



**NOTICE OF A
REGULAR MEETING OF THE
CALOPTIMA BOARD OF DIRECTORS'
MEMBER ADVISORY COMMITTEE**

**THURSDAY, FEBRUARY 11, 2021
2:30 P.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 www.caloptima.org. 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 not 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: 552-547-940 or**
- 2) Participate via Webinar at: <https://attendee.gotowebinar.com/register/3878060387197283340> rather than attending in person. Webinar instructions are provided below.**

I. CALL TO ORDER
Pledge of Allegiance

II. ESTABLISH QUORUM

III. APPROVE MINUTES

- A. Approve Minutes of the November 12, 2020 Special Meeting of the CalOptima Board of Directors' Member Advisory Committee**

- B. [Approve Minutes of the December 10, 2020 Special Meeting of the CalOptima Board of Directors' Member Advisory Committee \(MAC\), OneCare Connect Member Advisory Committee \(OCC MAC\), Provider Advisory Committee \(PAC\) and the Whole-Child Model Family Advisory Committee \(WCM FAC\).](#)

IV. PUBLIC COMMENT

At this time, members of the public may address the Member 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.

V. REPORTS

- A. Consider Recommendation of Medi-Cal Beneficiaries Representative

VI. MANAGEMENT REPORTS

- A. [Chief Executive Officer Update](#)
- B. Chief Operating Officer Update
- C. Chief Medical Officer Update

VII. INFORMATION ITEMS

- A. Committee Member Updates
- B. [COVID-19 Update](#)
- C. [Strategic Plan Update for 2020-2021](#)
- D. [Community Relations Update](#)
- E. [Children with Intellectual/Developmental Disabilities - Reaching the Underserved](#)
- F. [Federal and State Legislative Update](#)

VIII. COMMITTEE MEMBER COMMENTS

IX. ADJOURNMENT

Webinar Information

1. Please register for the Member Advisory Committee Meeting on February 11, 2021 at 2:30 PM PDT at: <https://attendee.gotowebinar.com/register/3878060387197283340>

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.

2. 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: [552-547-940](#)

Audio PIN: Shown after joining the webinar.

MINUTES

SPECIAL MEETING OF THE CALOPTIMA BOARD OF DIRECTORS' MEMBER ADVISORY COMMITTEE

November 12, 2020

A Special Meeting of the CalOptima Board of Directors' Member Advisory Committee (MAC) was held on November 12, 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

Chair Tolbert called the meeting to order at 2:32 p.m. and led the Pledge of Allegiance.

ESTABLISH QUORUM

Members Present: Christine Tolbert, Chair; Pamela Pimentel, Vice Chair; Maura Byron; Sandra Finestone; Hai Hoang; Patty Mouton; Kate Polezhaev; Steve Thronson; Mallory Vega

Members Absent: Connie Gonzalez; Sally Molnar; Melisa Nicholson; Sr. Mary Therese Sweeney

Others Present: Richard Sanchez, Interim Chief Executive Officer; Ladan Khamseh, Chief Operating Officer; David Ramirez, M.D., Chief Medical Officer; Gary Crockett, Chief Counsel; Emily Fonda, M.D., Deputy Chief Medical Officer; Candice Gomez, Executive Director, Program Implementation; Belinda Abeyta, Executive Director, Operations; Tracy Hitzeman, Executive Director Clinical Operations; Betsy Ha, Executive Director, Quality & Population Health Management; Jackie Marks, Sr. Policy Advisory, Government Affairs; Cheryl Simmons, Staff to the Advisory Committees; Praveena Lal Administrative Assistant, Customer Service.

MINUTES

Approve the Minutes of the August 13, 2020 Regular Meeting of the CalOptima Board of Directors' Member Advisory Committee

Action: On motion of Member Finestone, seconded and carried, the MAC approved the minutes as submitted. (9-0-0, members Gonzalez, Molnar, Nicholson and Sweeney absent)

Approve the Minutes of the October 8, 2020 Special Joint Meeting of the CalOptima Board of Directors' Member Advisory Committee, OneCare Connect Member Advisory Committee, Provider Advisory Committee and the Whole-Child Model Family Advisory Committee

Action: On motion of Member Byron, seconded and carried, the MAC approved the minutes as submitted. (9-0-0, Members Gonzalez, Molnar, Nicholson and Sweeney absent)

PUBLIC COMMENT

There were no public comments.

REPORTS

Consider Recommendation of Recipients of CalWORKs Representative Seat

Steve Thronson reviewed on behalf of the Nominations Ad Hoc Committee the recommendation of Jacqueline Gonzalez as the Recipients of CalWORKs Representative. He noted that Ms. Gonzalez was a Social Services Supervisor II with the Family Self Sufficiency division of the Orange County Social Services Agency. With more than 15 years of experience at the county level, Ms. Gonzalez has worked with CalOptima members as an eligibility worker and eligibility supervisor to assist and guide CalWORKs clients.

Action: On motion of Member Vega, seconded and carried, the Committee approved the recommendation of Jacqueline Gonzalez as the Recipients of CalWORKs Representative (Motion carried 9-0-0, Members C. Gonzalez, Molnar, Nicholson and Sweeney absent)

CEO AND MANAGEMENT REPORTS

Chief Executive Officer Update

Richard Sanchez, Chief Executive Officer provided a verbal update on COVID-19 and noted that there is a surge in cases in the US and worldwide, but that the good news was that there was talk of a vaccine. Mr. Sanchez notified the committee that at the Board level, the Member Representative had resigned and that the Orange County Health Care Agency (OCHCA) would begin recruitment to fill the seat on the Board and asked the Committee to share the information with their peers to assist with this recruitment.

Chief Operating Officer (COO) Update

Ladan Khamseh, Chief Operating Officer (COO) informed the PAC that approximately 1,000 members had received through the mail information on their possible eligibility for the Qualified Medicare Beneficiary (QMB) program to claim Part A Medicare benefits. Ms. Khamseh also provided an update on the current status of the Medi-Cal Rx program and noted that Magellan Health Care has begun sending the 90 and 60-day notices to members and that CalOptima was responsible for the final 30-day notice. The Department of Health Care Services (DHCS) has provided a website and a phone number to address member questions.

Chief Medical Officer (CMO) Update

David Ramirez, M.D., Chief Medical Officer, shared with the committee that CalOptima had received a quality award from the Department of Health Care Services (DHCS) for being the only Medi-Cal plan in the state to perform above percentile benchmark in all the quality measures for Reporting Year 2020. Dr. Ramirez also updated the MAC on the Orange County Coronavirus Taskforce and the promising vaccine development results that were recently announced. He noted that the taskforce would be reviewing ways to promote the vaccine to CalOptima members and others in the community. Dr. Ramirez also provided an update on the Telehealth program that the Board had previously approved and noted that a Request for Proposal (RFP) was currently in the review process. He also noted that the second part of the plan regarding a 24/7 E-Visit vendor and a Request for Information (RFI) from vendors is being considered.

INFORMATION ITEMS

MAC Member Updates

Chair Tolbert announced that help is needed to recruit for the Medi-Cal beneficiary representative. She also reminded everyone to complete their compliance courses if they had not done so. The next meeting is on December 10, 2020 and will be a special joint meeting with all the advisory committees.

OneCare Connect Transition Planning

Ravina Hui, Director, Program Implementation noted that the Centers for Medicare and Medicaid Services (CMS) had notified CalOptima that the Cal MediConnect program, known as CalOptima's OneCare Connect program would end on December 1, 2022. Ms. Hui noted that existing OneCare Connect members would have the option of being moved to CalOptima's OneCare program as one of the options.

Federal & State Legislative Update

Jackie Mark, Sr. Policy Advisor provided an update on several legislative items of interest and noted that the State Legislature will begin the planning process for the 2021-2022 budget on December 7, 2020.

ADJOURNMENT

Hearing no further business, Chair Tolbert adjourned the meeting at 3:32 p.m.

/s/ Cheryl Simmons

Cheryl Simmons

Staff to the Advisory Committees

Approved: February 11, 2021

MINUTES

**SPECIAL JOINT MEETING OF THE
CALOPTIMA BOARD OF DIRECTORS'
MEMBER ADVISORY COMMITTEE,
ONECARE CONNECT
CAL MEDICCONNECT PLAN (MEDICARE-MEDICAID PLAN)
MEMBER ADVISORY COMMITTEE,
PROVIDER ADVISORY COMMITTEE AND
WHOLE CHILD MODEL FAMILY ADVISORY COMMITTEE**

December 10, 2020

A Joint Meeting of the CalOptima Board of Directors' Member Advisory Committee (MAC), OneCare Connect Member Advisory Committee (OCC MAC), Provider Advisory Committee (PAC) and Whole-Child Model Advisory Committee (WCM FAC) was held on Thursday, December 10, 2020 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

PAC Chair Dr. Lazo-Pearson called the meeting to order at 8:05 a.m., and OCC MAC Chair Patty Mouton led the Pledge of Allegiance.

