**NOTICE OF A
REGULAR MEETING OF THE
WHOLE-CHILD MODEL
FAMILY ADVISORY COMMITTEE**

**TUESDAY, SEPTEMBER 19, 2023
9:30 A.M.**

**CalOptima Health
505 City Parkway West, Suite 150-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. To speak on an item during the public comment portion of the agenda, please register using the Webinar link below. Once the meeting begins the Question-and-Answer section of the Webinar will be open for those who wish to make a public comment and registered individuals will be unmuted when their name is called. You must be registered to make a public comment.

In compliance with the Americans with Disabilities Act, those requiring accommodations for this meeting should notify the Clerk of the Board's Office at (714) 246-8806, at least 72 hours prior to the meeting.

The Regular Whole-Child Model Family Advisory Committee's meeting agenda and supporting materials are available for review at CalOptima Health, 505 City Parkway West, Orange, CA 92868, 8 a.m. – 5:00 p.m., Monday-Friday, and online at www.caloptima.org.

Register to Participate via Zoom at:
https://us06web.zoom.us/webinar/register/WN_tOG8FQehTrq9CVybM3zuIg and Join the Meeting.

Webinar ID: 849 0104 1340

Passcode: 909599 -- Webinar instructions are provided below.

1. **CALL TO ORDER**
    Pledge of Allegiance

2. **ESTABLISH QUORUM**

3. **APPROVE MINUTES**
    Approve Minutes of the June 13, 2023 Special Meeting of the CalOptima Health Board of
    Directors' Whole-Child Model Family Advisory Committee

4. **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.*

5. **MANAGEMENT REPORTS**
    A. Chief Executive Officer Report
    B. Chief Operating Officer Report
    C. Chief Medical Officer Report

6. **INFORMATIONAL ITEMS**
    A. Denti-Cal Update
    B. Whole-Child Model Care Coordination Support
    C. Cultural and Linguistics Update
    D. Whole-Child Model Family Advisory Committee Member Updates

7. **COMMITTEE MEMBER COMMENTS**

8. **ADJOURNMENT**

TO JOIN THE MEETING

Please register for the Special Meeting of the Whole-Child Model Family Advisory Committee on September 19, 2023 at 9:30 a.m. (PDT)

To **Register** in advance for this webinar:

https://us06web.zoom.us/webinar/register/WN_tOG8FQehTrq9CVybM3zuIg

Join from a PC, Mac, iPad, iPhone or Android device

On day of meeting, please click this URL to join:

https://us06web.zoom.us/s/84901041340?pwd=STJWNzB6aGxJZ2hiYzQ1dmtXY053UT09

Passcode: **909599**

Or join by phone:

Dial(for higher quality, dial a number based on your current location): US: +1 669 444 9171 or +1 253 205 0468 or +1 253 215 8782 or +1 346 248 7799 or +1 719 359 4580 or +1 720 707 2699 or +1 507 473 4847 or +1 564 217 2000 or +1 646 558 8656 or +1 646 931 3860 or +1 689 278 1000 or +1 301 715 8592 or +1 305 224 1968 or +1 309 205 3325 or +1 312 626 6799 or +1 360 209 5623 or +1 386 347 5053

Webinar ID: 849 0104 1340

Passcode: 909599

MINUTES

SPECIAL MEETING OF THE
CALOPTIMA HEALTH
WHOLE CHILD MODEL
FAMILY ADVISORY COMMITTEE

June 13, 2023

A Special Meeting of the Whole-Child Model Family Advisory Committee (WCM FAC) was held on June 13, 2023 at CalOptima Health, 505 City Parkway West, Orange, California via in-person and teleconference (Zoom).

CALL TO ORDER
Member Maura Byron acting as chair called the meeting to order at 9:31 a.m. and led the Pledge of Allegiance.

ROLL CALL

Members Present:	Kristen Rogers, Chair (9:40 a.m.); Maura Byron; Erika Jewell; Monica Maier; Jessica Putterman; Lori Sato
Members Absent:	Kathleen Lear, Vice Chair; Malissa Watson
Others Present:	Michael Hunn, Chief Executive Officer; Yunkyung Kim, Chief Operating Officer; Richard Pitts, D.O. Ph.D., Chief Medical Officer; Zeinab Dabbah, M.D., J.D., MH, Deputy Chief Medical Officer; Kelly Giardina, Executive Director, Clinical Operation; Ladan Khamseh, Executive Director, Operations; Thanh-Tam Nguyen, M.D., Medical Director; Albert Cardenas, Director, Customer Service; Sharon Dwiers, Clerk of the Board; Cheryl Simmons, Staff to the Advisory Committees; Kami Long, Executive Assistant, Operations; Doris Billings, Orange County Healthcare Agency

MINUTES

Approve the Minutes of the October 25, 2022 Regular Meeting of the CalOptima Board of Directors' Whole-Child Model Family Advisory Committee

> *Action:*   ***On motion of Member Putterman, seconded and carried, the WCM FAC Committee approved the minutes of the October 25, 2022, meeting. (Motion carried 6-0-0; Members Lear and Watson absent)***

PUBLIC COMMENTS
There were no public comments.

REPORT ITEMS

Approve Whole-Child Model Family Advisory Committee Schedule for FY 2023-2024

> *Action:* **On motion of Member Erika Jewell, seconded and carried, the WCM FAC Committee approved the WCM FAC Meeting Schedule for FY 2023-2024. (Motion carried 6-0-0; Members Lear and Watson absent)**

CEO AND MANAGEMENT REPORTS

Chief Executive Officer Report

Michael Hunn, Chief Executive Officer, shared his appreciation with the members of the WCM FAC for their valuable input and insight that allows CalOptima Health to develop services and outreach to members. Mr. Hunn reviewed the on-going redetermination and answered questions from the members on possible auto-renewals and for children that were under a waiver. Mr. Hunn also updated the members on the community event that was held at St. Anthony Claret Catholic Church in Anaheim. He noted that resources were available by the Social Services Agency with 30 of their multilingual employees ready with computers to assist families and children with regards to the redetermination effort. Approximately 3,000 people attended which is the largest CalOptima event to be attended. Members of the committee had a robust discussion on the redetermination with several members providing input on their experiences.

At this time Member Maura Byron as acting chair rearranged the agenda to hear the Item 6.C. CMO Report.

Chief Medical Officer Update

Richard Pitts, D.O., Ph.D., Chief Medical Officer, updated the members on the new Fellowship Program at CalOptima Health. Three Fellows have been chosen out of approximately 50 applicants and discussed the criteria that must be met to be chosen for the fellowship.

INFORMATION ITEMS

California Children Services Update

Doris Billings, CCS Division Manager/Chief Therapist, Orange County Health Care Agency provided an update on the operations of the California Children Services (CCS) and noted that with the end of the public health emergency resolved the flexibilities what CCS had been experiencing over the last three years in CCS's general program. She noted that medical redeterminations had gone back to pre-pandemic guidelines and they were now reviewing for appropriate medical reports that are current with a 12-month period and that the medical report was to be sent by a qualifying physician that was a CCS panel physician or preferably a specialist. When a CCS child comes up for their annual redetermination, if information is not provided as appropriate to address the criteria as stated above, they would start closing cases, but she also noted that they were trying to make sure that in those cases, they looked at all alternatives before we will actually close a case.

California Advancing and Innovating Medi-Cal (CalAIM) Update
Mia Arias, Director, CalAIM Implementation presented on the Enhanced Care Management (ECM) and respite community support. She reminded the members that the ECM launched in January of 2022 as a whole-person interdisciplinary approach to providing care to CalOptima Health's most vulnerable members. Ms. Arias discussed how the systematic coordination of care was community based and very person centered with the population of focus as of January 1, 2023 being adults living in the community and at risk for long-term care institutionalization or adult nursing facility residents transition to the community. She noted that on July 1, 2023 children and youth would become a population of focus and then beginning on January 1, 2024, pregnant and postpartum individuals at risk for adverse perinatal outcomes who are subject to racial and ethnic disparities and individuals transition from incarceration would also become a population of focus. Ms. Arias provided information on the clinics who were ECM participants in the CalOptima Health community. Ms. Aria also reviewed respite services and provide the members with a list of respite care providers.

At this time Member Maura Byron as acting chair rearranged the agenda to return to Item 6.B., COO Report before continuing with the member updates.

Chief Operating Officer Report
Yunkyung Kim, Chief Operating Officer, asked the committee to help by sharing providers that they utilized so that CalOptima Health could begin identifying providers and building a more robust network for the Whole-Child Model population. She noted that this was essential to providing the member with choice.

Whole-Child Model Member Updates
Member Maura Byron as acting chair informed the committee that the recent recruitment was successful with only one family member seat remaining on the committee and asked the members to please help recruit so that the committee could be fully staffed. She noted that the slate of candidates would be presented to the Board of Directors' Quality Assurance Committee for their recommendation in June and then to the Board of Directors at their August 3, 2023 meeting. She also reminded the members that the next meeting would be September 19, 2023 at 9:30 AM.

ADJOURNMENT
Hearing no further business, Member Maura Byron as acting chair adjourned the meeting at 11:20 a.m.

