

NOTICE OF A REGULAR MEETING OF THE CALOPTIMA BOARD OF DIRECTORS' WHOLE-CHILD MODEL FAMILY ADVISORY COMMITTEE

TUESDAY, FEBRUARY 23, 2021 9:30 A.M.

CALOPTIMA 505 CITY PARKWAY WEST, SUITE 107-N Orange, California 92868

Agenda

This agenda contains a brief, general description of each item to be considered. The Committee may take any action on all items listed. Except as otherwise provided by law, no action shall be taken on any item not appearing in the following agenda.

Information related to this agenda may be obtained by contacting the CalOptima Clerk of the Board at 714.246.8806 or by visiting our website at <u>www.caloptima.org</u>. In compliance with the Americans with Disabilities Act, those requiring special accommodations for this meeting should notify the Clerk of the Board's office at 714.246.8806. Notification at least 72 hours prior to the meeting will allow time to make reasonable arrangements for accessibility to this meeting.

To ensure public safety and compliance with emergency declarations and orders related to the COVID-19 pandemic, individuals are encouraged <u>not</u> to attend the meeting in person. As an alternative, members of the public may:

- 1) Listen to the live audio at +1 (562) 247-8422 Access Code: 682-376-469 or
- 2) Participate via Webinar at: <u>https://attendee.gotowebinar.com/register/6488970594518857483</u> rather than attending in person. Webinar instructions are provided below.
- I. CALL TO ORDER Pledge of Allegiance
- II. ESTABLISH QUORUM

III. PUBLIC COMMENT

At this time, members of the public may address the Whole-Child Model Family Advisory committee on matters not appearing on the agenda, but within the subject matter jurisdiction of the Committee. Speakers will be limited to three (3) minutes.

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IV. APPROVE MINUTES

A. Approve Minutes of the October 27, 2020 Regular Meeting of the CalOptima Board of Directors' Whole-Child Model Family Advisory Committee

V. MANAGEMENT REPORTS

- A. Chief Executive Officer Report
- B. Chief Operating Officer Report
- C. Chief Medical Officer Report

VI. INFORMATIONAL ITEMS

- A. Whole-Child Model Family Advisory Committee Member Updates
- B. COVID-19 Update
- C. Medi-Cal Rx Update
- D. California Children's Service Advisory Group Update
- E. Durable Medical Equipment Update
- F. Medical Therapy Program
- G. Federal and State Legislative Update
- H. California Advancing and Innovating Medi-Cal (CalAIM) Update

VII. COMMITTEE MEMBER COMMENTS

VIII. ADJOURNMENT

WEBINAR INFORMATION

1. Please register for the Whole-Child Model Family Advisory Committee Meeting on February 23, 2021 9:30 AM PDT at:

https://attendee.gotowebinar.com/register/6488970594518857483

2. After registering, you will receive a confirmation email containing a link to join the webinar at the specified time and date.

Note: This link should not be shared with others; it is unique to you.

Before joining, be sure to check system requirements to avoid any connection issues.

3. Choose one of the following audio options:

TO USE YOUR COMPUTER'S AUDIO:

When the webinar begins, you will be connected to audio using your computer's microphone and speakers (VoIP). A headset is recommended.

--OR---

TO USE YOUR TELEPHONE:

If you prefer to use your phone, you must select "Use Telephone" after joining the webinar and call in using the numbers below.

United States: +1 (562) 247-8422 Access Code: 682-376-469 Audio PIN: Shown after joining the webinar

MINUTES

REGULAR MEETING OF THE CALOPTIMA BOARD OF DIRECTORS' WHOLE CHILD MODEL FAMILY ADVISORY COMMITTEE

October 27, 2020

A Regular Meeting of the CalOptima Board of Directors' Whole-Child Model Family Advisory Committee (WCM FAC) was held on October 27, 2020, CalOptima, 505 City Parkway West, Orange, California and via teleconference (Go-to-Webinar) in light of the COVID-19 public health emergency and consistent with Governor Newsom's executive orders EO-N-25-20 and EO-N-29-20, which temporarily relax the teleconferencing limitations of the Brown Act.

CALL TO ORDER

Kristen Rogers, WCM FAC Chair called the meeting to order at 9:37 a.m. and led the Pledge of Allegiance.