ESTABLISH QUORUM

Member Advisory Committee

Members Present: Christine Tolbert, Chair; Maura Byron; Sandy Finestone; Connie Gonzalez; Jacqueline Gonzalez; Hai Hoang; Sally Molnar; Patty Mouton; Kate Polezhaev; Sr. Mary Terese Sweeney; Steve Thronson; Mallory Vega

Members Absent: Melisa Nicholson; Pamela Pimentel, Vice Chair;

OneCare Connect Member Advisory Committee

Members Present: Patty Mouton, Chair; Meredith Chillemi; Gio Corzo; Josefina Diaz; Eleni Hailemariam, M.D. (non-voting); Sandy Finestone; Sara Lee; Mario Parada; Donald Stukes

Members Absent: Jyothi Atluri (non-voting); Keiko Gamez, Vice Chair; Donald Stukes

Provider Advisory Committee

Members Present: Junie Lazo-Pearson, Ph.D., Chair; John Nishimoto, O.D., Vice Chair; Alpesh Amin, M.D.; Anjan Batra, M.D.; Jennifer Birdsall, Tina Bloomer; Donald Bruhns, Dr. Inglis, Jena Jensen; John Kelly, M.D.; Teri Miranti; Alex Rossel; Loc Tran, Pharm.D.; Christy Ward

Members Absent: John Kelly, M.D.; Peter Korchin; Alexander Rossel

Whole-Child Model Family Advisory Committee

Members Present: Kristen Rogers, Chair; Brenda Deeley, Vice Chair; Maura Byron; Malissa Watson

Members Absent: Cathleen Collins; Sandra Cortez-Schultz; Jacque Knudsen; Kathleen Lear; Monica Maier
WCM FAC did not achieve a quorum.

Others Present: Richard Sanchez, Chief Executive Officer; Ladan Khamseh, Chief Operating Officer; Emily Fonda, M.D., Interim Chief Medical Officer; Gary Crockett, Chief Counsel; Belinda Abeyta, Executive Director, Operations; Candice Gomez, Executive Director, Program Implementation; Betsy Ha, Executive Director, Quality and Population Health Management; Tracy Hitzeman, Executive Director Clinical Operations; Michelle Laughlin, Executive Director, Network Operations; Rachel Selleck, Executive Director, Public Affairs; Thanh-Tam Nguyen, M.D., Medical Director, Medical Management; Albert Cardenas, Director, Customer Service; Cheryl Simmons, Staff to the Advisory Committees; Praveena Lal, Administrative Assistant, Customer Service

PUBLIC COMMENT

There were no requests for public comment.

CEO AND MANAGEMENT REPORTS

Chief Executive Officer Update

Richard Sanchez, Chief Executive Officer, welcomed the members of the Board Advisory Committees. Mr. Sanchez reported that the Department of Health Care Services had postponed the Medi-Cal Rx program until April 1, 2021 and noted that it could be extended beyond that date. He also provided a brief update on the COVID pandemic and noted how the case counts were increasing but shared the good news on the availability of the new vaccine. Mr. Sanchez also introduced Rachel Selleck as the new Executive Director of Public Affairs.

Chief Medical Officer Update

Emily Fonda, M.D., Interim Chief Medical Officer gave a status update on COVID-19 for Orange County where the number of cases were still substantial. She discussed the significance of the vaccine and how important and necessary it is to prevent illness, deaths and any long term health consequences as experienced by many people. She shared that a high vaccine uptake at 70% or greater could help end the pandemic and noted that California is planning to distribute and administer vaccines as quickly as possible when the emergency use is finalized.

INFORMATION ITEMS

Trends in Early Diagnosis of Autism Spectrum Disorder

Jonathan T. Megerian M.D., Thompson Autism Center, Michael Weiss, M.D., CHOC Health Alliance and Charles Golden, M.D., CHOC presented on screening, diagnosis, and treatment trends in pediatric autism.

Trends in Adolescent Mental Health

Chelsea O'Haire, Director of Education & Training at The Center for Autism & Neurodevelopmental Disorders, UC Irvine, School of Medicine presented on trends in adolescent diagnoses of autism spectrum disorder as it continues to increase around the country.

Compassionate Care and Applied Behavior Analysis Treatment During the Pandemic

Junelyn Lazo-Pearson, Ph.D., Chief Clinical Officer, Advanced Behavioral Health presented on providing treatment specific to applied behavioral analysis during the pandemic.

Trauma Informed Care and Adverse Childhood Experiences (ACEs) Aware Update

Betsy Ha, Executive Director, Quality and Population Health Management presented and provided an update on ACES and trauma informed care framework and CalOptima's role in working with community partners to implement training, reimbursement while also addressing COVID-19 trauma related to the ACES.

COMMITTEE MEMBER UPDATES

MAC Chair Tolbert welcomed Jacqueline Gonzalez as the new Recipients of CalWORKs Representative and announced that the next regular MAC meeting was scheduled for February 11, 2021 at 2:30 PM. Chair Tolbert also reminded everyone on all the committees to please complete their compliance courses if they had not already done so.

OCC MAC Chair Mouton reminded the OCC MAC members that the next OCC MAC meeting was scheduled for February 25, 2021 at 3:00 PM. She also announced that there would be another special joint meeting on March 11, 2021 with a time to be determined.

PAC Chair Lazo-Pearson announced that the next PAC meeting was scheduled for February 11, 2021 at 8:00 AM. She also told the PAC that she would be reaching out to the members about presenting at various PAC meetings.

WCM FAC Chair Rogers announced that WCM FAC would hold their next regular meeting on February 23, 2021 at 9:30 AM.

ADJOURNMENT

There being no further business before the Committees WCM FAC Chair Kristen Rogers adjourned the meeting at 10:35 a.m.

/s/ Cheryl Simmons

Cheryl Simmons

Staff to the Advisory Committees

Approved: Provider Advisory Committee on February 11, 2021

Approved: Member Advisory Committee on February 11, 2021

MEMORANDUM

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

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.

- *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 [here](#).

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.



A Public Agency

CalOptima

Better. Together.

Population Health COVID-19 Vaccine and Member Outreach Strategy

Member Advisory Committee and Provider Advisory Committee
February 11, 2021

Emily Fonda, MD, MMM, CHCQM
Interim Chief Medical Officer

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CalOptima Population Analysis by COVID-19 Risk Factors

