AGENDA
Children’s Health Consultant Advisory Committee Meeting
Board of Governors
Tuesday, November 15, 2022, 8:30 a.m.
L.A. Care Health Plan, 1055 W 7th Street, 10th Floor, Los Angeles, CA 90017

Please recheck these directions for updates prior to the start of the meeting.
This meeting will be conducted in accordance with the provisions of the Ralph M. Brown Act, allowing members of the Board, members of the public and staff to participate in person and via teleconference, because State and Local officials are recommending measures to promote social distancing. Accordingly, members of the public should join this meeting in person and via teleconference as follows:

NEW: Members of the Committee, staff and the public can attend the meeting in person at the address listed above. Public comment can be made live and in person at the meeting. A form will be available at the meeting to submit public comment.

To join the meeting via videoconference please use the link below:
https://lacare.webex.com/lacare/j.php?MTID=m6096f59990660e8ea01fe1bda1205720

To join the meeting via teleconference please dial:
+1-213-306-3065
Meeting Number:
2486 045 0203
Password: lacare

Members of the Children’s Health Consultants Advisory Committee or staff may also participate in this meeting via teleconference or videoconference. The public is encouraged to submit its public comments or comments on Agenda items in writing by e-mail to BoardServices@lacare.org, or sending a text or voicemail to: 213 628-6420.

Attendees who log on to lacare.webex using the URL above will be able to use “chat” during the meeting for public comment. You must be logged into WebEx to use the “chat” feature. The log in information is at the top of the meeting Agenda. This is new function during the meeting so public comments can be made live and direct.

1. The “chat” will be available during the public comment periods before each item.
2. To use the “chat” during public comment periods, look at the bottom right of your screen for the icon that has the word, “chat” on it.
3. Click on the chat icon. It will open two small windows.
4. Select “Everyone” in the “To:” window,
5. The chat message, text, voicemail, or email must indicate if you wish to be identified or remain anonymous, and must also include the name of the item to which your comment relates.
6. Type your public comment in the box that says “Enter chat message here”.
7. When you hit the enter key, your message is sent and everyone can see it.
8. L.A. Care staff will read the chat messages for up to three minutes during public comment so people who are on the phone can hear the comment.

Your comments can also be sent by voicemail, email or text. If we receive your comments by 8:30 am on November 15, 2022, it will be provided to the members of the Children’s Health Consultants Advisory Committee at the beginning of the meeting. The chat message, text, voicemail, or email must indicate if you wish to be identified or remain anonymous, and must also include the name of the item to which your comment relates. Public comments submitted will be read for up to 3 minutes during the meeting.
Once the meeting has started, public comment must be received before the agenda item is called by the meeting Chair and staff will read those comments for up to three minutes. Chat messages submitted during the public comment period for before each item will be read for up to three minutes. If your public comment is not related to any of the agenda item topics, your public comment will be read in the general public comment agenda item. These are extraordinary circumstances, and the process for public comment is evolving and may change at future meetings. We thank you for your patience.

Please note that there may be delay in the digital transmittal of emails, texts and voicemail. The Chair will announce when public comment period is over for each item. If your public comments are not received on time for the specific agenda item you want to address, your public comments will be read at the public comment section prior to the board going to closed session.

The purpose of public comment is that it is an opportunity for members of the public to inform the governing body about their views. The Committee appreciates hearing the input as it considers the business on the Agenda.

**All votes in a teleconferenced meeting shall be conducted by roll call.**

If you are an individual with a disability and need a reasonable modification or accommodation pursuant to the Americans with Disabilities Act (ADA) please contact L.A. Care Board Services staff prior to the meeting for assistance by text to 213 628-6420 or by email to BoardServices@lacare.org.

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**Welcome**

1. Approve today’s Agenda
2. Public Comment
3. Approve August 16, 2022 Meeting Minutes P.4
4. Chairperson Report
5. Chief Medical Officer Report P.9
6. Child & Adolescent Health: Get Back to Care Interventions P.13
7. CalAIM Update P.35

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Tara Ficek, MPH  
Chair  
Chair  
Chair  
Chair  
Chair  
Chair  
Chair

Richard Seidman, MD, MPH  
Chief Medical Officer

Laura Gunn  
Quality Improvement Project Manager II  
Quality Improvement

Richard Seidman, MD, MPH  
Phinney Ahn,  
Executive Director, Medi-Cal  
Executive Director, Medi-Cal  
Senior Director, Safety Net Initiatives  
Johanna Kichaven  
Population Health Management  
Program Manager III
ADJOURNMENT

The next meeting is scheduled on January 17, 2023 at 8:30 a.m. Please keep public comments to three minutes or less.

The order of items appearing on the agenda may change during the meeting.

If a teleconference location is listed at the top of this agenda, the public can participate in the meeting at that location or by calling the teleconference call in number provided. If teleconference arrangements are listed at the top of this Agenda, note that the arrangements may change prior to the meeting. To confirm details with L.A. Care Board Services staff prior to the meeting call (213) 694-1250, extension 4183 or 4184.

THE PUBLIC MAY ADDRESS THE BOARD OF GOVERNORS BEFORE DISCUSSION OF EACH ITEM LISTED ON THE AGENDA BY FILLING OUT A “REQUEST TO ADDRESS” FORM AND SUBMITTING THE FORM TO L.A. CARE STAFF PRESENT AT THE MEETING BEFORE THE AGENDA ITEM IS ANNOUNCED. YOUR NAME WILL BE CALLED WHEN THE ITEM YOU ARE ADDRESSING WILL BE DISCUSSED. THE PUBLIC MAY ALSO ADDRESS THE BOARD ON OTHER L.A. CARE MATTERS DURING PUBLIC COMMENT.

NOTE: THE CHILDREN’S HEALTH CONSULTANT ADVISORY COMMITTEE CURRENTLY MEETS ON THE THIRD TUESDAY EVERY TWO MONTHS AT 8:30 A.M. POSTED AGENDA and PRINTED MEETING MATERIALS ARE AVAILABLE FOR INSPECTION AT Board Services, 1055 W. 7th Street – 10th Floor, Los Angeles, CA 90017. Any documents distributed to a majority of the Board Members regarding any agenda item for an open session after the agenda has been posted will be available for public inspection at Board Services, L.A. Care Health Plan, 1055 W. 7th Street, 10th Floor, Los Angeles, CA 90017, during regular business hours, 8:00 a.m. to 5:00 p.m., Monday – Friday.

AN AUDIO RECORDING OF THE MEETING MAY BE MADE TO ASSIST IN WRITING THE MINUTES AND IS RETAINED FOR 30 DAYS.