ESTABLISH QUORUM

Members Present:	Kristen Rogers, Chair; Brenda Deeley, Vice Chair; Maura Byron; Cathleen Collins; Jacqui Knudsen; Monica Maier; Malissa Watson
Members Absent:	Sandra Cortez-Schultz; Kathleen Lear
Others Present:	Richard Sanchez, Interim Chief Executive Officer; Ladan Khamseh, Chief Operations Officer; David Ramirez, M.D., Chief Medical Officer; Gary Crockett, Chief Counsel; Emily Fonda, M.D., Deputy Chief Medical Officer; Belinda Abeyta, Executive Director, Operations; Betsy Ha, Executive Director, Quality and Population Health Management; Candice Gomez, Executive Director, Program Implementation; Tracy Hitzeman, Executive Director, Clinical Operation; Thanh-Tam Nguyen, M.D., Medical Director; Kris Gericke, Director, Pharmacy Management; Albert Cardenas, Director, Customer Service; Andrew Tse, Associate Director, Customer Service; Vy Nguyen, Manager, Customer Service; Jackie Mark, Sr. Policy Advisor, Government Affairs; Cheryl Simmons, Staff to the Advisory Committees; Praveena Lal, Administration Assistant, Customer Service

MINUTES

<u>Approve the Minutes of the August 27, 2020 Regular Meeting of the CalOptima Board of Directors' Whole-Child Model Family Advisory Committee</u>

Action: On motion of Member Byron, seconded and carried, the WCM FAC Committee approved the minutes of the August 27, 2020 meeting. (Motion carried 7-0-0; Members Sandra Cortez-Schultz and Kathleen Lear absent)

PUBLIC COMMENT

There were no public comments

Minutes of the Special Meeting of the CalOptima Board of Directors' Whole-Child Model Family Advisory Committee October 27, 2020 Page 2

CEO AND MANAGEMENT REPORTS

Chief Executive Officer Update

Richard Sanchez, Interim Chief Executive Officer, updated the committee on the possibility of a Medi-Cal Expansion rate reduction that had been announced by the Department of Health Care Services (DHCS) in September. He noted that recently DHCS had notified CalOptima that the Medi-Cal Expansion rate cuts would not be as large as anticipated and that DHCS had agreed to work with CalOptima on the requested glidepath for these rate reductions. Mr. Sanchez also informed the committee that CalOptima had recently been recognized by the DHCS for meeting quality metrics set by the State and that CalOptima was the only plan in California to meet all of the established metrics.

Chief Medical Officer Update

David Ramirez, M.D., Chief Medical Officer mentioned that in general the Whole Child Model program has gone really well and how CalOptima was still working to make it even better. He noted that the Clinical Advisory Committee had been working on a number of areas but noted that it has been a successful partnership and collaboration.

INFORMATION ITEMS

Whole-Child Model Member Updates

Chair Rogers reminded the members that there were still two Authorized Family Member seats available and asked for help with recruitment for these seats. Chair Rogers also announced that there would be a Joint Meeting on December 10, 2020 for all the Board Advisory Committees and that more information would be sent out closer to the date. She also reminded the members that the next Whole Child Model Family Advisory Committee meeting will be held on February 23, 2021 as the December meeting had been cancelled due to the joint meeting. Chair Rogers also reminded the members to please complete their mandatory compliance courses if they had not already done so as the November 6, 2020 deadline was fast approaching.

California Children Services Advisory Group Update

Tracy Hitzeman, Executive Director, Clinical Operations, provided verbal update on DHCS's California Children Services Advisory Group (CCS AG) meeting. Ms. Hitzeman noted that they were presented with an updated draft of the Whole-Child Model (WCM) dashboard and were advised that the CCS classic dashboard was not ready and that the CalOptima and the other Plans were looking forward to when this is released for review. She also noted that an update was provided on Medical Therapy Unit (MTU) guidance during COVID-19 which added the ability for children who needed to be seen at the MTU for critical or urgent needs. Specific criteria have been outlined and this information can found on the DHCS website.

California Children Services Aging Out Transition

Tracy Hitzeman also provided a verbal update on the transition of care for WCM members who were approaching age 21 and who would be aging out of CCS and transitioning to full-scope Medi-Cal. She noted that the goal was to provide education and initiate planning with the member/family

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member's for future health care and other life issues. This would also involve working with the primary care physician and others involved to smoothly transfer care to adult providers from pediatric providers.