/s/ Cheryl Simmons
Cheryl Simmons
Staff to the Advisory Committees

Approved: September 19, 2023

MEMORANDUM

DATE:	August 30, 2023
TO:	CalOptima Health Board of Directors
FROM:	Michael Hunn, Chief Executive Officer
SUBJECT:	CEO Report — September 7, 2023, Board of Directors Meeting
COPY:	Sharon Dwiers, Clerk of the Board; Member Advisory Committee; Provider Advisory Committee; and Whole-Child Model Family Advisory Committee

A. Medi-Cal Renewal Efforts Continue

CalOptima Health's approach to Medi-Cal renewal remains a top priority along with our colleagues at the County of Orange Social Services Agency (SSA). Here each department identifies its role to ensure eligible members retain their coverage. Below are highlights of recent activities and news related to renewals. In addition, because the renewal process is fluid and membership numbers fluctuate during the month, I will share further updates at the Board meeting on September 7.

- **Health Network Engagement**
  During CalOptima Health's August 17 Health Network Forum, COO Yunkyung Kim and Executive Director of Operations Ladan Khamseh shared detailed information about the data being transmitted to health networks for their use in supporting members' Medi-Cal renewals. We have asked all health networks to identify ways to engage their members to raise awareness about the renewal process, such as through telephone outreach or conversations at the point of care. Activating our health network partners is another strategy to support members' ongoing coverage.

- **Customer Service Calls**
  Our Customer Service staff continues outreach to members who have not returned their renewal packets. Nearly 6,400 Medi-Cal members with an August renewal month were engaged through inbound and outbound calls. For OneCare, 250 members were engaged.

- **Community Events**
  On Saturday, August 26, more than 3,000 community members attended our inaugural Back-to-School Health and Wellness Event in Anaheim. The event offered an opportunity to highlight the importance of Medi-Cal renewal as well as provide resources for children, including the on-site vision and dental screenings and distribution of food, diapers, bike helmets and backpacks.

- **Texting Campaigns**
  In August, CalOptima Health intensified our texting campaigns to reach members in support of the renewal process. Since the start, more than 148,000 text messages (in threshold languages) have been sent to members with renewal months from June to November. There are two types of messages: one reminds members to return their renewal packets and the other urges members to update their contact information using an interactive app. To date, more than 17,200 addresses have been confirmed as correct, and 1,605 members provided updated contact information, which was

sent to the County of Orange Social Services Agency (SSA). A new text campaign will begin in early September to reach members whose coverage was terminated, encouraging them to take action to be reinstated during the 90-day window when there will be no gap in coverage.

- **State Medi-Cal Dashboard**
  On August 7, the Department of Health Care Services (DHCS) introduced a new interactive Medi-Cal dashboard detailing statewide and county-level demographic data on Medi-Cal application processing, enrollments, redeterminations and renewal outcomes. DHCS will update and adjust the dashboard monthly throughout the remainder of the year-long redetermination process.

B. CalOptima Health's Street Medicine Program Enjoys Success With Plans to Grow

Our street medicine program has made significant strides in providing health care and social services to the unhoused population of Garden Grove. Since April, Healthcare in Action has interacted with 201 individuals and now 92 participants are enrolled in Enhanced Care Management (ECM) — a CalAIM-funded state benefit. Furthermore, CalOptima Health planning to bring the topic of program expansion to a future Board meeting. Officials from other cities have expressed interest in having the program for their areas. Most recently, the City of Santa Ana unanimously supported submitting a letter of interest to CalOptima Health about the program. The letter stated that our program will complement and enhance Santa Ana's outreach and engagement services for people experiencing.

C. Media Event Highlights $2 Million Check for Care Traffic Control Command Center

CalOptima Health hosted a media event on August 15 to amplify the successful efforts of U.S. Representatives Lou Correa and Young Kim to award $2 million to support our Care Traffic Control Command Center. This marked the first time that CalOptima Health has received federal earmark funds. The media event featured remarks by COO Yunkyung Kim and Reps Correa and Kim, a check presentation, and a tour of the future Care Traffic Control Command Center located on the third floor of the 500 Building. KABC ran this piece during the 4 p.m. newscast.

D. DHCS Releases First Report on CalAIM Services

On August 3, DHCS released a report highlighting a notable increase in the number of Californians using the wide array of CalAIM benefits, including Enhanced Care Management (ECM) and Community Supports, in the first year since the January 2022 launch. Statewide, more than half of Medi-Cal members enrolled in ECM in 2022 were individuals who were at risk of avoidable hospital or emergency department visits, more than 42,000 were members with serious mental health/substance use disorder needs, and more than 36,000 members were individuals experiencing homelessness. DHCS expects even more Californians to use these expanded Medi-Cal services in 2023 and 2024 as eligibility includes new populations of focus, and as more providers contract with Medi-Cal managed care plans. In the report, CalOptima Health ranked near the top in delivery of Community Supports. Specifically:

- **We have the second-highest number of services provided in the state.**
- **We have the fifth-highest utilization rate in the state.**

It should be noted that this report includes data as of December 31, 2022. Our utilization has skyrocketed since then, so 2023 should show more impressive results. Further, our ECM Academy that trains providers graduated its first cohort in July, and we expect that ECM utilization will increase.

E. CalOptima Health to Host CalAIM Conference

CalOptima Health's CalAIM team has developed a two-day conference to foster deeper collaboration among managed care plan peers leading CalAIM implementation. CalAIM Implementation Share & Learn will be held October 3–4 at the Avenue of the Arts Hotel in Costa Mesa. The in-person

conference will encourage attendees from managed care plans, ECM providers and CBOs to work together to build stronger relationships and share successes and roadblocks.

F.   Funding Opportunity for Organizations Serving Unhoused Members to Close Soon
With the Board's support of the ongoing Housing and Homelessness Incentive Program (HHIP), CalOptima Health released a Nonprofit Healthcare Academy Notice of Funding Opportunity (NOFO) to help build the capacity of smaller, grassroots community-based organizations (CBOs) serving populations experiencing health disparities. In its initial phase, CalOptima Health will identify and onboard up to 20 CBOs with operating budgets of $5 million or less. The NOFO is available through this portal, and applications are due by September 15, 2023, at 5 p.m.

G.   Incentive Payment Program (IPP) Grant Awards Fuel Success Through Community Supports
At the heart of CalAIM is collaboration with organizations rooted in the community, and CalOptima Health is making community investments to build those connections and increase regional capacity. Since CalAIM launched in January 2022, CalOptima Health has drawn down significant dollars from DHCS through the related Incentive Payment Program (IPP). Initial funds were dispersed to our first Community Supports providers and participating health networks who were operating as our initial Enhanced Care Management (ECM) providers. As this program evolved, CalOptima Health has turned to these funds to build the capacity of new Community Supports providers and for community health centers and community-based organizations to onboard as ECM providers. Altogether, 42 grant awards provided a total of $4.2 million of community investment. CalOptima Health anticipates making additional funding opportunities to further develop these new benefits, offering culturally relevant services to populations of focus, and ensuring providers are accessible in all parts of the county where our members reside.

H.   "Pulse for Good" Experience Feedback Program Launching Soon
Through a partnership with Pulse for Good, CalOptima Health is launching a program that will help providers obtain feedback on their services from members experiencing homelessness. Offered to CalOptima Health's housing navigation providers, Pulse for Good empowers them with insights directly from the people frequenting their sites and using their services. Currently, 11 housing navigation providers are participating in the program and 18 standalone kiosks will be installed at their combined 18 unique locations throughout the county. They will also receive start-up funding to support the integration of this technology into their organization's operations and evaluation processes.

I.   Three New Medical Leaders Join CalOptima Health
- **Natalie Do, Pharm.D., D.O., Medical Director, Behavioral Health**
  Dr. Do is a double board-certified psychiatrist specializing in child and adolescent psychiatry. She attended pharmacy school at the University of Southern California, and she conducted HIV/AIDS research in Botswana as a Fulbright Scholar with the Botswana/Harvard AIDS Partnership. She practiced inpatient pharmacy while completing her medical education at Western University of Health Sciences. She completed her Adult/General Psychiatry residency at Loma Linda University and continued her training in psychiatry at UC San Diego in the Child and Adolescent Psychiatry program.
- **Robin Hatam, D.O., Medical Director, Chronic and End-Stage Kidney Disease**
  Dr. Hatam will lead CalOptima Health's efforts to improve care for members with chronic and end-stage kidney disease. He will also support CalOptima Health's network and hospital relations. He is a board-certified internist with experience working for prominent Medi-Cal and Medicare Advantage organizations. Dr. Hatam holds a bachelor's degree in Molecular and Cell Biology from

UC Berkeley, and a Doctor of Osteopathic Medicine degree from Western University of Health Sciences. He did his residency training in internal medicine at LAC+USC Medical Center.

- **Claus Hecht, M.D., Street Medicine Medical Director**
  Dr. Hecht is an emergency medicine specialist. He joins CalOptima Health in a new medical director position focused on serving those in our street medicine program. Dr. Hecht was most recently the medical director at the Orange County Fire Authority, a position he held since 2017. Prior to that, he served in emergency rooms across Southern California, including Corona Regional Medical Center, West Anaheim Medical Center, Western Medical Center Santa Ana and Eisenhower Medical Center. He has more than 24 years of experience in the medical field. He received a bachelor's degree from UC Irvine and his medical degree from Saint Louis University School of Medicine.

