims-Cove...
- DME
- Other
- Provider
- Quality of Care-Service
- Timely Access
- Transportation





WCM Review

Q3 2023 TRENDS

REVIEW and TRENDS:

1. WCM Grievances are closely monitored to identify trends by the Staff Grievance Review Committee (SGRC)
2. WCM Grievances **decreased** during Q3 2023
3. Volume Increased:
 - ❖ Quality of Care/Services
4. Recurring themes continue:
 - ❖ Appeals – WES Genetic Testing
 - ❖ Provider Billing (**decreased**)
 - ❖ Transportation (**decreased**)

WCM **GRIEVANCE** Actions



- Continue engaged monitoring and interventions.
- Monitoring adults exiting from WCM program.
- **Solicit input:** Clinical Partners, please share if you would like to see something specific with future reports.





Pediatric Complex CM

Kelsey Riggs, Peds CCM Manager

Ashley McEowen, Peds CCM Supervisor

Jenna Stromsoe, Peds CCM Supervisor

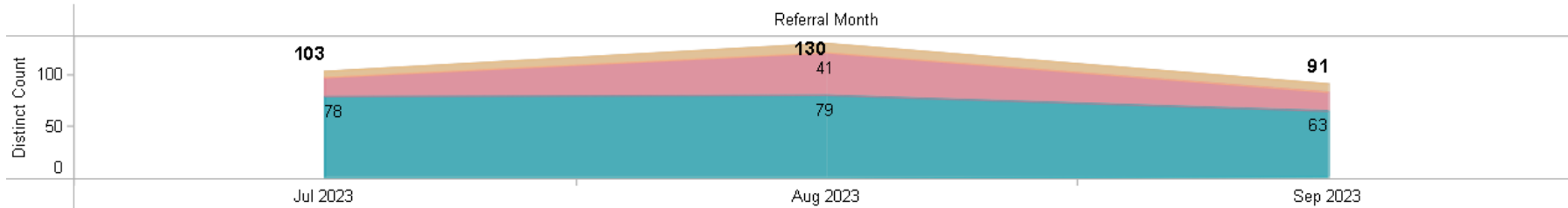
December 2023

WCM Referral Volumes

CCAH CCS Referral Trending: Q3 2023

CM CCS Referral Assessments: Referral Trending

Last Refresh date: 11/8/2023 8:50:23 AM Counties: All



Measure Names

- Count Pending
- Count Denied
- Count Approved
- Count Other
- Count Corrected



Referral Counts

Q3: Alliance Referrals by County

- Merced: 126
- Monterey: 139
- Santa Cruz: 59
- Total Referrals: 324



Referral Approval Rates

Q3: CCS Referral Approval Rates by County

- Merced: 65.1%
- Monterey: 66.2%
- Santa Cruz: 78.0%

- Average Approval Rate: 67.9%



December 2023:
Total WCM Enrollment: 7,860
Age Out Count: 64



A young child is running through a spray of water, smiling broadly. The child is wearing a white t-shirt with a colorful graphic that reads "THIS WORLD FULL OF HOPE It's BEGIN TO PROCEED WITH POSITIVE". The background is a soft, out-of-focus green field with a blue sky. The overall mood is joyful and energetic.

QUESTIONS?



Medi-Cal Redeterminations & the Continuous Coverage Unwinding

Gisela Taboada, Member Services Call Center Manager
Whole Child Model Clinical Advisory Committee
December 13, 2023

COVID-19 Public Health Emergency

- On December 29, 2022, the Consolidated Appropriations Act was enacted, which included provisions affecting the continuous coverage requirement.
- Continuous coverage is no longer linked to the COVID-19 PHE as of April 1, 2023.



Continuous Coverage Unwinding

- Starting in April, members with a June renewal date began receiving redetermination paperwork in the mail.
- Counties have 14 months to complete their backlog of redeterminations.
- Members have ~90 days to submit paperwork.



