AGENDA
WHOLE CHILD MODEL CLINICAL ADVISORY COMMITTEE

DATE: Thursday, March 19, 2020

TIME: Noon – 12:10 p.m.: Call to Order and Catered Lunch
      12:10 – 1:00 p.m.: Meeting of the Committee

PLACE: In Santa Cruz County:
       Central California Alliance for Health Board Room
       1600 Green Hills Road, Suite 101, Scotts Valley, CA

       In Monterey County:
       Central California Alliance for Health Board Room
       950 East Blanco Road, Suite 101, Salinas, CA

       In Merced County:
       Central California Alliance for Health Board Room
       530 West 16th Street, Suite B, Merced, CA

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1. Call to Order by Chairperson Bishop. 12:00 p.m.
   A. Roll call.
   B. Supplements and deletions to the agenda.
   C. Catered lunch for Committee and Staff.

2. Oral Communications. 12:10 p.m.
   A. Members of the public may address the Committee on items not listed on today’s agenda that are within the jurisdiction of the Committee. Presentations must not exceed five minutes in length, and any individual may speak only once during Oral Communications.
   B. If any member of the public wishes to address the Committee on any item that is listed on today’s agenda, they may do so when that item is called. Speakers are limited to five minutes per item.

Consent Agenda Items: 12:15 p.m.

3. Approve WCMCAC meeting minutes of December 19, 2019.
   A. Reference materials: Minutes as above.
   B. Grievance Update S. Sanders

Regular Agenda Items: 12:20 p.m.

4. Old Business
   A. Quality Update H. Gillette-Walch, RN, MPH
New Business
B. Alliance WCM Program Optimization       M. Brusuelas, T. Brass, D. Bishop, MD

5. Open Discussion
A. Committee may discuss any urgent items.       All

6. Adjourn: 12:50 pm

The next Whole Child Model Clinical Advisory Committee meeting will take place on
Thursday, June 18, 2020, from 12:00 – 1:00 p.m.
Locations: Videoconference from Alliance Offices in Scotts Valley, Salinas, and Merced.

Members of the public interested in attending should call the Alliance at (831) 430-5556 to verify meeting
dates and locations prior to the meetings.
### Meeting Minutes

**Thursday, December 19, 2019**  
12:00 p.m. – 1:00 p.m.

**In Santa Cruz County:**  
Central California Alliance for Health  
1600 Green Hills Road, Suite 101, Scotts Valley, California

**In Monterey County:**  
Central California Alliance for Health  
950 East Blanco Road, Suite 101, Salinas, California

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Central California Alliance for Health  
530 West 16th Street, Suite B, Merced, California

#### Committee Members Present:
- Gordon Arakawa, MD, PhD  
  Provider Representative
- Jennie Jet, MD  
  Provider Representative
- John Mark, MD  
  Provider Representative
- Liz Falade, MD  
  Provider Representative
- Patrick Clyne, MD  
  Provider Representative
- Robert Dimand, MD  
  Provider Representative

#### Committee Members Absent:
- Amanda Jackson, MD  
  Provider Representative
- Constance Caldwell, MD  
  Provider Representative
- Gary Gray, DO  
  Board Representative
- Karen Dahl, MD  
  Provider Representative
- Salem Magarian, MD  
  Provider Representative

#### Staff Present:
- Dr. Dale Bishop  
  Chief Medical Officer
- Dana Marcos  
  Member Services Director
- Jordan Turetsky  
  Provider Services Director
- Jennifer Mockus  
  Regional Operations Director
- Mary Brusuelas, RN  
  Utilization Management (UM) Director
- Melanie Rager  
  Care Management Director
- Michelle Stott, RN  
  Quality Improvement Director
- Hillary Gillette-Walch, RN, MPH  
  Clinical Decision Quality Manager
- Sarah Sanders  
  Grievance and Quality Manager
- Tammy Brass, RN  
  UM Manager - Prior Authorizations
- Tracy Neves  
  HS Administrative Specialist

#### Hospital Representatives Present:
- Sheri Sager  
  Hospital Representative
1. **Call to Order by Chairperson Bishop.**

   Chairperson Dr. Dale Bishop called the meeting to order at 12:01 p.m. Roll call was taken.