Medi-Cal Rx Update

Kristin Gericke Pharm.D, Director, Pharmacy Management provided a verbal update on the Medi-Cal Rx transition to Magellan Health Care which is slated to be effective on January 1, 2021. Dr. Gericke noted that 30, 60 and 90 day notices have begun with CalOptima responsible for the 30-day notice to the members.

Federal and State Legislative Update

Jackie Mark, Sr. Policy Advisor, Government Affairs provided a verbal update on the Federal and State legislative agenda and advised that September 30, 2020 had been the deadline date for Governor Newsom to sign or veto legislation. Ms. Mark also discussed Assembly Bill (AB) 2276 which relates to childhood blood lead screening tests and accessibility to get tested. She also discussed the delay being experienced in passing the next COVID relief bill due to the upcoming election.

ADJOURNMENT

Chair Rogers reminded the committee members that the next meeting would be a joint meeting on December 10, 2020 at 8:00 a.m.

Hearing no further business, Chair Rogers adjourned the meeting at 10:44 a.m.

<u>/s/ Cheryl Simmons</u> Cheryl Simmons Staff to the Advisory Committees

Approved: February 23, 2021



M E M O R A N D U M

DATE:	January 27, 2021
TO:	CalOptima Board of Directors
FROM:	Richard Sanchez, Interim CEO
SUBJECT:	CEO Report — February 4, Board of Directors Meeting
COPY:	Sharon Dwiers, Clerk of the Board; Member Advisory Committee; Provider Advisory Committee; OneCare Connect Member Advisory Committee; and Whole-Child Model Family Advisory Committee

Biden Administration Will Bring Changes to Federal Health Care Priorities

On January 20, President Joe Biden and Vice President Kamala Harris were inaugurated. President Biden's top priority is COVID-19 response and vaccine distribution, with a goal of administering 100 million vaccines within his first 100 days in office. Shortly after being sworn in, he took executive action to rejoin the World Health Organization, restore the Obama-era White House global health security office, and mandate the use of masks on all federal properties and by all federal employees. The new Administration also released an outline of a \$1.9 trillion COVID-19 relief plan, which would require approval by Congress. Elements include \$20 billion for a national vaccination program, \$50 billion for testing, \$30 billion for medical supplies and personal protective equipment, and \$350 billion for state and local governments. Related to Medicaid, the president wants to increase the Medicaid Federal Medicaid Assistance Percentage to 100% for vaccine administration fees, strengthen and expand the Affordable Care Act, and address racial and ethnic health care disparities. Democrats' new majority in the Senate may put other health care policies within reach, such as the creation of a public option or Medicare early buy-in plan. I will keep your Board informed of key federal health policy changes going forward.

Proposed State Budget Increases Medi-Cal Funding, Reintroduces Plans for Innovation

On January 8, 2021, Gov. Gavin Newsom released the proposed Fiscal Year 2021–22 State Budget. As California continues to respond to the public health emergency, Gov. Newsom's proposed budget expands upon existing health care programs while reintroducing proposals that were delayed due to last year's budget restraints and the COVID-19 pandemic. Among other health care actions, the proposed budget includes \$122.2 billion in Medi-Cal spending (a 6% increase from the prior year), extends funding for Medi-Cal optional benefits until 2022 and reintroduces the California Advancing and Innovating Medi-Cal (CalAIM) proposal. California has until July 1, 2021, to enact a state budget. Following my report is CalOptima's analysis of the proposed budget.

CalAIM Proposal Relaunched, Enhances Care Coordination for High-Risk Members

Concurrent with the release of Gov. Newsom's FY 2021–22 proposed budget, the Department of Health Care Services (DHCS) released a revised CalAIM proposal. CalAIM is a multiyear initiative to improve Medi-Cal beneficiaries' quality of life and health outcomes by implementing delivery system, program and payment reforms. The proposal was initially released in late 2019 but put on hold due to the pandemic. The new proposal revitalizes the Enhanced Care Management and In Lieu of Services initiatives and calls for implementation on

CEO Report January 27, 2020 Page 2

January 1, 2022. CalAIM's relaunch also brings the restart of state-sponsored workgroups this month, with a plan to finalize requirements in the spring. CalOptima will participate in the state's stakeholder-feedback process and has begun local coordination efforts by meeting with the Orange County Health Care Agency (HCA) on January 22. Soon, CalOptima will also engage our advisory groups, health networks, provider associations, community collaboratives and others to ensure awareness of the significant elements in CalAIM. A white paper summarizing CalAIM initiatives follows my report.

