**Stakeholder Communication Update**

## December 2021

The [Department of Health Care Services](#) (DHCS) is pleased to share this bimonthly update of important events and actions at the Department. If you are not a subscriber and would like to receive these updates, please sign up on the DHCS [website](#). Check out the [Calendar of Events](#) for specific meetings and events, or visit the [Stakeholder Engagement Directory](#) for listings by program. You also can view our [State Plan Amendments (SPA)](#), and find the most [recent data](#) on Medi-Cal enrollment. For questions or suggestions, contact us at [DHCSCommunications@dhcs.ca.gov](mailto:DHCSCommunications@dhcs.ca.gov). Please also follow DHCS on social media. Thanks.



# Top News

## California Advancing and Innovating Medi-Cal (CalAIM) Updates

**Mandatory Managed Care Enrollment**

Mandatory managed care enrollment will standardize enrollment processes to help ensure populations moving between counties are subject to the same requirements, thereby eliminating variances in benefits according to aid code, population, and geographic location. There are two phases to mandatory managed care enrollment:

- For Phase I, DHCS mailed the first beneficiary notices and a frequently asked questions (FAQ) document in October to impacted beneficiaries regarding their transition into either the managed care or fee-for-service (FFS) delivery system, effective January 1, 2022.

- For Phase II, DHCS mailed the second beneficiary notices and FAQs in November regarding their transition. DHCS also mailed Medi-Cal Managed Care Choice Packets to beneficiaries eligible for managed care plan (MCP) enrollment at the end of November.

**Managed Care Benefit Standardization**

Managed care benefit standardization will help ensure consistency in the benefits delivered by managed care and FFS statewide, reducing complexity and county-to-county differences. Under benefit standardization, major organ transplants (currently only a covered benefit in County Organized Health Systems (COHS) counties) will be carved in to Medi-Cal MCPs statewide for all Medi-Cal members enrolled in a MCP, effective January 1, 2022. Additionally, the Multipurpose Senior Services Program (MSSP) will be carved out to FFS and operate as a 1915(c) MSSP waiver benefit in all Coordinated Care Initiative (CCI) demonstration counties, effective January 1, 2022. In November, MCPs in CCI counties mailed beneficiary notices and a Notice of Additional Information document to impacted beneficiaries regarding the carve out of MSSP services.

**Dental Initiatives**

On September 28, DHCS submitted State Plan Amendment (SPA) 21-0019 to the Centers for Medicare & Medicaid Services (CMS) for federal approval of CalAIM dental initiatives. The SPA is under review; the public comment period ended on September 6. The FFS and safety net clinic (SNC) provider bulletins are published on the Medi-Cal and Medi-Cal Dental websites. Please visit the DHCS website for more information about each CalAIM dental initiative, including required forms and SNC billing requirements.

## Medi-Cal COVID-19 Vaccination Incentive Program

DHCS is allocating up to $350 million to incentivize COVID-19 vaccination efforts in the Medi-Cal managed care delivery system for the service period of September 1, 2021, through February 28, 2022. Medi-Cal MCPs are eligible to earn incentive payments for activities designed to close vaccination gaps with their enrolled members, and to address vaccine uptake disparities for specific age and race/ethnicity groups. MCPs may earn up to $50 million for achieving specified process measures and $200 million for outcome measures, with $100 million available for MCPs to use for direct member incentives. Effective September 1, 2021, all 25 full-service MCPs and one population-specific health plan were approved for participation in the program, and DHCS will provide payment allocations for the approved vaccination response plans. DHCS provided baseline data (as of August 29, 2021) to the plans for vaccine uptake outcome measures on October 4, and the MCPs submitted baseline data for their process measures on October 30. The first achievement assessment period ended on October 31. Future achievement assessments will occur in January and March 2022. The high-performance pool component of the incentive program is being developed. For more information, please refer to All Plan Letter 21-010.

