

Whole Child Model Clinical Advisory Committee



Meeting Agenda

Thursday, June 16, 2022

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:
 - a. **Join on your computer, tablet or smartphone:**
[Click here to join the meeting](#)
 - b. **Or call in (audio only):**
United States: 1+ (323) 705-3950
Phone Conference ID: 977 284 60#
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 Wednesday, June 15, 2022 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.)

1. **Call to Order by Chairperson Bishop 12:00 p.m.**
 - A. Roll call.
 - B. Supplements and deletions to the agenda.
2. **Oral Communications. 12:10 p.m.**

HEALTHY PEOPLE. HEALTHY COMMUNITIES.

- 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 March 17, 2022

- A. Reference materials: Minutes as above.
- B. Grievance Update S. Sanders

Regular Agenda Items: 12:20 p.m.

4. Old Business

- A. Pharmacy Carve-Out N. Sachdeva, Pharm D.
- B. WCM Updates T. Brass, RN

5. New Business

- A. Transportation Needs T. Brass, RN, G. Taboada

6. Open Discussion: 1:20 p.m.

- A. Group may discuss any urgent items.

7. Adjourn: 1:30 p.m.

The next meeting of the Whole Child Model Clinical Advisory Group, after this June 16, 2022 meeting:

- Thursday September 15, 2022, 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/boardmeeting.html

Whole Child Model Clinical Advisory Committee



Meeting Minutes

Thursday, March 17, 2022

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

Teleconference Meeting

Committee Members Present:

Jennie Jet, MD	Provider Representative
Cal Gordon, MD	Provider Representative
Devon Francis, MD	Provider Representative
Sarah Smith, MD	Provider Representative

Committee Members Absent:

John Mark, MD	Provider Representative
Patrick Clyne, MD	Provider Representative
Salvador Sandoval, MD	Provider Representative

Staff Present:

Dale Bishop, MD	Chief Medical Officer
Dianna Diallo, MD	Medical Director
Gordan Arakawa, MD	Medical Director
Jennifer Mockus, RN	Community Care Coordination Director
Michelle Stott, RN	QI & Population Health Director
Hilary Gillette-Walch, RN, MPH	Quality and Population Health Manager
Kelsey Riggs, RN	Complex Case Management Supervisor
Jessie Newton, RN	Care Coordination Manager
Jessica Hampton, RN	Enhanced Care Management/CS Manager
Vera Eichenbaum, Pharm D.	Clinical Pharmacist
Jeanette Revelez	Pharmacy Services Supervisor
Yasuno Sato, Pharm D.	Clinical Pharmacy Manager
Tammy Brass, RN	UM & Complex Case Management Manager
Sarah Sanders	Grievance and Quality Manager
Tracy Neves	Clerk of the Committee

Hospital Representatives Present:

James Rabago, MD	Board Representative
Becky Shaw	Provider Representative

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 December 16, 2021 meeting were reviewed.

B. Grievance Update

Grievance data was reviewed and provided to the Committee.

M/S/A Consent agenda items approved.

4. **Regular Business.**

A. Pharmacy Carve-Out

Vera Eichenbaum noted on January 1, 2022, the pharmacy benefit was transitioned to Medi-Cal Rx. This means that prescriptions that are filled at a pharmacy are now covered by Medi-Cal Rx instead of the Alliance. There is no change for drugs administered by providers in their office and infusion clinics, these remain Alliance responsibility.

Proactive actions taken by Medi-Cal Rx included:

- Medi-Cal Rx 180-day Transitional Period through June 30, 2022.
- Reject Code Suspension until April 30, 2022.
- Auto-Prior Authorization (PA) for Synagis and Makena until April 30, 2022.

Proactive actions taken by the Alliance included:

- Review of daily data feeds from Medi-Cal Rx and MedImpact.
- Utilization of Medi-Cal Rx Portal and Clinical Liaison for care coordination.
- Communication with DHCS and Medi-Cal Rx on ongoing issues.