Be Well OC Campus in Orange Ready to Serve With Integrated Mental Health System

On January 13, CalOptima was proud to be part of an outstanding virtual ribbon cutting event for the Be Well OC campus in Orange. Representing CalOptima as a contributing partner to the campus, I was included among the speakers asked to highlight the benefits of the transformed and integrated mental health care system. My message emphasized the value of Be Well's seamless continuum of care and the availability of enhanced Medi-Cal services for CalOptima members. Starting on January 25, members have access to sobering stations to recover safely from substance use and receive additional services or referrals. On February 1, Be Well's crisis stabilization unit will be operational to support members experiencing an acute mental health crisis. View the recorded event here.

COVID-19 Vaccination Efforts Focus on Collaboration, Communication

CalOptima's activity has shifted to raising vaccine awareness and speeding distribution. Below are summaries of selected efforts surrounding vaccination response.

- *Vaccine Equity Pilot Program:* On January 26, the Board of Supervisors approved a COVID-19 Vaccine Equity Pilot Program to support CalOptima, our health networks and community clinics in serving targeted Medi-Cal members with co-morbidities over the age of 65. The program will add resources at vaccination sites specific for these members and promote availability of the vaccine through targeted outreach. The goal is to reach up to 96,000 CalOptima members.
- *Program of All-Inclusive Care for the Elderly (PACE) Vaccination Clinic:* In a collaborative effort between PACE, HCA, Mercy Pharmacy Group and Othena, CalOptima held the first of four COVID-19 vaccine clinics at the Garden Grove PACE center on Saturday, January 23. Vaccines were administered to 172 PACE participants and 54 staff. The next clinic is January 28, and the third and fourth clinics are in late February to administer the second dose. The event was a success, with many participants and the family members who transported them expressing emotions of joy and relief.
- *Long-Term Care Vaccination:* CalOptima's Long-Term Care nurses conduct biweekly phone calls with contracted nursing facilities and have recently added vaccination data collection to their check-ins. Data from late January, from 52 of 70 facilities reporting, indicates that more than 2,600 CalOptima nursing home members have been vaccinated thus far.
- *Vaccine Hesitancy Survey:* In response to the directive at your Board's Special Meeting on January 7, CalOptima will conduct a vaccine hesitancy survey of our members. The Population Health Management team will collaborate with HCA staff to leverage the HCA vaccine hesitancy survey results and identify unanswered questions to include in the CalOptima survey. We will design appropriate or alternative survey methodology that will lead to actionable plans to address the root causes of vaccine hesitancy, focusing on CalOptima's hard-to-reach and most vulnerable populations.

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- *Vaccination Advertising Campaign:* Launching in February, CalOptima's vaccination ad campaign has been approved by the state and shared with the County for coordination. The first part of the campaign emphasizes placement in local newspapers, including English, Spanish and Vietnamese language papers. Starting in March, ads for billboards, transit shelters, Spanish radio and social media will be added. The campaign will run through the end of June, and across that period, we will introduce new ad designs to keep the campaign fresh. Further, we are working closely with the County to leverage our media buy.
- *Media Coverage:* The Board-approved \$35.4 million program to offer two \$25 incentives for members to receive the vaccine drew significant media coverage on January 20. The Orange County Register ran an article on the front page, and KABC's 3 p.m. and 6 p.m. news also mentioned the incentives in a larger story about vaccination sites. See the link <u>here</u>.

Medi-Cal Enrollment Awareness Material Shared Broadly in the Community

Considering the pandemic's economic impact on individuals, CalOptima's Community Relations team is reaching out to organizations that serve potential members. This month, the team connected with more than 80 community-based groups, collaboratives, shelters and affordable housing developers to raise awareness about the Medi-Cal eligibility and application process and supply electronic educational material in CalOptima's threshold languages of English, Spanish, Vietnamese, Korean, Farsi, Arabic and Chinese. Nearly 40 of the organizations have already requested printed copies of the materials, posted information their websites and social media platforms, or shared information with their clients.