All Total
Members

806,334

All High Risk Conditions

200,978

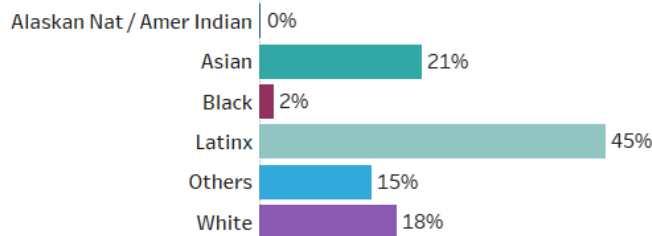
All Experiencing
Homelessness

12,130

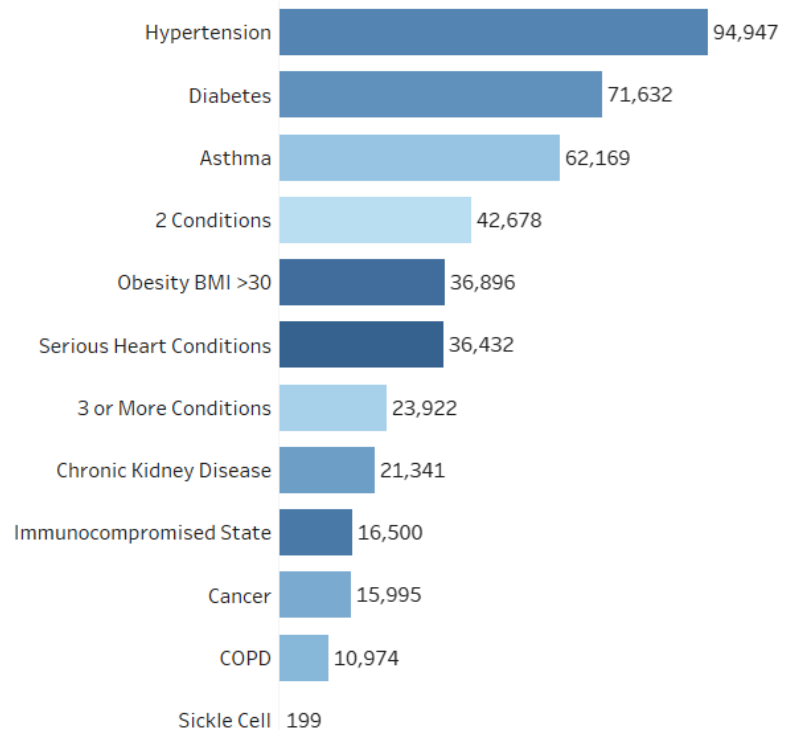
All LTC
Residents

4,148

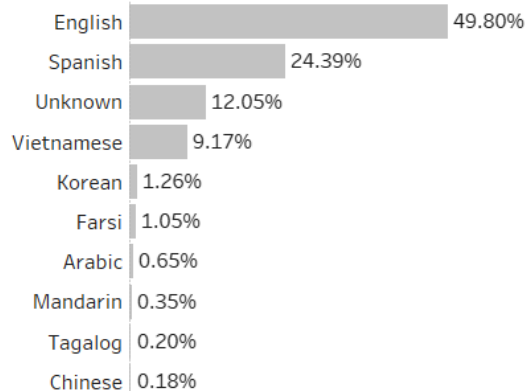
Member Counts by Ethnicity: All



Member Counts by High Risk Condition: All



Member Counts: Top Ten Languages: All



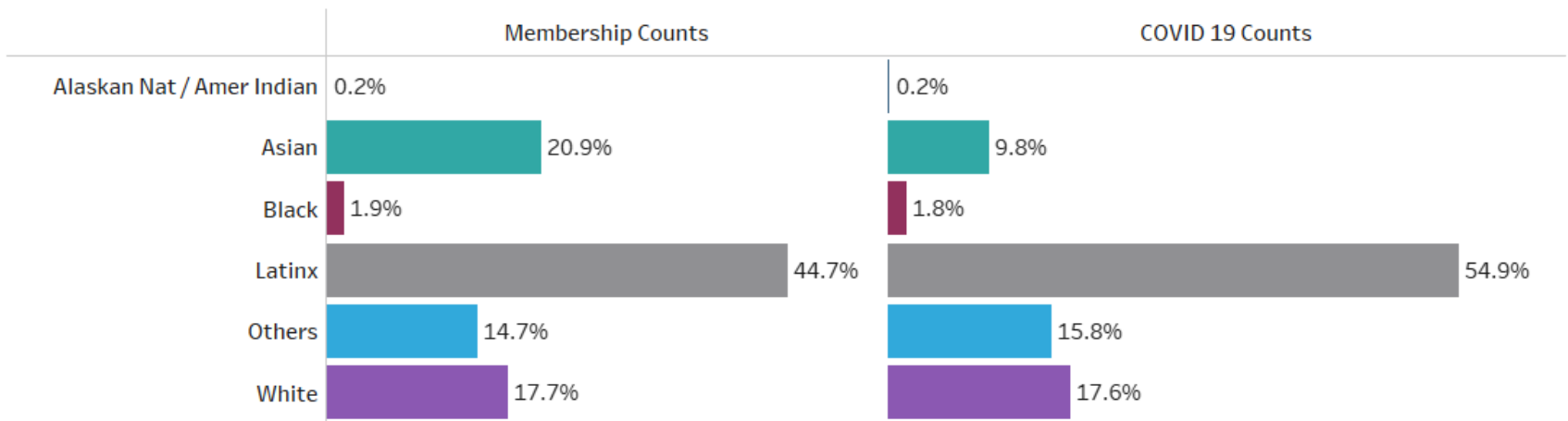
Chronic Conditions in "2 Conditions" and "3 or More Conditions" include Asthma, Chronic Obstructive Pulmonary Disease (COPD), Chronic Kidney Disease (CKD), Congestive Heart Failure (CHF), Diabetes and Hypertension (HTN)

Data pulled on December 28, 2020, Data Source: CalOptima Enterprise Analytics; [Back to Agenda](#) [Condition Prevalence](#); Time Frame: December 20, 2019–November 20, 2020; EA_EQ_Member Detail; Time Frame: December 2020; Programs: All

CalOptima Members COVID-19 Data: December 2020

- Latinx account for 54.9% of coronavirus cases and make up 44.7% of the CalOptima's membership
- Blacks account for 1.8% of cases and make up 1.9% of the membership

CalOptima Members COVID 19 Data
By Race and Ethnicity
December 2020



COVID 19 cases coded in Claims and Encounters received through 12/18/20
CalOptima Enterprise Analytics

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Ongoing COVID-19 Efforts

- Orange County Nursing Home Program
 - Intensive infection protection training began June 1, 2020 in collaboration with the HCA and conducted by UCI epidemiology team in anticipation of the fall COVID-19 resurgence
- Post-Acute Infection Prevention Quality Incentive Initiated October 2019
 - Supports the substitution of regular liquid soap with chlorhexidine soap (antibacterial, anti-viral, anti-fungal for 24 hours) in nursing homes
 - Ongoing program in 27 facilities with plans for expansion

Ongoing COVID-19 Efforts (cont.)

- Virtual Urgent Care Pilot

- Virtual urgent care visits, including after-hour access for all CalOptima members regardless of network assignment for behavioral health (BH) conditions/non-BH care for CCN
- Telehealth coverage for BH — also provided by vendor Bright Heart with limited number of providers
- Goals — to assist with access and availability issues and offload provider offices with limited capacity during the pandemic

OC Nursing Home COVID-19 Prevention Program Extension and Expansion

- Original grant covered the development of an online toolkit for nursing homes and implementation training for the protection of nursing facility staff and patients and for environmental infection prevention
 - 1,984 views @UCIhealth.org/stopcovid
 - Over 150 hours of consultative training
- Results → 185 resident cases avoided; 110 staff cases have been avoided using matched controls
 - Saved 32–35 lives among those due to 17–19% mortality among CalOptima LTC members)

OC Nursing Home COVID-19 Prevention Program Extension and Expansion (cont.)

- \$1.2 million approved by CalOptima Board of Directors on January 7, 2021, for Extension and Expansion
- Urgent expansion will address multiple levels of concern
 - Early estimates of COVID-19 vaccine uptake by nursing facility staff are approximately only 15–30%, reportedly due to misinformation and magnified by frequent staff turnover
 - Informational bilingual webinars for staff to dispel rumors and address vaccine hesitancy
 - Staff helpline for vaccine questions by phone or text
 - Laminated breakroom educational materials for all 67 contracted OC nursing homes

COVID-19 Vaccination Outreach and Member Incentive

○ Initiative Description

- Outreach to members via mail, texting and phone calls
- Host vaccination events in hard-to-reach communities in collaboration with HCA and health networks
- Partner with community-based organizations (e.g., food pantries) to bring additional resources to the event
- Leverage CalOptima non-medical transport to bring members to/from vaccination events
- Member quality incentives of \$25 non-monetary gift cards for each vaccine, subject to regulatory approval
 - \$35 million approved by the BOD on January 7, 2021

○ Target Member Population

- All members

Homeless Health Initiative Vaccination Intervention and Member Incentive Strategy

- One-year Homeless Health Initiative (HHI) — up to \$400,000 for non-monetary member incentives to promote COVID-19 vaccination while addressing social determinants of health (SDoH)
 - A \$25 quick service restaurant gift card per vaccination for members receiving the COVID-19 vaccines
 - Non-monetary incentives in an amount not to exceed \$50
- Collaborate with community partners serving the homeless to support vaccination at shelters, recuperative care sites and other hot spots
 - Orange County Health Care Agency and Coalition of Community Clinics-Clinical Field Teams
- Start planning collaboratively with Coalition of Community Clinics in January 2021

COVID-19 Vaccine Outreach Plan

- Begin at proposed phase 1b* front line essential workers and persons aged 65 years and older
- Conduct targeted outreach via text messaging campaign or alternative modality to these members letting them know that
 - They are now eligible to be vaccinated
 - Advise members where to be vaccinated
 - Location of free vaccination TBD in collaboration with HCA
 - Address root causes of members who may be hesitant to get vaccinated for further outreach with specific messaging.
 - Conduct CalOptima-specific vaccine hesitancy survey.
- Timeline: February–December 2021

* The Advisory Committee on Immunization Practice (ACIP) proposed Phase 1b as including front line essential workers and those persons aged ≥ 75 years
<https://www.cdc.gov/vaccines/covid-19/implementation-strategies.html>

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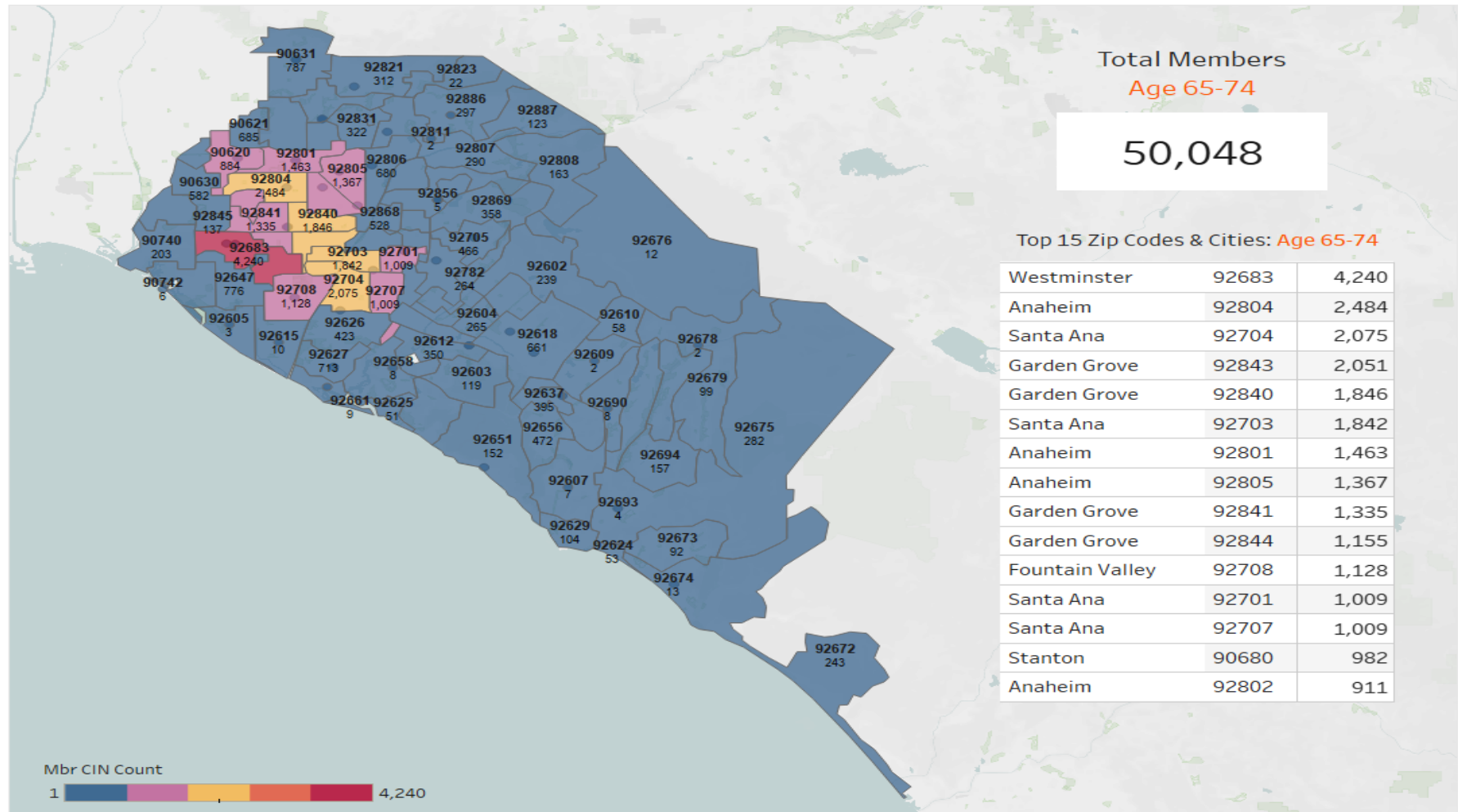
COVID-19 Communications Strategy