# Program Updates

## Adverse Childhood Experiences (ACEs) Aware

Less than two years after launching, ACEs Aware has reached two key milestones by training more than 20,500 California clinicians to screen for ACEs, thereby facilitating the ACEs screening of more than 500,000 children and adults across the state. Since December 2019, DHCS and the Office of the California Surgeon General (CA-OSG) have co-led the ACEs Aware initiative to train clinical teams to screen children and adults for ACEs in primary care settings; become eligible for directed payments through Medi-Cal; and treat the impacts of toxic stress with trauma-informed care and evidence-based interventions.

Building upon these successes, two of the University of California's nationally ranked medical centers - University of California, Los Angeles (UCLA) and University of California, San Francisco (UCSF) - have partnered with DHCS and CA-OSG to establish the UCLA/UCSF ACEs Aware Family Resilience Network (UCAAN). Led and administered through the Department of Pediatrics at the David Geffen School of Medicine at UCLA and the UCSF Center to Advance Trauma-Informed Health Care (CTHC), UCAAN leverages the rich and diverse expertise and resources of both UC campuses across disciplines to develop, promote, and sustain evidence-based methods to screen, treat, and heal from the impacts of childhood adversity.

## Annual Network Certification Update

DHCS submitted network adequacy certification documentation, including the assurance of compliance for Medi-Cal MCPs and Dental Managed Care plans to CMS on November 1. Five MCPs were placed under corrective action plans (CAP) for not fully meeting network adequacy standards. DHCS is working with the MCPs on their CAP efforts and is analyzing the most recent network adequacy data to determine MCP compliance. The MCPs will have six months to address and rectify the CAP findings. The network adequacy assurance and certification letters to CMS are available on the DHCS website.

DHCS submitted network adequacy documentation, including assurance of compliance for Mental Health Plans (MHPs) and Drug Medi-Cal Organized Delivery System (DMC-ODS) plans, to CMS on December 1. A total of 39 MHPs and 31 DMC-ODS were placed on CAPs for not fully meeting network adequacy standards. DHCS is working with the MHPs and DMC-ODS on their CAP resolution efforts and will meet with counties on a monthly basis to provide technical assistance. The MHPs and DMC-ODS will have five months to address and rectify the CAP findings, with all CAP resolution documentation and data due March 2022. The network adequacy assurance and certification letters to CMS will be posted to the DHCS website within the month of December 2022.

## Asset Limits – Non-Modified Adjusted Gross Income (MAGI) Medi-Cal

Assembly Bill (AB) 133 (Chapter 143, Statutes of 2021) added Welfare and Institutions Code (WIC) section 14005.62, which authorizes a two-phased approach to eliminating the asset test for all non-MAGI Medi-Cal programs, including long-term care and the Medicare Savings Programs. Phase I will be implemented on July 1, 2022, and will increase asset limits to $130,000 per person and $65,000 per additional person being evaluated. Phase II will be implemented on January 1, 2024, and will eliminate the asset test. In November, DHCS issued policy guidance to the counties regarding the Phase I implementation in an All County Welfare Directors Letter (ACWDL 21-31).

## Behavioral Health Continuum Infrastructure Program (BHCIP) Update

On November 1, DHCS released the Request for Application (RFA) for the BHCIP Round Two County and Tribal Planning Grant. Eligible applicants are county agencies and Tribal entities. These grant funds will allow county and Tribal partners to plan how best to address local behavioral health facility needs, along with developing strategies and action steps to meet these needs. Grant amounts will be up to $150,000. The BHCIP's goal is to expand behavioral health infrastructure capacity statewide, and this grant is the second in a series of six rounds of available funding. The RFA is available at https://www.infrastructure.buildingcalhhs.com/. For more information, please email BHCIP@dhcs.ca.gov, visit the DHCS website, or go to the BHCIP project website.

## Behavioral Health Federal Grants Update

On October 25, DHCS awarded nearly $77.3 million to the Sierra Health Foundation: Center for Health Program Management to implement the Recovery Services Project (RSP). The Center will make available more than $73.5 million through a RFA to support statewide recovery services for individuals with serious mental illness (SMI), serious emotional disturbances (SED), and substance use disorders (SUD). DHCS and the Center will conduct extensive community engagement with diverse stakeholders to define recovery services programs and better understand the unique recovery services needs of local communities. DHCS and the Center will subsequently integrate community feedback into the RFA process to determine the best use of grant funds that reflects these community needs. Depending on the findings of the community engagement process, grantees may:

- Support the development of local recovery community support institutions.