Meetings are accessible to people with disabilities. Individuals who may require any accommodations (alternative formats – i.e., large print, audio, translation of meeting materials, interpretation, etc.) to participate in this meeting and wish to request an alternative format for the agenda, meeting notice, and meeting packet may contact L.A. Care’s Board Services Department at (213) 694-1250. Notification at least one week before the meeting will enable us to make reasonable arrangements to ensure accessibility to the meetings and to the related materials.
# BOARD OF GOVERNORS
## Children’s Health Consultant Advisory Committee
### Meeting Minutes – August 16, 2022
1055 W. Seventh Street, Los Angeles, CA 90017

<table>
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<tr>
<th>Members</th>
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<tr>
<td>Tara Ficek, MPH, Chair*</td>
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<td>Linda Aragon, MPH*</td>
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<td>Edward Bloch, MD*</td>
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<td>Maria Chandler, MD, MBA</td>
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<td>James Cruz, MD*</td>
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<tr>
<td>Rebecca Dudovitz, MD, MS</td>
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<td>Rosina Franco, MD</td>
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<td>Susan Fleischman, MD*</td>
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<td>Toni Frederick, PhD*</td>
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<td>Gwendolyn Ross Jordan</td>
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<td>Lynda Knox, PhD</td>
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<td>James Kyle, MD, M.Div.</td>
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<td>Nayat Mutafyan*</td>
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<td>Hilda Perez</td>
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<td>Maryjane Puffer, BSN, MPA</td>
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<td>Richard Seidman, MD, MPH</td>
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<td>Ilan Shapiro, MD, FAAP*</td>
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<td>Diane Tanaka, MD*</td>
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<td>Management</td>
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<td>James Kyle, MD, Chief of Equity and Quality Medical Director, Quality Improvement</td>
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<td>Katrina Miller Parrish, MD, FAAP, Chief Quality and Information Executive, Health Services</td>
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<tr>
<td>Michael Brodsky, MD, Medical Director, Behavioral Health and Social Services, Behavioral Health</td>
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*Absent **Present, but not quorum

California Governor Newsom issued Executive Orders No. N-25-20 and N-29-20, which among other provisions amend the Ralph M. Brown Act. Members of the public can hear and observe this meeting via teleconference and videoconference, and can share their comments via voicemail, email or text.

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<td>CALL TO ORDER</td>
<td>Tara Ficek, MPH, Chairperson, called the meeting to order at 8:30 a.m. without a quorum.</td>
<td>Approved unanimously. 9 AYES (Chandler, Dudovitz, Ficek, Frederick, Knox, Perez, Puffer, Ramos, Seidman)</td>
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<td>APPROVAL OF MEETING AGENDA</td>
<td>The committee reached a quorum at 9:02 a.m.</td>
<td>The Agenda for today’s meeting was approved as submitted</td>
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<td>APPROVAL OF THE MEETING MINUTES</td>
<td>The May 17, 2022 meeting minutes were approved as submitted.</td>
<td>Approved unanimously.</td>
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<td>CHAIRPERSON’S REPORT</td>
<td>Chairperson Ficek stated that she has a few things to share. Noted that time of the year is back to school for many. She is thrilled that children will be back in the classroom and she is thinking about the relationship between a child’s readiness to learn and their mental</td>
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<td>health. She would include oral health, there is an interconnection physical, mental health and their wellbeing and their ability to learn and succeed. She noted that the county is struggling in areas such as well child visits, well child and adolescents visits, childhood immunizations, and dental varnish. She noted that the pandemic played a major role, but hopes the committee thinks about where or how it is performing, not just where it could do better, but where it is doing really well tied to children’s preventative supports knowing everyone plays an important role in children’s wellbeing. And how it relates to a child’s learning abilities.</td>
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PUBLIC COMMENT
No public comment was submitted.

CHIEF MEDICAL OFFICER REPORT
(Member Ramos and Member Dudovitz joined the meeting.)

Member Seidman presented the August 2022 Chief Medical Officer report. *(A copy of the written report can be obtained from Board Services.)*

Dr. Seidman said that based on the Chairperson’s report it would be a good time to start thinking about the committee’s charter and goals of the committee.

COVID Update
While the number of cases of COVID-19 is decreasing globally, nationally and locally, transmission rates, morbidity and mortality remain high. Los Angeles County recently moved down to the medium community level. Moved back down because the number of hospital admissions with COVID-19 as primary or secondary diagnosis came back down to 10 per 100,000. Two of three metrics measure the impact on the hospital system and the third metric is the overall rate of new COVID-19 infection per 100,000 population. That is what determines the community rate. It remains high in L.A. County. That is why masking is highly recommended in indoor public places. It is also recommended that children wear masks in school. The total number in children is relatively low, but should still be taken seriously with the modified approach.