- Awareness campaign
 - Through print, outdoor, radio, digital and social media
- Collateral materials
 - Member frequently asked questions (FAQs), member newsletters, PHM mailings, provider FAQs, provider updates, community updates
 - Direct mail, website, member portal, social media and virtual events
- Community outreach
 - Partnerships, panel discussions and town halls
- Media pitching
 - Newspapers, TV, radio and op-ed

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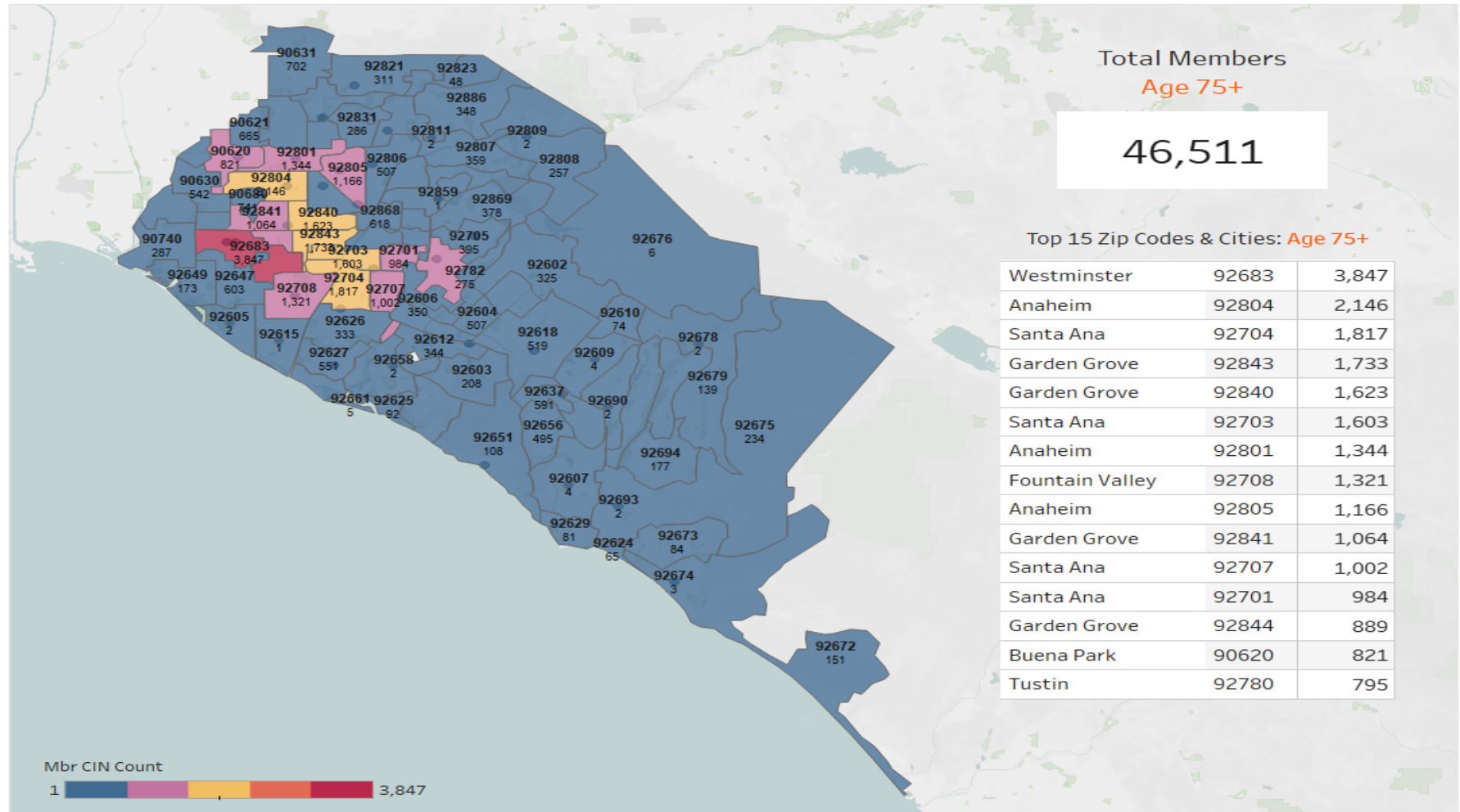
Members Ages 65–74 by City and Top ZIP Codes



Data pulled on December 29, 2020. Data Source: CalOptima Enterprise Analytics;
EA_MemberCurrentMonth; Time Frame: December 2020; Programs: All

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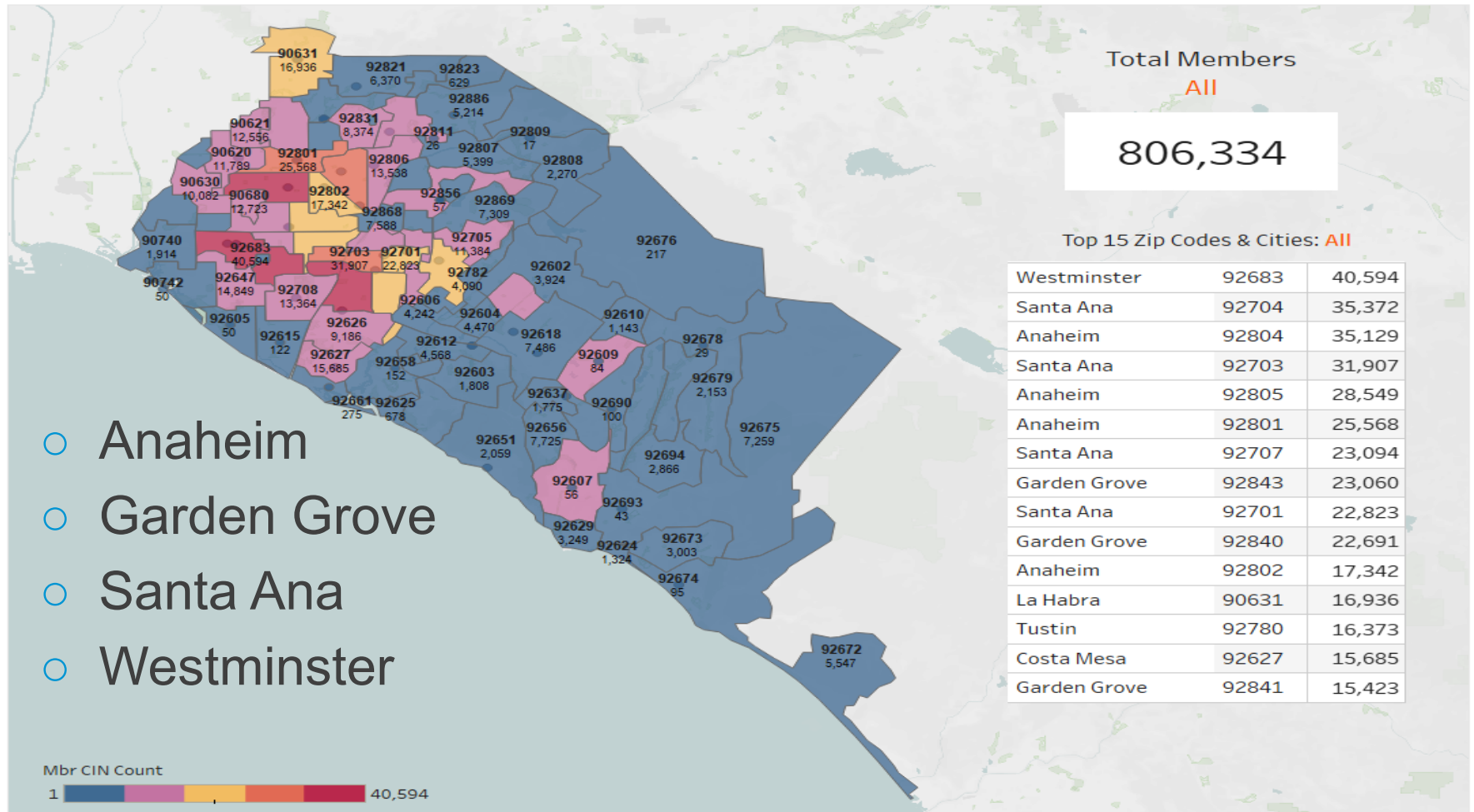
Members Age 75+ by City and Top ZIP Codes



Data pulled on December 29, 2020. Data Source: CalOptima Enterprise Analytics
EA_MemberCurrentMonth; Time Frame: December 2020; Programs: All

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Recommendation for Targeted Vaccine Events



- Anaheim
- Garden Grove
- Santa Ana
- Westminster

Data pulled on December 29, 2020. Data Source: CalOptima Enterprise Analytics; EA_MemberCurrentMonth; Time Frame: December 2020; Programs: All

Our Mission

To provide members with access to quality health care services delivered in a cost-effective and compassionate manner



A Public Agency

CalOptima

Better. Together.