- Develop strategies and educational campaigns, trainings, and events to reduce recovery-related stigma and discrimination at the local level.

- Expand the use of evidence-based recovery models for SMI, SED, and SUD.

- Provide SMI, SED, and SUD recovery resources and support system navigation.

- Improve the accessibility of peer recovery support services to diverse populations.

- Collaborate and coordinate with local private and nonprofit clinical health care providers, the faith community, city, county, state, and federal public health agencies, and criminal justice response efforts in expanding recovery services.

For more information about the RSP, please email BHRRP@dhcs.ca.gov or visit the DHCS website.

## CalHOPE

The CalHOPE Crisis Counseling Assistance and Training Program (CCP) received federal approval to extend services, allowing the program to continue through February 9, 2022, providing emotional support for all Californians. CalHOPE Connect provides CCP services through the chat feature. CalHOPE also continues to partner with Together for Wellness and Juntos por Nuestro Bienestar, which feature evidence-based community resources to help manage stress and anxiety; the CalHOPE Warm Line, (800) 317-HOPE (4673), which connects callers to other people who have persevered through struggles with stress, anxiety, and depression; CalHOPE Redline connecting urban Native American Indian and Alaskan Natives to resources and providing outreach through phone, chat, and in-person services; and CalHOPE Student Support, which develops courses to train teachers and school staff to identify students suffering from mental distress, provide brief interventions, and refer children and their families to mental health providers.

The IndieFlix Foundation, in partnership with CalHOPE, Blue Shield of California, and the California Department of Education, developed ANGST: Building Resilience, a film based on a mental health support program, endorsed by educators, psychiatrists, and mental health advocates. The film includes Olympic swimmer Michael Phelps, who spoke of his own challenges with anxiety. The kick-off event was held on October 19, and the film aired on Sacramento PBS affiliate KVIE on October 20. The program will be provided to all California public middle and high schools during the 2021-2022 academic year.

## Certification of Compliance – Transfer, Discharge, and Refusal to Readmit Hearing Decisions

In December, DHCS will post a certification of compliance to its website. Pursuant to AB 133 (Chapter 143, Statutes of 2021), section 14126.029 was added to the WIC, requiring long-term care facilities to timely comply with a hearing decision of DHCS' Office of Administrative Hearing and Appeals finding that a long-term health care facility improperly transferred, discharged, or refused to readmit a resident. Once posted, long-term care facilities will be required to submit the certification pursuant to the instructions provided. The certification form will be included with each decision.

To demonstrate compliance, long-term health care facilities must file a certification of compliance with DHCS within three calendar days of the date the hearing decision is served. If a facility fails to timely file the certification or timely comply with the hearing decision, DHCS may assess a penalty of $750 per day for each day the facility fails to comply, up to an aggregate of $75,000.

## Continuous Glucose Monitors

DHCS will add Therapeutic Continuous Glucose Monitoring Systems as a pharmacy-billed medical supply benefit through Medi-Cal Rx, effective January 1, 2022. The coverage criteria and provider bulletins will be available on the Medi-Cal Rx website the first week of December 2021.

## Dental Integration - Health Plan of San Mateo (HPSM)

Senate Bill (SB) 849 (Chapter 47, Statutes of 2018) authorized DHCS to establish a dental integration program in San Mateo County to include Medi-Cal dental services as a covered benefit under HPSM. The purpose of this effort is to test the impact on oral care access, quality, utilization, and medical costs by delivering covered dental services under the Medi-Cal managed care delivery system. The integration of the dental benefit into HPSM will take effect on January 1, 2022, and will be authorized for no more than six years, ending on December 31, 2027. All Medi-Cal members enrolled in HPSM will receive their dental care through HPSM in addition to their medical services. HPSM members were mailed notices in October, November, and December to inform them of this benefit change. Provider bulletins are also posted on the Medi-Cal Dental website.