J. Recruitment Underway for Board Member Representative

Nancy Shivers, the CalOptima Health director representing members, resigned from the Board of Directors effective August 3. An application for this position can be found on the Orange County Health Care Agency website.

K. CalOptima Health Gains Media Coverage

CalOptima Health continues to receive positive and valuable media coverage.

- On August 7, the Orange County Register featured a quote from Carmen Katsarov, Executive Director of Behavioral Health Integration, on the collaboration between CalOptima Health and the Orange County Department of Education with a $25.5 million investment in schools through the Student Behavioral Health Incentive Program (SBHIP).
- On August 8, KNX radio interviewed Natalie Zavala, Director of Behavioral Health Integration, on the impact of SBHIP in Orange County Schools starting this fall.

CalOptima Health

Mission: To serve member health with excellence and dignity, respecting the value and needs of each person.

Membership Data* (as of July 31, 2023)

Total CalOptima Health Membership

979,618

Program	Members
Medi-Cal	961,494
OneCare (HMO D-SNP)	17,695
Program of All-Inclusive Care for the Elderly (PACE)	429

*Based on unaudited financial report and includes prior period adjustment

Operating Budget (for one month ended July 31, 2023)

	YTD Actual	YTD Budget	Difference
Revenues	$362,777,779	$362,111,870	$665,909
Medical Expenses	$318,962,339	$336,362,133	$17,399,794
Administrative Expenses	$16,784,946	$20,011,467	$3,226,521
Operating Margin	$27,030,494	$5,738,270	$21,292,224
Medical Loss Ratio (MLR)	87.9%	92.9%	(5.0%)
Administrative Loss Ratio (ALR)	4.6%	5.5%	0.9%

Reserve Summary (as of July 31, 2023)

	Amount (in millions)
Board Designated Reserves	$579.0*
Capital Assets (Net of depreciation)	$83.9
Resources Committed by the Board	$650.4
Resources Unallocated/Unassigned	$397.0*
Total Net Assets	$1,710.3

*Total of Board designated reserves and unallocated resources can support approximately 90 days of CalOptima Health's current operations.

Total Annual Budgeted Revenue

$4 Billion

**NOTE: CalOptima Health receives its funding from State and Federal revenues only.
CalOptima Health does not receive any of its funding from the County of Orange.**

CalOptima Health Fast Facts
September 2023

Personnel Summary (as of August 12, 2023, pay period)

	Filled	Open	Vacancy %
Staff	1,314.3	79.1	5.68%
Supervisor	79.0	5.0	5.95%
Manager	116.0	8.0	6.45%
Director	56.5	7.5	11.72%
Executive	21	1	4.55%
Total FTE Count	1,586.8	100.6	5.96%

FTE Count based on position control reconciliation and includes both medical and administrative positions.

Provider Network Data (as of July 31, 2023)

	Number of Providers
Primary Care Providers	1,292
Specialists	8,651
Pharmacies	560
Acute and Rehab Hospitals	43
Community Health Centers	52
Long-Term Care Facilities	104

Treatment Authorizations (as of June 30, 2023)

	Mandated	Average Time to Decision
Inpatient Concurrent Urgent	72 hours	18.68 hours
Prior Authorization – Urgent	72 hours	17.24 hours
Prior Authorization – Routine	5 days	1.84 days

Average turnaround time for routine and urgent authorization requests for CalOptima Health Community Network.

Member Demographics (as of July 31, 2023)

Member Age

0 to 5	8%
6 to 18	25%
19 to 44	35%
45 to 64	20%
65 +	12%

Language Preference

English	59%
Spanish	27%
Vietnamese	9%
Other	2%
Korean	1%
Farsi	1%
Chinese	<1%
Arabic	<1%

Medi-Cal Aid Category

Temporary Assistance for Needy Families	39%
Expansion	38%
Optional Targeted Low-Income Children	8%
Seniors	9%
People With Disabilities	5%
Long-Term Care	<1%
Other	<1%

$50 million Workforce Development Plan Update

Our Mission
To serve member health with excellence and dignity, respecting the value and needs of each person.

Our Vision
By 2027, remove barriers to health care access for our members, implement same-day treatment authorizations and real-time claims payments for our providers, and annually assess members' social determinants of health.

Goal of the Grant Initiative

○ **Goal: Close gaps in the health care workforce in Orange County to increase access to high-quality, equitable care for CalOptima Health members.**

  ▪ As Orange County's population ages and becomes increasingly diverse, our health delivery system needs to anticipate ongoing and future workforce needs

  ▪ The pandemic magnified gaps in access to care and the impacts of social determinants of health as well as placed unprecedented personal and financial demands on health care workers. Filling these gaps will be vital in the support of population health.

  ▪ Disparities in access to and quality of care are further exacerbated by a lack of diversity and language concordance in the health care workforce

  ▪ The cost of living and other economic factors in Orange County challenge the workforce to remain here to serve our members. Many health care workers have left the workforce, and new workers are needed.

  ▪ This grant initiative is intended to assist in filling these gaps by providing economic assistance to address critical workforce shortages

Source: California Future Health Workforce Commission

Existing Workforce and Access Investments

CalOptima Health has already launched four significant health care workforce investment programs.

1. **Coalition of Orange County Community Health Centers**
   - $50 million investment over five years focused on population health and value-based care transformation, including workforce investments

2. **CSU Fullerton – Master of Social Work Program**
   - $5 million over five years for select CSU Fullerton social work students to receive stipends of $20,000 per academic year
   - Ties participation to serving Orange County at the completion of the program

3. **National Alliance for Mental Illness (NAMI) Orange County**
   - $5 million grant partnership with NAMI to expand access to peer support services for Medi-Cal members

4. **Chrysalis Orange County**
   - $2.9M grant partnership to increase capacity of the Orange County homeless continuum of care by creating 130 jobs for unhoused and justice-involved individuals

Priorities for Five-Year Workforce Development Plan

○ The health care workforce challenges before us are significant based on data on workforce shortages, gaps in access to care, and long wait times for services. A focused approach will maximize the impact of the $50 million investment.

○ As a Medi-Cal managed care plan, CalOptima Health will work to address health equity and the unique needs of the Medi-Cal member population in prioritizing our investment in health care workforce development

○ We will achieve this vision by prioritizing investment in the following ways:

  ▪ **Identify and address shortages and gaps in the Orange County health care workforce that serves the Medi-Cal population, including physicians;**

  ▪ **Aim to increase the diversity of the healthcare workforce; and**

  ▪ **Provide economic support to allow individuals to pursue a career in health care in service to CalOptima Health members in Orange County**

○ *NOTE: Any CalOptima Health investments will avoid supplanting or replacing existing federal and state funding sources for workforce development initiatives.*

Recommended Workforce Investments

○ Based on a review of local needs and stakeholder engagement, CalOptima Health aims to fund initiatives in the following three focus areas:

1. **College/University-based educational investments** that increase the 'pipeline' of students moving into the health care workforce based on identified gaps in caregivers;

2. **Investments for training and certification programs** to address shortages of mid-level providers; and

3. **Targeted physician recruitment investment** to address identified Medi-Cal access gaps in primary and specialty care

Recommended Specific Grant Investments

○ Based on a review of our member customer service records, network data, and member grievances, along with input from our health networks (including acute care providers) and community clinics, it is recommended that workforce development investments address shortages that specifically impact the Medi-Cal population

○ Specific Grant Recommendations:

- **Behavioral Health Providers (Individual Therapists for Children and Adults)**

- **Nurses (Ambulatory Care and Acute Care)**

- **Primary and Specialty Care**

- **Ancillary Providers (TBD)**

NOTE: This list will be further validated through stakeholder engagement, available market workforce studies, and internal data analytics.

Stakeholder Engagement Process

○ CalOptima Health has already begun engaging with our Joint Member and Provider Advisory Committee, our health network and provider partners, and institutions of higher education to identify workforce shortages and opportunities for grant investments.

○ A robust stakeholder engagement process will continue in September and will include but will not be limited to:

- Institutions of higher education, including the University of California, Irvine, all Orange County colleges, community colleges, Unified School Districts for high school medical magnet programs
- County agencies
- Coalition of Orange County Community Health Centers, clinics
- Hospitals, health systems, medical groups, contracted networks, skilled nursing facilities

Stakeholder Engagement Process (cont.)

- State agencies/offices, including California Department of Healthcare Access and Information and the Governor's Office of Business and Economic Development
- Orange County Business Council
- OC Workforce Development Board
- CEO Leadership Alliance of Orange County
- Orange County Hispanic Chamber of Commerce
- Orange Workforce Alliance
- Orange County Labor Federation
- Other economic development organizations in Orange County

Grant Application and Review Process

○ CalOptima Health will utilize its existing grant proposal evaluation process to select awardees

○ The first funding round will be awarded in Q4 of 2023 and will make available ~$10m in grants

○ A second round of funding will be awarded in Q1 of 2024 and will make available ~$10m in grants

| Stakeholder Discussions Sept 2023 | Release Notice of Funding Opportunity October 2023 | Proposals Due November 2023 | Review Proposals and Select Awardees December 2023 | Round 1 Grants Awarded January 2024 | Rounds 2 Grants Awarded March 2024 |

NOTE: Grant funding will be allocated over a 3-5-year time period.