As part of our proactive provider outreach, the Alliance generates and evaluates multiple daily reports. Information reviewed includes prescriptions that pharmacies are unable to fill due to denial by Medi-Cal Rx, and denied prior authorizations and medication requests from pharmacies and doctors that are sent to the Alliance in error. The Alliance ensures pharmacies are billing correctly and provides correct information if there are discrepancies. In addition, pharmacies are provided appropriate override codes for example when there is a continuation of therapy to override a denial. Providers are contacted when medications are denied, and a prior authorization is needed and assisted with the process. California Children's Services (CCS) patients and other high-risk members such as recent discharge, or previous related hospitalizations and those with medication access issues are referred to Care Management for assistance and follow-up.

As a result of Alliance Pharmacy Outreach, our members have faster access to medications and medication issues are proactively resolved preventing gaps in therapy. Also, provider burden is decreased by unnecessary submission or avoidable PA requests. The outreach helps pharmacies process medications and focus on their patients without the need to call Medi-Cal Rx for assistance. The Alliance's pharmacy outreach results in fewer phone calls from members and providers requesting assistance, and fewer unnecessary prior authorization requests submitted to Medi-Cal Rx.

Medication access issues encountered included off label use and not FDA approved medications not covered and requiring PA submission with evidence-based literature support such as clinical guidelines and large case studies, etc. (small case reports are generally not accepted). The Alliance was unable to find a pharmacy to provide sterile compounding for Medi-Cal Rx members which means these members will be switched to a non-compounded, commercially available formulation, or must pay out of pocket for the medication.

Recommendations to Providers:

- Be aware of restrictions.
- Submit chart notes and relevant documentation.
- Provide accurate and complete details on PA requests and pay attention to questions.

Provider inquired about the contract drug list and if there is an easier way to search for medications. Yasuno suggested utilizing the drug look-up tool, and then review the PDF version for the details. Cover MY Meds is also recommended by Medi-Cal Rx. Some of the larger clinics are working to integrate the information into their EMR systems. Also, Sure Scripts has information from Medi-Cal Rx.

Providers can call the Alliance directly to assist with medication issues if needed. Policy questions can be relayed to Navneet, and she can communicate them to DHCS.

B. WCM Update

Kelsey Riggs provided an update on California Children's Services Eligibility and Member Volumes. At the end of quarter 4, there was a total of 7,208 CCS members with a total of 373 new members which was the highest amount per quarter. CCS referrals for all counties included 294 referrals for quarter 2, 419 referrals for quarter 3 and 513 referrals for quarter 4 (data unavailable for quarter 1 due to the new reporting system). For quarter 4 2021, the team ended the year with a total of 1,979 CCS Individualized Care Plans (ICPS) with 714 in Merced, 961 in Monterey, and 304 in Santa Cruz. Provider letters are being distributed to engage provider paneling, and the team is seeing positive responses. Tammy shared that the Alliance recently completed the DHCS audit and is awaiting results. The audit and exit interview went

well, and the auditors were very complementary of the growth in the WCM programs.

C. CaAIM Enhanced Care Management & Community Support Services (ECM/CS)

Jessica Hampton provided an overview of the Enhanced Care Management and Community Supports program. ECM became a Medi-Cal benefit on January 1, 2022 in Santa Cruz and Monterey Counties and will begin in Merced County on July 1st. ECM is high-touch, face-to-face community work with frequent member contact and is available to Medi/Medi's. The ECM benefit provides intensive whole-person care management and coordination to help address the clinical and non-clinical needs of the Medi-Cal Managed Care Plans' highest risk members. ECM is person-centered, goal-oriented, and culturally relevant and services are arranged through the county or community-based providers that serve the populations of focus.

The ECM Populations of Focus Timeline includes:

Phase I – January 2022

- Individuals and Families Experiencing Homelessness (one of the only populations that will include the pediatric population this year).
- High Utilizer Adults.
- Adults who have serious mental illness (SMI) and substance use disorder (SUD) conditions.