## Dental Transformation Initiative (DTI)

As of October 31, 2021, the total amount of Domain 2 payments issued is approximately $210 million, and 3,461 providers have opted in to participate. The goal of Domain 2 is to diagnose early childhood caries by using caries risk assessments to treat it as a chronic disease and to introduce a model that prevents and mitigates oral disease. For more information, please visit the DHCS website. In accordance with the Medi-Cal 2020 waiver extension, DTI will end on December 31, and payments will continue for dates of service through December 31, 2021.

## Drug Medi-Cal Organized Delivery System (DMC-ODS)

The DMC-ODS 1115 demonstration waiver is active in 37 counties, covering 96 percent of California's population. DHCS is in negotiations with CMS for approval of the DMC-ODS program in the new waiver period, from 2022-2026; DHCS developed the policies included in the new waiver through multiple stakeholder engagement meetings and stakeholder comments on a draft information notice posted in November. The final information notice outlining updated DMC-ODS policy will be released in December.

Also, DHCS implemented SB 823 (Chapter 781, Statutes of 2018) through Behavioral Health Notice No.: 21-001, which requires DHCS' licensed alcohol and other drug (AOD) recovery treatment facilities to obtain at least one DHCS Level of Care (LOC) Designation and/or at least one residential ASAM LOC Certification consistent with all of its program services. As of October 2021, DHCS has processed 1,527 total designations for AOD providers in California. Of those designations, 1,227 are active for 437 providers. More information about the DMC-ODS is available on the DHCS website.

Additionally, DHCS contracts with an External Quality Review Organization (EQRO) to review DMC-ODS counties annually regarding access, timely access, and quality of care. The information from these reviews is summarized in annual county reports, which are posted on the EQRO website. Through a contract with UCLA Integrated Substance Abuse Programs, DHCS is conducts annual DMC-ODS waiver evaluation activities to measure and monitor program outcomes; DMC-ODS waiver evaluation reports are posted on the UCLA ISAP website.

## Home and Community-Based Alternatives (HCBA) Waiver Amendment

DHCS will be submitting a technical amendment to CMS to increase the daily reimbursement rates to providers for HCBA Waiver Intermediate Care Facilities for the Developmentally Disabled - Continuous Nursing Care (ICF/DD-CNC), pursuant to AB 133 (Chapter 143, Statutes of 2021). The rate increases will go into effect upon authorization by CMS, which can be up to 90 days after submission.

The HCBA waiver provides long-term, community-based services and supports to Medi-Cal-eligible beneficiaries in the community setting of their choice. These services include private duty nursing, case management, and personal care services necessary to maintain the health and safety of an individual with nursing level of care needs in a community setting instead of an institution.

## MCP Procurement - Model Changes Update

DHCS completed its review of the approved county ordinances that were required to be submitted to DHCS by October 10. A final list of counties approved to move forward with a Plan Model change was posted on the DHCS website.

Additionally, by December 3, MCPs were each required to submit for DHCS review a network contracting strategy; those strategies are being reviewed. Final approval to implement on January 1, 2024, will be based upon MCP operational readiness and CMS approval. Additional information is available on the DHCS website.

## Medi-Cal Health Enrollment Navigators Project

DHCS is expanding and extending efforts to enroll hard-to-reach Medi-Cal populations. Effective July 1, 2019, AB 74 (Chapter 23, Statutes of 2019) appropriated $59.7 million for DHCS to partner with counties and community-based organizations (CBOs) to conduct Medi-Cal outreach, enrollment, retention, and navigation services for hard-to-reach Medi-Cal and potentially eligible Medi-Cal populations. Due to the community health impacts of COVID-19, navigator services are now more critical than ever. Project partners have implemented innovative and creative approaches to contact and enroll eligible populations in their local communities, provided vaccine information and outreach at the local level, and engaged college students at all levels. The current phase of the project allows CBOs and counties to incorporate new or expand existing activities for all participants, and continue adjusting their outreach and enrollment approaches to overcome challenges presented by COVID-19. As of November 2021, all remaining funding was allocated to project partners, enabling them to extend their project performance period to June 30, 2022. Information and updates related to the project are available on the DHCS website.