Alliance Response

- 📁 Member Outreach Materials
 - DHCS Toolkit
- 📄 Alliance Website Updates
- 📞 Call Center Phone Tree
 - Waiting message
- 👥 County Partnership
 - Member contact information exchange
- 📱 Member Texting Campaign
 - Contract with a text messaging vendor
- 📞 Live Outreach
 - Live outreach calls to members at risk of losing Medi-Cal coverage for not completing their redetermination paperwork.
- 📊 Monitoring
 - Measurement of impact of Member Engagement/Member Touchpoints
 - Monitoring number of members being disenrolled from Medi-Cal

Update your Medi-Cal!

Check in with the Alliance. → Check in with your county. → Make sure you're covered!

Have you moved? Did you get Medi-Cal coverage during the pandemic?

You will need to update your county office with any changes to your information.

For more information, visit www.thealliance.health/renew or use your smartphone's camera to scan the QR code.



Impact Monitoring:

September

Category	Santa Cruz	Monterey	Merced	Total
Redetermination	3,802	7,886	6,835	18,523
Disenrolled	1,014	2,033	1,872	4,919

October

Category	Santa Cruz	Monterey	Merced	Total
Redetermination	3,995	8,294	6,712	19,001
Disenrolled	975	2,028	1,906	4,909

November

Category	Santa Cruz	Monterey	Merced	Total
Redetermination	4,419	9,939	6,838	21,196
Disenrolled	1,022	2,265	1,781	5,068



Questions?





CalAIM Enhanced Care Management & Community Supports CCS Update

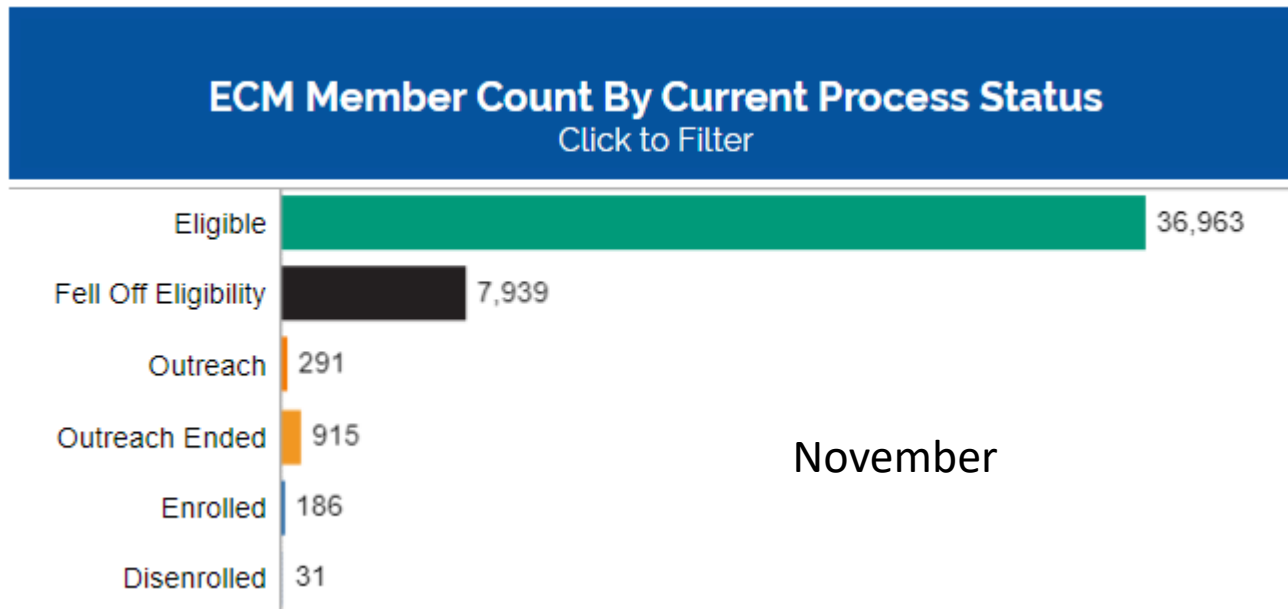
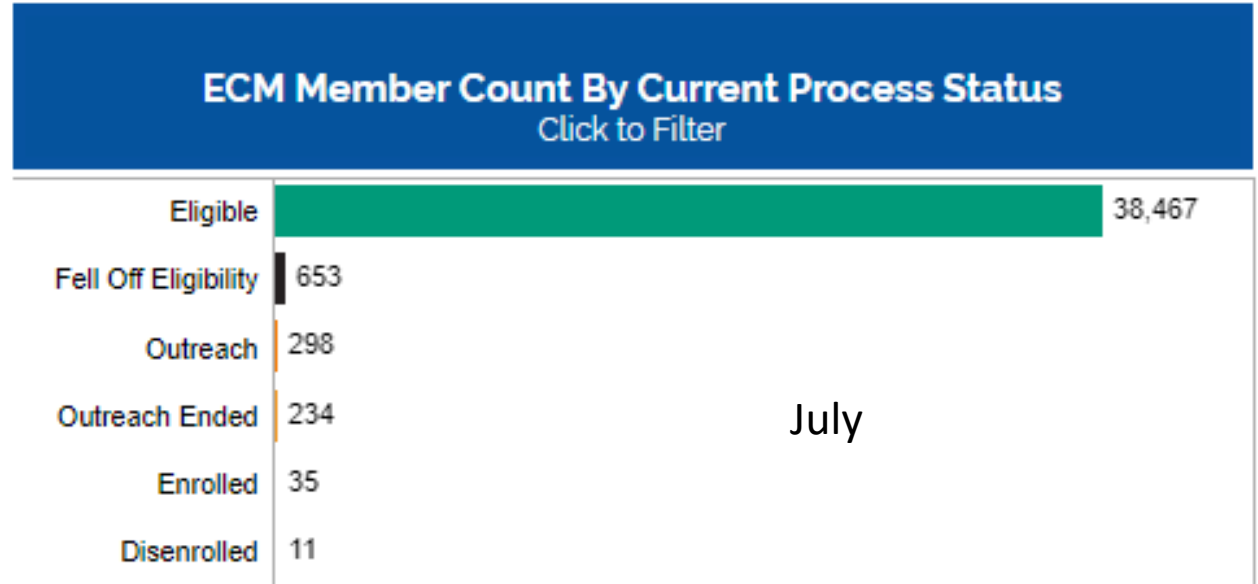
Jessica Hampton, ECM/CS Manager
Whole Child Model Clinical Advisory Committee
December 13, 2023

