



**NOTICE OF A  
SPECIAL MEETING OF THE  
CALOPTIMA BOARD OF DIRECTORS'  
ONECARE CONNECT CAL MEDICCONNECT PLAN  
(MEDICARE-MEDICAID PLAN)  
MEMBER ADVISORY COMMITTEE**

**THURSDAY, MARCH 10, 2022  
3:00 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 Committees may take any action on all items listed. Except as otherwise provided by law, no action shall be taken on any item not appearing in the following agenda. To speak on an item during the public comment portion of the agenda, please register using the Webinar link below. Once the meeting begins the Question-and-Answer section of the Webinar will be open for those who wish to make a public comment and registered individuals will be unmuted when their name is called. You must be registered to make a public comment.

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](http://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:**

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**Webinar ID: 926 9644 9524**

**Passcode: 178481**

**I. CALL TO ORDER**

*Pledge of Allegiance*

**II. ESTABLISH QUORUM**

**III. APPROVE MINUTES**

- A. Approve Minutes of the October 28, 2021 Regular Meeting of the CalOptima Board of Directors' OneCare Connect Member Advisory Committee
- B. Approve Minutes of the November 5, 2021 Special Meeting of the CalOptima Board of Directors' OneCare Connect Member Advisory Committee
- C. Approve Minutes of the December 9, 2021 Special Joint Meeting of the Member Advisory Committee, OneCare Connect Member Advisory Committee, Provider Advisory Committee and the Whole-Child Model Family Advisory Committee

**IV. PUBLIC COMMENT**

*At this time, members of the public may address the OneCare Connect 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. CEO AND MANAGEMENT REPORTS**

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

**VI. INFORMATION ITEMS**

- A. OneCare Connect Member Advisory Committee Updates
- B. OneCare Connect Transition Update
- C. Ombudsman Update
- D. Master Plan on Aging

**VII. COMMITTEE MEMBER COMMENTS**

**VIII. ADJOURNMENT**

## WEBINAR INFORMATION

1. **Please register for the Special OneCare Connect Member Advisory Committee Meeting on March 10, 2022 3:00 p.m. (PST) at:**

**[https://zoom.us/webinar/register/WN\\_BfSugw0LSKGgWca6xyheJg](https://zoom.us/webinar/register/WN_BfSugw0LSKGgWca6xyheJg)**

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

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**Webinar ID: [926 9644 9524](#)**

**Passcode: [178481](#)**

# MINUTES

## REGULAR MEETING OF THE CALOPTIMA BOARD OF DIRECTORS' ONECARE CONNECT CAL MEDICONNECT PLAN (MEDICARE-MEDICAID PLAN) MEMBER ADVISORY COMMITTEE

October 28, 2021

A Regular Meeting of the CalOptima Board of Directors' OneCare Connect Member Advisory Committee (OCC MAC) was held on October 28, 2021, CalOptima, 505 City Parkway West, Orange, California and via teleconference (Go-to-Webinar) in light of the COVID-19 public health emergency and of Assembly Bill (AB) 361 (Chaptered September 16, 2021), which allows for temporary relaxation of certain Brown Act requirements related to teleconferenced meetings.

### **CALL TO ORDER**

Chair Patty Mouton called the meeting to order at 3:01 p.m. and led the Pledge of Allegiance.

### **ESTABLISH QUORUM**

Members Present: Patty Mouton, Chair; Meredith Chillemi; Gio Corzo; Josefina Diaz; Sandra Finestone; Sara Lee; Donald Stukes

Members Absent: Keiko Gamez, Vice Chair; Eleni Hailemariam, M.D. (non-voting)

Others Present: Richard Sanchez, Chief Executive Officer; Yunkyung Kim, Chief Operating Officer; Emily Fonda, M.D. Chief Medical Officer; Tracy Hitzeman, Executive Director Clinical Operations; Ladan Khamseh, Executive Director, Operations; Albert Cardenas, Director, Customer Service; Debra Kegel, Director, Strategic Development; Tiffany Kaaiakamanu, Manager, Community Relations; Jackie Marks, Manager, Government Affairs; Cheryl Simmons, Staff to the Advisory Committees; Jorge Dominguez, Lead Customer Service Representative, Customer Service.