## Medi-Cal Rx Implementation Update

Medi-Cal Rx is scheduled to launch on January 1, 2022. Outreach and education activities are ongoing and will run through December. DHCS sent a 60-day notice to all Medi-Cal beneficiaries, and will send a 30-day notice to all FFS beneficiaries. MCPs will also send a 30-day notice to their members as part of a broader outreach campaign. Additionally, DHCS continues to host Medi-Cal Rx stakeholder engagements and meetings. Upcoming public forum webinars will be posted on the DHCS website. For questions or comments related to Medi-Cal Rx, please email RxCarveOut@dhcs.ca.gov.

## Medication Therapy Management (MTM)

On September 15, DHCS received CMS approval of SPA 21-0028, which adds MTM as a payable FFS pharmacy service provided in conjunction with certain complex chronic medical conditions. DHCS is finalizing provider contracts and expects to initiate the program in December. To participate in the program, Medi-Cal-enrolled pharmacies will be required to enter into a contract with DHCS. The contract will outline the requirements and guidelines necessary to receive reimbursement under this methodology.

## Multipurpose Senior Services Program (MSSP) Waiver Amendment

On November 19, DHCS submitted an amendment to CMS, carving out the MSSP program from the 1115 Bridge to Reform Demonstration waiver known as the Coordinated Care Initiative (CCI) and amending the 1915(c) waiver. On October 1, DHCS, in collaboration with the California Department of Aging, posted the waiver for a 30-day public comment period. The update to the 1915(c) waiver will revert all CCI counties (except San Mateo County) back into the FFS delivery system. Additional changes to the waiver include an update to the geographic service area of counties already being served, anticipated Electronic Visit Verification (EVV) implementation, and adding participant slots in relation to the 2021 Budget Act.

The MSSP waiver provides social and health care management for frail, elderly clients who qualify for placement in a nursing facility, but who wish to remain in the community. The objective of the MSSP is to avoid the premature placement of persons in nursing facilities, while fostering independent living in the community.

## Older Adult Expansion

AB 133 (Chapter 143, Statutes of 2021) expanded eligibility for full-scope Medi-Cal to individuals who are 50 years of age or older, and who do not have satisfactory immigration status or are unable to establish satisfactory immigration status, if otherwise eligible. DHCS is targeting system readiness and the implementation of the older adult expansion on May 1, 2022. DHCS has provided policy guidance to counties in ACWDL 21-13. DHCS will hold monthly advocate and county workgroup meetings through the implementation of this expansion. DHCS will post additional program details on its website in the coming months.

## Postpartum Care Coverage

Under the provisions of the American Rescue Plan Act of 2021 (ARPA), DHCS is broadening the scope of Medi-Cal coverage for eligible and newly eligible pregnant individuals. Medi-Cal will cover the full breadth of medically necessary services, during both the pregnancy and postpartum periods, by adding ten months of coverage following the current 60-day postpartum period, for a total of 12 months. In the interest of aligning the Medi-Cal Access Program (MCAP) with the Medi-Cal postpartum care extension policies described above, DHCS submitted a Children's Health Insurance Program (CHIP) SPA, CA-21-0032, proposing to create a Health Services Initiative (HSI) to extend the provisions allowed in ARPA to MCAP. On September 14, DHCS received federal approval for the HSI, allowing a retroactive effective date of July 1, 2020. Under the provisions of ARPA and the HSI, individuals will maintain coverage through their pregnancy and 12-month extended postpartum coverage period regardless of income changes, citizenship, or immigration status. This ARPA policy for Medi-Cal is targeted for implementation on April 1, 2022.

## Quality Improvement Awards - 2021

DHCS annually recognizes Medi-Cal MCPs that have excelled in improving the quality of health care they provide to the nearly 12 million members receiving Medi-Cal benefits and services through the managed care delivery system. DHCS congratulates all of the winners, thanks them for their efforts, and encourages them to share promising practices with other health plans serving Medi-Cal members. To view the award recipients, as well as awards details, please visit the DHCS website.