Smile, your Medi-Cal benefits include dental coverage!

Agenda

- About the Medi-Cal Dental Program

- Covered Dental Services

- Commonly Asked Questions

Dental health is an important part of your overall health

Medi-Cal Dental Program

Medi-Cal Dental provides free or low-cost check-ups every six months for members under age 21 and once every 12 months for members over age 21.

2x PER YEAR — Under age 21

1x PER YEAR — Over age 21

Services for Your Smile

Free or low-cost Medi-Cal dental services may include:

- Exams and X-rays
- Cleanings
- Fluoride treatments
- Emergency services
- Tooth removal
- Fillings and crowns*
- Molar sealants**
- Root canal treatments

- Scaling and root planing
- Periodontal maintenance
- Complete and partial dentures
- Denture relines
- Orthodontics (braces) for children who qualify
- Outpatient services (if medically necessary)

*Crowns on molars or premolars (back teeth) may be covered in some cases.
**Permanent molar sealants are covered for kids and teens up to age 21.

Babies (0-3)

Healthy gums make way for healthy teeth.

Babies: Covered Services

- Dental exams (every 3 months)
- X-rays
- Teeth cleaning (every 6 months)
- Fluoride varnish (every 6 months)
- Fillings
- Tooth removal
- Emergency services

- Outpatient services (if medically necessary)
- Sedation (if medically necessary)

Kids (4-12)

Children start to lose their baby teeth as early as 5 years old. Ask your dentist about sealants to help protect your child's back teeth from cavities.

Sealants are clear, protective coatings that are quick and painless ways to prevent cavities.

Kids: Covered Services

- Dental exams (every 6 months)
- X-rays
- Teeth cleaning (every 6 months)
- Fluoride varnish (every 6 months)
- Molar sealants
- Fillings

- Root canals
- Tooth removal
- Emergency services
- Outpatient services (if medically necessary)
- Sedation (if medically necessary)

Teens (13-20)

Teenagers who get regular dental check-ups can maintain good oral health well into adulthood.
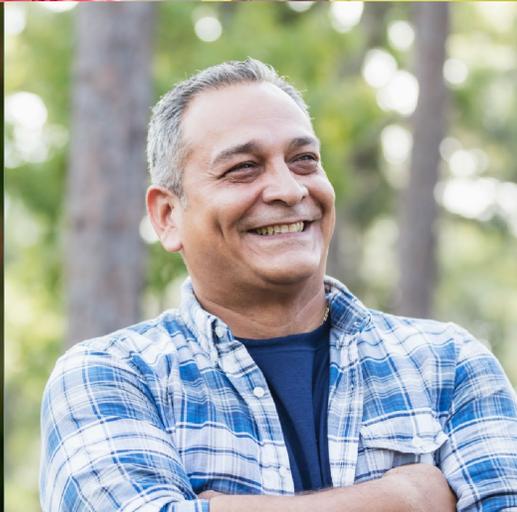
Teens: Covered Services

- Dental exams (every 6 months)
- X-rays
- Teeth cleaning (every 6 months)
- Fluoride varnish (every 6 months)
- Molar sealants
- Orthodontics (braces) for those who qualify
- Fillings

- Crowns*
- Root canals
- Partial and full dentures
- Scaling and root planing
- Tooth removal
- Emergency services
- Outpatient services (if medically necessary)
- Sedation (if medically necessary)

*Crowns on molars or premolars (back teeth) may be covered in some cases.

Adults and Seniors

As of May 1, 2022, California expanded full scope Medi-Cal coverage to adults 50 years of age or older. Immigration status does not matter. All other Medi-Cal eligibility rules still apply.

Adults and Seniors: Covered Services

- Dental exams*
- X-rays
- Teeth cleaning*
- Scaling and root planing
- Fluoride varnish*
- Fillings
- Crowns**

- Root canals
- Tooth removal
- Partial and full dentures
- Denture relines
- Outpatient services (if medically necessary)
- Sedation (if medically necessary)

*Every 12 months if **over** 21 years of age or every 6 months if **under** 21 years of age.
**Crowns on molars or premolars (back teeth) may be covered in some cases.

Pregnancy

It is safe and recommended by dental and health professionals to see the dentist at any time during your pregnancy.

As a Medi-Cal member, your dental benefits are covered during pregnancy and 12 months postpartum. The 12 month postpartum coverage period will begin on the last day of the pregnancy.

Pregnancy: Covered Services

- Dental exams*

- X-rays

- Teeth cleaning*

- Scaling and root planing

- Fluoride varnish*

- Fillings

- Crowns**

- Root canals

- Tooth removal

- Partial and full dentures

- Denture relines

- Emergency services

*Every 12 months if **over** 21 years of age or every 6 months if **under** 21 years of age.
**Crowns on molars or premolars (back teeth) may be covered in some cases.

Caregivers

If you provide daily care for a loved one, remember that you play an important role in helping them maintain a healthy smile.

When your loved one is struggling with other health problems their oral health can become a lower priority, but good daily oral hygiene and regular dental visits help your loved one avoid tooth pain and tooth loss.

Back to Agenda

Caregivers

Here are some tips to help your loved one maintain a healthy smile:

- Talk with them about the importance of keeping their mouth healthy

- Help them set an oral health routine

- Help schedule their dental appointments

- Help them maintain a healthy, balanced diet

- Be sure dentures are cleaned daily

SmileCalifornia.org

About
Provides an overview of Medi-Cal Dental

Covered Services
Learn about your Medi-Cal Dental covered services by age group

Visiting the Dentist
Helps you get ready for your Medi-Cal Dental appointment

Videos
Short informative Medi-Cal Dental videos

Care for Your Smile
Tips to help you take care of your gums and teeth

Find A Dentist
Tool to help you find a Medi-Cal Dental provider near you

Members
Resources for Medi-Cal member about benefits and the importance of routine dental check-ups

Commonly Asked Questions

How do I find a dentist that accepts Medi-Cal?

Smile, California can help you find a dental home near you in four easy steps.

You can also find a Medi-Cal dentist by calling the Telephone Service Center **(800) 322-6384**.

1. Visit **SmileCalifornia.org**.
2. Click on the **Find A Dentist** button.
3. Click on the **Provider Search Directory** and pick the option that best fits your needs.
4. Enter your **zip code** and you're on your way to finding a dentist near your area.

Commonly Asked Questions

How do I apply for Medi-Cal dental benefits?

You do not need to apply separately for Medi-Cal dental benefits. The Medi-Cal program covers dental services as one of the program's many benefits.
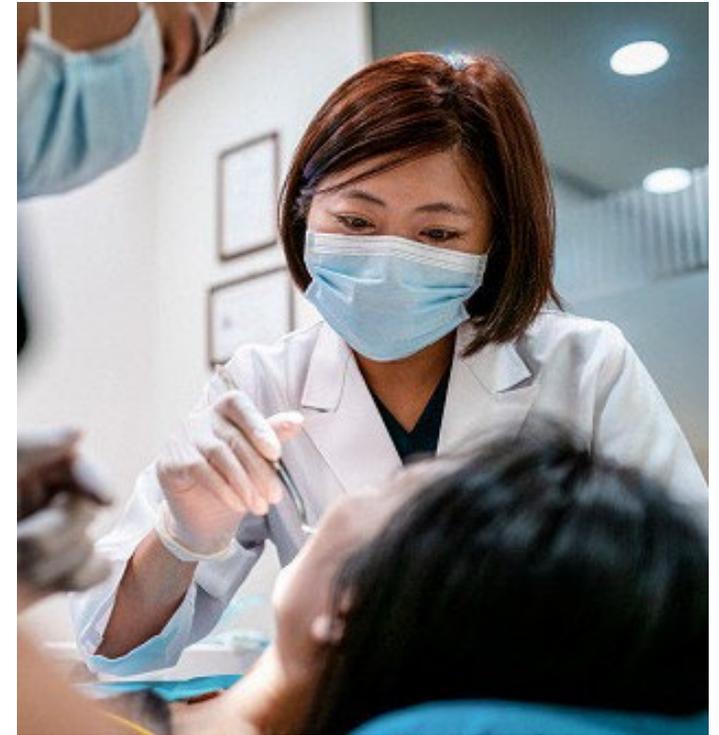
Visit dhcs.ca.gov and click on the **Individuals** button at the top of the menu.

Commonly Asked Questions

How many times a year can I visit the dentist?