Monkeypox
The U.S. Centers for Disease Control (CDC) has declared the current outbreak of Monkeypox cases a Public Health Emergency. There have been over 28,000 cases in 88 countries reported to date, including 81 countries that have not historically reported known cases. In the United States, there are now more than 7,500 cases reported in all but two states, and nearly 900 cases in Los Angeles County. Over 70% of cases in Los Angeles
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<td>County are in White and Latinx individuals, with 11% in Black/African Americans, and 5% among Asians. Human to human spread of monkeypox infection occurs primarily through close, intimate contact with someone who has monkeypox. In Los Angeles County, 99% of reported cases have been in men, and 85% within the LGBTQ+ community, 2% among straight or heterosexuals, and 14% of unknown sexual orientation. The California Department of Public Health has assessed the current risk of getting monkeypox among the general population as very low. People can reduce their risk of infection by avoiding close, skin-to-skin contact with people who have a rash that looks like monkeypox, avoid contact with objects and materials that a person with monkeypox has used, and attention to good hand hygiene practices. At this time, access to testing and vaccination for monkeypox is limited. The goal set by the LAC DPH is to administer a first dose of vaccine to as many people at increased risk for monkeypox exposure as quickly as possible. As the vaccine supply increases, Public Health will make second doses available. The current priority in Los Angeles County is to offer vaccine to gay or bisexual men and transgender adults with increased risk of infection.</td>
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<td>Dr. Seidman advised the committee that L.A. Care has written a resolution to address gun violence. Have written to legislators for safer gun laws. L.A. Care also issued a statement supporting reproductive rights and abortion rights. California will continue to provide abortion services for women including those that are out of state.</td>
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<td>Dr. Seidman announced that he gave notice to John Baackes, Chief Executive Officer, that he will be retiring at the end of the calendar year. He noted that he has been in practice for 30 years since he finished training. Mr. Baackes is currently searching for his replacement.</td>
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<td>Chairperson Ficek thanked him for his report and wishes him the best. She hopes for other opportunities to honor him.</td>
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<td>Member Perez stated that normally the chair of each committee attends the Board meeting to provide a report. She asked Chairperson Ficek if she is able to attend the Board meeting and give the CHCAC report. Chairperson Ficek responded that she will reach out to Dr. Seidman to coordinate.</td>
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<td>Messages received through chat box: from Maryjane Puffer to everyone: 8:48 AM Dr. Seidman!!! You have been an incredible leader on all fronts and you will be missed! Enjoy your retirement:) from Richard Seidman to everyone: 8:54 AM</td>
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<td>Thanks very much Maryjane. Still a lot of work to do before the end of year. from Diana Ramos to everyone: 8:59 AM</td>
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<td>Thank you Dr. Seidman for your leadership! Enjoy the next chapter 😊 from Toni Frederick to everyone: 9:00 AM</td>
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<td>I also want to thank Dr. Seidman for his leadership and dedication to the health of our children and youth. Enjoy your retirement. We will miss you! from Lynda Knox to everyone: 9:01 AM</td>
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<td>Dr. Seidman, Amazing and most importantly, compassionate work at LA Care. You will be missed! from Richard Seidman to everyone: 9:04 AM</td>
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<td>Thanks very much for your kind comments. It has been an honor and a privilege to serve in this role and work with all of you to improve the care and services available to people living in our most vulnerable communities. from Maryjane Puffer to everyone: 9:15 AM</td>
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<td>Thank you Dr. Miller. Two things of note on oral health. We screened kindergarten children in 9 schools last school semester in April/May. We saw an increase in level three abscess and broken teeth from 5 to 10%. the dental community is calling this concern: Covidities because so many children lacked access to care. LA County DPH Oral Health will be very focused on kinder screening this coming year. from Rebecca Dudovitz to everyone: 9:24 AM</td>
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<td>I am curious the degree to which LA Care works with WIC to try and reach parents of infants and young children from Laura Gunn to everyone: 9:40 AM</td>
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<td>sidenote: there is a provider webinar happening next week with WIC from Richard Seidman to everyone: 9:41 AM</td>
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<td>Victor, please share the information about the webinar noted above with all of the members of the committee once you get the information from the QI team. Thank you. from Lynda Knox to everyone: 9:44 AM</td>
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<td>Katrina - I’m involved with both TLA and Help me Grow if you’d like me to discuss at some point w training of the practice improvement facilitators.</td>
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DHCS 2021 Preventive Services Report

Katrina Miller Parrish, MD, FAAP, Chief Quality and Information Executive, Health Services, gave a presentation about the DHCS 2021 Preventive Services Report (PSR) (A copy of the presentation can be obtained from Board Services.)
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|                        | • PSR follows a 2019 report by the California (CA) State Auditor. The goal of this report is to help Managed Care Plans (MCP) improve how they care for the state’s most vulnerable children. The PSR assesses the provision of preventive services across the MCPs, measures, and regions, which enable the Department of Health Care Services (DHCS) to identify and deal with shortfalls.  
• The second PSR is based on data from 2020 and includes results from 19 indicators.  
• Plan performance ratings were developed with administrative and hybrid data. They were stratified by demographic characteristics. This included racial/ethnic groups, primary language groups, gender, age, and region (if applicable).  
• PSR drew eight key finding and added conclusions and considerations for each finding. |  |

**ADJOURNMENT**

The meeting was adjourned at 10:02 a.m.

Respectfully submitted by:  
Victor Rodriguez, *Board Specialist II, Board Services*  
Malou Balones, *Board Specialist III, Board Services*  
Linda Merkens, *Senior Manager, Board Services*

APPROVED BY:  
Tara Ficek, *MPH, Chairperson*

Date Signed: ____________________________
COVID/Flu/RSV Update

COVID trends continue to improve overall with 2.3 million cases and 9,300 deaths reported globally in the last week of October in the World Health Organization’s Weekly Situation Report, with more than 627 million cases and 6.5 million deaths cumulatively. While the Omicron BA.5 subvariant continues to be the predominant (75%) cause of infection, other subvariants account for an increasing proportion of cases (BA.2, BA.2.75, BQ1 and others). While we remain concerned about the potential for a fall/winter surge of COVID cases in the United States, it is a potentially encouraging sign that the increasing numbers of cases seen in Europe in September and October are now coming down after a lower peak than might have occurred. Masking, vaccination and the new bivalent booster shots remain effective and underutilized preventive measures.

Based on the experience in the Southern Hemisphere during their most recent flu season, Public Health authorities in the United States had anticipated an early and potentially severe flu season in the United States. Unfortunately, we have seen an early start to the flu season here in Los Angeles and by late October, 13% of all specimens tested at LA County Sentinel Labs were positive for influenza, visits for Influenza Like Illness (ILI) accounted for 6.6% of emergency room visits and pneumonia, influenza and COVID-19 accounted for 11% of deaths in LA County.

L.A. Care’s Fight the Flu Campaign started in September, with activities including a social media campaign, call center pre-screen announcement when members call in, an email blast to PPG network on the importance of educating and vaccinating all patients, and messaging on L.A. Care’s Health Education (MyHIM) platform. Other interventions scheduled in October and November include automated calls and flu vaccine clinics at local Community Resource Centers (CRCs). Four CRCs will host Flu and Covid-19 vaccine events this year, including Metro LA, El Monte, Inglewood and Lynwood.

Last, but not least, we are also seeing a significant number of cases of Respiratory Syncytial Virus (RSV) that can cause serious illness in young children that may require hospitalization. Orange County has declared a public health emergency due to the overwhelming demand on hospitals and emergency rooms.

Quality Improvement Overview

DHCS released their Quality Improvement (QI) Activities and Submission requirements for 2022-2023. L.A. Care met the minimum performance level (MPL) set at the 50th percentile of the national Medicaid average on 12 of the 15 Managed Care Accountability Set (MCAS) measures. L.A. Care did not meet the MPL on the well care visits for children
under 30 months of age and Immunization measures (CIS-10). Based on our performance, L.A. Care will be required to conduct two Performance Improvement Projects (PIPs), two Plan Do Study Act (PDSAs) or one Strengths Weaknesses Opportunities and Threats (SWOT) analysis. Despite meeting the MPLs for the majority of the measures, DHCS policy enables the Department to issue monetary sanctions for Plans not meeting the MPL for all measures. To date, L.A. Care has not been informed whether the Department intends to impose any sanctions upon L.A. Care.