### *Smile, California* Campaign for Medi-Cal Dental Services

Five "Behind the Smiles" Medi-Cal Dental provider testimonial videos were published to the *Smile, California* website and posted to *Smile, California's* Instagram and Facebook accounts, highlighting why dentists enjoy participating in the Medi-Cal Dental program. *Smile, California* also developed a new educational brochure that highlights important information on aging and oral health. The new "A Healthy Smile Never Gets Old!" brochure explains common dental problems and symptoms associated with older adults, information on how to access and pay for dental care, tips for good oral health, and details on non-medical transportation services.

Additionally, *Smile, California* partnered with nine foodbanks in hard-to-reach communities, which serve a majority of the Medi-Cal member population, to distribute the "Healthy Smiles Start with Healthy Foods" insert and *Smile, California*-branded floss cards during their planned holiday food distribution drives.

## Stakeholder Meetings and Webinars

### CalAIM Justice-Involved Meeting

On November 16, DHCS held a CalAIM Justice-Involved sub-workgroup meeting via webinar on Medi-Cal pre-release application processes. This sub-workgroup will meet monthly from November 2021 through July 2023 to discuss the county inmate Medi-Cal pre-release application mandate and to recommend any enhancements to existing state inmate pre-release application processes. Sub-workgroup members provide regular input on key policies and implementation issues to support the launch and ongoing success of CalAIM justice-involved initiatives. More information is available on the DHCS website. Please email CalAIMJusticeAdvisoryGroup@dhcs.ca.gov with any questions.

### CalAIM Managed Long-Term Services and Supports (MLTSS) and Duals Integration Workgroup Meeting

On January 20, 2022, DHCS will hold the CalAIM MLTSS and Duals Workgroup meeting via webinar. Agenda items may include Dual Eligible Special Needs Plan network guidance, including network adequacy, aligned networks, and continuity of care. Other topics may include reporting requirements and quality measures. This workgroup meeting is open to the public. Background materials, transcripts, and video recordings of the previous workgroup meetings, along with additional information about the workgroup, are posted on the DHCS website.

### Community Health Workers (CHW) Stakeholder Workgroup Meeting

On December 1, DHCS hosted the CHW stakeholder workgroup meeting. Based upon stakeholder input at two previous meetings, DHCS developed a draft SPA for informal review by CMS and stakeholders. DHCS will continue to work with stakeholders to refine the draft SPA prior to formally submitting it to CMS in March 2022. The benefit is scheduled to start July 1, 2022. More information about the CHW benefit is available on the DHCS website.

### Coordinated Care Initiative (CCI) Stakeholder Update Webinar

On December 9, DHCS will hold the next quarterly CCI stakeholder meeting via webinar. Agenda items include DHCS program updates, Cal MediConnect (CMC) dashboard updates, and the release of Durable Medical Equipment fact sheets. Registration for the December 9 webinar is required. Background materials, transcripts, and video recordings of the previous webinars, and additional information about CCI and CMC, are posted on the DHCS website.

## Doula Services Stakeholder Workgroup Meeting

On November 19, DHCS held a second stakeholder meeting regarding the addition of doula services as a Medi-Cal benefit starting on July 1, 2022. DHCS is working with stakeholders to identify required elements for a SPA and to develop the benefit, including qualifications of doulas to provide services and defining the benefit. More information about the doula benefit is available on the DHCS website.

## Electronic Visit Verification (EVV) Phase II

On December 17, DHCS will host the next EVV Phase II stakeholder meeting. The webinar will provide critical information to all providers who are required to comply with EVV requirements, including the process for registering with the Provider Self-Registration portal, the process for registering for the CalEVV training portal, key policy decisions, and an overview of DHCS' stakeholder engagement strategy over the coming months.

DHCS, in partnership with the Departments of Developmental Services, Public Health, Aging, and Social Services and the Office of Systems Integration (OSI) held the previous EVV Phase II stakeholder meeting on November 19. In November, Sandata Technologies, LLC also hosted three live demonstrations on the CalEVV system. Federal law mandates that states implement EVV for all Medicaid-funded personal care services and home health care services that require an in-home visit by a provider.

To be added to the EVV Phase II stakeholder e-mail list, please contact EVV@dhcs.ca.gov. For more information about EVV Phase II or for information on upcoming stakeholder meetings, please visit the DHCS website.