Medi-Cal Rx Transition Still Anticipated for April 1

On January 6, DHCS held a webinar to provide an update regarding the transition to Medi-Cal Rx. DHCS staff stated that go-live remains April 1, and the state distributed a member notice in late December with that implementation date. Magellan discussed its launch of Transitional Support Services (TSS), with responsibilities that include operating a customer service support center, expanding web portal functionality and providing managed care plan training with Magellan clinical liaisons. CalOptima will meet twice with the clinical liaison team this month. Between now and April 1, the TSS call center will respond to questions about Medi-Cal Rx, web functionality, and training and education, but will not assist with questions about member eligibility, authorizations or claims. Separate yet relevant to Medi-Cal Rx, Centene Corp. announced January 4 that it is acquiring Magellan.

CalOptima Completes Employee Engagement Survey Data Collection

To share their feedback, 1,085 employees (77%) completed The Pulse Employee Engagement Survey this month. Next, the survey vendor will compile and analyze the results by approximately March, and CalOptima leaders will use the findings to identify opportunities to strengthen engagement. A prior employee survey was conducted in July 2019 and resulted in several enhancements, including an Employee Engagement Team, a peer recognition program and education on strategic goal setting.



COVID-19 Update

Whole Child Model Family Advisory Committee February 23, 2021

Emily Fonda, M.D., Interim Chief Medical Officer Back to Agenda

COVID-19 Efforts in Progress

- Member Vaccine Hesitancy Survey
- Member Incentive Implementation
- Member Vaccination Strategy
- Communications Strategy



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COVID-19 Communications Strategy

- Awareness campaign launching February 2021
 - Print, outdoor, radio, digital and social media, social media, direct mail, virtual events
- Collateral materials
 - Member FAQs and newsletters, provider FAQs and updates
- Community outreach
 - Panel discussions and town halls
- Media pitching
 - Newspapers, TV, radio and op-ed

PROTECT YOURSELF FROM COVID-19



Getting vaccinated is **SAFE** and **EFFECTIVE**. Visit **othena.com** for info.





Our Mission To provide members with access to quality health care services delivered in a costeffective and compassionate manner





Legislative Update

Whole-Child Model Family Advisory Committee February 23, 2021

Jackie Mark, Senior Policy Advisor, Government Affairs

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Federal Legislative Update



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Federal Update

- Biden Administration COVID-19 priorities:
 - COVID-19 response and vaccine distribution
 - 100 million vaccines within his first 100 days in office
 - Proposed \$1.9 trillion COVID-19 relief plan:
 - National vaccination program
 - Testing
 - Medical supplies and personal protective equipment
 - Funding for state and local governments
- Proposed Medicaid priorities:
 - Strengthen and expand the Affordable Care Act
 - Address racial and ethnic health care disparities



State Legislative Update



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2021 State Legislative Update

- State Legislation
 - The last day for State bills to be introduced was February 19
- Proposed State Budget for Fiscal Year (FY) 2021–22
 - \$227 billion, including \$164.5 billion General Fund (GF)
- Medi-Cal Budget
 - \$122.2 billion, including \$28.4 billion GF
 - Funding for optional benefits maintained for FY 2021–22



Proposed State Budget

- California Advancing and Innovating Medi-Cal (CalAIM): \$1.1 billion
 - Enhanced Care Management
 - In Lieu of Services
 - Population Health Management
 - Full Integration
- Behavioral Health for Youth: \$400 million
 - Incentive plan to increase the number of students receiving preventive and early intervention behavioral health services
- Telehealth: \$94.8 million
 - Expands and makes permanent certain telehealth flexibilities authorized during the COVID-19 pandemic



Local Special Election



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Local Special Election

• Orange County Board of Supervisors, District 2

- Costa Mesa, Cypress, Huntington Beach, La Palma, Los Alamitos, Newport Beach, Seal Beach, Stanton, the unincorporated area of Rossmoor, and portions of Buena Park and Fountain Valley
- Election Day: Tuesday, March 9, 2021
- More information: www.ocvote.com



Our Mission To provide members with access to quality health care services delivered in a costeffective and compassionate manner



2021–22 Legislative Tracking Matrix

COVID-19 (CORONAVIRUS)

Bill Number (Author)	Bill Summary	Bill Status	Position/Notes*
AB 93 Garcia	Prioritization of Food Supply Industry Workers: Would prioritize workers in the food supply industry, such as field workers and grocery workers, for rapid testing and vaccination programs in response to pandemics, including COVID-19.	12/07/2020 Introduced	CalOptima: Watch