   No changes to the agenda were made.

2. **Oral Communications.**

   Chairperson Dr. Dale Bishop opened the floor for any members of the public to address the Committee on items not listed on the agenda.

   No members of the public addressed the Committee at this time.

3. **Approval of WCMCAC Meeting Minutes**

   Minutes from the September 19, 2019 meeting were reviewed.

   M/S/A Minutes approved as written.

4. **Old Business – Updates**

   A. **Grievance Update**

      Sarah Sanders, Grievance and Quality Manager, presented on Whole Child Model (WCM) Grievances. Data per month, quarter, and category were reviewed. Consistent recurring themes have been Genetic Testing and Immunotherapy. Timely access grievances are low. Providers received Immunotherapy outreach from the Alliance which showed an 85% reduction in appeals.

      Committee discussed new member referrals to the California Children’s Services (CCS) program to ensure eligibility is processed and that the collected data would be accurate. A Committee member indicated that there was a decrease in CCS referrals in the WCM counties. The Alliance’s Grievance Department receives grievances from all patient populations, and has no record of receiving grievances regarding lack of CCS linkage. Examples of grievance cases were presented. The Alliance has implemented an internal corrective action plan to address this issue and has noted that physicians are not referring because they believed WCM plans were submitting as CCS referrals. The Alliance will utilize a Business Intelligence software tool to identify CCS eligible members through diagnoses and CPT codes, which will be implemented soon. The Alliance is also continuing to reach out to providers to encourage continuance of referrals.

      Committee member indicated that members are calling CCS inquiring about various benefits they are available to access through the Alliance such as transportation. The Committee was encouraged to provide members with the Alliance’s main Member Services or Case Management number.

   B. **Quality Update**

      Hilary Gillette-Walch, Clinical Decision Quality Manager, provided data and updates on the proposed Department of Health Care Services (DHCS) performance measures which included...
Child and Adolescent Access to Primary Care Services, Ambulatory Outpatient Care, Well Child Care for 3-6 year olds, Emergency Department Visits, total inpatient admissions, 30 day readmissions, Mental Health Services utilization, and childhood immunizations. Primary Care Services provides access to acute care services, Ambulatory Outpatient Care Services are all services delivered in the outpatient setting (i.e.: physical therapy, etc.) The data is partially a reflection of a lack of CCS providers. Committee mentioned that complicated deliveries and Neonatal Intensive Care Unit (NICU) average length of stay might be affecting the data. Pediatric admissions are seasonal, and are expected to decline. Sheri Sager mentioned that the California Children's Hospital, in partnership with Behavioral Health specialists at each hospital, created a whitepaper on mental health and proposed solutions.

**Action:** Sheri will provide the whitepaper to distribute to the Committee.

C. **Care Coordination and Care Management Update**

Melanie Rager, Care Management Director, presented on the integration of adult and pediatric complex case management with Utilization Management. The Alliance has a pediatrician available to review cases. The new structure will ensure clear communication channels to identify children who are eligible for CCS, ensure clinical oversight of complex members, connection to a nurse for individualized care plans, and more proactive outreach to the members.

5. **New Business**

A. **NICU and HRIF**

Melanie Rager, Care Management Director, presented on High-Risk Infant Follow-Up (HRIF) and NICU intervention eligibility. CCS eligibility, NICU cases, and HRIF authorization and referral process was discussed. Alliance Concurrent Review nurses make the NICU and HRIF determinations per the numbered letter. The Alliance requests if providers recognize potential CCS Title 22 diagnoses of their patients, please submit the CCS referral to the appropriate County CCS office. If providers receive an infant patient who only meets HRIF or NICU intervention, a provider referral is not required because under the Whole Child Model, DHCS specifies that Health Plans hold responsibility for making eligibility determinations for HRIF and NICU-Intervention cases. The goal is to ensure new members, which are eligible for CCS, to be entered into CMSNet by County CCS so that eligibility can be appropriately tracked.