Phase II – January 2023

- Adults & Children/Youth Transitioning from incarceration.
- Eligible for long-term care and at risk for institutionalization.
- Nursing Facility Residents who want to transition back to the community.

Phase III – July 2023

- Children and Youth who are high utilizers, serious emotional disturbance (SED), CCS with needs beyond physical needs, and child welfare.

Homelessness will be a primary focus this year. The seven core components of the ECM Core Services are outreach, comprehensive assessment and care management plan, enhanced coordination of care, health promotion, comprehensive transitional care, member, and family supports and coordination of referral to community and support services.

Community Supports was implemented on January 1st and builds upon the work of the Whole Person Care Pilots to better address health related social needs of Medi-Cal members. Supports are medically appropriate, cost-effective alternative services or settings that are provided "in lieu of" and as a substitute for more costly services or settings such as hospital or skilled nursing facility admissions, discharge delays, or emergency department use. These services are optional for Medi-Cal Managed Care members to receive.

An overview of each of the Community Supports listed below was provided to the Committee.

Community Supports	Santa Cruz County	Monterey County	Merced County
Housing Transition Navigation Services	January 1, 2022	January 1, 2022	TBD
Housing Deposits	January 1, 2022	January 1, 2022	TBD
Housing Tenancy and Sustaining Services	January 1, 2022	January 1, 2022	TBD
Recuperative Care	July 1, 2022	July 1, 2022	July 1, 2022
Short-Term Post Hospitalization Housing	July 1, 2022	July 1, 2022	July 1, 2022
Medically Tailored Meals	January 1, 2022	January 1, 2022	January 1, 2022
Sobering Centers		January 1, 2022	TBD

There is no wrong door approach for referrals. Referrals can be initiated by contracted providers, non-contracted provider, members, and family. The Provider Referral forms were shared with the Committee and are available on the provider website.

5. Open Discussion.

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

Provider had a question regarding CCS paneling. It was noted, there is a CCS paneling application on the DHCS website. There are resources on the Alliance provider website and Provider Services can assist as well. The DHCS website has a search function to look-up CCS paneled providers. **Action:** Kelsey will provide DHCS provider paneling resources and Tracy will email the information to the Committee.

Provider noted they are missing case management with patients, and she would like to know which patients are being case managed by the Alliance. Kelsey noted the provider can reach out to her or the pediatric team for assistance. **Action:** Tracy to email Pediatric Case Management contact information to the Committee.

Provider noted a pharmacy issue when contacting a patient's pulmonologist to refill a compounding medication. The pulmonologist was no longer prescribing the medication and provider had been referring to the patient notes. After a discussion with the pulmonologist, it was determined the patient no longer needed to take the medication. It was noted the Alliance Pharmacy department is working on a medication reconciliation program this year, and Yasuno suggested adding CCS members as one group of focus. **Action:** Yasuno will investigate CCS medication reconciliation further for the possibility of discussion at a future meeting.

Provider requested more information regarding transportation access for patients to specialty appointments. Provider noted families have barriers around emergency transportation to appointments (Stanford). Emergency room to emergency room or in-patient transfers are sometimes required due to barriers and children needing specialty

care. Kelsey noted that the pediatric team can also work with the facility regarding options for families. Provider noted transportation on weekends and holidays is challenging. **Action:** Dr. Diallo noted transportation is handled by Member Services and this important topic will be discussed further at the next meeting.

The meeting adjourned at 1:20 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