The DHCS Population Health Management (PHM) Program guide that contains more detail on operational guidance was released on September 2, 2022. Ingesting Admissions, Discharge, and Transfer (ADT) data for Transitional Care Services and assigning a Care Manager to members for all transitions represent significant challenges internally and for our network providers and PPGs. Notably, DHCS announced a phased implementation of the Transitional Care Services requirements beginning January 1, 2023 requiring that care managers be assigned to all high risk members as defined by DHCS, allowing an additional year until January 1, 2024 to fully implement the requirement for all members transitioning from one level of care to another.

The First 5/Help Me Grow (HMG): LA Cohort 1 practices, Kids & Teens and Asian Pacific Health Care Venture (APHCV), combined have generated a 20% increase through July in developmental screenings for L.A. Care members aged 0-5 years old as a result of the transformation work accomplished so far. Heluna Health has started delivering the Pediatric Healthy Lifestyle Program for Ages 2-5 to 15 L.A. Care Families. The program consists of six sessions. This first round of two cohorts will be completed by first week of November. Recruitment is ongoing for families to join the next group beginning January 2023.

On 8/13 and 9/28, L.A. Care and Health Net jointly hosted two sessions of Implicit Bias training. Dr. Sayida Peprah-Wilson, a licensed clinical psychologist and birth doula, facilitated both sessions. A total of 415 and 236 attended the trainings respectively. Final Enterprise Goals Anti-Racism Trainings will take place in October and November for Directors and above. The Provider Equity Award applications for this year were released in October. Equity categories for the award are 1) reducing health disparities, 2) language care and, 3) Sexual Orientation, Gender Identity (SOGI) Collection. This first of its kind awardee will be recognized during the Provider Recognition Awards Ceremony in March 2023. A Gun Violence Prevention Summit is also planned for December 9, 2022.

The Enhanced Care Management (ECM) and Community Supports (CS) programs continue to evolve with over 16,000 members currently enrolled and receiving services by our contracted ECM provider network, and over 12,000 members receiving Housing and Homeless Support Services. Other Community Support Services currently offered by L.A. Care include Recuperative Care and Medically Tailored Meals. In January 2023, we will be adding Environmental Accessibility Adaptations (EAA) to our CS offerings and two new populations of focus will be added to the ECM program – Adults Living in the Community and At Risk for Long Term Care, and Adult Nursing Facility Residents Transitioning to the Community.

**Virtual Specialty Care Program (V-SCP)**

Over the past 18 months, we developed a pilot to provide an integrated approach to providing specialty consultation remotely and with face-to-face visits. The program offers eConsult, telehealth visits with specialty providers and face-to-face visits as appropriate. We know that other delivery systems, like Kaiser and LA County DHS, have successfully implemented eConsult and telehealth services. However, the availability of virtual care services varied greatly from practice to practice in the private setting and for many private practices, there was no peer to peer eConsult-like service readily available for private providers who perhaps only needed a quick question addressed.

In July 2022, we launched this pilot with 18 adult and 5 pediatric specialties with four of our high volume Direct Network providers. Although this pilot is still in its infancy and we are still in the midst of recruiting more primary care
practices, the Children’s Hospital of Los Angeles (CHLA) team nominated L.A. Care to present at an upcoming National Academies of Science, Engineering and Medicine (NASEM) pediatric specialty committee. The CHLA team believes that L.A. Care’s program is unique in that we worked collaboratively with providers, offered to reimburse for the services provided by the primary care and specialist in a fair way and offer a mechanism for private providers to access specialty input to inform the care of their patients in a timely and efficient manner.

The NASEM pediatric specialty committee has invited Dr. Li, our Deputy CMO, to their Nov 11th meeting. In this meeting, members of the NASEM pediatric specialty committee will learn more about our pilot program, ask questions and determine whether our efforts should be highlighted as a best practice for a health plan with regard to helping members and providers get access to specialty care services.

**Improving Care for Communities of Color – Supporting Independent Practices Serving Medi-Cal Enrollees**

After recognizing that 56% of primary care visits for Medi-Cal beneficiaries are provided by non-County and non-FQHC providers in California, and 70% of visits in Los Angeles County, the California Health Care Foundation (CHCF) awarded a grant to the California Quality Collaborative. L.A. Care and Health Net collaborated with the CHCF and CQC to design the program to strengthen and build advanced primary care capacity within independent primary care practices to improve the quality of care and outcomes and reduce disparities for people of color. Participating practices will receive practice coaching by trained IPA and L.A. Care practice coaches. Health Net will focus its improvement efforts by working with their contracted IPAs, which L.A. Care will do as well. In addition, L.A. Care will select Direct Network practices to work with. Other activities will include peer learning events and access to on-demand digital resources.

**Stars Excellence – D-SNP (Medicare) and Commercial/Marketplace Exchange (LACC) Stars Strategy:**

The STARS Steering Committee continues to guide L.A. Care’s efforts to improve our STARS performance for the D-SNP product that will go live on January 1, 2023 and for our Covered California product, L.A. Care Covered (LACC). CMS, which regulates the Medicare portion of the D-SNP, and Covered CA both offer rewards and potential penalties for Plans that do not achieve at least a 3 STAR rating. Interventions being developed now include high touch member outreach to improve medication adherence, colon cancer screening rates, osteoporosis management and member experience.

**L.A. Care Provider Continuing Education (PCE) Program**

L.A. Care Health Plan’s Provider Continuing Education (PCE) Program led by PCE Program Manager, Leilanie Mercurio, will continue to offer virtual distance learning / webinars via Cisco WebEx in year 2022-23 for L.A. Care Providers, L.A. Care staff and other healthcare professionals due to COVID-19 climate since mid-March 2020. The L.A. Care PCE Program will gradually bring back in-person CME/CE events and has implemented one event on October 1, 2022 Behavioral Health Conference held at the Hilton Los Angeles/San Gabriel for L.A. Care Providers and other healthcare professionals.

**Recently Held Directly Provided CME / CE Activities:**
September 22, 2022 Webinar, 12:00 pm – 1:30 pm PST, 1.50 CME/CE Credits, Acceptance and Commitment Therapy (ACT) for Depression and Anxiety, Presenter Dr. Katherine Bailey from West LA VA Healthcare Center. We had a total of 88 attendees including 47 L.A. Care Providers which accounted for 53% of the total audience.

