

# Sacramento Medi-Cal Managed Care Advisory Committee

## Meeting Minutes

January 28, 2013, 3:00 PM – 5:00 PM

### DHHS Administration

7001A East Parkway

Sacramento, CA 95823

Conference Room 1

<b>COMMITTEE MEMBERS</b>			
x	Chair – Sandy Damiano, PhD	x	Hospital – Robert Waste, PhD
x	Advocate – John Tan	x	Hospital – Rosemary Younts
x	Advocate – Sujatha Branch	x	IPA – Matt Mengelkoch, Ted Fong (new member 02/13)
x	Clinic – J. Miguel Suarez, MD	x	PHAB – Marty Keale
	Clinic – Jonathan Porteus, PhD	x	Pharmacy – Frank Cable
x	DHA – Paul Lake	x	Physician – Marvin Kamras, MD
x	DHHS – Sherri Heller, EdD	x	Physician – Nathan Allen, MD
x	Health Plan – Cathy Lumb-Edwards		<b>EX-OFFICIO MEMBERS</b>
x	Health Plan – Effie Ruggles (January / February)	x	County Board of Supervisors – Cecilia Coronado
	Health Plan – Steve Soto		County Board of Supervisors – Ted Wolter
x	Health Plan – Sean Atha	x	State DHCS – Michael Dutra
x	Hospital – Ellen Brown	x	Healthcare Options – Lili Zahedani



## Sacramento Medi-Cal Managed Care Advisory Committee

<p>State DHCS Update</p>	<p>Michael Dutra addressed the committee and stated that he would be providing brief updates on Medi-Cal Managed Care expansion, as well as the 13/14 State Budget.</p> <p><u>Medi-Cal Managed Care Rural Expansion</u> – Due to AB 1467, 26 counties will be transitioned from Fee-for-Service (FFS) Medi-Cal to Medi-Cal Managed Care. This affects approximately 380,000 beneficiaries statewide. DHCS has conducted 7 Stakeholder meetings/webinars and will continue to do so.</p> <p>DHCS released a detailed request for application. Applicant Plans must be able to serve two or more contiguous counties. Bidding is now closed, and applications are being evaluated. Two Plans will be selected per county. Notices of Award are expected to be sent at the end of February.</p> <p><u>13/14 Budget</u> – DHCS will implement an “Open Enrollment” period for Medi-Cal beneficiaries, much like what happens with private insurance. Currently, beneficiaries may switch plans at any time. With Open Enrollment, enrollees will be able to switch plans only once a year.</p> <p><u>Questions from the Committee:</u>          Regarding the Rural expansion: <i>What is the impact on Sacramento County? Many beneficiaries from smaller counties seek services in Sacramento.</i> DHCS is evaluating this flow. Beneficiaries should be able to keep their current providers.</p> <p>Regarding Open Enrollment: <i>Does it apply to all of Medi-Cal? When will this be implemented?</i> No, this only applies to GMC Counties and 2-Plan Models. Will be implemented quickly as cost savings are budgeted.</p>
<p>Medi-Cal Dental Advisory Committee</p> <p><i>See Medi-Cal Dental Advisory Committee handout for more information.</i></p>	<p>Kate Varanelli gave an overview of the Medi-Cal Dental Advisory Committee. Members have been working together since 2008, when First 5 formed the Children’s Task Force. In 2010 the group requested assistance from the State and made recommendations, resulting in AB1467. The purpose of the Committee is to monitor utilization.</p> <p><u>Questions from the Committee</u>  <i>Concern regarding the Beneficiary Dental Exception (BDE) access to care issues. Patients receive assistance with appointments. If patients are not able to find the appointments they</i></p>