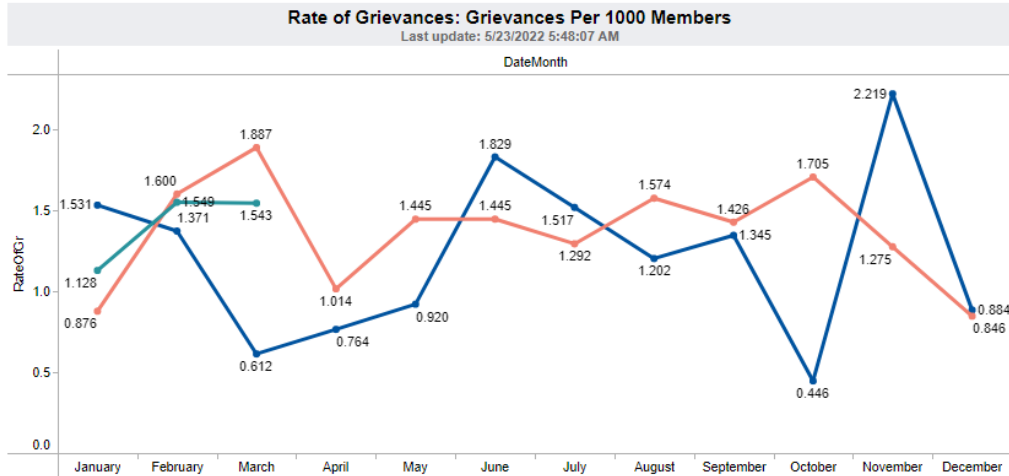
Whole Child Model Clinical Advisory Committee

Prepared by: Sarah Sanders, Grievance and Quality Manager

June 16, 2022

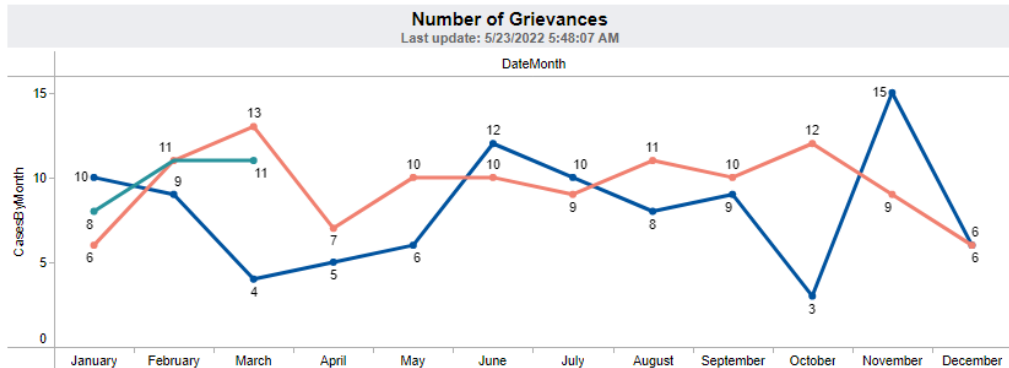
WCM GRIEVANCE RATE: Per thousand WCM/CCS Members Per Month (PKPM)

RATE

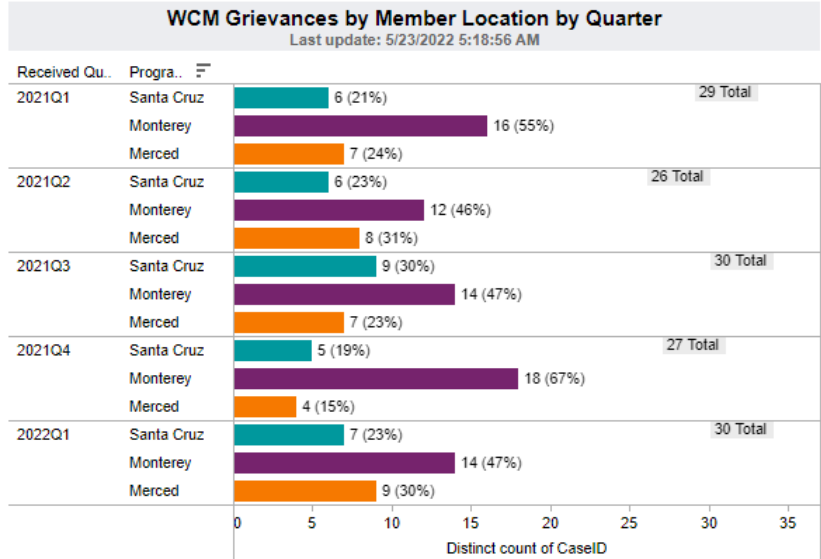
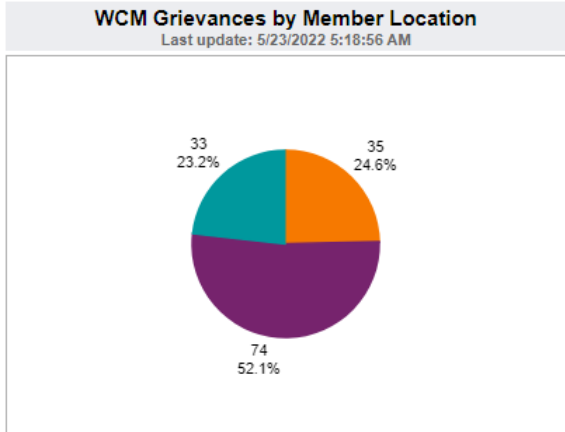