### **MINUTES**

#### **Approve the Minutes of the August 26, 2021 Regular Meeting of the CalOptima Board of Directors' OneCare Connect Member Advisory Committee (OCC MAC)**

***Action: On motion of Member Meredith Chillemi, seconded and carried, the Committee approved the minutes of the August 26, 2021 meeting by a roll call vote. (Motion carried 8-0-0)***

## **PUBLIC COMMENT**

There were no requests for public comment

### **Chief Executive Officer Report**

Richard Sanchez, Chief Executive Officer announced that CalOptima had hired a new Chief Operating Officer Yunkyung Kim who had started within the last month. He noted that Ms. Kim had previous been with CalOptima as the Director of Public Affairs. Mr. Sanchez also noted that CalOptima had recently received their National Committee of Quality Assurance NCQA rating and informed the committee that CalOptima had ranked very high among Medicaid plans across the nation ranking 16 among 185 plans and commended staff for their hard work in achieving this ranking. Mr. Sanchez also discussed the California Advancing and Innovating Medi-Cal (CalAIM) program that would begin on January 1, 2022 and noted that it was a five year project implemented through an initiative by Governor Newsom.

### **Chief Medical Officer Report**

Emily Fonda, M.D., Chief Medical Officer, provided a COVID-19 update to the OCC MAC on the vaccine status in Orange County. She noted that 417,466 CalOptima members had been vaccinated and that approximately 246,667 gift cards have been processed for CalOptima members and another 1,649 gift cards have been distributed to CalOptima members experiencing homelessness.

## **INFORMATION ITEMS**

### **OCC MAC Member Updates**

Chair Patty Mouton notified the Committee reminded the committee that their annual compliance courses would be due on November 5, 2021. She also notified the committee that Donald Stukes, Member Advocate Representative had resigned his seat from the committee. Chair Mouton notified the OCC MAC that a special meeting would need to be held on November 5, 2021 in order to approve a recommendation to the Board for an In-Home Services and Supports Representative applicant.

### **Cultural and Linguistics Update**

Carlos Soto, Manager, Cultural and Linguistics, provided a brief overview of the cultural and linguistic services available for the CalOptima members. Mr. Soto's discussion included member utilization data using telephonic, face to face interpreter & translation services and how Cultural & Linguistics utilizes both internal staff and contracted vendors to ensure members are provided with timely translation and interpretation services.

### **Homeless Health and Seniors Update**

Sloane Petrillo, Director of Case Management provided a brief verbal report on the Homeless Response Team, Clinical Field Team, Health Homes Program and CalAIM implementation. Ms. Petrillo highlighted and described the efforts of the homeless response team. Ms. Petrillo advised that the team's field presence was paused due to the COVID-19 pandemic and noted that using virtual technology, the field teams continue to help five to eight members per day.

### **Utilization Management Update**

Mike Shook, Director, Utilization Management, provided an update on prior authorizations and how the authorization underwent a review. He noted that typically, the Medicare portion would be reviewed first and if it met the Medicare criteria it would then be approved. If it did not meet Medicare criteria, it would be reviewed under the Medi-Cal guidelines and if it met Medi-Cal guidelines under the dual membership, it would be approved and the member and provider would be notified of this approval. If it does not meet Medicare and Medi-Cal criteria, an integrated denial letter would be sent to the member and the provider indicating the reasons for the Medicare and Medi-Cal denial. He noted that it was important to identify the criteria used for denying services and what was needed to provide those services.

### **Ombudsman Update**

Sara Lee, Lead Attorney, Community Legal Aid SoCal (CLA), reviewed the Ombudsman presentation on items related to OneCare Connect (OCC) services. She noted that CLA continues to assist members with OCC enrollment issues, potential OCC disenrollment and helped bridge services for members who have been terminated from OCC.