Youth Providers by **County**

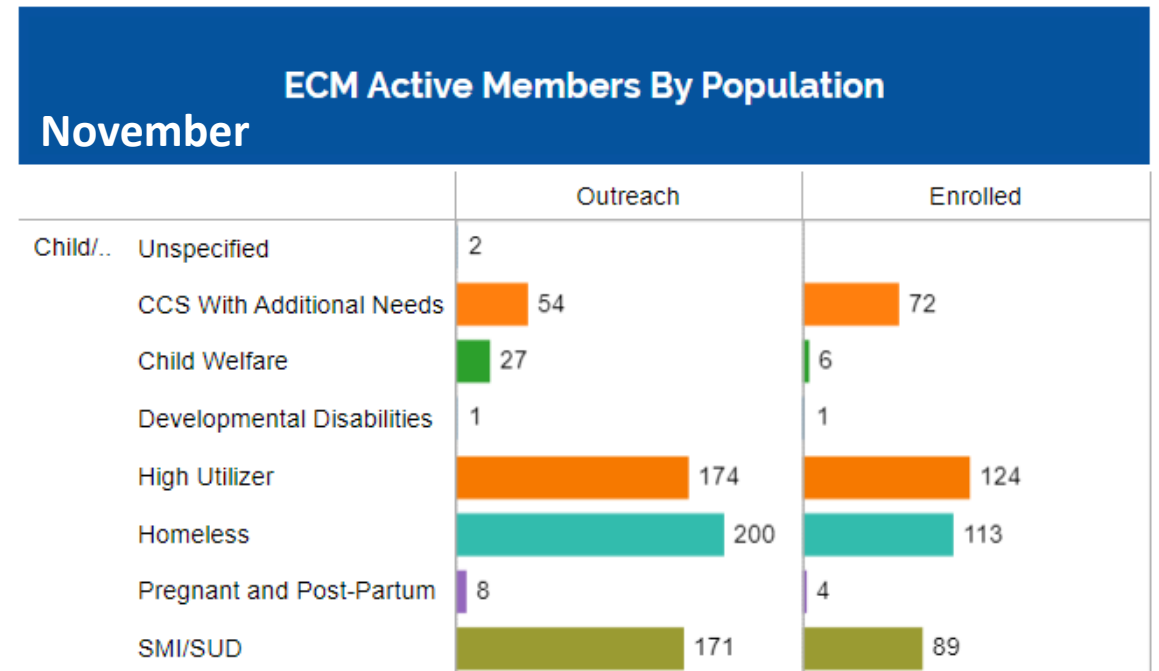
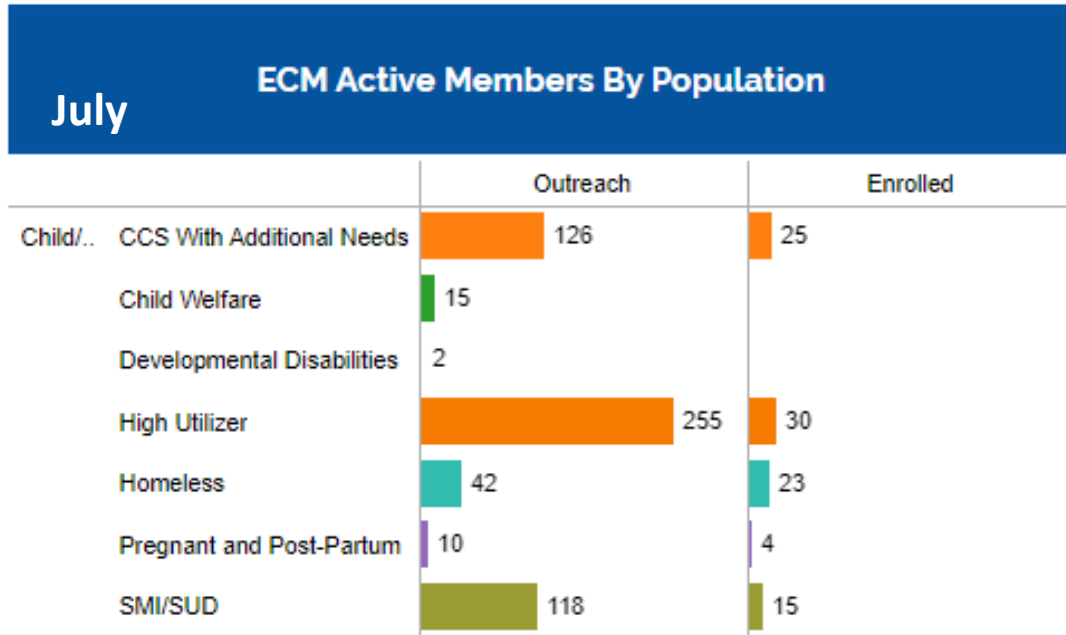
Merced County	Monterey County	Santa Cruz County
Pair Team	Seneca	Jacob's Heart
King's View	Community Bridges WIC	Community Bridges WIC
Sierra Vista	Costal Kids Home Care	Salud Para La Gente
Love Focus	Access Case Management	HERS -Helping Empower Reentry Services
	Pacific Rehab and Pain	Coastal Kids Home Care
		Pacific Rehab and Pain