October 1, 2022 In-Person CME/CE Event, Behavioral Health Conference, Hilton Los Angeles/ San Gabriel, Program 8:30 am – 4:30 pm PST, Various Presenters, 6 CME/CE Credits. We had a total of 123 attendees including 31 L.A. Care Providers which accounted for 25% of the total audience. This event is our very first In-Person CME/CE event since the start of the pandemic in March 2020, and was successfully implemented since the current COVID infection rate has significantly declined and remains low.

October 27, 2022 Webinar, 12:00 pm – 1:30 pm PST, 1.50 CME/CE Credits, Medication Treatment for Opioid and Alcohol Use Disorder, Presenter Dr. Larissa Mooney, UCLA Addiction Psychiatry Clinic.

November 9, 2022 Webinar, 12:00 pm – 1:30 pm PST, 1.50 CME/CE Credits, Childhood Lead Poisoning Prevention, Presenter Dr. Jean Woo, California Department of Public Health.

November 17, 2022 Webinar, 12:00 pm – 1:30 pm PST, 1.50 CME/CE Credits, The Link Between Cardiovascular Disease and Diabetes, Presenter Dr. Karol Watson, UCLA Program in Preventive Cardiology.

The L.A. Care Provider Continuing Education (PCE) Program remains committed to providing educational programs to meet the learning needs of L.A. Care Providers, other physicians, DOs, PAs, PsyDs, PhDs, PharmDs, NPs, RNs, LCSWs, LMFTs, LPCCs, LEPs, L.A. Care staff and other healthcare professionals, to facilitate the optimal delivery of quality healthcare services to Los Angeles County’s vulnerable populations and improve the overall health of the communities that L.A. Care serves.

Farewell and Best Wishes

Last, but not least, please accept my apologies for missing the December 1, 2022 Board Meeting and not being able to provide this update to the Board in person. It has been a great honor and privilege to serve as the Chief Medical Officer for L.A. Care for the past 5 ½ years. L.A. Care serves the critical mission of providing insurance coverage providing access to care and services for the County’s most vulnerable residents, now in the midst of the profound transformation of the Medi-Cal program as laid out in CalAIM. L.A. Care continues to add value to our members, our providers and the community at large with efforts such as the Los Angeles County Safety Net Coalition, our Community Health Investment Fund, our Community Resource Centers, the Transform L.A. and Virtual Specialty Care (V-SCP) Programs throughout the COVID-19 pandemic and the current complex political, economic, and regulatory environment. My compliments to L.A. Care’s Leadership and its Board, and best wishes going forward.
Child and Adolescent Health: Get Back to Care Interventions

November 15, 2022
CHCACA Meeting

Laura C. Gunn, MPH, CHES
QI Project Manager II
Today’s agenda

• Current well care visit rates.

• The three 2022 Get Back to Care interventions:
  - Automated call scripts
  - Social media posts
  - Postcards

• Share member feedback from the 10/12/2022 Executive Community Advisory Committee (ECAC) meeting.
Well Care Rates

• **Measurement Year 2021 Final Rates**
  - Well Child Visits in the First 30 Months of Life (W30)
    • 0-15 months (W30+6): 33.36%
    • 15-30 months (W30+2): 59.47%
  - Child and Adolescent Well-Care Visits (WCV): 48%
    *ages 3-21*

• **Measurement Year 2022 Prospective Rates**
  - W30+6: 30.43%
  - W30+2: 60.75%
  - WCV: 25.77%

• L.A. Care is required to do a Department of Health Care Services (DHCS) Performance Improvement Project (PIP) because we have three underperforming measures under the childhood domain, both W30 measures and Childhood Immunization Status: Combination 10 (CIS-10).
  - Will be doing a SWOT (Strengths, Weaknesses, Opportunities, Threats).
  - Create strategies to improve these rates.
Automated Calls

• Calls to guardians/parents of children ages 0-17. Calls to member ages 18-21.

• Calls serve as a well care visit reminder. They also mention vaccines and other screenings done during a visit.

• Three separate scripts:
  - Ages 0-30 months.
  - Ages 3-17 years old.
  - Ages 18-21 years old.

• For the 2022 calls, the Clinical Initiatives team added:
  - Other services done during well care visits.
  - Updated COVID-19 vaccine information.
  - A greeting to the introduction.

• Already incorporated some member feedback: Introduction, defining a word.

• **Main 2023 idea:** Two sets of calls instead of one, add flu vaccine.
Hello from L.A. Care Health Plan! Here is an important message about your child’s health.

Infants and toddlers need regular checkups during the first two years of life. These checkups keep your child’s growth on track through recommended services, such as a blood lead test and developmental screenings. Developmental screenings take a closer look at how your child speaks, learns, moves, and also interacts with others. Remember to keep your child up-to-date on vaccines. This includes the COVID-19 vaccine, if your child is 6 months or older.

Call the doctor’s phone number on the front of your child’s health plan card to catch up on missing vaccines and well visits. For additional information about well care exams, please visit the Getting Care page at the LA Care Website at: www.lacare.org/members.

If you no longer wish to receive automated calls from L.A. Care, please press #9.
Hello from L.A. Care Health Plan! Here is an important message about your child’s health.

All children need to see their doctor at least once a year for a check-up. Checkups keep your child’s growth on track through recommended services, such as a blood lead test for children under the age of 6 and developmental screenings. Developmental screenings take a closer look at how your child speaks, learns, moves, and also interacts with others.

Call the doctor’s phone number on the front of your child’s health plan card to schedule a checkup today. Remember to keep your child up to-date on vaccines, including the COVID-19 vaccine.

For additional information about well care exams, please visit the Getting Care page at the LA Care Website at: www.lacare.org/members.

If you no longer wish to receive automated calls from L.A. Care, please press #9.
This is an important message about your health from L.A. Care Health Plan.

All young adults need to see their doctor at least once a year for a check-up. Checkups are confidential and monitor your well-being through recommended screenings. Remember to stay up-to-date on vaccines, including the COVID-19 vaccine.

Call the doctor’s phone number on the front of your health plan card to schedule a checkup today. For additional information about well care exams, please visit the Getting Care page at the LA Care Website at: www.lacare.org/members.

If you no longer wish to receive automated calls from L.A. Care, please press #9.
Automated Calls

• **ECAC feedback:**
  - Split the 3-17 age group into two groups.
  - Add more heart to the message.
  - Two calls in the year.