### **2022 Member Benefits**

Nancy Martinez, Manager, Customer Service reviewed the changes to the 2022 OneCare Connect benefits and noted that there had been no substantial changes from 2021. Ms. Martinez reviewed items such as changes to the over-the-counter services, chiropractic services, fitness benefits and hearing aid benefits.

### **ADJOURNMENT**

Hearing no further business, Chair Patty Mouton adjourned the meeting at 4:08 p.m.

*/s/ Cheryl Simmons*

Cheryl Simmons

Staff to the Advisory Committees

*Approved: March 10, 2022*

# MINUTES

## SPECIAL MEETING OF THE CALOPTIMA BOARD OF DIRECTORS' ONECARE CONNECT CAL MEDICONNECT PLAN (MEDICARE-MEDICAID PLAN) MEMBER ADVISORY COMMITTEE

November 5, 2021

A Special Meeting of the CalOptima Board of Directors' OneCare Connect Member Advisory Committee (OCC MAC) was held on November 5, 2021, CalOptima, 505 City Parkway West, Orange, California and via teleconference (Go-to-Webinar) in light of the COVID-19 public health emergency and of Assembly Bill (AB) 361 (Chaptered September 16, 2021), which allows for temporary relaxation of certain Brown Act requirements related to teleconferenced meetings.

### **CALL TO ORDER**

Chair Patty Mouton called the meeting to order at 12:00 p.m. and led the Pledge of Allegiance.

### **ESTABLISH QUORUM**

Members Present: Patty Mouton, Chair; Keiko Gamez, Vice Chair; Meredith Chillemi; Gio Corzo; Josefina Diaz; Sara Lee;

Members Absent: Sandra Finestone; Eleni Hailemariam, M.D. (non-voting)

Others Present: Cheryl Simmons, Staff to the Advisory Committees

### **PUBLIC COMMENT**

There were no requests for public comment

### **REPORTS**

#### **Consider Recommendation of OneCare Connect Member Advisory Committee In-Home Supportive Services Representative**

Chair Patty Mouton review the qualifications of Nury Melara who applied for the vacant In-Home Supportive Services Representative seat. She noted that in September 2021 an application was received for the In-Home Supportive Services Representative which has been vacant due to the relocation of Mario Parada. An ad hoc committee made up of Chair Patty Mouton, Meredith Chillemi and Gio Corzo reviewed and scored the application on October 25, 2021.

***Action: On motion of Member Gio Corzo, seconded and carried, the Committee approved the Nominations Ad Hoc Recommendation of Nury Melara to fill the vacant In-Home Supportive Services Representative seat by a roll call vote. (Motion carried 6-0-0; Voting Member Sandy Finestone absent)***

## **ADJOURNMENT**

Chair Mouton thanked the OCC MAC members for attending the special meeting and hearing no further business adjourned the meeting at 12:10 p.m.

*s/s Cheryl Simmons*

Cheryl Simmons

Staff to the Advisory Committees

*Approved: March 10, 2022*



# 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 9, 2021**

A Special 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 9, 2021 and via teleconference (Go-to-Webinar) in light of the COVID-19 public health emergency and of Assembly Bill (AB) 361 (Chaptered September 16, 2021), which allows for temporary relaxation of certain Brown Act requirements related to teleconferenced meetings.

## **CALL TO ORDER**

OCC MAC Chair Patty Mouton called the meeting to order at 8:05 a.m. and led the Pledge of Allegiance.