CalOptima 2020–2022 Strategic Plan Review Session

Provider Advisory Committee
Member Advisory Committee
February 11, 2021

Strategic Plan Planning, Development Process and Implementation Overview

Rachel Selleck, Executive Director Public Affairs
Debra Kegel, Director Strategic Development

Planning and Development Process Overview (April–December 2019)

Interviewed CalOptima Board, Executive Staff, and Advisory Committee Chairs and Vice Chairs

Conducted Strategic Planning Session with CalOptima Board of Directors

Completed Environmental Scan

Identified Themes and Priorities

Developed First Draft of 2020–2022 Strategic Plan

Facilitated Meetings with Advisory Committees and Health Networks

Presented Draft Strategic Plan to CalOptima Board of Directors

Integrated Final Input and Comments

Presented Final 2020–2022 Strategic Plan to CalOptima Board of Directors

Strategic Priorities and Objectives



Innovate & Be Proactive

- Anticipate Likely CMS And DHCS Priorities
- Identify and Collaborate on Local Priorities and Needs
- Leverage New Federal and State Programs and Services to Improve Access and Quality of Care for Members
- Seek Opportunities to Further Integrate Care for Members



Expand CalOptima's Member-Centric Focus

- Focus on Population Health
- Strengthen Provider Network and Access to Care
- Enhance Member Experience and Customer Service



Strengthen Community Partnerships

- Increase Collaboration with Providers and Community Stakeholders to Improve Care
- Utilize Strong Advisory Committee Participation to Inform Additional Community Engagement Strategies



Increase Value and Improve Care Delivery

- Evaluate and Implement Value-Based Purchasing Strategies that Drive Quality
- Deploy Innovative Delivery Models to Address Social Determinants of Health and Homelessness
- Maintain Focus on Providing High-Quality Care Provided to Members



Enhance Operational Excellence and Efficiency

- Maintain Strong Culture of Compliance
- Preserve CalOptima's Financial Stability
- Invest in Infrastructure and Efficient Processes
- Engage Workforce and Identify Development Opportunities

Strategic Planning Discussion

○ Strategic Priorities



○ Strategic Initiatives Categories

- Behavioral Health
- Clinical Operations
- Community Engagement
- COVID-19 Response
- Employee Support
- Health Equity*
- Member Access
- Organizational Operations
- Quality Improvement
- Service Delivery Model*
- Social Determinants of Health

* Added 2/4/21 per Board of Directors

Looking Forward

- Continue leveraging flexibilities under the 2020–2022 Strategic Plan to address
 - COVID-19 pandemic and aftermath
 - New federal administrative and legislative agendas
 - Next fiscal year state budget and initiatives
 - California Advancing and Innovating Medi-Cal (CalAIM)
 - Racial and ethnic health care disparities
- Per direction of Board at February 4, 2021 meeting
 - Staff will engage advisory committees regarding proposed goals in the following categories
 - Behavioral Health
 - Health Equity
 - Service Delivery Model
 - Social Determinants of Health





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Our Mission

To provide members with access to quality health care services delivered in a cost-effective and compassionate manner






Strategic Priority Initiatives

	Projects*	Purpose	Primary Strategic Priority	Planned Start Date	Status
Behavioral Health	Behavioral Health Ad Hoc Workgroup Coordination	Expand collaborative opportunities and build a synergistic relationship among the Coalition of Orange County Community Health Centers, their member community health centers and CalOptima to promote health equity of the most vulnerable populations in Orange County, specific to mental health and substance use disorder treatment services.	Increase Value and Improve Care Delivery	6/19/2020	 Ongoing
Behavioral Health	Behavioral Health Integration (BHI) Redesign	Develop, document and improve departmental processes for BHI due to transition of care services for OneCare and OneCare Connect from Magellan to CalOptima as of January 1, 2020, and assist with redesign of BHI department organization and internal team processes to improve member experience.	Increase Value and Improve Care Delivery	7/1/2019	 Ongoing
Clinical Operations	Enhance Real-Time Monitoring	Implement formalized real-time and near real-time monitoring processes with standards development for tracking, trending, feedback and remediation of utilization management activities.	Enhance Operational Excellence and Efficiency	5/1/2020	 Ongoing
Clinical Operations	Medi-Cal Pharmacy Benefit Carve-Out	Carve out Medi-Cal pharmacy benefits to Medi-Cal Fee for Service, effective April 1, 2021. Excluded from the carve-out are OneCare, OneCare Connect, Program of All-Inclusive Care for the Elderly (PACE) and physician-administered drugs.	Enhance Operational Excellence and Efficiency	12/1/2019	 Ongoing

* CalOptima will seek Board of Directors and/or regulatory approval, as needed







Strategic Priority Initiatives

	Projects*	Purpose	Primary Strategic Priority	Planned Start Date	Status
Clinical Operations	Pediatric Integrated Care Survey	Pilot the implementation of a family-reported survey instrument, developed by Boston Children's Hospital, that measures family experience of care integration in a subset of the Whole Child Model (WCM) population. Both CalOptima and CHOC Health Alliance are participants in the initiative, which will inform quality improvement and interventions to improve integration of services for WCM members.	Expand CalOptima's Member-Centric Focus	2/1/2021	 Not Yet Started
Clinical Operations	Pharmacy Benefit Management (PBM)	Negotiate contract with current PBM for dates of service starting January 1, 2022, or pursue a Request for Proposal (RFP) depending on outcome of contract negotiations. Initiative would ensure quality and efficient administration of pharmacy benefit for members in our Medicare programs. Note: Contract with MedImpact was extended through 2024.	Enhance Operational Excellence and Efficiency	11/1/2020	 Complete 12/31/2020
Community Engagement	CalOptima Collaboration in the Community	Provide targeted outreach and education projects/activities to (1) increase engagement and collaboration with providers and community stakeholders; and (2) engage our advisory committees and other community stakeholders to identify members' needs, community health issues, priorities and opportunities.	Strengthen Community Partnerships	1/1/2020	 Ongoing

* CalOptima will seek Board of Directors and/or regulatory approval, as needed







Strategic Priority Initiatives

	Projects*	Purpose	Primary Strategic Priority	Planned Start Date	Status
Community Engagement	Quarterly Safety Net Meetings	Provide a platform for CalOptima and the Coalition of Orange County Community Health Centers to convene on a quarterly basis with a shared strategic agenda to identify opportunities for both organizations to partner and provide value to ongoing health care initiatives.	Strengthen Community Partnerships	4/17/2020	 Ongoing
Community Engagement	Vietnamese Leadership Collaborative	Identify key stakeholders serving the Vietnamese community and launch the Vietnamese Leadership Collaborative to lead and address health care issues impacting our Vietnamese membership.	Strengthen Community Partnerships	3/1/2021	 Not Yet Started
COVID-19 Response	Community Stakeholder Outreach and Engagement During COVID-19 Pandemic	Provide targeted outreach activities/projects to (1) serve as a reliable source of resource information to community stakeholders; (2) share information about CalOptima and Medi-Cal through virtual platforms; and (3) support community stakeholder sponsored events with information materials and branded items.	Strengthen Community Partnerships	3/1/2020	 Ongoing
COVID-19 Response	COVID-19 Pandemic Response	Respond efficiently and proactively to our staff, providers, community partners and others during the pandemic, and adjust as necessary to the resulting regulatory changes from our federal, state and local partners.	Enhance Operational Excellence and Efficiency	3/1/2020	 Ongoing

* CalOptima will seek Board of Directors and/or regulatory approval, as needed






Strategic Priority Initiatives

	Projects*	Purpose	Primary Strategic Priority	Planned Start Date	Status
COVID-19 Response	Orange County COVID-19 Nursing Home Prevention Program	Engage nursing homes to undergo intensive COVID-19 infection prevention training to provide greater depth and assurance of infection prevention, develop a toolkit and implement training to improve the infection prevention readiness for COVID-19 surge across OC nursing homes.	Innovate and Be Proactive	5/28/2020	 Ongoing
COVID-19 Response	PACE Virtual Care	Provide a technology platform for PACE providers and clinicians to connect virtually with PACE participants to meet current COVID-19 physical distancing requirements.	Increase Value and Improve Care Delivery	5/7/2020	 Complete 11/24/2020
Employee Support	Emergency Mass Notification System	Provide CalOptima a vehicle to help protect, alert and communicate with CalOptima employees at times of need and/or during emergencies.	Enhance Operational Excellence and Efficiency	4/19/2020	 Ongoing
Employee Support	HR Learning Management System and eLearning Content RFP and Implementation	Implement a new learning management system for CalOptima University employee training, development and education programs. Contracted vendor on target for implementation mid-2021.	Enhance Operational Excellence and Efficiency	7/1/2019	 Ongoing