## Medi-Cal Children's Health Advisory Panel (MCHAP) Meeting

On December 9, DHCS will host the next MCHAP meeting via webinar. Expected meeting topics include updates from the Director's Office on COVID-19 and the CalAIM initiative. The meeting will also include discussions on the Children and Youth Behavioral Health initiative (CYBHI) and building of the behavioral health workforce for CYBHI. Additionally, the meeting will include an update on children's enrollment. The MCHAP is a 15-member independent statewide advisory body that advises DHCS on matters relevant to children enrolled in Medi-Cal. The agenda and registration link for the December 9 meeting are posted on the DHCS website. Please email MCHAP@dhcs.ca.gov with any questions.

## Medi-Cal Consumer-Focused Stakeholder Workgroup (CFSW) Meeting

On December 3, DHCS hosted the CFSW meeting via webinar. The next CFSW meeting will be held on January 7, 2022. Additional information about the workgroup is available on the DHCS website.

## Medi-Cal Dental Los Angeles Stakeholder Meeting

On November 18, DHCS hosted the Medi-Cal Dental Los Angeles Stakeholder meeting via webinar. The purpose of the meeting was for Los Angeles County stakeholders to provide input on how DHCS can best perform oversight of and guide its dental program to improve dental utilization rates and the delivery of oral health and dental care services, including prevention and education services within dental managed care and FFS dental. Additional information is available on the DHCS website.

## Medi-Cal Managed Care Advisory Group (MCAG) Meeting

On December 2, DHCS hosted the quarterly MCAG meeting via webinar. The meeting focused on updates requested from stakeholders through the MCAG inbox. The purpose of the MCAG is to facilitate communication between DHCS and all interested parties and stakeholders. DHCS provides program updates, and stakeholders are able to ask

questions about issues that affect managed care beneficiaries. MCAG members generally consist of stakeholders and advocates, legislative staff, health plan representatives, health plan associations, and providers. To request agenda items for future meetings, please email advisorygroup@dhcs.ca.gov. To view meeting information, materials, and historical documents, please visit the DHCS website.

## Telehealth Advisory Workgroup Meeting
DHCS conducted three Telehealth Advisory Workgroup meetings in September and October. Pursuant to AB 133 (Chapter 143, Statutes of 2021), the workgroup met virtually to address utilization management and billing protocols for telehealth coverage in the Medi-Cal program. The discussions held during these workgroup meetings will yield recommendations to help inform the proposed 2022-23 Governor's Budget. Information about the meetings is available on the DHCS website.

# Reports

## Managed Care Performance Monitoring Dashboard Report
The October release of the Managed Care Performance Monitoring Dashboard was published on the California Health & Human Services Agency Open Data Portal on November 1. The dashboard is a monitoring tool produced quarterly that includes comprehensive data on a variety of measures, such as enrollment, health care utilization, appeals and grievances, network adequacy, and quality of care. Information in the dashboard assists DHCS and its stakeholders with observing and understanding MCP performance statewide. The October release reports on monthly enrollment, demographics, and hearings totals from April 2020 to March 2021, monthly utilization totals from October 2019 to September 2020, and quarterly grievance totals from mid-2019 to early 2021.

## Quality Incentive Pool (QIP) Program Year Three (PY3) Evaluation Report
On October 29, DHCS submitted the QIP PY3 Evaluation Report to CMS and posted it on the DHCS website. Beginning July 1, 2017, DHCS directed Medi-Cal MCPs to make performance-based quality incentive payments to 17 participating Designated Public Hospital (DPH) systems based on their performance on at least 20 quality measures that address primary, specialty, and inpatient care, including measures of appropriate resource utilization. To receive QIP payments, DPHs must achieve specified improvement targets. In PY3, the measurement period and payment targets were modified with CMS' approval due to COVID-19. Hospitals could receive full payment if their performance exceeded a certain threshold, even if performance was worse than the prior year. The PY3 evaluation report provides comparisons between PY2 and PY3 for the quality of inpatient and outpatient services provided to Medi-Cal members at DPHs. DHCS found that all but one DPH (94 percent) met their payment target for all 20 measures, and there was aggregate improvement for more than half of the measures (61 percent).