If you are under age 21, you are covered for free or low-cost dental check-ups twice a year. If you are age 21 or older, you are covered for free or low-cost check-ups once a year.
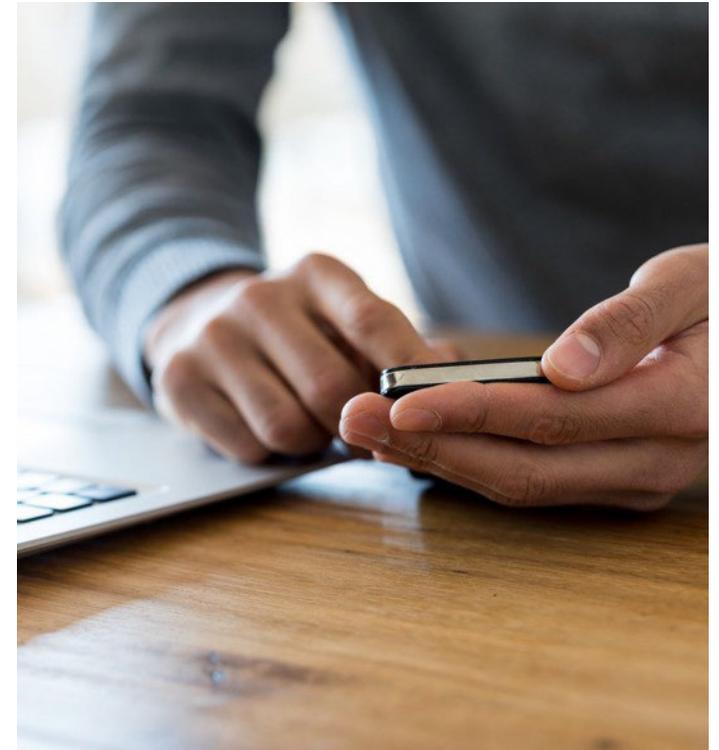
Commonly Asked Questions

What do I do if I don't have a way to get to the appointment?

Medi-Cal provides non-medical and non-emergency transportation services to eligible members.

For transportation assistance, call the Telephone Service Center phone line at **(800) 322-6384**.
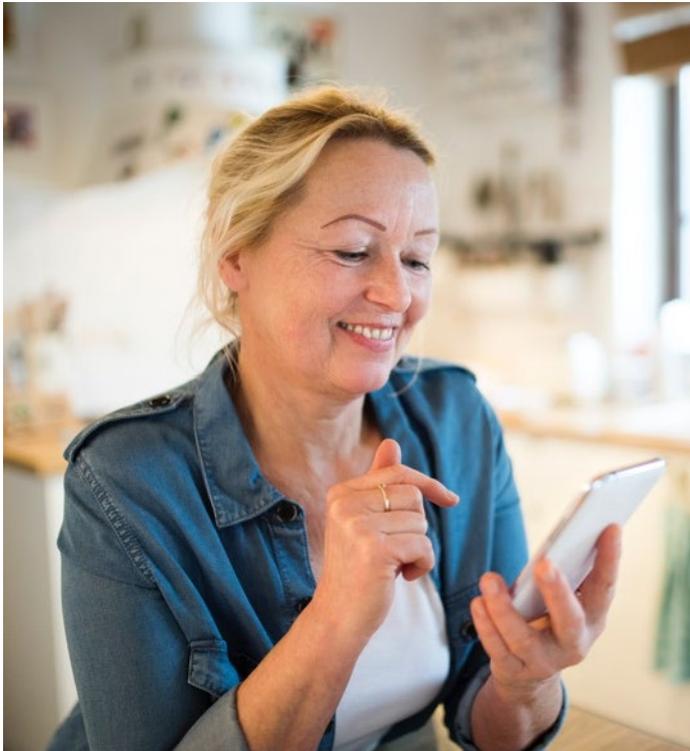
Commonly Asked Questions

I need an interpreter. Can someone help me?

Yes. We have interpreters who can help. We can also help you find a Medi-Cal dental provider who speaks your language or who has office staff who speak your language.

Commonly Asked Questions

What happens if I miss an appointment?

It is important to show up to your dentist appointments. If you know you will not be able to make it, call at least 24 hours in advance to cancel and reschedule. If for some reason you are unable to call 24 hours in advance to cancel, be sure you call as soon as possible.

For more information about your Medi-Cal dental benefits, and to find a dentist, visit **SmileCalifornia.org** or call the Telephone Service Center at **1(800) 322-6384**.

Follow us on social media!

(f) @SmileCalifornia

(o) @SmileOnCalifornia

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MEDI-CAL HAS DENTAL COVERED

DHCS | Medi-Cal Dental

Medi-Cal Has Dental Covered

As a Medi-Cal member, your benefits and your child's benefits include dental coverage. See the chart below for an overview of the dental care that is covered by Medi-Cal.

SERVICES	BABIES	KIDS	TEENS	PREGNANCY	ADULTS	SENIORS
Exam*	✓	✓	✓	✓	✓	✓
X-rays	✓	✓	✓	✓	✓	✓
Teeth cleaning	✓	✓	✓	✓	✓	✓
Fluoride varnish	✓	✓	✓	✓	✓	✓
Fillings	✓	✓	✓	✓	✓	✓
Tooth removal	✓	✓	✓	✓	✓	✓
Emergency services	✓	✓	✓	✓	✓	✓
Sedation	✓	✓	✓		✓	✓
Molar sealants**		✓	✓			
Root canals		✓	✓	✓	✓	✓
Orthodontics (braces)***			✓			
Crowns****			✓	✓	✓	✓
Partial and full dentures			✓	✓	✓	✓
Denture relines			✓	✓	✓	✓
Scaling and root planing			✓	✓	✓	✓

Free or low-cost check-ups every six months for members under the age of 21, every 12 months for members over the age of 21.
**Permanent molar sealants are covered for kids and teens up to age 21.*
***For those who qualify.*
****Crowns on molars or premolars (back teeth) may be covered in some cases.*

BABIES

Your child's first dental visit should take place after their first tooth appears, but no later than their first birthday. Baby teeth are critical to your child's health and development. They help him or her chew, speak and smile.

KIDS

Children start to lose their baby teeth as early as five years old. This is when their permanent teeth begin to grow in. Ask the dentist for molar sealants to help protect your child's molars from cavities.

TEENS

Eating sugary foods and drinks, as teens often do, puts them at a higher risk for gum disease and tooth decay. Teenagers who continue to get regular check-ups ensure good oral health well into adulthood.

PREGNANCY

Good oral health care helps prevent problems during pregnancy. As a Medi-Cal member, you are covered during pregnancy and 12 months after the birth of your baby.

ADULTS

As you age, taking care of your health becomes more important. Regular dental visits keep your gums and teeth strong, and help with your overall health.

SENIORS

Older adults are prone to gum disease and other oral health problems. You can lower your risk by brushing twice a day, flossing every day, and seeing your dentist regularly.

Learn about your dental benefit and find a Medi-Cal dentist near you at **SmileCalifornia.org** or by calling **1-800-322-6384**. With Medi-Cal Dental, your visit is free or low-cost. Schedule your appointment today!

SmileCalifornia.org | 1-800-322-6384

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MEDI-CAL HAS DENTAL COVERED

rev 03-2022

Medi-Cal cuenta con cobertura dental

Como afiliado de Medi-Cal, ¡sus beneficios y los de su hijo incluyen cobertura dental! Consulte el siguiente cuadro para obtener una descripción general del cuidado dental que está cubierto por Medi-Cal.

SERVICIOS	BEBÉS	NIÑOS	ADOLESCENTES	EMBARAZO	ADULTOS	PERSONAS MAYORES
Examen*	✓	✓	✓	✓	✓	✓
Radiografías	✓	✓	✓	✓	✓	✓
Limpieza dental	✓	✓	✓	✓	✓	✓
Barniz de flúor	✓	✓	✓	✓	✓	✓
Empastes	✓	✓	✓	✓	✓	✓
Extracción de un diente	✓	✓	✓	✓	✓	✓
Servicios de emergencia	✓	✓	✓	✓	✓	✓
Sedación	✓	✓	✓		✓	✓
Selladores de muelas**		✓	✓			
Conductos radiculares		✓	✓	✓	✓	✓
Ortodoncia (correctores dentales)***			✓			
Coronas****			✓	✓	✓	✓
Dentaduras postizas parciales y completas			✓	✓	✓	✓
Recubrimientos de dentaduras postizas			✓	✓	✓	✓
Limpieza de sarro y alisado radicular			✓	✓	✓	✓

*Chequeos gratuitas o de bajo costo cada seis meses para miembros menores de 21 años, cada 12 meses para miembros mayores de 21 años.
**Los selladores de muelas permanentes están cubiertos para niños y adolescentes hasta los 21 años.
***Para aquellos que califiquen.
****Las coronas en molares o premolares (dientes posteriores) pueden estar cubiertas en algunos casos.

BEBÉS

La primera visita dental de su hijo debe realizarse después de la aparición del primer diente, pero no después de su primer cumpleaños. Los dientes de leche son fundamentales para la salud y el desarrollo de su hijo. Le ayudan a masticar, hablar y sonreír.

NIÑOS

Los niños comienzan a perder sus dientes de leche a partir de los cinco años de edad. Es entonces cuando comienzan a salirle los dientes permanentes. Pídale al dentista selladores de muelas para ayudar a prevenir caries en las muelas de su hijo.

ADOLESCENTES

Consumir alimentos y bebidas azucaradas, como a menudo hacen los adolescentes, los pone frente a un mayor riesgo de desarrollar enfermedad de las encías y caries dentales. Los adolescentes que continúan realizándose controles regulares se aseguran una buena salud bucal hasta la edad adulta.