* CalOptima will seek Board of Directors and/or regulatory approval, as needed






Strategic Priority Initiatives

	Projects*	Purpose	Primary Strategic Priority	Planned Start Date	Status
Member Access	Long-Term Care at Home (LTCH)	Provide members with greater access to skilled care at home and facilitate transition from the hospital and skilled nursing facility to home, subject to DHCS approval of its proposed LTCH initiative. Note: LTSS collaborated with DHCS and managed care plan stakeholders to assess the program design and provide structure feedback. On August 26, 2020, DHCS terminated the development of the LTCH program based on the inability to reach agreement with the Administration on a design process.	Expand CalOptima's Member-Centric Focus	5/22/2020	 Closed 8/26/2020
Member Access	Preventive Care Outreach (Outbound Call Campaign per All Plan Letter 19-010)	Contact all Medi-Cal beneficiaries under age 21 who have not used, or who have underutilized, preventive care services available under the Early and Periodic Screening, Diagnostic and Treatment (EPSDT) services, and encourage these beneficiaries to use EPSDT services.	Expand CalOptima's Member-Centric Focus	5/1/2020	 Ongoing
Member Access	Private Duty Nursing (PDN) - Case Management Responsibilities for Medi-Cal Eligible Members	Ensure Medi-Cal eligible members under the age of 21 know their right to PDN benefits, which fall under the EPSDT services. Note: Notices were sent to families with members under 21.	Expand CalOptima's Member-Centric Focus	1/1/2020	 Complete 11/30/2020

* CalOptima will seek Board of Directors and/or regulatory approval, as needed






Strategic Priority Initiatives

	Projects*	Purpose	Primary Strategic Priority	Planned Start Date	Status
Organizational Operations	Communications Support	Provide supportive communication strategies, messaging and materials for various strategic initiatives identified by other departments.	Innovate and Be Proactive	1/1/2020	 Ongoing
Organizational Operations	DHCS Health Network Certification	Monitor and certify CalOptima's subcontracted networks pursuant to regulatory standards and requirements set forth by DHCS, including time and distance standards, timely access, mandatory provider types and provider to member ratios. CalOptima is in the process of identifying network deficiencies, reviewing results with networks and updating policy accordingly. Note: In March 2022, CalOptima will submit documentation verifying that its networks have met the adequacy standards per DHCS guidance.	Increase Value and Improve Care Delivery	10/1/2019	 Ongoing
Organizational Operations	Directed Payments	Operationalize DHCS' Directed Payments programs (Physician Services, Hyde, Developmental Screening Services, Adverse Childhood Experiences Screening, Value-Based Payment and Family Planning Services) to incentivize specific providers for specific services using Proposition 56 (Tobacco tax) funds.	Increase Value and Improve Care Delivery	7/1/2018	 Ongoing

* CalOptima will seek Board of Directors and/or regulatory approval, as needed






Strategic Priority Initiatives

	Projects*	Purpose	Primary Strategic Priority	Planned Start Date	Status
Organizational Operations	E-Signature Change Healthcare/Adobe	Improve efficiencies for providers and CalOptima through Adobe e-signature functionality for provider contracts produced by CalOptima's Contracting Department.	Enhance Operational Excellence and Efficiency	12/2/2019	 Complete 7/31/2020
Organizational Operations	Intergovernmental Transfer (IGT) Drawdown Process	Work with DHCS and participating governmental entities to facilitate the transfer of public funds in order to access the highest federally allowable reimbursement rate for Orange County. IGT funds are part of CalOptima's operating income/expenses and must be used for Medi-Cal covered services for the Medi-Cal population.	Increase Value and Improve Care Delivery	7/1/2020	 Ongoing
Organizational Operations	Non-Contracted Ground Emergency Medical Transportation (GEMT)	Provide additional funding to non-contracted GEMT providers that service Medi-Cal beneficiaries to support quality improvement efforts through the Quality Assurance Fee.	Increase Value and Improve Care Delivery	7/1/2018	 Ongoing

* CalOptima will seek Board of Directors and/or regulatory approval, as needed






Strategic Priority Initiatives

	Projects*	Purpose	Primary Strategic Priority	Planned Start Date	Status
Organizational Operations	OneCare Network Build for 2023	Build a OneCare provider network to support continuity and access to care for members participating in OneCare Connect who are expected to transition to OneCare in 2023. As a plan under the Cal MediConnect demonstration project, OneCare Connect is due to sunset at the end of 2022, at which time it is anticipated that existing OneCare Connect members will transition to OneCare. Board authority will be requested as needed.	Increase Value and Improve Care Delivery	9/1/2021	 Not Yet Started
Organizational Operations	Organizational Support for Regulatory Guidance Implementation	Facilitate multidepartment activities related to new regulatory requirements to support compliance and organizational policy and process alignment, while ensuring uninterrupted member care. Examples include: Cost Avoidance and Post-Payment Recovery for Other Health Coverage (OHC) (All Plan Letter 20-010); CMS Part C and D Final Rule Requirements (OneCare, OneCare Connect and PACE); D-SNP (OneCare) Contract Year 2021 Provisions; and Medi-Cal Contract Amendment Implementation.	Enhance Operational Excellence and Efficiency	1/1/2020	 Ongoing
Organizational Operations	PACE Encounters	Develop end-to-end process for PACE encounters. This process begins with capture of center-based services and ends with validation and monitoring. This will ensure that all encounters are submitted and reported accurately to support CMS risk adjustment for Medicare payments.	Enhance Operational Excellence and Efficiency	1/4/2021	 Not Yet Started

* CalOptima will seek Board of Directors and/or regulatory approval, as needed






Strategic Priority Initiatives

	Projects*	Purpose	Primary Strategic Priority	Planned Start Date	Status
Organizational Operations	Provider Experience Value Stream Enhancement	Facilitate improvement of interdepartmental processes that impact the provider experience and satisfaction including onboarding, letters of agreement, contract uploads and agreement updates, quality monitoring, and provider dispute resolutions.	Enhance Operational Excellence and Efficiency	6/1/2019	 Ongoing
Organizational Operations	Provider Trust Exclusion Monitoring	Streamline the required exclusion monitoring review process and implement a workflow that will reduce likelihood of Medicare and Medi-Cal fraud and meet regulatory compliance.	Enhance Operational Excellence and Efficiency	7/1/2019	 Ongoing
Organizational Operations	RFP for Provider Data Management Solution System	Issue an RFP to select a vendor, upon Board approval, to produce an integrated provider/partner data system that will merge existing systems used by CalOptima. These systems include Facets, McKesson, Cactus and Guiding Care, among others. The new system will collect data, spot discrepancies, assist in reconciling and validating the data and share it with other systems to which CalOptima exports. The end goal is a single provider data management platform that will be the internal source of truth for all CalOptima provider data with full interoperability.	Innovate and Be Proactive	9/1/2020	 Ongoing

* CalOptima will seek Board of Directors and/or regulatory approval, as needed





Strategic Priority Initiatives

	Projects*	Purpose	Primary Strategic Priority	Planned Start Date	Status
Quality Improvement	Office Ally Electronic Health Record (EHR) Implementation	Build repository of member EHR data from Office Ally providers to close member data gaps for population health management, reduce provider abrasion by requesting fewer medical records for quality related review (HEDIS, PQIs), and assist with turnaround time for Utilization Management denials.	Increase Value and Improve Care Delivery	11/4/2019	 Ongoing
Quality Improvement	Post-Acute Infection Prevention Quality Initiative (PIPQI)	Reduce the spread of multi-drug resistant organisms in long-term care facilities and hospital admissions/readmissions through the administration of topical products to reduce bacteria on the body that can produce harmful infections.	Innovate and Be Proactive	10/1/2019	 Ongoing
Quality Improvement	Virtual Care Strategy	Improve member access and convenience by (1) supporting use of virtual visits during COVID-19 and beyond; (2) contracting with specialty providers with a virtual care focus for CCN members; (3) contracting with a vendor offering virtual visits including after-hours access for acute non-emergency medical conditions and behavioral health conditions; (4) contracting with a vendor offering eConsults for CCN members and PCPs through CalOptima-contracted specialists; and (5) establishing member texting.	Innovate and Be Proactive	5/7/2020	 Ongoing

* CalOptima will seek Board of Directors and/or regulatory approval, as needed





Strategic Priority Initiatives

	Projects*	Purpose	Primary Strategic Priority	Planned Start Date	Status
Social Determinants of Health	Homeless Health Initiative: Clinical Field Team (CFT) Pilot	Meet the immediate urgent care needs of individuals experiencing homelessness throughout the county wherever they may be located. These on-call urgent care services are provided by contracted community health centers that serve members and others regardless of insurance status. By the end of the pilot, establish a sustainable program to continue these services.	Innovate and Be Proactive	4/1/2019	 Ongoing
Social Determinants of Health	Homeless Health Initiative: Homeless Response Team (HRT)	Provide a dedicated team of case managers and care coordinators to administer the CFT pilot. HRT responsibilities include staffing the call line; making dispatches to contracted providers; scheduling, reporting and coordinating with community organizations, providers and health networks; developing relationships with homeless service providers; and engaging members and homeless service providers in the community.	Innovate and Be Proactive	4/1/2019	 Ongoing