BEHAVIORAL HEALTH

Bill Number (Author)	Bill Summary	Bill Status	Position/Notes*
AB 77 Petrie-Norris	Jarrod's Law: States the intent of the author to introduce legislation that would require the California Department of Health Care Services (DHCS) to administer a licensing process for inpatient and outpatient substance use disorder treatment programs that are not otherwise required to be licensed under current law.	12/07/2020 Introduced	CalOptima: Watch
SB 106 Umberg	Mental Health Services Act (MHSA) Focus Populations: States the intent of the author to introduce legislation that would update the MHSA to further address individuals with mental illness who are also experiencing homelessness or are involved in the criminal justice system. Updates to the MHSA would also address early intervention efforts for youth experiencing a mental illness.	01/05/2021 Introduced	CalOptima: Watch

COVERED BENEFITS

Bill Number (Author)	Bill Summary	Bill Status	Position/Notes*
AB 114 Maienschein	Rapid Whole Genome Sequencing: Would add rapid Whole Genome Sequencing as a covered Medi-Cal benefit. The benefit would include individual sequencing, trio sequencing for parents and their baby, and ultra-rapid sequencing.	12/17/2020 Introduced	CalOptima: Watch

ELIGIBILITY

Bill Number (Author)	Bill Summary	Bill Status	Position/Notes*
AB 4 Arambula	Medi-Cal Eligibility Expansion: Would extend eligibility for full-scope Medi-Cal to eligible individuals of all ages regardless of their immigration status. The Legislative Analyst's Office previously projected this expansion would cost approximately \$900 million General Fund (GF) in 2019-2020 and \$3.2 billion GF each year thereafter, including the costs of In-Home Supportive Services.	12/07/2020 Introduced	CalOptima: Watch



Orange County's Community Health Plan

2021–22 Legislative Tracking Matrix (continued)

Bill Number (Author)	Bill Summary	Bill Status	Position/Notes*
AB 112 Holden	Inmate Eligibility Extension: Would delay the termination date of Medi-Cal eligibility for non-juvenile inmates from one (1) year of elapsed incarceration to three (3) years of elapsed incarceration. For juvenile inmates, Medi-Cal eligibility would not be terminated until three (3) years after their status as a juvenile has ended. While Medi-Cal benefits and payments would still be suspended throughout incarceration, as required by federal law, this bill would allow inmates to remain Medi-Cal eligible for a longer period before termination. The lengthened eligibility period would allow more inmates to immediately reinstate their benefits upon release, rather than initiate the standard re-determination process.	12/17/2020 Introduced	CalOptima: Watch
SB 56 Durazo	Medi-Cal Eligibility Expansion: Would extend eligibility for full-scope Medi-Cal to eligible individuals ages 65 years or older, regardless of their immigration status. The Assembly Appropriations Committee projects this expansion would cost approximately \$134 million each year (\$100 million GF, \$21 million federal funds) for approximately 25,000 undocumented seniors. The financial costs for In-Home Supportive Services is estimated to cost \$13 million GF.	12/07/2020 Introduced	CalOptima: Watch

HOMELESSNESS

Bill Number (Author)	Bill Summary	Bill Status	Position/Notes*
AB 71 Rivas, Luz	Statewide Homelessness Solutions Program: States the intent of the author to introduce legislation that would create a comprehensive, statewide homelessness solutions program. The program would facilitate collaboration across all levels of government and create additional flexibilities to accelerate the transition of homeless individuals into permanent housing. Would also create the Bring California Home Fund in the State Treasury to provide at least \$2.4 million annually to fund the statewide homelessness solutions program, subject to appropriation by the Legislature. Funds must be derived from specific adjustments in the personal income tax and/or corporate income tax structures.	12/07/2020 Introduced	CalOptima: Watch

POPULATION HEALTH

Bill Number (Author)	Bill Summary	Bill Status	Position/Notes*
SB 17 Pan	Racism as a Public Health Crisis: Would require the California Department of Public Health (CDPH) to collaborate with the Office of Health Equity, Health in All Policies Program, and other departments and stakeholders to address racism as a public health crisis.	12/07/2020 Introduced	CalOptima: Watch