Year
■ 2022
■ 2021
■ 2020

Number Rec'd



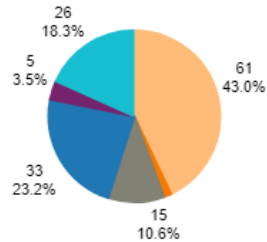
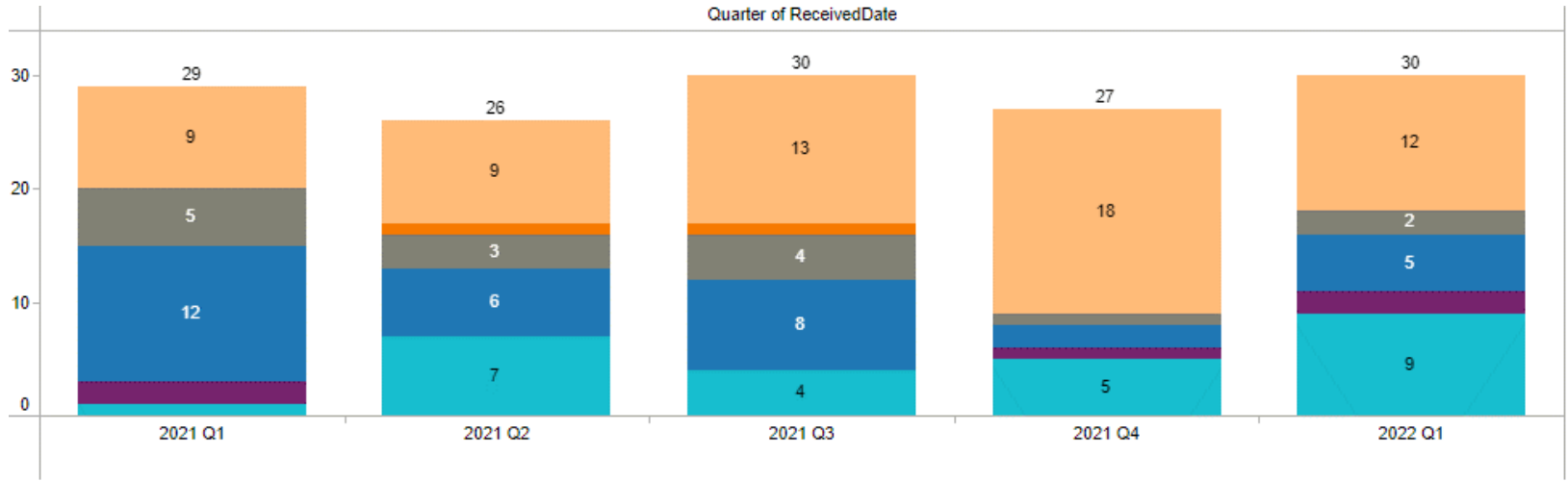
WCM Q1 2021 – Q1 2022 GRIEVANCES by LOCATION



ProgramCounty
■ Santa Cruz
■ Monterey
■ Merced



WCM Q1 2021 through Q1 2022 GRIEVANCES by TYPE



Grievance Type

- Appeal
- DME
- Other
- Provider
- Timely Access
- Transportation





WCM Review

Q1 2022 TRENDS

REVIEW and TRENDS:

1. WCM Grievances are closely monitored and trended by the Staff Grievance Review Committee (SGRC)
2. WCM Grievances are STABLE.
3. Recurring themes continue:
 - ❖ Genetic Testing
 - ❖ Provider Billing
 - ❖ Transportation

WCM GRIEVANCE CASE REVIEW

WCM Case Review #1

- Parent complained about no one answering the providers phone, lack of return calls and scheduling difficulty.
- Office Manager did not locate documentation of POC calls here.
- Office Manager confirmed their “urgent” case process which will send messages to clinical staff for a MBR response within 2 hours.

WCM Case Review #2

- Parent notified of provider bills in 2021 and told she had to resolve with the Alliance.
- Services required a referral and PCP submitted a retro-active req.
- The Alliance processed the claims successfully.

WCM Case Review #3

- Provider appealed denial for Whole Exome Sequencing (WES) genetic testing.
- Appeal was upheld as not found to meet medical necessity.
- Parent of Child (POC) filed a State Hearing which is scheduled for June.



WCM **GRIEVANCE** Next Steps



- Continue to monitor emerging issues.
- Aim to intervene quickly to prevent adverse events.
- Solicit input: Clinical Partners, what are you hearing from WCM/CCS members?



Questions?





WCM CCS REFERRAL UPDATES

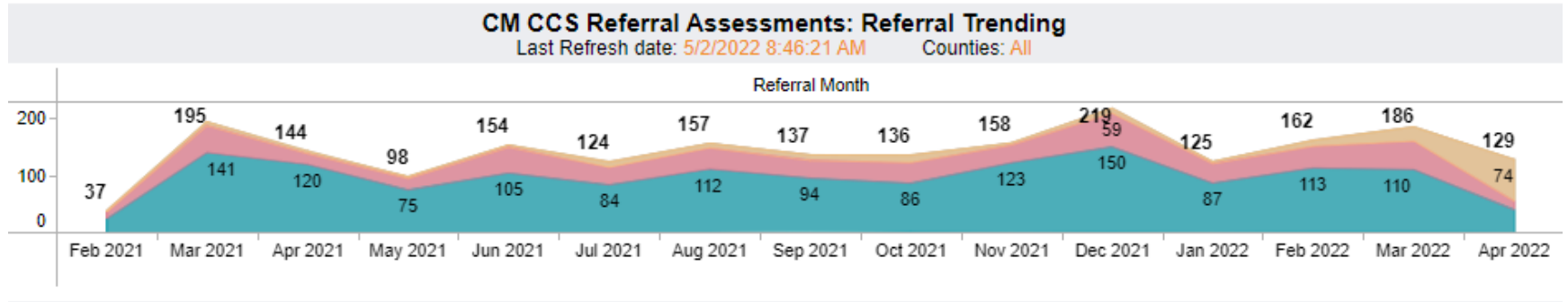
Pediatric CCM

Tammy Brass, RN, UM/CCM Manager

WCM Clinical Advisory Committee

June 16, 2022

CCAH CCS Referral Trending



- Measure Names**
- Count Pending
 - Count Denied
 - Count Approved
 - Count Other
 - Count Corrected



Referral Counts

Q1: Alliance Referrals by County

- Merced: 167
- Monterey: 233
- Santa Cruz: 72
- Total Referrals: 473



Referral Approval Rates

Q1: CCS Referral Approval Rates by County

- Merced: 70.5%
- Monterey: 59.5%
- Santa Cruz: 74.5%
- Average Approval Rate: 68.2%



Referral Denial Rates

Q1: CCS Referral Denial Rates by County

- Merced: 20.6%
- Monterey: 30.9%
- Santa Cruz: 24.3%
- Average Denial Rate: 25.3%



Summary

- Newly eligible CCS member totals in Q1 22 were higher than any prior 2021 quarter
 - 388 new members
 - 35% increase overall from prior quarters
- Merced = 10% increase
- Santa Cruz = 7% increase
- Monterey = 4% increase



A young child is running joyfully through a field of water spray, wearing a t-shirt that says "THIS WORLD FULL OF HOPE It's BEGIN TO PROCEED WITH HOPE". The child is smiling broadly, and the water droplets are captured in mid-air, creating a bokeh effect in the background. The scene is set outdoors, likely in a park or a similar natural setting, with a soft, golden light filtering through the trees.