EMBARAZO

El buen cuidado de la salud bucal ayuda a prevenir problemas durante el embarazo. Como miembro de Medi-Cal, los servicios dentales están cubiertos durante su embarazo y 12 meses después del nacimiento de su bebé.

ADULTOS

A medida que envejece, cuidar su salud se vuelve más importante. Las visitas regulares al dentista mantienen sus encías y dientes fuertes y ayudan con su salud en general.

PERSONAS MAYORES

Los adultos mayores son propensos a la enfermedad de las encías y otros problemas de salud bucal. Puede reducir su riesgo cepillándose los dientes dos veces al día, usando hilo dental todos los días y visitando a su dentista con regularidad.

Obtenga más información sobre su beneficio dental y encuentre un dentista de Medi-Cal cercano a su domicilio en **SonrieCalifornia.org** o llamando al **1-800-322-6384**. Con el Programa Dental de Medi-Cal, su visita es gratuita o de bajo costo. ¡Programe su cita hoy mismo!

SonrieCalifornia.org | **1-800-322-6384**

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MEDI-CAL TIENE COBERTURA DENTAL

rev 03-2022

Care Coordination for Children with Special Healthcare Needs

September 19, 2023

Our Mission
To serve member health with excellence and dignity, respecting the value and needs of each person.

Our Vision
By 2027, remove barriers to health care access for our members, implement same-day treatment authorizations and real-time claims payments for our providers, and annually assess members' social determinants of health.

CalOptima Health, A Public Agency

Children with Special Health Care Needs

The population supported by the CalOptima Health Children with Special Healthcare Needs program includes:

Medi-Cal Children under age 21 with special healthcare needs*

Whole Child Model carve-in

* Children with special health care needs are those who have or are at increased risk for a chronic physical, developmental, behavioral, or emotional condition and who also require health and related services of a type or amount beyond that required by children generally.

American Academy of Pediatrics, July 1998 A New Definition of Children with Special Health Care Needs 102 (1): 137–139.

Pediatric Membership by the numbers

11,094	Whole Child Model Members[2]
12	ECM WCM Members* *Program went live 7/1/23*
2,469	High / Med Risk WCM Members
8,629	Low Risk WCM Members^

^Excludes stratification of new members and CODMEDA/CODMEDB/CODMED

343,991	Pediatric Medi-Cal Members (exc. WCM)[2]
89	ECM Pediatric Medi-Cal Members (exc. WCM)
1,208	High / Med Risk Pediatric Medi-Cal Members (exc. WCM)
309,735	Low Risk Pediatric Medi-Cal Members (exc. WCM)

CALOPTIMA HEALTH PEDIATRIC MEMBERSHIP BY RISK LEVEL[2]

Includes Whole Child Model, Children with Special Healthcare Needs, SPD, and Medi-Cal Pediatric members under age 21
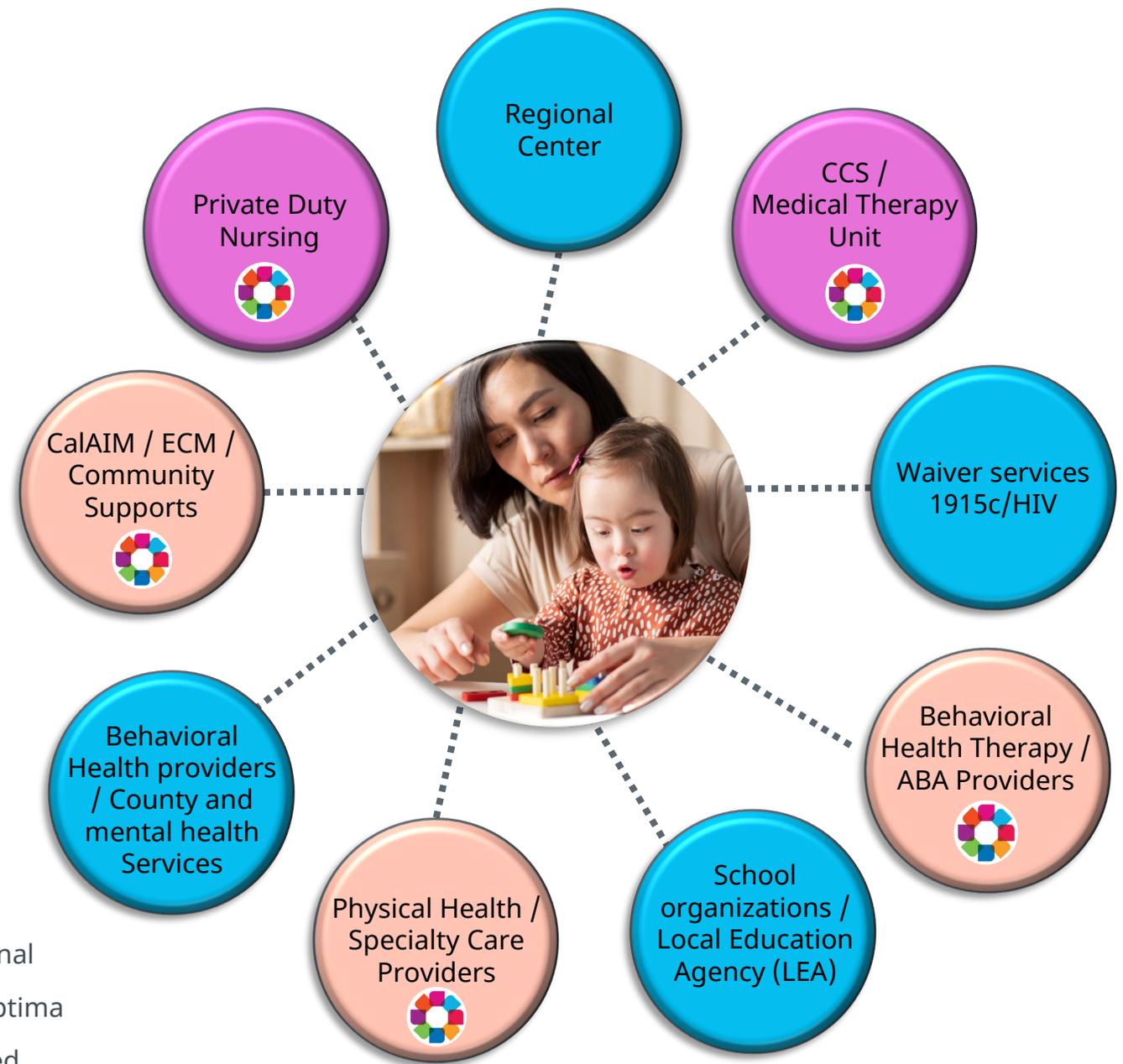

- 101 ECM*^
- 292 ECM Population of Focus^
- 3,674 High/Med Risk Members^
- 317,917 Low Risk members^

950,525 Total Medi-Cal Members
355,142 Medi-Cal Members Under age 21

*~33, 556 members excluded in leveling above are *New, and CODMEDA, B, and C*
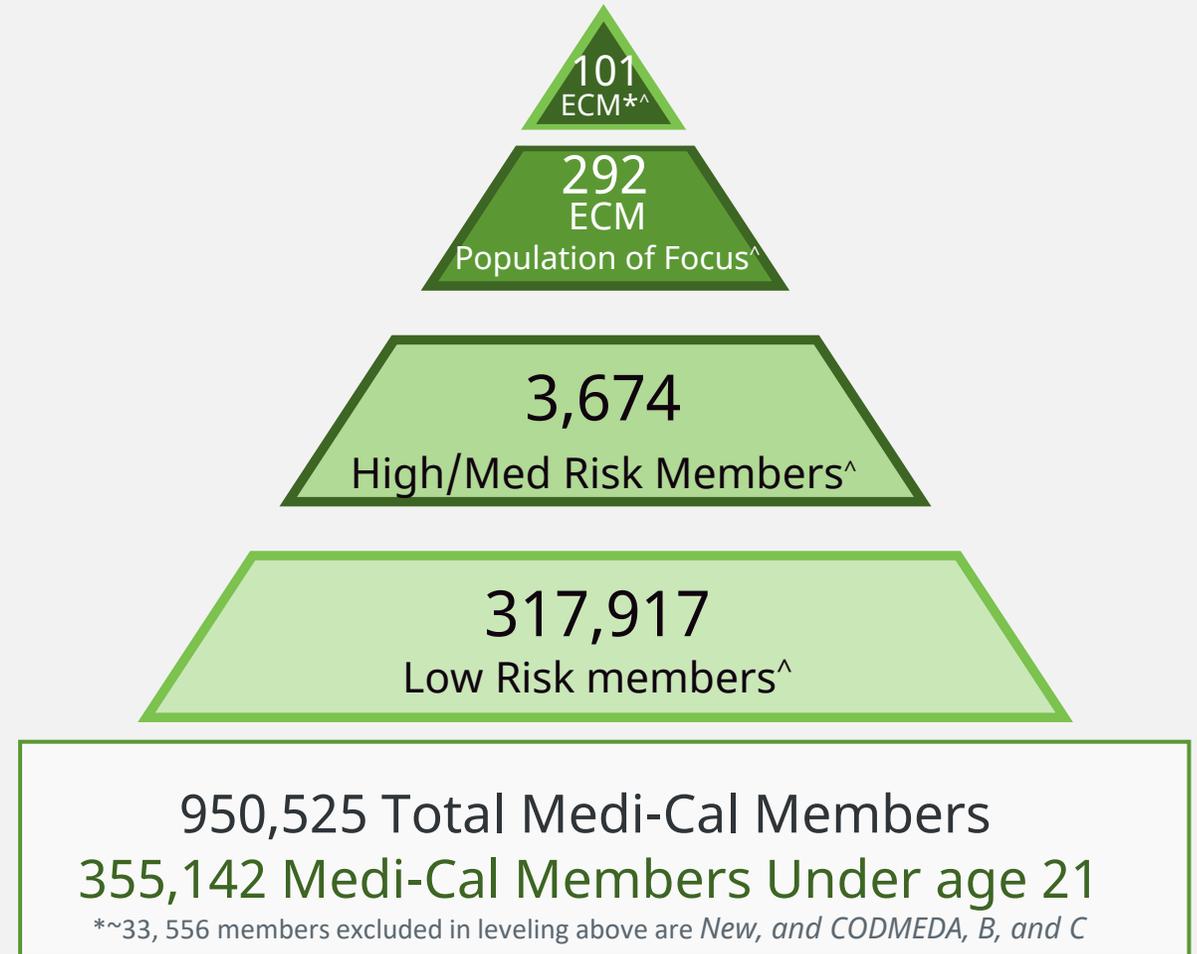
CalOptima Health