All Counties

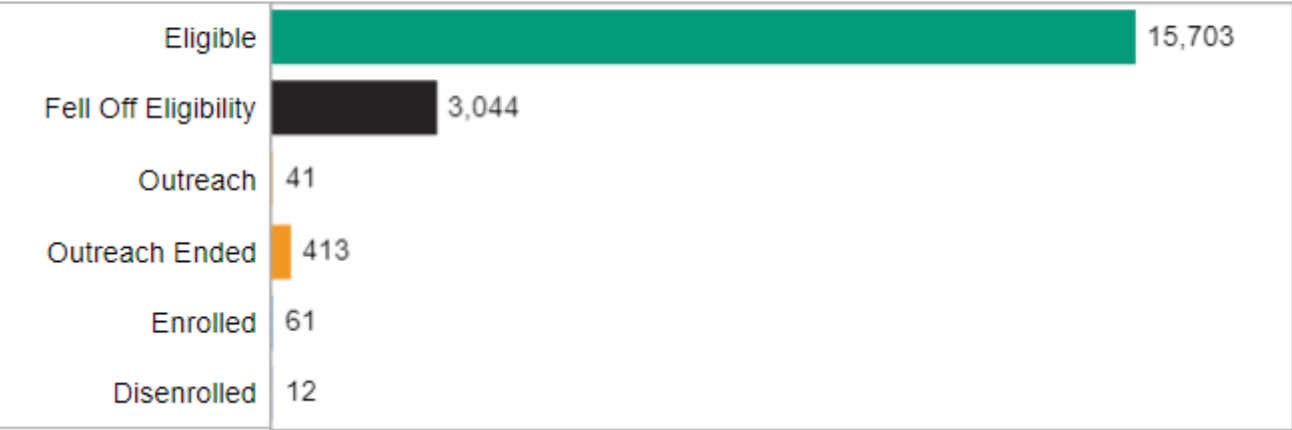


All Counties



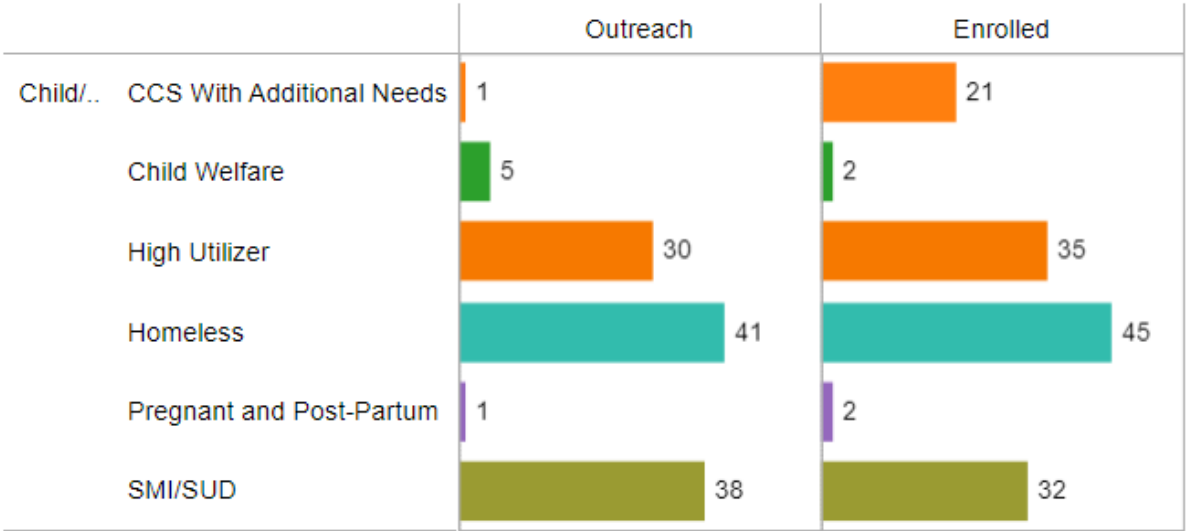
ECM Member Count By Current Process Status