## **ESTABLISH QUORUM**

### **Member Advisory Committee**

Members Present: Christine Tolbert, Chair; Maura Byron, Vice Chair; Linda Adair; Sandy Finestone; Jacqueline Gonzalez; Hai Hoang; Sally Molnar; Melisa Nicholson; Kate Polezhaev; Steve Thronson; Mallory Vega

Members Absent: Meredith Chillemi; Connie Gonzalez; Sr. Mary Terese Sweeney;

### **OneCare Connect Member Advisory Committee**

Members Present: Patty Mouton, Chair; Keiko Gamez, Vice Chair; Gio Corzo; Josefina Diaz; Sandy Finestone; Sara Lee

Members Absent: Meredith Chillemi; Eleni Hailemariam, M.D. (non-voting)

### **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.; Tina Bloomer, WHNP; Donald Bruhns; Gio Corzo; Andrew Inglis, M.D.; Jena Jensen; Loc Tran, Pharm.D.; Jacob Sweidan, M.D.; Christy Ward

Members Absent: Jennifer Birdsall, Ph.D; Alex Rossel

**Whole-Child Model Family Advisory Committee**

Members Present: Kristen Rogers, Chair; Kathleen Lear, Vice Chair; Maura Byron; Sandra Cortez-Schultz; Malissa Watson

Members Absent: Cathleen Collins; Jacque Knudsen; Monica Maier  
*WCM FAC did not achieve a quorum.*

Others Present: Michael Hunn, Interim Chief Executive Officer; Yunkyung Kim, Chief Operating Officer; Emily Fonda, M.D., Chief Medical Officer; Gary Crockett, Chief Counsel; Ladan Khamseh, Executive Director, 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; Claudia Magee, Interim Director, Strategic Development; Cheryl Simmons, Staff to the Advisory Committees; Jorge Dominguez, Customer Service; James Novello, Consultant; Michael Weiss, D.O., Vice President, Population Health, Children's Hospital of Orange County (CHOC)

**PUBLIC COMMENT**

There were no requests for public comment.

*At this time MAC Chair Christine Tolbert rearranged the agenda to hear Information Item IV.A Medi-Cal Rx before continuing with CEO and Management Reports*

**Medi-Cal Rx Update**

Emily Fonda, M.D., Chief Medical Officer, Kristen Gericke, PharmD., Director, Clinical Pharmacy and Michael Weiss, M.D., Vice President, Population Health at Children's Hospital of Orange County (CHOC) were asked by the committees to provide an in-depth overview of Medi-Cal Rx and its impact to the CalOptima members. It was noted during the meeting that members of the OneCare Connect program will not be affected by this change to Magellan and would continue to be administered by CalOptima. Dr. Weiss presented on CHOC's efforts to add more medication to the current formulary in order to assist the most vulnerable children affected by the transition. A robust discussion was held amongst the committee members with Dr. Fonda, Dr. Gericke and Dr. Weiss answering the many questions that were asked. It was agreed that they would continue to update the MAC, PAC and WCM FAC on this program in early 2022.

## **CEO AND MANAGEMENT REPORTS**

### **Chief Executive Officer Report**

Michael Hunn, Interim Chief Executive Officer updated the members on the current status of several items of interest to the committees. He notified the committees that he would be meeting with the California Health and Human Services Secretary Dr. Mark Ghaly on December 13, 2021 along with other plan CEOs to discuss the many concerns on the Medi-Cal Rx rollout. He assured the committees that CalOptima would be in high performance mode to ensure proper communication, proper outreach and mitigation of the many issues that may arise as a result of this new program. Mr. Hunn notified the committees that Veronica Carpenter had been appointed as the new Chief of Staff and would join CalOptima on December 13, 2021.

### **Chief Operating Officer Report**

Yunkyung Kim, Chief Operating Officer thanked all of the Advisory Committees for their dedication, advice and guidance to CalOptima throughout this year. She notified the committee that Kelly Giardina had joined CalOptima as the Executive Director, Program Implementation and noted that Ms. Giardina is currently assisting Dr. Fonda in an interim capacity overseeing the clinical operations team. Ms. Kim also notified the committee that Wael Younan had joined CalOptima as the Chief Information Officer. She also noted that CalOptima had partnered with the Orange County Health Care Agency to conduct a series of vaccine clinics. The clinics have been held in Anaheim and Irvine to date.

### **Chief Medical Officer Report**

Emily Fonda, M.D., Chief Medical Officer, updated the committees on the current COVID-19 pandemic and discussed the vaccine incentives roll-out, with an emphasis on the homeless population in Orange County.