Coordinating with key supports for the member

CalOptima Health partners with the member and their primary supports to identify services to enhance and enrich their lives.

By coordinating with key partners, CalOptima Health works with the member to ensure the right services are there to support the member when they need it.

Regional Center

CCS / Medical Therapy Unit

Private Duty Nursing

CalAIM / ECM / Community Supports

Waiver services 1915c/HIV

Behavioral Health providers / County and mental health Services

Behavioral Health Therapy / ABA Providers

Physical Health / Specialty Care Providers

School organizations / Local Education Agency (LEA)

External

CalOptima

Shared

Denotes CalOptima Accountability, otherwise influenced by or coordinated by CalOptima

CalOptima Health

4

Activities to support the member

Care Coordination	Identification and Coordination of High-Risk Infant Follow-up (HRIF) and Early Start Benefits	Care Plan including integration of regional center and school organization care plans	Individualized Education Plan (IEP) participation
Specialty Care and Authorization review through Utilization Management	Benefit Coordination (when Medi-Cal is secondary)		Interdisciplinary Care Team (ICT)
Assessment	Protocols for reassessment (minimum of every 6 months)	Caregiver needs assessment and resources	ABA coordination

CalOptima Health

Activities to support the member (continued)

Dental services coordination	Physical Health and Chronic Condition management and health coaching	Medical Director clinical consult including internal Pediatricians, CCS, and Pediatric Psychiatrist	DME evaluation and provision
Out of county transfer coordination	Transportation	Coordination of transition to adult providers and eligibility benefits	Referral, Coordination, and Advocacy with waiver services (HCBS, HIV/AIDS)
Pharmacy	Emergency action planning and medical alert bracelets	Life Skill support including driving, relational health, vocational support and education, prep for independent living and engaging in meaningful activities	

CalOptima Health

CalAIM Services

Enhanced Case Management

Comprehensive person-centered case management for children and youth enrolled in CCS or WCM with additional needs beyond the CCS condition.

- AltaMed
- CCN / COD
- Family Choice
- Monarch
- Talbert
- AMVI
- CHLA
- HPN–Regal
- Noble
- United Care
- Arta Western
- CHOC
- Kaiser
- Prospect

Home Respite Services

Non-medical relief for the caregiver

- Abbi Care
- Care Partners
- Unlimited Possibilities

Personal Care

Assistance with ADLs and IADLs above and beyond what is approved by county IHSS.

- Abbi Care
- Care Partners
- Unlimited Possibilities

CalOptima Health

Support for the age-out process

AGE

14
- Launch early long-term transition planning with member/family/designee and PCP
- Share the Adolescent Health Care Skills checklist to assist with early transition planning

15
- Continued support for transition plan

16
- Identify members who have not engaged in long-term transition planning
- Formal transition planning process including coordination with the Primary Care Provider (PCP) and Special Care Center (SCC), if applicable
- Complete and/or update the Adolescent Health Care Skills checklist to assist with transition planning

17
- Notify the member/family of formally instituting the transition planning process.
- Share Adult Services Declaration and Notice of Privacy Practices to educate member/family on turning 18 years old

Health

Support for the age-out process (continued)

AGE

18
- Coordinate the transition process and planning with the member/family/ designee.
- Continue health care transition planning and update/ reshare the Adolescent Health Care Skills checklist to assist with transition planning
- Begin to educate on process for identifying adult PCP and specialty care providers

19
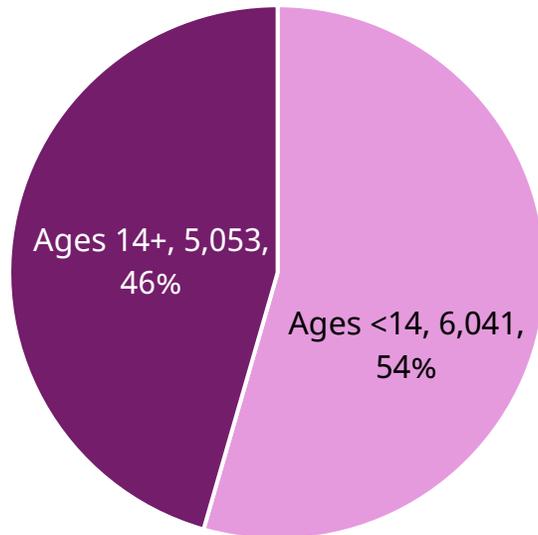- Continued support for transition plan

20
- Notify the member/family of the pending transition and share the Transition support plan form
- PCP/ Specialists notified of pending transition and determine whether PCP will continue to provide care post age-out
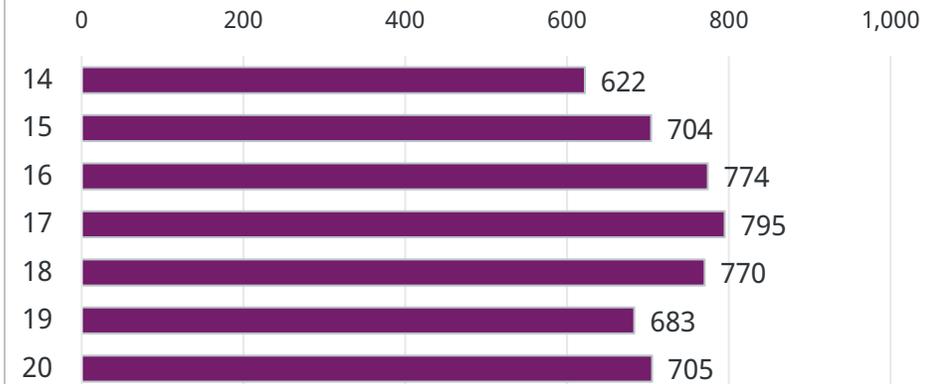- CHOC Health Alliance members select another Health Network prior to their 21st birthday.

21
- Member transitions from Pediatric care providers to adult providers

CalOptima Health

WCM Age-out membership

ALL WCM MEMBERS AGES 0-20 PRE AND DURING AGE-OUT PROCESS

Ages 14+, 5,053, 46%

Ages <14, 6,041, 54%

WCM MEMBERS AGING OUT BY AGE

Age	Count
14	622
15	704
16	774
17	795
18	770
19	683
20	705

Population Breakdown	WCM	
Total Population age 0-20	11,094	
Age (current)	**Count**	**% of total**
14	622	5.6%
15	704	6.3%
16	774	7.0%
17	795	7.2%
18	770	6.9%
19	683	6.2%
20	705	6.4%

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CalOptima Health

10

Post WCM age-out support

CalOptima Health maintains support for members after they have transitioned from their Whole Child Model services. Continued coordination ensures members:

○ Are supported through transition to Adult providers

○ Retain their current CM

○ Retain current benefits

○ Retain regional center support and Home and Community Based Alternatives waiver support

○ Members are monitored post-transition to ensure needs are met

CalOptima Health

Next steps and open discussion

○ What's working? What's not working? What can we do better?