* CalOptima will seek Board of Directors and/or regulatory approval, as needed




Strategic Priority Initiatives

	Projects*	Purpose	Primary Strategic Priority	Planned Start Date	Status
Social Determinants of Health	Homeless Health Stakeholder Engagement	Facilitate Homeless Health Stakeholder Engagement Strategy sessions to solicit input on outreach, engagement strategies and best practices from key homeless advocates and stakeholders who have an established presence in the community.	Innovate and Be Proactive	12/1/2020	 Ongoing
Social Determinants of Health	In Lieu of Services – Recuperative Care Request	Develop a business case for implementation of recuperative care as an in lieu of service when no longer available under the Whole Person Care pilot. This will include collaboration with the county to leverage WPC experience and the prior DHCS CalAIM proposal. CalOptima will seek authorization from the Board of Directors prior to a formal application to DHCS to authorize recuperative care as an in lieu of service.	Innovate and Be Proactive	10/1/2020	 Ongoing

* CalOptima will seek Board of Directors and/or regulatory approval, as needed



Strategic Priority Initiatives

	Projects*	Purpose	Primary Strategic Priority	Planned Start Date	Status
Social Determinants of Health	Intergovernmental Transfer (IGT) Community Grants	Provide oversight and report grant activity progress and achieved outcomes made toward the grants' goals and objectives. The CalOptima Board of Directors authorized the allocation of IGT funds toward community grants. Twelve community grants were awarded in the following categories: Adult Dental Services, Children's Dental Services, Children's Mental Health Services, Food Distribution Services for Children and Families, Primary Care Services and Social Determinants of Health, and Increase Access to Medication-Assisted Treatment.	Innovate and Be Proactive	10/1/2019	 Ongoing

* CalOptima will seek Board of Directors and/or regulatory approval, as needed



A Public Agency

CalOptima

Better. Together.

Serving Our Community During COVID-19

Tiffany Kaaiakamanu

Manager, Community Relations Department

Community Relations Department

- Vision

- Community Relations strives to strengthen partnerships by enhancing communications, understanding and mutual support between CalOptima and community organizations to serve our members' health care needs.

- Mission

- To increase understanding of CalOptima's values and mission by educating, collaborating and strengthening relationships in the community

Community Relations Team



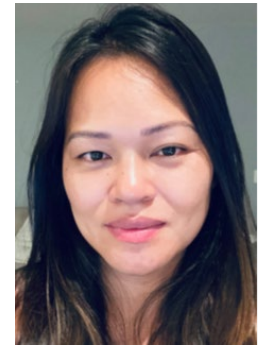
Debra Kegel
Strategic Development
Director



Tiffany Kaaiakamanu
Community Relations
Manager



Shelly Manjarrez
Sr. Community Relations
Specialist



Lisa Nguyen
Sr. Community Relations
Specialist

Community Support

- Participate in community events including conferences, workshops and resource/health fairs
 - FY 18–19: 126 events attended
 - FY 19–20: 111 events attended
- Provide financial support through sponsorships, registration fees and promotional items
 - FY 18–19: \$97,230
 - FY 19–20: \$70,765

Community Support (cont.)

- Since March 2020, Community Relations has followed local, state and federal guidelines
 - In-person attendance at events suspended
 - 35 virtual meetings attended
 - 34 community events attended, distributed CalOptima items/materials and provided \$33,930 in financial support
- From March through May 2020
 - 41 community events/resource fairs were cancelled or postponed

Community Support (cont.)

- Hosted events/collaborative meetings and gave presentations
 - Shared information about CalOptima and community health initiatives for members and strengthen community partnerships.
- Since March 2020, Community Relations transitioned to virtual platform
 - Hosted virtual events and collaborative meetings.
 - 5 Cafecito meetings
 - 4 session resource fair — “Resources for Individuals Experiencing Homelessness”
 - 1 Community Alliances Forum “Mental Health and Self-Care During Uncertain Times”
 - Delivered approximately 30 virtual presentations

Community Support (cont.)

- Endorsements
 - Letters of Support and Use of CalOptima's Name or Logo
- Communication efforts
 - Community Announcements
 - State and local guidance, CalOptima updates and resources
 - Community Connections e-Newsletter
- COVID-19 response
 - Weekly COVID-19 updates to community stakeholders
 - Expanded outreach to serve potential members
 - 26 community partners, 37 collaboratives and 21 shelters
 - 12 partners for educational materials, 5 websites/social media platforms, 21 collaboratives, 3 newsletters and listservs

New Initiatives in Response to COVID-19

- Supporting COVID-19 vaccine events
 - Community partners' vaccine events
 - Developing plans to support CalOptima members and community
 - Strategy to respond as vaccine availability increases
 - Collaborating with OC Health Care Agency and community partners
- Speakers Bureau
 - Collaborating to support community partners' meetings, events, town hall meetings and conferences

Questions



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Tiffany Kaaiakamanu

Manager, Community Relations

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657-235-6872

Our Mission

To provide members with access to quality health care services delivered in a cost-effective and compassionate manner

How to Enroll in Medi-Cal

CalOptima Manages Medi-Cal

Health Care for Low-Income Individuals in Orange County

STEP 1

Complete the
Medi-Cal
application

STEP 2

Receive
eligibility from
County of
Orange Social
Services
Agency within
45 days

STEP 3

Get assigned
to CalOptima

STEP 4

Become a
CalOptima
member and
select a health
network
and doctor
within 30 days

STEP 5

Renew each
year with
County of
Orange Social
Services
Agency

Eligible Low-Income Groups

People with
Disabilities

Families
with Children

Undocumented
Youth

Seniors

Adults

Foster Care
Children

Pregnant Women

People with
Specific Conditions

Where to Apply

Free Enrollment Help

Coalition of Orange County
Community Health Centers
www.coccc.org
1-714-352-5990

Community Health Initiative
of Orange County
www.chioc.org
1-855-927-8333

California Health Plus
www.californiahealthplus.org

Covered California
www.coveredca.com
1-800-300-1506
1-888-889-4500 TTY

Asian Americans
Advancing Justice
www.advancingjustice-oc.org
1-714-587-2050 Ext. 5

County of Orange
Social Services Agency
www.mybenefitscalwin.org
1-800-281-9799

Families and
Communities Together
Orange County
www.factoc.org
1-714-566-2878

CALL
NOW!

YEAR-ROUND
ENROLLMENT

Documents You May Need



Proof of
Income



Birth
Certificate



Proof of
Address



Personal ID



Social
Security Card



Proof of
Citizenship



Individual
Taxpayer
Identification
Number (ITIN)

Medi-Cal Benefits



Doctors



Hospital



Dental



Behavioral
Health



Pharmacy



Vision



CalOptima
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Orange County's
Community Health Plan

CalOptima members that need assistance with
their health care benefits can contact CalOptima
Customer Service at 1-714-246-8500 or toll-free at
1-888-587-8088.

www.caloptima.org

Cómo Inscribirse en Medi-Cal

CalOptima administra el programa de Medi-Cal

Seguro médico para individuos con bajos ingresos en el Condado de Orange

- PASO 1**

Llenar la solicitud de Medi-Cal
- PASO 2**

Recibir la elegibilidad de la Agencia de Servicios Sociales del condado de Orange dentro de 45 días
- PASO 3**

Ser asignado a CalOptima
- PASO 4**

Ser miembro de CalOptima y seleccionar un plan de salud y médico general dentro de 30 días
- PASO 5**

Renovar cada año con la Agencia de Servicios Sociales del condado de Orange

Grupos de bajos ingresos que califican



Dónde llenar una solicitud

Ayuda de inscripción gratuita

Coalition of Orange County Community Health Centers
www.coccc.org
1-714-352-5990

Community Health Initiative of Orange County
www.chioc.org
1-855-927-8333

California Health Plus
www.californiahealthplus.org

Covered California
www.coveredca.com
1-800-300-1506
1-888-889-4500 TTY

Asian Americans Advancing Justice
www.advancingjustice-oc.org
1-714-587-2050 Ext. 5

County of Orange Social Services Agency
www.mybenefitscalwin.org
1-800-281-9799

Families and Communities Together Orange County
www.factoc.org
1-714-566-2878

INSCRIPCIONES A LO LARGO DEL AÑO

Documentos que pudiera necesitar

- Comprobante de ingresos
- Acta de nacimiento
- Comprobante de dirección
- Identificación personal
- Tarjeta de seguro social
- Comprobante de ciudadanía
- Número de identificación personal del contribuyente de impuestos (ITIN)

Beneficios de Medi-Cal

- Médicos
- Hospitales
- Servicios dentales
- Servicios de la salud del comportamiento
- Farmacia
- Servicios de la visión



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El Plan de Salud Comunitario del Condado de Orange

Miembros de CalOptima que necesiten ayuda con sus beneficios médicos, pueden llamar al Departamento de Servicio a Miembros de CalOptima al 1-714-246-8500 o gratuitamente al 1-888-587-8088.
www.caloptima.org



CalOptima

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CalOptima is your public health insurance program with one mission: to provide members with access to quality health care services delivered in a cost-effective and compassionate manner.