### **Public Affairs Update**

Rachel Selleck, Executive Director, Public Affairs spoke to the committee on how there would be a call with pharmacy leaders sometime in December to reiterate the concerns with Medi-Cal Rx. She also noted that CalOptima had a team assembled to help identify how to best share information with members and providers. Ms. Selleck invited the committees to attend the upcoming Community Alliance Forum where WCM FAC Chair Kristen Rogers would be presenting. She also shared that CalOptima was developing an equity framework for the organization. She noted that staff would be focusing on a health, equity and social determinant of health strategy for our members and that staff would also be looking at the organization more broadly when it comes to equity during this multi-year initiative.

## **INFORMATION ITEMS**

### **Strategic Plan Implementation Update**

Claudia Magee, Director, Strategic Development presented an update on the Strategic Plan for 2020 – 2022. She noted that after various meetings with the committees it was determined that CalOptima would focus on the following initiatives: Behavioral Health, Equity, Service Delivery Model and Social Determinants of Health. Ms. Magee noted that she would return to the committees with quarterly updates as needed.

## **COMMITTEE MEMBER UPDATES**

MAC Chair Christine Tolbert reminded the MAC members that the next meeting was scheduled for February 10, 2022 at 3:00 PM. She also reminded the members that the MAC would undertake a recruitment in March for those seats expiring on June 30, 2022.

Chair Mouton reminded the OCC MAC members that their next meeting was scheduled for February 24, 2022 at 3:00 PM.

PAC Chair Dr. Junie Lazo-Pearson announced that the next PAC meeting was scheduled for February 10, 2022 at 8:00 AM. She also notified the PAC that the annual recruitment for those terms expiring on June 30, 2022 would begin in March.

Chair Kristen Rogers announced that the next WCM FAC meeting would be held on February 22, 2022 at 9:30 AM. She also asked the members to assist with the recruitment of Authorized Family Member Representatives.

## **ADJOURNMENT**

There being no further business before the Committees, OCC MAC Chair Mouton adjourned the meeting at 9:45 a.m.

*/s/ Cheryl Simmons*

Cheryl Simmons

Staff to the Advisory Committees

Approved: February 10, 2022 by the Member Advisory Committee and the Provider Advisory Committee

Approved: March 10, 2022 by the OneCare Connect Member Advisory Committee

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## MEMORANDUM

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**DATE:** February 24, 2022

**TO:** CalOptima Board of Directors

**FROM:** Michael Hunn, Chief Executive Officer (Interim)

**SUBJECT:** CEO Report — March 3, 2022, 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

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**a. Department of Health Care Services (DHCS) Annual Medi-Cal Audit Concludes**

The DHCS annual routine medical audit of CalOptima’s Medi-Cal plan concluded on February 4<sup>th</sup>, 2022. I would like to acknowledge the entire team and the Office of Compliance for their leadership. DHCS auditors provided positive feedback and were complimentary, noting that CalOptima was well-organized. We have begun to proactively address areas of opportunity found both before and during the audit. DHCS acknowledged the active remediation efforts, and while they do not absolve CalOptima of ‘potential’ findings, they do indicate to DHCS that the issues are being addressed. A formal exit conference will be held during the second week in April. DHCS noted preliminary areas for improvement, including:

- Prior authorization, appeals, post-stabilization authorization, quality of care grievances, non-emergency medical transportation approvals, and call inquiry documentation.
- Delegation oversight of Kaiser (prior authorizations and appeals), and Kaiser’s call inquiry documentation and quality of service grievance timeliness.
- Need for better reporting/escalating issues that potentially impact quality of care.

**b. Enrollment of Eligible Members in CalFresh**

CalOptima is collaborating with the County of Orange Social Services Agency (SSA) to raise awareness about CalFresh as part of our effort to address social determinants of health. SSA reports that there are approximately 344,000 CalOptima members (approximately 259,000 households) who are potentially eligible to enroll and benefit from this program. Staff is bringing a funding request to the March Board meeting that will support a targeted outreach campaign that includes a variety of tactics, including direct member communications, a toolkit for providers and community-based organizations, community events, media outreach and advertising. The goal is increase CalFresh enrollment among CalOptima members.