○ Establish committee priorities
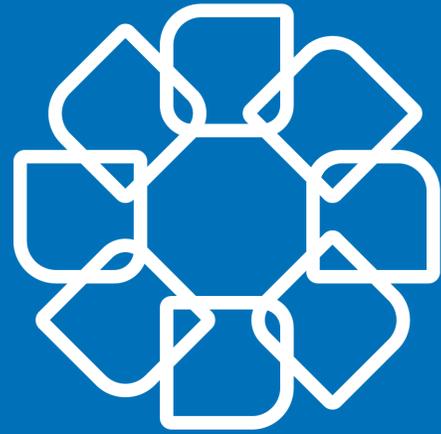
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WCM Health Network breakdown

Health Network	Total Members	% of total members
CHOC	6,586	59.2%
CCN	1,047	9.4%
Kaiser	915	8.2%
Monarch	725	6.5%
AltaMed	342	3.1%
Arta Western	299	2.7%
United Care	299	2.7%
Family Choice	209	1.9%
Prospect	165	1.5%
AMVI	162	1.5%
Noble	153	1.4%
Talbert	101	0.9%
COD Admin	79	0.7%
HPN–Regal	21	0.2%
COD Medi-Medi	16	0.1%
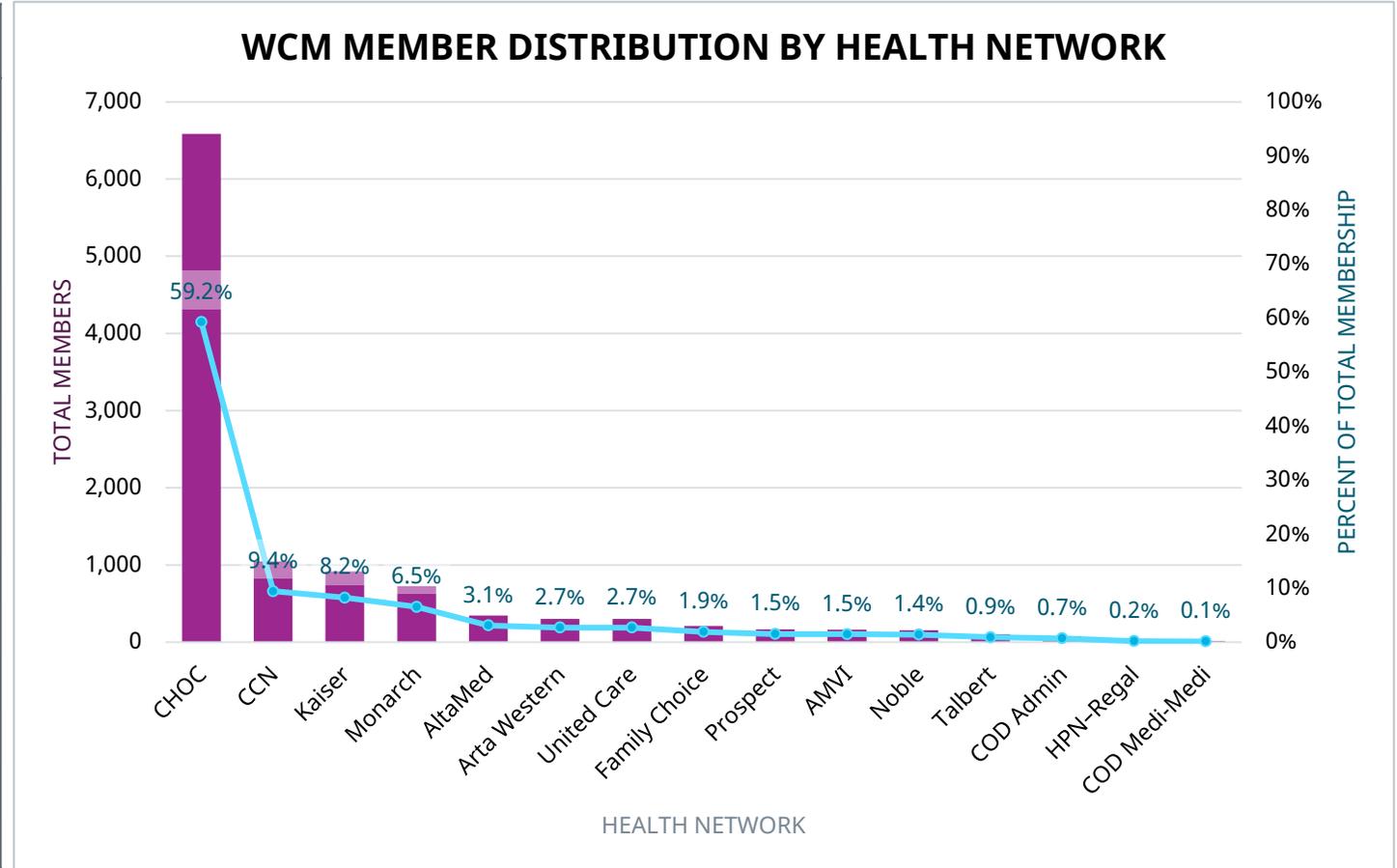
WCM MEMBER DISTRIBUTION BY HEALTH NETWORK

14

Age-out membership

ALL PEDIATRIC AGE 0-20 BY PRE AND DURING AGE-OUT PROCESS (INCLUDES WCM, CSHCN, SPD)

Ages 14+, 138,736, 39%
Ages <14, 216,349, 61%

ALL WCM MEMBERS AGES 0-20 PRE AND DURING AGE-OUT PROCESS

Ages 14+, 5,053, 46%
Ages <14, 6,041, 54%
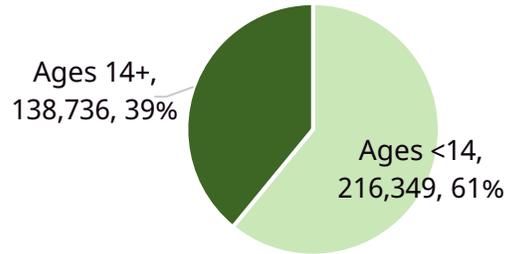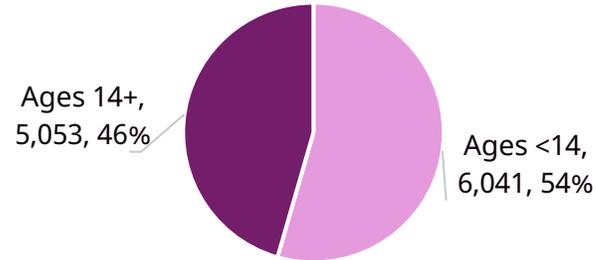
NON-WCM PEDIATRIC AGE 0-20 PRE AND DURING AGE-OUT PROCESS

Ages 14+, 133,683, 39%
Ages <14, 210,308, 61%
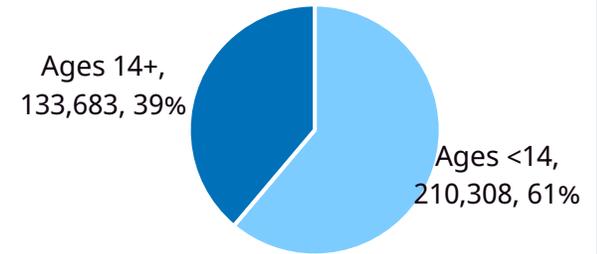
ALL PEDIATRIC MEMBERS AGING-OUT BY AGE

Age	Count
14	19,445
15	20,395
16	20,638
17	20,029
18	19,984
19	19,114
20	19,131

WCM MEMBERS AGING OUT BY AGE

Age	Count
14	622
15	704
16	774
17	795
18	770
19	683
20	705
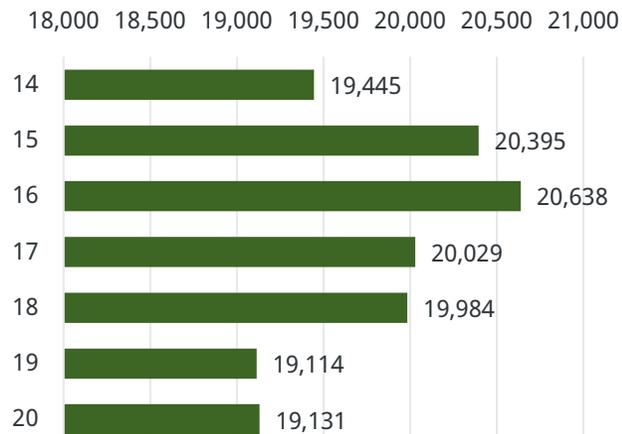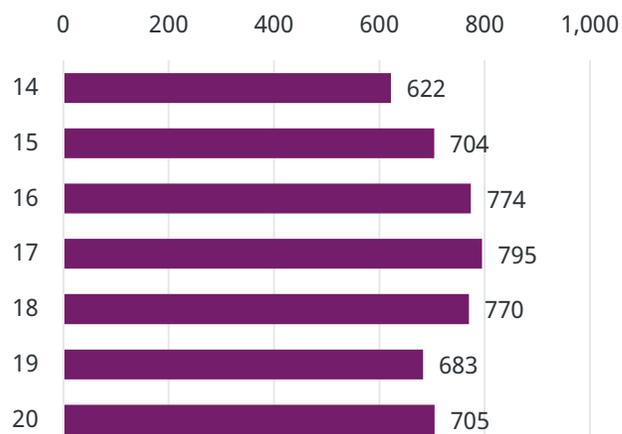
ALL PEDIATRIC NON-WCM MEMBERS AGING OUT BY AGE

Age	Count
14	18,823
15	19,691
16	19,864
17	19,234
18	19,214
19	18,431
20	18,426

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CalOptima Health