• **Initial Call Results:**
  - Launched: 9/27/2022-10/7/2022
  - 146,693 members called.
  - 112,818 members reached (live connect/voicemail).
  - Overall reach rate is 77%.
  - **2023 Evaluation:** Did members have a date of service within 90 day after the calls were conducted?
Social Media

- The 2022 campaign tied with the adult *Get Back to Care LA* campaign.
  - Goal is to encourage parents to take their child in for well care visits. Also, to encourage vaccines and other screenings during those visits.

- This year’s campaign launched in August:
  - Six posts.
  - In English and Spanish.
  - Included web links, images, and hashtags.
  - Included an HPV reel (short video). English “actor” was from the American Cancer Society and Spanish “actor” was from the L.A. Care Health Promoter Program.

- For the 2022 posts, the Clinical Initiatives team added:
  - More posts.
  - Attention to specific screenings.

- **Main 2023 idea:** Launch with the adult *Get Back to Care LA Campaign* in June.
1) Children under two need more well care visits to check for physical and developmental milestones. To learn more about these milestones, go to: https://www.cdc.gov/ncbddd/actearly/milestones/index.html #BacktoCareLA

2) Stay on time with vaccines! On time vaccines during checkups are the best way to keep your child safe and healthy. Check if your child is on track with this guide: https://www.lacare.org/members/getting-care/routine-exams #BacktoCareLA
3) Lead can cause serious sickness in children. Lead can be found where?  
A) Paint  B) Toys  C) Soil  D) Pottery  
E) All of the above  

Answer- E) All of the above. Swallowing or breathing lead can cause lead poisoning or too much lead in the body. Lead poisoning can cause health problems in children. A blood lead screening can detect high levels of lead in the body. This screening is recommended for children 2 and under. Ask your child’s doctor if they are due for a blood lead screening. For more information about how lead affects health, visit:  
[http://publichealth.lacounty.gov/lead/index.htm](http://publichealth.lacounty.gov/lead/index.htm)  #BacktoCareLA

4) True or False: Healthy teenagers don’t need a checkup each year.  
FALSE—All teens, including healthy ones, need a checkup with the doctor each year. Checkups are the time to catch up on vaccines and health screenings. Concerned about your teen’s eating and sleeping habits and how they handle stress? Bring up your concerns to the doctor during your teen’s checkup.  
[https://www.lacare.org/members/getting-care/routine-exams](https://www.lacare.org/members/getting-care/routine-exams)  #BacktoCareLA
5) **HPV Reel- no image.** Great advice from (name of parent actor) on how to help prevent cancer by getting your children vaccinated against HPV. Find out more about how HPV Vaccination is cancer prevention, at: www.cancer.org/hpv [link to: https://www.cancer.org/healthy/hpv-vaccine.html] #HPVCancerFree #BacktoCareLA

6) A healthy kid also means healthy teeth and gums. For tips on how to take care of your child’s teeth, visit: https://smilecalifornia.org/care-for-your-smile/ #BacktoCareLA
Social Media: Screenshots

L.A. Care Health Plan with American Cancer Society California.

Great advice from Dan on how to help prevent cancer by getting your children vaccinated against HPV. Find out more about...See more

cancer.org
HPV Vaccination and Cancer Prevention | ACS

Learn more

L.A. Care Health Plan with American Cancer Society California.

Sponsored

Excelentes consejos de Dalia sobre cómo ayudar a prevenir el cáncer al vacunar a sus hijos contra el Virus del Papiloma Humano (VPH). Obtenga más información sobre cómo la vacuna contra el VPH es la prevención del cáncer en:

#DeVueltaASuDoctor

L.A. Care Health Plan with American Cancer Society California.

Sponsored

Lead can cause serious sickness in children. Lead can be found where?

@LACAREHEALTH

Learn more

L.A. Care Health Plan with American Cancer Society California.

Sponsored

Quiza
LEAD CAN CAUSE SERIOUS SICKNESS IN CHILDREN. LEAD CAN BE FOUND WHERE?

a. Paint
b. Taps
c. Flowers
d. Soil

a. all of the above

@LACAREHEALTH
Social Media

• ECAC Feedback:
  - More images!
  - Pictures of children with family members and caregivers of various ages.
  - Better representation of our Asian American/Pacific Islander community.

• Campaign Results:
  - Launched 8/22/2022 for two weeks.
  - Analytics:
    o Total Engagements: 4,804
    o Total Impressions: 262,014
    o Total Reach: 99,122
    o Best post- Spanish HPV Reel- 1,161 views!
Postcards

- Postcards to guardians/parents of children ages 0-17 and to member ages 18-21.

- Postcards serve as well care visit reminders.

- Three separate postcards:
  - Ages 3-11 years old.
  - Ages 12-17 years old.
  - Ages 18-21 years old.

- For the 2022 postcards, the Clinical Initiatives team added:
  - Updated COVID-19 vaccine information.
  - Created a 18-21 year old postcard.
  - Updated some images.

- **Main 2023 ideas:** Update masked photos, mail during the summer.

- Challenges: Redesign from Marketing, delayed mailing.
Postcard: 3-11 year olds

Checkups keep kids healthy!
Your child may need a checkup or shots to return to school.
Call your child’s doctor today for an appointment.

English version with Marketing redesign.

The doctor’s phone number can be found on the L.A. Care ID card.

Children 6 months and up can now get the COVID-19 vaccine.
You can ask about your child’s well-being and any concerns.
Postcard: 3-11 year olds

Spanish version

¡Los chequeos mantienen a los niños saludables!
Es posible que su hijo necesite un chequeo o vacunas para regresar a la escuela.
Llame al médico de su hijo hoy mismo para pedir una cita.

Chinese version

檢查保持兒童健康！
您的孩子可能需要接受檢查或接種疫苗才能返回學校。
立即致電您孩子的醫生進行約會。
Postcards: 12-17 year olds

L.A. Care

Back to school, back to care.

Checkups keep teens healthy!

Your teenager may need a checkup or shots to return to school.

Call your teenager’s doctor today for an appointment.
Postcards: 18-21 year olds

Take charge of your health

Schedule a checkup today!

Checkups keep you healthy. They are also confidential.