**c. Orange County Point-in-Time Count Helps Determine Services for Homelessness**

The Point-in-Time Count is a biennial count and survey of people experiencing homelessness. The dates this year were Monday, February 21, through Thursday, February 24. The count provides vital information that helps the County of Orange and the Orange County Continuum of Care better understand homelessness in the community and guides the response to homelessness in Orange County. I am proud to say that several teams of CalOptima employees participated in the Point in Time count, including myself, the CMO, COO, CFO and COS. Once the count is finalized by the County, we will share the results with the Board and make recommendations on

how CalOptima can serve this vulnerable population. A preliminary review of data of CalOptima members estimates that there may be up to 10,756 individuals who are potentially experiencing homelessness based on claim codes or addresses that indicate they have no permanent shelter. We will share more information on this issue with the Board in future reports.

#### **d. Medi-Cal Rx Implementation Continued Issues for Providers**

In February, DHCS hosted a Medi-Cal Rx webinar with managed care plans to discuss implementation issues. CalOptima's Customer Service department has received 1,790 member and provider inquiries since January 3 - February 18. Magellan is holding virtual office hours daily at noon on Zoom, where providers can report issues with the Medi-Cal Rx through a Secured Provider Portal. Magellan and DHCS are continuing to address issues as they arise and triage the requests, noting that most calls are related to prior authorizations. Although most pharmacy benefits are now carved out of CalOptima, we are committed to supporting our Medi-Cal members as much as possible through what has become a challenging implementation by the State.

#### **e. Proposed Legislation - Impacts to CalOptima**

January 31, 2022, was the deadline for state legislation introduced in 2021 to pass their house of origin. Ahead of this date, there were developments on two bills with potentially significant impacts to CalOptima:

AB 1355: Medi-Cal Independent Medical Review (IMR) System passed the Assembly floor and was referred to the Senate.

- Summary: Effective January 1, 2023, the bill would require DHCS to establish an IMR system for Medi-Cal plans without a Knox-Keene license (KKL). The new IMR process would closely mirror the Department of Managed Health Care IMR process for health plans with a KKL.
- Potential Impact: CalOptima Medi-Cal members would have access to an additional appeal process administered by DHCS. Staff would need to incorporate a new IMR process into GARS workflows.

#### **Kaiser Permanente's Direct Contract with the State of California**

Trailer bill legislation has been introduced to authorize DHCS to contract with an "Alternative Health Care Service Plan (AHCSP)," of which Kaiser is the only one in the State. Kaiser currently cares for 54,000 members in a fully delegated contract with CalOptima.

Per the trailer bill, AHCSP is a nonprofit health care service plan with at least four million enrollees statewide, owns or operates pharmacies, and provides professional medical services to enrollees in specific geographic regions through an exclusive contract with a single medical group in each specific geographic region in which it is licensed.

*CalOptima's position is as follows:*

While we respect our Kaiser colleagues and caregivers and recognize the quality care they provide, CalOptima is disappointed in the state's proposal to directly contract with Kaiser Permanente through a no-bid process lacking transparency. Of particular concern:

- The direct contract with the state creates a two-tiered public health system. Tier 1 is run by a private 'exclusive' plan that "cherry picks" the members they enroll, opening and closing enrollment based on business goals. Tier 2 is the public and community



- health system through CalOptima that accepts all eligible members at any time without barriers.
- Our doctors, hospitals, community clinics, and other provider partners serve ALL Medi-Cal members in Orange County, including the most underserved and under-resourced members, by addressing medical and social determinants of health. Kaiser's exclusive enrollment policy that allows them to serve healthier members should not be rewarded with equal reimbursement. The high-risk members will need to be cared for by the community and safety net physicians, thereby destabilizing these providers. Kaiser's ability to cherry pick puts our safety net providers at risk and is detrimental to the public's health.
  - CalOptima members have broad choice of providers across the entire County and can find access in every zip code. Kaiser's delivery system limits choice by both location and by number of providers in Orange County.