B. **Numbered Letters (N.L.) and Program Update**

Dr. Robert Dimand, Medical Director, provided an overview of the new numbered letters. The link to find all the CCS Numbered letters is: https://www.dhcs.ca.gov/services/ccs/Pages/CCSNL.aspx. Many of the new numbered letters are on the topic of medications. The new numbered letters since the last WCMCAC meeting include Palliative Care Options for CCS Eligible Children (Note: Supersedes CCS N.L. 16-1218), Cerilponase Alfa (Brineura) - Authorization Criteria (Revised), Voretigene Neparvovec-rzyl (Luxturna) - authorization Criteria, Authorization of Out of State Service Requests, GHPP policy on Palynziq (pegvaliase-pqpz), Tisagenlecleucel (Kymriah) – REVISED, Cystic Fibrosis Transmembrane Conductance Regulator Modulator Drug Therapies, Program Requirements for Physician Assistants Providing Patient Care in Neonatal Intensive Care Units, Central Precocious Puberty, Kawasaki Disease, California Children's Services Program and Genetically Handicapped Persons Program Policy on Epidiolex (Cannabidiol) –REVISED, and
Authorization of Restricted Treatment Drugs for Bleeding Disorders. Two or three more numbered are expected, including Home Care Private Duty Nursing.

6. Open Discussion

Chairperson Bishop opened the floor for Committee to have open discussion.

Committee member indicated issues with the approval of TAR’s. More information will be collected and brought to the Committee.

Dr. Connie Caldwell’s service will be held at the Temple Bethel in Aptos on 12/29 at 2:00 p.m.

Dr. Bishop thanked everyone for their attendance, and will look forward to meeting with everyone again at next quarters meeting on Thursday, March 19, 2020.

The meeting adjourned at 1:00 p.m.
Respectfully submitted,

Ms. Jacqueline Van Voerkens
Clerk of the Advisory Committee

The Whole Child Clinical Advisory Committee is a public meeting.
- WCM Grievances closely monitored and trended by the Staff Grievance Review Committee (SGRC)
- WCM Grievances continue to decrease indicating a stabilized reduction
- During 2019, one WCM/CCS member filed multiple Grievances against resolution outcomes and dissatisfaction with Plan procedures
- Recurring Appeal themes remain consistent:
  - Genetic Testing
  - Immunotherapy
WCM Case Review #1
- Appeal for denied medication (Synagis) as member is more than 24 months old.
- Provider did not submit additional information to justify this RX for patients beyond 24 months.
- Upheld the denial.

WCM Case Review #2
- Mom upset due to cancelled appt. from November.
- Laurel Pediatrics originally re-scheduled to 1/7/2020 due to unexpected illness of Doctor.
- During Grievance review, member's appointment was rescheduled 7 days earlier to 12/31/2019.

WCM Case Review #3
- 1st assigned driver refused to drive MBR to OOA appt.
- Mom complained and CTC scheduled another ride within 10 minutes of the original pick up time.
WHOLE CHILD MODEL CLINICAL ADVISORY COMMITTEE
MEETING CALENDAR FOR 2020

Thursday, March 19  12:00 PM to 1:00 PM
Thursday, June 18   12:00 PM to 1:00 PM
Thursday, September 17  12:00 PM to 1:00 PM
Thursday, December 17  12:00 PM to 1:00 PM

All meetings will be held via video conference at the Alliance offices listed below:

Alliance Main Office: 1600 Green Hills Road, Suite 101, Scotts Valley, CA 95066
Alliance Salinas Office: 950 East Blanco Road, Suite 101, Salinas, CA 93901
Alliance Merced Office: 530 West 16th Street, Suite B, Merced, CA 95340