- Ask anything that concerns you at your checkup. Write a list before you go.
- Tell your doctor about your lifestyle. Be open and honest. They will not judge you.
- These talks help your doctor order the right tests, vaccines, and services for you.
Postcards

• Current status:
  - 160,188 members were mailed the 12-17 year old postcards on 10/28.
  - 43,346 members were mailed the 18-21 year old postcards on 10/28.
  - Postcards for 3-11 year olds will be tentatively mailed this early November.
Feedback: Interventions

• What did you like/not like? What would you change?
• How often do you think these interventions should go out?
• Do you have any other ideas or suggestions for other child/adolescent interventions?
Thank you!! 😊

Last comments?
Medi-Cal Redeterminations

- During the COVID-19 public health emergency (PHE), Medi-Cal beneficiaries experienced continuous coverage regardless of changes in circumstances

- When the PHE ends, states will resume routine renewal operations that:
  - Minimizes beneficiary burden
  - Promotes continuity of coverage for eligible individuals (either through Medi-Cal or Covered CA)

- PHE currently projected to end mid-January 2023

- DHCS has projected 13-20% of current Medi-Cal beneficiaries will lose their Medi-Cal coverage once redeterminations resume
  - This is an estimated decrease of 2-3M beneficiaries
  - L.A. Care is projecting a 13% annualized disenrollment rate or about 325K members

- Guidance from DHCS and CMS provides a great opportunity for collaboration between States, Counties, and managed care plans to ensure continuous coverage for eligible individuals
Role of Managed Care Plans

Strategies and Activities in Process

- L.A. Care is actively working to mitigate the negative impact to Medi-Cal beneficiaries through various member and provider communications and by strengthening our partnership with the Department of Public Social Services (DPSS)

**Member Outreach & Support**
- In-person assistance with Medi-Cal renewals at CRCs
- Call Center FAQs to inform and educate members on renewals
- Webpage dedicated to Medi-Cal renewals with FAQs
- Social media renewal campaign (Phase 1 & 2)
- Redetermination robocall and on-hold messaging
- Member text campaign
- Annual mailing
- Digital Campaign (bus shelters, TV, radio)

**Collaboration with DPSS**
- Secure sharing of member contact info changes daily; established process since August 2017
- Developing process to include Plan Partner (PP) data onto standardized template for sharing with DPSS
- MOU in process to receive renewal data from DPSS to support proactive member outreach

**Provider Support**
- Developing Provider “Toolkit” to include:
  - Info on redetermination and how providers can support the process to mitigate negative impact
  - Animations for sharing on their website and within provider offices
  - Redetermination FAQs to aid providers in educating and informing members
  - Provider newsletter articles
Redetermination Info Page in the Medi-Cal Annual Mailing (Dec 2021)

Medi-Cal Renewal

Why do I have to renew my Medi-Cal?
Some Medi-Cal beneficiaries must renew their Medi-Cal benefits each year to keep their health care coverage. Keep your Medi-Cal benefits by renewing on time. Here is some important renewal information:

- Some members may be renewed automatically. If DPSS is able to automatically verify your income information, you will be sent an approval notice of action (NOA) letter
  - A renewal packet will be mailed to members annually if DPSS is not able to verify your income information
  - The forms in this packet must be filled out and returned to the DPSS by the due date listed in the packet
- If you have questions about renewing your health care coverage, please call DPSS.
- Here are some important DPSS contact information to help you with your renewal:

1. BenefitsCal website: benefitscal.com
   BenefitsCal is a website for LA County residents to apply for and to view their benefits online for CalWORKs, CalFresh, and Medi-Cal applications.

2. Website: dpss.lacounty.gov
   Helpful resources including links to CSC and online applications.

3. DPSS Customer Service Center (CSC) telephone numbers

<table>
<thead>
<tr>
<th>Toll Free</th>
<th>866-613-3777</th>
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</thead>
<tbody>
<tr>
<td>Local numbers</td>
<td></td>
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<tr>
<td>626-569-1399</td>
<td></td>
</tr>
<tr>
<td>310-258-7400</td>
<td></td>
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<tr>
<td>818-701-8200</td>
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- How do I update my information?
  Correct personal information is important to get needed care and to renew your Medi-Cal coverage when it is due to prevent a gap in benefits.
  - If your name has changed, you have moved to a different address, have a new telephone number, or need to report a correction to your personal information, please call the Los Angeles County Department of Public Social Services at 1-866-613-3777 Monday – Friday from 7:30 a.m. – 7:30 p.m. and Saturdays from 8:00 a.m. – 4:30 p.m. (excluding holidays) or visit dpss.lacounty.gov.

- What happens after I return my form?
  DPSS will send you a letter to let you know if you still qualify for Medi-Cal coverage. If additional information is needed to renew your coverage, DPSS will send you a letter requesting the missing information.

- If you have questions about Medi-Cal renewal:
  - Contact your Medi-Cal case worker at your local DPSS office at 1-866-613-3777 or 1-626-569-1399 (TTY/TDD 1-800-660-4026) Monday – Friday from 7:30 a.m. – 7:30 p.m. and Saturdays from 8:00 a.m. – 4:30 p.m. (excluding holidays)
  - More information including contact information is included in the letter you may receive
Redetermination- Animation & Social Media

- Animation- “Preparing for Medi-Cal Renewals” https://youtu.be/U-dGAcgQLNs
- Examples of social media posts using GOL
Redetermination- Website Highlights

Website Banner, Call-out Box, and Medi-Cal Renewal FAQ Page

Redetermination website banner with DHCS global outreach language (GOL)

Highlight and quick link to Medi-Cal renewal FAQs

Website page dedicated to Medi-Cal renewal FAQs

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Medi-Cal Renewal FAQs

L.A. Care addresses many of the questions members have about renewing Medi-Cal coverage below. For any questions you may have that aren’t covered, please call the L.A. County Department of Public Social Services (DPSS) number at 1-866-613-3777 (TTY) 1-800-660-4826.

During the COVID-19 public health emergency (PHE), you have been able to keep your coverage regardless of any changes in your circumstances. However, once the COVID-19 PHE ends, your county will check to see if you still qualify for free or low-cost Medi-Cal. If you or someone in your household receives a letter from the county asking for information about your Medi-Cal coverage, please provide the requested information.

Change in Circumstance

Please continue to report any changes in your household to your local county office. This includes changes to your income, disability status, phone number or mailing address. You should also report if someone in your household becomes pregnant, if someone moves in, or anything else that may affect your Medi-Cal eligibility. Reporting these changes may help you continue to receive Medi-Cal coverage after the end of the COVID-19 PHE.
Redetermination- Medi-Cal On Hold Postcard

Please Remember
Keep your health care benefits...
It’s time to renew your Medi-Cal coverage!

To apply for your Medi-Cal renewal, please complete the forms from the L.A. County Department of Public Social Services (DPSS) and return them as soon as possible!

Call the DPSS Customer Service Center at 1.866.613.3777, Monday through Friday from 7:30 a.m. – 7:30 p.m. and Saturdays from 8:00 a.m. – 4:30 p.m. (TTY users should call 1.800.660.4026), and speak to your eligibility worker for assistance or go to beneftscal.com to complete your renewal forms.