QUESTIONS?



Non-Emergency Medical Transportation (NEMT)

Tammy Brass, RN, UM/CCM Manager
Whole Child Model Clinical Advisory Committee
June 16, 2022

NEMT Services

- Requires Prior Authorization
- Level of NEMT is based on the Physician Certification Statement.

^ Non-emergency medical transportation (NEMT)

If you are medically unable to use a car, bus, train or taxi, the Alliance will arrange transportation for you. This type of transportation is called non-emergency medical transportation (NEMT).

NEMT is for when you need extra help or special transportation needs. Examples of NEMT are an ambulance, wheelchair van or air transport.

NEMT Overview

- Four available modalities
 - NEMT ambulance services
 - Litter van services
 - Wheelchair van services
 - NEMT by air
- Requires NEMT Physician Certification Statement (PCS) forms
 - PCS indicates the level of transportation service for Medi-Cal members
 - Same PCS form can be used for 12 months of NEMT services
- Rides arranged by Alliance Transportation Coordinators





Instructions

Physician Certification Statement of Medical Necessity for Non-Emergency Medical Transport

Questions about the Physician Certification Statement (PCS) of medical necessity for Non-Emergency Medical Transportation (NEMT) request form? Call the Alliance Transportation department at (831) 430-5577 or Toll Free (800) 700-3874 ext. 5577.

Member Information: Enter First and Last Name of member.

Medi-Cal ID #: Enter CIN Number / ID Number.

- 1) Dates of Service: Enter Start and End dates for Transportation Services; authorization may be maximum of 12 months, (e.g. 09/01/17 to 09/01/18). Form is not valid if a date range is not entered.
- 2) Appt. Time: If form request is only valid for a day, enter specific time of appt. If request is for a date range, enter "Appt. Time Varies."
- 3) Days/week transportation is needed: Check all days of the week that apply.

Documentation to support Medical Necessity:

- 4) Diagnosis to support visit(s): Please enter diagnosis pertinent to your care of member, or specific to member's mobility limitations
- 5) Medical purpose/justification for visit(s): Enter "ongoing medical care," or other, more specific description
- 6) Functional limitations: Please explain member's mobility challenges with getting to appointments
- 7) Gurney Requested: Circle or write-in appropriate information
- 8) Wheelchair requested: Circle or write-in appropriate information

Signature of Physician or Healthcare Professional Certifying Need for Transportation: Physical signature and all fields are required. Telephone orders and/or signature stamps are not valid.

Submission Directions: Fax the completed form to (831) 430-5850.

Questions about the Physician Certification Statement (PCS) of medical necessity for Non-Emergency Medical Transportation (NEMT) request form? Call the Alliance Transportation department at (831) 430-5577 or Toll Free (800) 700-3874 ext. 5577



Fax the completed form to **(831) 430-5850**

Non-Emergency Medical Transportation Issues & Mitigation

- NEMT Provider and Access issues
 - No-show
 - Late pick-ups
 - Safety concerns
 - Limited NEMT providers availability
- Mitigation
 - Continue to strengthen communication with specific vendors
 - “VIP” option for all CCS members
 - Tracking of members that require door to door
 - Continued efforts to widen NEMT provider network



Questions?





Non-Medical Transportation (NMT)

Gisela Taboada, Member Services Call Center Manager
Whole Child Model Clinical Advisory Committee
June 16, 2022

Non-medical Transportation (NMT)

This benefit is only for Medi-Cal members.