Click to Filter



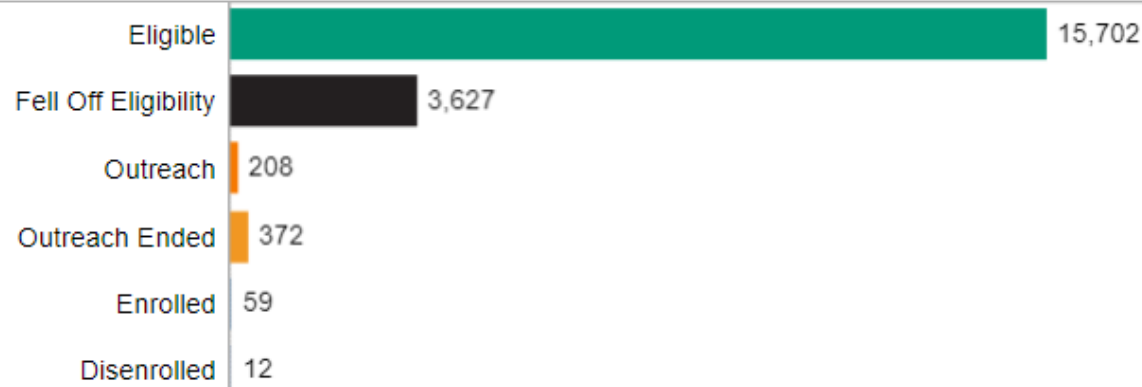
Merced County

ECM Active Members By Population



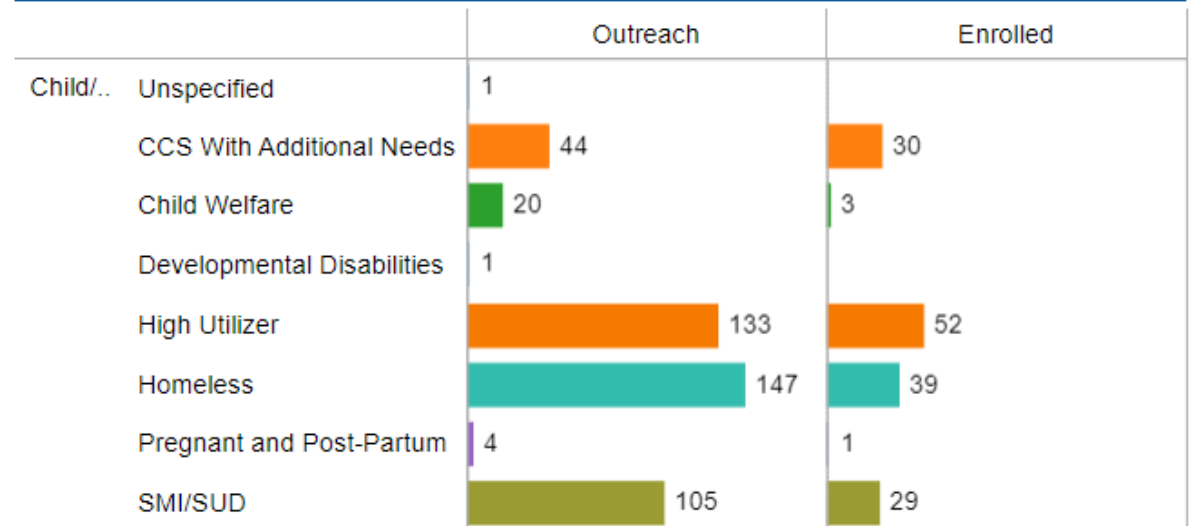
ECM Member Count By Current Process Status

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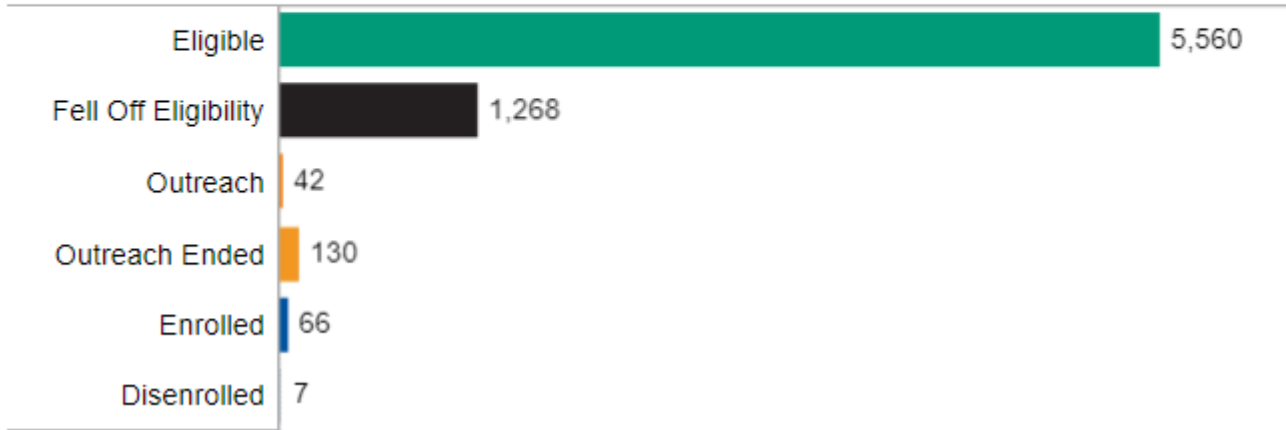
Monterey County