L.A. Care works with three other health plans to provide health care services for members.

*Draft- mock-up version
Redetermination- Marketing Campaign

*Draft- mock-up version of bus shelter advertisement
Community Health Workers and Doula Benefit Update
Community Health Worker Benefit Overview

• CHW services added as a Medi-Cal benefit starting July 1, 2022 and released plan guidance on September 2, 2022

• CHW services defined as preventive health services delivered by a CHW to prevent disease, disability, and other health conditions or their progression; to prolong life; and to promote physical and mental health.
  - The four categories of CHW services are health education, health navigation, screening and assessment, and individual support or advocacy

• CHWs are trusted members of their community who help address chronic conditions, preventive health care needs, and health-related social needs within their communities

• L.A. Care is in process of implementing CHW services for our Medi-Cal members
  - Building network through new and existing providers
  - Finalizing operational processes (referrals, reporting, etc)
  - Analyzing data to understand potential utilization and inform outreach
  - Developing member and provider communications on availability of CHW services and how to access
Doula Benefit Overview

- Doula services will be added as a Medi-Cal preventive service starting January 1, 2023

- Doula services aligned with DHCS’ focus on health equity
  - Aim to improve the maternal experience, reduce disparities, reduce infant mortality, low birth weight babies, and improve the entire perinatal experience from conception to birth to postpartum care.

- A doula is a trained individual (non-clinical) who provides physical, emotional, and informative support throughout pregnancy, childbirth, and postpartum experience.

- Eligibility for doula services:
  - An individual who is pregnant, or was pregnant within the past year
  - Requires an written recommendation from a provider that authorizes up to 11 pre-birth, birth/delivery, and postpartum visits

- Plans waiting for final guidance to inform implementation

- Potential challenges with capacity of existing doula network and willingness to work with managed care plans
Population Health Management (PHM) Overview

• DHCS’ CalAIM PHM Program is designed to ensure that all members have access to basic population health management services based on their needs and preferences across the continuum of care to meet the quadruple aim and achieve health equity.

• The program will build upon existing NCQA PHM Standards.

• Gather, share and assess data for risk stratification and segmentation for appropriate interventions.

• Provide care management services for members at higher risk of poor outcomes.

• Provide transitional care services for members transferring from one setting to another.

• Utilize Community Health Workers (CHWs) for targeted interventions.
Transitional Care Services (TCS)

• By January, 2023:
  - Admissions/Discharge/Transfer (A/D/T) known on \textit{ALL} members
  - TCS provided by a single point of contact care manager for high-risk members
    • All Enhanced Care Management (ECM) members
    • Complex Case Management members
    • Members who received Long Term Support Services (LTSS)
    • Members identified as high risk through L.A. Care’s Risk Stratification Segmentation (RSS)

• By January, 2024:
  - TCS will be provided to \textit{ALL} members
Current State Initial Health Assessment (IHA)

- **Current IHA requirements** are based on APL-08-003 and include:

  - All newly enrolled Medi-Cal members must have a complete IHA within 120 days of enrollment*. A complete IHA is made up of the following components:
    - Complete medical history
    - Physical examination
    - Administration of Individualized Health Education Behavioral Assessment (IHEBA)-often the Staying Healthy Assessment (SHA)
    - Completion of preventive screenings and immunizations

*Members 18 months or younger is 120 days from enrollment or within periodicity timelines established by American Academy of Pediatrics (AA)) for ages two and younger, whichever is less.
Overview of IHA Changes per CalAIM starting 1/1/2023


**What is Changing?:**
- **Name Change:** Initial Health Assessment will be changed to Initial Health Appointment.
- The Individualized Health Education Behavioral Assessment (IHEBA)/Staying Healthy Assessment (SHA) requirement is eliminated.
- **Primary Care Visit** can be used as a proxy for completion of IHA.
- **Providing preventive screenings for adults and children** as recommended by the United States Preventive Services Taskforce (USPSTF) is *not an IHA requirement*. But still should be completed in timely manner per USPSTF guidelines.

**What is Staying the Same?:**
- **Timeframes.** IHA must be completed within 120 days of enrollment* for new members.
- **Early and Periodic Screening, Diagnostic and Treatment (EPSDT) screenings** will be covered based on American Academy of Pediatrics (AAP) /Bright Futures periodicity schedule (APL 19-010) for Children under age 21.

*For members less than 18 months of age: within 120 calendar days of enrollment or within periodicity timelines established by the AAP Bright Futures for age 2 and younger, whichever is sooner.*
CalAIM ECM Update: Children Population of Focus

Cynthia Carmona, MPA
Safety Net Initiatives
November 2022
Expanding Enhanced Care Management (ECM)

» ECM is person-centered, community-based care management provided to the highest-need Medi-Cal enrollees, primarily through in-person engagement where enrollees live, seek care, and choose to access services.

» Enrollees with complex needs have their care coordinated by a lead care manager knowledgeable of community resources and services and available to coordinate care addressing both medical and social drivers of health.

» ECM is California’s first statewide effort to address complex care management, leveraging the promising results from California counties’ Health Homes Program and Whole Person Care pilots.

» ECM will be available to seven defined Populations of Focus, one of which is specific to children and youth.
Children & Youth ECM Population of Focus
Launching July 2023

Children & Youth POFs:

1. Experiencing Homelessness (up to age 21)
2. *With Serious Mental Health or Substance Use Disorder Needs* (up to age 21)
3. *Enrolled in California Children’s Services (CCS) / Whole Child Model (WCM) with additional needs beyond their CCS condition* (up to age 21)
4. Involved in Child Welfare (up to age 26)
5. At Risk for Avoidable Hospital/Emergency Department (ED) Utilization (up to age 21)
6. *High-Risk Pregnant and Postpartum Individuals*
7. Individuals Transitioning from Incarceration (including adults and children/youth)
8. Individuals with Developmental and Other Complex Needs*

*Excluding children and youth who are enrolled in a 1915(c) or 1915(i) waiver program.*

**NOTE:** ECM POFs are not mutually exclusive, and a child can qualify for ECM via more than one POF; italics indicate revisions to POF
Community Supports

» MCPs can offer Community Supports, including, but not limited to, housing navigation and deposits, medically tailored meals, respite services, and asthma remediation, as cost-effective alternatives to services that can be covered under the Medi-Cal State Plan.

» Providers serving patients with complex social risk factors, such as food insecurity or homelessness, will be able to offer a menu of 14 social supports provided by experienced community-based organizations in their area as part of a patient’s integrated whole person care.