NMT is for when you:

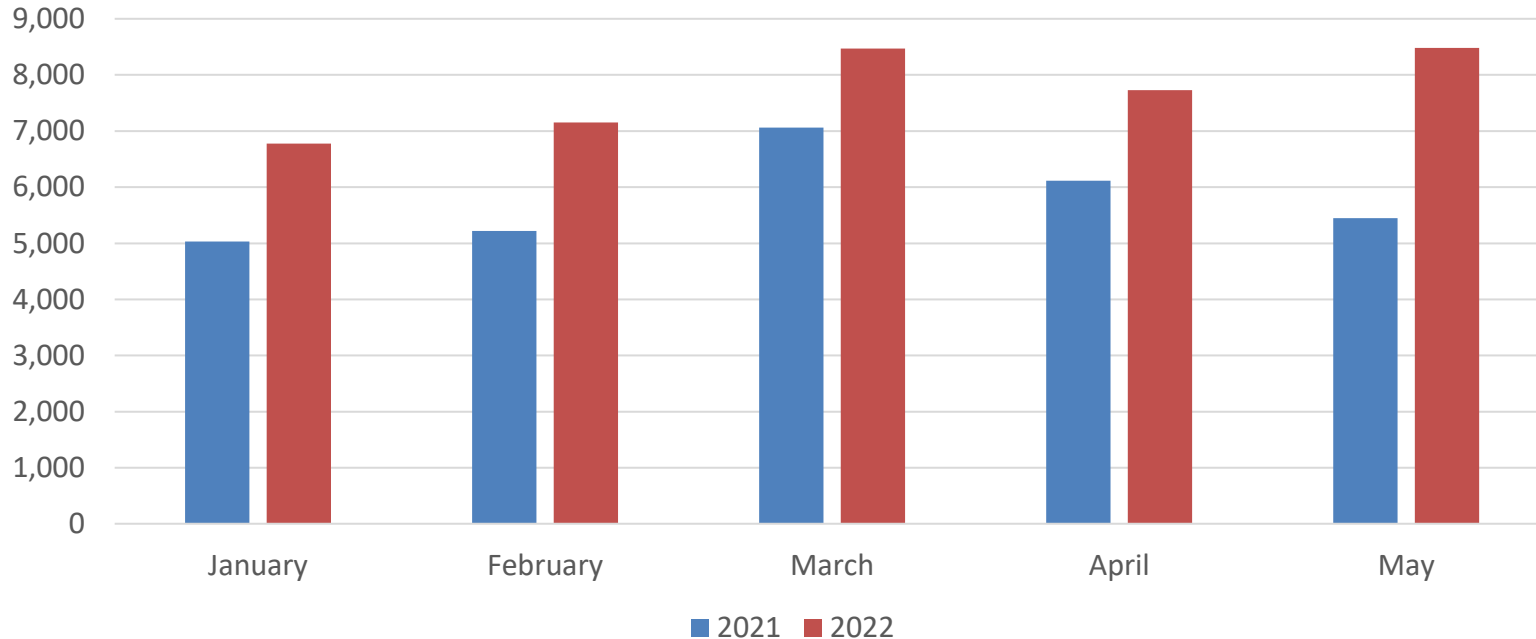
- Can get in and out of a vehicle without help.
- Do not need special medical equipment while traveling to or from an approved appointment.
- Can show that you do not have any other transportation options.

Examples of NMT: public bus, taxicab and rideshares (Lyft/Uber).



If you are eligible for the benefit, the Alliance will determine which transportation option to provide based on your need and help with scheduling

Transportation Call Trends



Non-Medical Transportation Issues & Mitigation

- Continued driver issues
 - No-show
 - Late pick-ups
 - Safety concerns
- Mitigation
 - Continue to strengthen communication with Call the Car
 - “VIP” option for all CCS members
 - Tracking of members that require door to door



Questions?



Whole Child Model Clinical Advisory Committee Meeting Calendar 2022



Thursday, March 17	12:00 - 1:00 PM
Thursday, June 16	12:00 - 1:00 PM
Thursday, September 15	12:00 - 1:00 PM
Thursday, December 15	12:00 - 1:00 PM