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<p>Medi-Cal Dental Advisory Committee (continued)</p> <p><i>See Medi-Cal Dental handout for more information.</i></p>	<p>need, they have the option to opt out of GMG Dental and Into Medi-Cal FFS. So far appointment assistance has been very successful and no one has opted out.</p> <p><i>What is being done regarding initial concern about the number of available providers? Preferred Provisional Provider agreement allows 18 months for the provider to be approved.</i></p> <p><i>Will there be enough providers to absorb the HF transition? Enough providers are anticipated. We will continue to monitor.</i></p> <p><i>Will HF providers be willing to become Medi-Cal/Denti-Cal providers? Most already are.</i></p>
<p>Healthy Families Transition Panel Discussion</p> <p><i>See Healthy Families Transition to Medi-Cal Power Point by the Sacramento Health Plans</i></p>	<p><u>State DHCS</u> Michael Dutra gave an update on the status of the HF transition.</p> <p>Phase 1A was implemented on January 1, 2013 in 8 counties, including Alameda, San Francisco, San Mateo, and Santa Clara. 197,000 beneficiaries were transitioned to Medi-Cal. The transition has gone smoothly. The State continues to monitor and is focused on preserving continuity of care.</p> <p>Phase 1B will be implemented on March 1 and will include 17 counties including Sacramento. 17,000 beneficiaries in Sacramento will transition. Smooth transition is anticipated since all participating Plans are part of Phase 1A and are familiar with the process.</p> <p>Valuable resources, such as network assessments, are available on the State DHCS website.</p> <p><u>Health Plans</u> Effie Ruggles gave a PowerPoint presentation on behalf of the Health Plans. Presentation is available on the website.</p> <p><u>Questions from the Committee</u> <i>Has there been concern from Pediatricians so for Phase 1A? Is drop in reimbursement anticipated? Currently networks have adequate pediatricians.</i></p> <p><i>What percentage of HF beneficiaries has disabilities? They are impacted due to providers'</i></p>

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Healthy Families Transition  
Panel Discussion - continued

*See Healthy Families Transition to  
Medi-Cal Power Point by the  
Sacramento Health Plans*

*refusal to accept due to lower reimbursements.* Plans stated that 3% Statewide are CCS and will continue to receive services.

*Will new aid codes be applied to future applicants? Yes*

*Will children receiving orthodontic services be able to continue to see their current provider through Medi-Cal Managed Care? Yes, if their provider is part of the Medi-Cal Managed Care of CCS. This raises an issue. Providers may have concerns, as many are unwilling to take on another provider's course of treatment.* Kate thought that Plans would engage current providers, and will follow up with the State to confirm.

*What is being done to ensure access to care? Plans and IPAs are working together to ensure adequacy. Plans provided network adequacy and State approved.*

*Are providers concerned about not receiving the same reimbursements? Yes.* River City stated they are paying Medi-Cal FFS rates.

*How is access evaluated for HF/Medi-Cal crossover? Plot maps are used to determine time and distance. Plans provide access reports and measurements.*

### Sacramento County DHA

Mary Behnoud gave a brief update on the status in the HF transitions. DHA began receiving applications on January 1. 700-800 applications were anticipated. She will provide number of applications received. Employees have been trained and are on target to meet needs. Additional staff will be trained for March. There have been no issues with processing. She asked that if the committee hears of issues, to please contact her. Beginning in March, they will begin processing as a "Medi-Cal Waterfall." Applications will be evaluated to determine eligibility for any possible Medi-Cal program. They will be evaluated at each encounter (application, 6 month check-in, and redetermination).

### Medi-Cal Dental Advisory Committee

Kate Varanelli reported that the State feels that the number of providers is adequate. Not much else to report since the transition has only been happening for a couple of weeks. Will continue



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Public Comment - continued	<p><u>Michael Monasky</u>: Expressed his concern with the high default enrollment rate. He further opined that “if a water bill is not paid, the water is not shut off. The same should apply to premiums.” He is concerned with the care that Medi-Cal / Denti-Cal kids are not getting and that complaints are coming in and that the “glass is 75% empty.” He stated that BDE is not a choice for patients but a requirement for the State. He also commented the number of “Doctors” at the table who are not “Physicians.” He feels that State rates are too low and there is no quality control. <i>(At this point he was notified that he had spoken over the time limit)</i>. Michael continued, saying that the committee needs to expand public comment, as more input is necessary. He stated that these are “barbaric systems” that “find people ineligible for basic services.” His closing remark was, “It is obvious that the system is breaking down.”</p>
Next Meeting	<p>Topics will be:</p> <ul style="list-style-type: none"> <li>▪ State update</li> <li>▪ Committee update</li> <li>▪ Transitions - Medicaid Expansion</li> <li>▪ Introduction to the Low Income Health Program (LIHP) which is expected to transition to Medi-Cal in 2014</li> <li>▪ Healthy Families Update if indicated</li> </ul>
Next Steps and Meeting Closure	<p>Sandy Damiano thanked everyone for their participation and closed the meeting. Meeting adjourned.</p>
Next Meeting	<p>Monday, February 25, 2013          3:00 – 5:00 PM          DHHS Administrative Building          7001-A East Parkway</p>