PHARMACY

Bill Number (Author)	Bill Summary	Bill Status	Position/Notes*
AB 97 Nazarian	Insulin Affordability: States the intent of the author to introduce legislation that would make insulin more affordable for Californians.	12/08/2020 Introduced	CalOptima: Watch

PROVIDERS

Bill Number (Author)	Bill Summary	Bill Status	Position/Notes*
SB 40 Hurtado	California Medicine Scholars Program: Would require California's Office of Statewide Health Planning and Development (OSHPD) to establish the California Medicine Scholars Program (CMSP) as a five-year pilot program, effective January 1, 2023. In order to address the shortage of primary care physicians and the growing health disparities in underserved communities, the CMSP would serve as a pipeline for community college students to pursue premedical training and enter medical school. The CMSP would be administered by a contracted entity through four regional hubs, each comprised of a four-year university, medical school, community colleges, and local organizations.	12/17/2020 Introduced	CalOptima: Watch

SUBSTANCE USE

Bill Number (Author)	Bill Summary	Bill Status	Position/Notes*
SB 75 Bates	Southern California Fentanyl Task Force: Would establish the Southern California Fentanyl Task Force, under the direction of the Attorney General, to identify strategies to combat the fentanyl crisis. The task force would be comprised of representatives from the California Department of Justice (DOJ), California Highway Patrol (CHP) and each County within Southern California. Would require the task force to hold its first meeting by July 1, 2022, and issue a report of its findings and recommendations to the Legislature and DOJ by January 1, 2025.	12/15/2020 Introduced	CalOptima: Watch

TELEHEALTH

Bill Number (Author)	Bill Summary	Bill Status	Position/Notes*
AB 32 Aguiar-Curry	Telehealth Payment Parity and Flexibilities: Would expand current law to require Medi-Cal managed care plans, including County Organized Health Systems (COHS), to reimburse its contracted providers for telehealth services at the same rate as equivalent in-person health services. This requirement would also apply to any delegated entities of a Medi-Cal managed care plan, such as contracted health networks.	12/07/2020 Introduced	CalOptima: Watch
	Would allow providers to determine eligibility and enroll patients into Medi-Cal programs through audio-visual or audio- only telehealth services. Additionally, would require DHCS to indefinitely continue all telehealth flexibilities implemented during the COVID-19 pandemic. DHCS would be required to establish an advisory group to guide the development a long- term Medi-Cal telehealth policy.		

*Information in this document is subject to change as bills are still going through the stages of the legislative process.

CAHP: California Association of Health Plans CalPACE: California PACE Association LHPC: Local Health Plans of California NPA: National PACE Association

Last Updated: January 13, 2020

January 3	117th Congress, 1st Session convenes
March 29–April 9	Spring recess
August 2–27	Summer recess for House
August 9–September 10	Summer recess for Senate
December 10	1st Session adjourns

2021 Federal Legislative Dates

2021 State Legislative Dates*

*Due to COVID-19, 2021 State Legislative dates have been modified

January 11	Legislature reconvenes
February 19	Last day for legislation to be introduced
March 25–April 4	Spring recess
April 30	Last day for policy committees to hear and report to fiscal committees any fiscal bills introduced in their house
May 7	Last day for policy committees to hear and report to the floor any non-fiscal bills introduced in their house
May 21	Last day for fiscal committees to hear and report to the floor any bills introduced in their house
June 1–4	Floor session only
June 4	Last day for each house to pass bills introduced in that house
June 15	Budget bill must be passed by midnight
July 14	Last day for policy committees to hear and report bills to fiscal committees or the floor
July 16–August 15	Summer recess
August 27	Last day for fiscal committees to report bills to the floor
August 30–September 10	Floor session only
September 3	Last day to amend bills on the floor
September 10	Last day for bills to be passed; final recess begins upon adjournment
October 10	Last day for Governor to sign or veto bills passed by the Legislature

Sources: 2021 State Legislative Deadlines, California State Assembly: http://assembly.ca.gov/legislativedeadlines

About CalOptima

CalOptima, a county organized health system (COHS), is the single plan providing guaranteed access to Medi-Cal for all eligible individuals in Orange County and is responsible for almost all medical acute services, including custodial long-term care. CalOptima is governed by a locally appointed Board of Directors, which represents the diverse interests that impact Medi-Cal.