ECM Active Members By Population



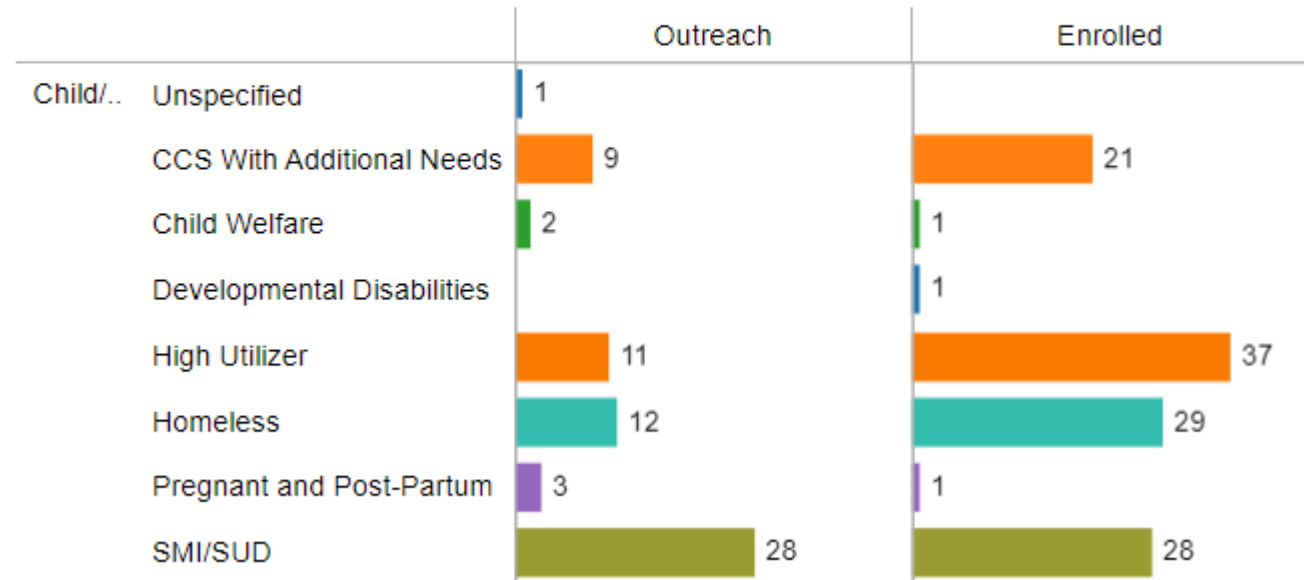
ECM Member Count By Current Process Status

Click to Filter



Santa Cruz County

ECM Active Members By Population



ECM and CCS Roles

- *ECM Care Managers act as “air traffic control” and are responsible for whole-child care coordination between and among all participants in the child’s care plan.*
- *ECM provider:*
 - *expected to leverage CCS’ comprehensive assessment and the care plan developed by CCS in developing the Member’s ECM care management plan.*
 - *expected to leverage CCS WCM’s Individual Care Plan (ICP) when developing the Member’s ECM care management plan.*
 - *consider members’ risk-levels and CCS eligibility determination when developing the Member’s ECM care management plan.*
- *Examples of Applicable ECM Services:*
 - *addressing other needs that are not already being met by CCS/CCS WCM*
 - *Facilitating access to Community Support services*
 - *Coordinating the transition from hospital to inpatient rehabilitation and to home after a traumatic injury*
 - *Coordinating care across all applicable delivery systems and care coordinators.*





Whole Child Model Clinical Advisory Committee Meeting Calendar 2024

Thursday, March 21	12:00 - 1:00 PM
Thursday, June 20	12:00 - 1:00 PM
Thursday, September 19	12:00 - 1:00 PM
Thursday, December 19	12:00 - 1:00 PM

Meetings will be held via MS Teams