For your health, CalOptima partners with a broad network of providers, so you can choose from thousands of doctors, pharmacies, community health centers, hospitals and long-term care facilities across Orange County. Quality care is our goal, and we are ranked among the best Medi-Cal plans in California.

About Medi-Cal

Medi-Cal is a public health insurance plan for low-income people. Families with children, adults, seniors, people with disabilities, pregnant women and others receive Medi-Cal through CalOptima.

The Orange County Social Services Agency determines if you are eligible for Medi-Cal. To enroll in Medi-Cal, call the Orange County Social Services Agency at **1-800-281-9799** or visit www.mybenefitscalwin.org.

You can also get no-cost enrollment help from the community health centers listed below:

- Coalition of Orange County Community Health Centers
www.coccc.org, **1-714-352-5590**
- Community Health Initiative of Orange County
www.chioc.org, **1-855-927-8333**
- Covered California
www.coveredca.org, **1-800-300-1506**

Medi-Cal Covered Benefits

Health Services

- Doctor office visit (exams and treatments)
- Prenatal care
- Newborn baby care
- Preventive care and annual wellness visits
- Specialty care services
- Immunizations
- Laboratory services (blood work, ultrasound, CT scans or X-rays)
- Medications

Behavioral Health Services

- Outpatient mental health services for mild to moderate conditions
- Behavioral health treatment

Medical Supplies

- Wheelchairs, walkers and other equipment

Transportation

- Emergency and non-emergency medical transportation
- Transportation to the doctor's office, the pharmacy and more

Long-Term Services and Supports

- Nursing facility care
- Hospice care

Dental Care

Preventive and restorative dental services are provided through Denti-Cal. For questions about dental benefits or to find a dentist, call Denti-Cal at **1-800-322-6384** or visit [SmileCalifornia.org](https://www.smilecalifornia.org).

CalOptima's Support Services

Cultural and Linguistic Services

Interpreter services for more than 100 languages are available 24 hours a day, 7 days a week at no cost to Medi-Cal members. Interpreters are available for things such as doctor visits, urgent care services, pharmacy services, customer service phone calls, health education and new member orientation meetings. Translated materials are available in your language.

Health Education

CalOptima believes in helping members live a healthy lifestyle. Members can get help for tobacco cessation, weight control, nutrition, cholesterol management, diabetes, asthma, heart disease and high blood pressure.

Customer Service

Our Customer Service representatives can speak your language. Staff can help you:

- Learn about your benefits and how to get medical services and medications.
- Find, select and change your doctor and health networks.
- Request a CalOptima ID card.
- Work with your medical providers, case managers and community agencies to get the care you need.
- Learn about CalOptima's programs for members with Medi-Cal and Medicare coverage, OneCare Connect; Cal MediConnect Plan (Medicare-Medicaid Plan), OneCare (HMO SNP), and Program of All-Inclusive Care for the Elderly (PACE).

Contact Us

You can contact our Customer Service at **1-714-246-8500** or toll-free at **1-888-587-8088**, 24 hours a day, 7 days a week. TTY users can call toll-free at **1-800-735-2929**. Visit our offices Monday through Friday from 8 a.m. to 5 p.m.

For behavioral health services call toll-free at **1-855-877-3885** 24 hours a day, 7 days a week.

To schedule transportation services call toll-free **1-833-648-7528** from 8 a.m. to 8 p.m., 7 days a week.

For the nurse advice phone line call toll-free **1-855-705-8823**, 24 hours a day, 7 days a week.

CalOptima's Main Office
505 City Parkway West
Orange, CA 92868

CalOptima's Satellite Office
County Community Service Center
15496 Magnolia St., Ste. 111
Westminster, CA 92683
1-714-372-3617


Visit us online

www.caloptima.org

www.facebook.com/CalOptima

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PRI-031-746 E (06/20)



Children with Intellectual/Developmental Disabilities - Reaching the Underserved

By: Hai Hoang, [Illumination Institute](#)

Introduction

Name: Hai Hoang

Organization: Illumination
Institute

Title: Chief Operating Officer

MAC: Persons with Disabilities

USC Center for Young Adult
Cancer Survivorship: Honorarium



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Hai's Background



- Sponsored by UCLA Medical Center and National Institutes of Health to come to the US to be studied and treated
- Pediatric oncology patient
- Former CalOptima member (12 years)
- M.P.H. from Charles R. Drew University
- Fellow at National Cancer Institute's Process of Care Research Branch
- Former Director of a Vietnamese non-profit



Mission: To inspire and foster innovative, efficient, and effective solutions to community and societal challenges through the implementation of sustainable programs and research.

“Wait...What do you do???”

The community dictates the program Illumination will create.



Main Programs

1. Cancer research and program development

- In partnership with CHOC, CHLA, UCI, and USC, we identify gaps in care knowledge pertaining to pediatric oncology and survivorship care, and we try to solve them.
- Community and resource linkage mobile app development
- Vietnamese enclave cancer paradox



Main Programs (continued)

2. Mindfulness

- School-based mindfulness trainings
- App development

3. Children with Intellectual/Developmental Disabilities (I/DD)

- Mindfulness training
- Parent mentoring program



Parent Mentoring Program — Helping Parents To Help The Children

- Parent education and mentoring of Regional Center of Orange County's (RCOC) Services
- Parent education and mentoring of CalOptima Services
- Parent education and mentoring of educational services (i.e. IEP)
- Power of Attorney



Parent Mentoring Program — Helping Parents To Help The Children (continued)

- Supported-Decision Making
- Home-making assistance
- Joint bank account
- SSA representative payee of benefits



Parent Mentoring Program — Helping Parents To Help The Children (continued)

- Authorized Representative
- Regional Center Medical/Dental consent
- Daily call services
- Bill paying services
- Medical or Educational release forms to allow the sharing of confidential information with supporters



Parent Mentoring Program — Helping Parents To Help The Children (continued)

- In-Home Supportive Services
- Institutional Deeming
- RCOC's waivers
- CalABLE account
- Estate planning tools



Intellectual/Developmental Disabilities System Concerns

- On average, Hispanic children received 31% less funding than caucasian children received.
- On average, Asian children received 16% less funding than caucasian children received.
- Nearly 31% of all children statewide did not receive any services funded from Regional Centers.
- More information can be found at:

<http://www.publiccounsel.org/tools/assets/files/1397.pdf>



Intellectual/Developmental Disabilities System Concerns (continued)

- Various solutions are offered/discussed- including changing the resource funding mechanism. Success of the child depend on the synergy of the education, social services, and healthcare systems
- We have saturated outreach and education by traditional public health approaches for this population.



Understanding the Hard to Reach

- It is more than just knowledge
- The barriers to care and services are unique and no one organization can solve it all
- Frontline staff are not equipped to recognize and troubleshoot the problems being presented to them which result in individuals being lost in translation
- Immigration issues



Understanding the Hard to Reach (continued)

- Stigma of being different
- Accepting authority without question
- Not aware of existing services and not understanding or knowing the point of contact to initiate said services



Where There Is A Will, There is a Way...

- Undocumented single mom with DACA child. Both have COVID, no service, mom can't work due to COVID and facing eviction.
 - Free immigration lawyers from organization such as Public Law Center and Legal Aid. USCIS doesn't want to deport anyone. Immigration and Customs Enforcement (ICE) does
 - Brian's fund from RCOC



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Questions??

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A Public Agency

CalOptima

Better. Together.

Legislative Update

Member Advisory Committee
February 11, 2021

Jackie Mark, Senior Policy Advisor, Government Affairs

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Federal Legislative Update

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Federal Update

- January 20: President Joe Biden and Vice President Kamala Harris were inaugurated
 - President Biden's top 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

Federal Update (cont.)

- Proposed Medicaid priorities:
 - Increase the Medicaid Federal Medicaid Assistance Percentage to 100% for vaccine administration fees
 - Strengthen and expand the Affordable Care Act
 - Address racial and ethnic health care disparities

State Legislative Update

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2021 State Legislation

- State legislation

- Due to the increase in positive COVID-19 cases, the State Legislature delayed the start of the new session to January 11

- Bills of interest

- Assembly Bill 4 (Arambula): Medi-Cal eligibility expansion
- Assembly Bill 32 (Aguiar-Curry): Telehealth flexibilities
- Senate Bill 56 (Durazo): Medi-Cal eligibility expansion to older adults

Proposed State Budget

- January 8: Proposed State Budget for Fiscal Year (FY) 2021–22 released
 - \$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 (cont.)

- COVID-19: \$4.4 billion one-time funding
 - Expands hospital capacity, vaccine distribution, contact tracing and testing, and secures personal protective equipment

- California Advancing and Innovating Medi-Cal (CalAIM): \$1.1 billion
 - Enhanced Care Management
 - In Lieu of Services
 - Population Health Management
 - Full Integration
 - If approved within the State Budget, CalAIM will be implemented in multiple phases, beginning no sooner than January 1, 2022

Proposed State Budget (cont.)

- Behavioral Health for Youth: \$400 million one-time funding
 - 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

- Homelessness: \$1.75 billion one-time funding
 - Purchases additional motels, develops short-term community mental health facilities, and purchases or preserves housing dedicated to seniors

Local Special Election

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 cost-effective 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

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

2021–22 Legislative Tracking Matrix (continued)

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	<p>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.</p> <p>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.</p>	12/07/2020 Introduced	CalOptima: Watch

*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

2021 Federal Legislative Dates

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 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/legislative deadlines>

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.