**f. CalOptima Joins State Budget Request for Data Sharing and Infrastructure**

With a coalition of Medi-Cal plans, provider associations, and Orange County community clinics and health information exchanges, CalOptima has signed onto a letter requesting the addition of \$100 million in the Fiscal Year 2022–23 state budget to accelerate Medi-Cal provider data sharing and infrastructure development. In alignment with CalOptima's Legislative Platform, this funding would help support the agency's successful implementation of California Advancing and Innovating Medi-Cal (CalAIM). Specifically, the funds could be used for performance payments for Medi-Cal providers to join and share data with health information organizations (HIOs), and for HIOs to build and maintain clinical data infrastructure.

**g. Medi-Cal to Cover At-Home COVID-19 Tests Obtained at Pharmacies**

On February 1, Medi-Cal started covering at-home COVID-19 tests obtained at pharmacies enrolled as Medi-Cal providers. The tests will be billed and reimbursed as a pharmacy-billed medical supply benefit through Medi-Cal Rx. At-home COVID-19 tests dispensed from a pharmacy and covered by Medi-Cal Rx will require a prescription, which can be provided by a pharmacist at the time the tests are dispensed. To match the federal requirement for private health plans to cover at-home COVID-19 tests, DHCS has proposed a limit of eight tests per beneficiary per month.

**h. COVID-19 Clinics Continue as Percentage of Vaccinated Members Climbs**

As of February 21, CalOptima reached a key milestone as 60% of all members ages 5 and up are now vaccinated. At six upcoming vaccine clinics in March and April, CalOptima staff will continue to distribute \$25 Member Health Rewards to eligible members and SSA representatives will be facilitating enrollment in CalFresh for those who qualify. Future clinics are March 12, March 19, March 26, April 9, April 16 and April 23.

**i. Monthly CalTeam Meetings Encourage Dialogue Between Staff and Leaders**

Beginning in January, CalOptima launched a new monthly virtual meeting format for all staff called CalTeam. These meetings provide an opportunity for staff to hear from leaders about important topics and engage with them in a virtual dialogue through a live Q&A. More than 900 staff participated in the recent February 16 meeting. Recorded broadcasts are accessible after the meeting as are answers to live questions not addressed during the one-hour meeting.

**j. CalOptima Gains Media Coverage**

- On February 7, [Orange County Breeze](#) ran an article about CalOptima's \$1 million grant to Be Well OC for improved intake and admissions coordination services.
- On February 16, [Spectrum News](#) aired a news segment highlighting CalOptima's mobile mammography clinics, which are based on a Population Needs Assessment that identified a low incidence of breast cancer screenings in among Korean and Chinese members.
- On February 19, the [KABC](#) 5 p.m. newscast ran a brief story about CalOptima's vaccine clinic at Second Baptist Church in Santa Ana that same day. In total, 225 people got a vaccine at the event. *(Story starts at 5:11:30 at the link.)*



# 2021–22 Legislative Tracking Matrix

## COVID-19 (CORONAVIRUS)

Bill Number Author	Bill Summary	Bill Status	Position/Notes
H.R. 4735 Axne (IA)  S. 2493 Bennet (CO)	<p><b>Provider Relief Fund Deadline Extension Act:</b> Would delay the deadline by which providers must spend any funds received from the Provider Relief Fund — created in response to the COVID-19 pandemic — until the end of 2021 or the end of the COVID-19 public health emergency, whichever occurs later. Funds that are unspent by any deadline must be repaid to the U.S. Department of Health and Human Services (HHS).</p> <p><i>Potential CalOptima Impact: Increased financial stability for CalOptima's contracted providers.</i></p>	07/28/2021 Introduced; referred to committees	CalOptima: Watch

## BEHAVIORAL HEALTH

Bill Number Author	Bill Summary	Bill Status	Position/Notes
H.R. 1914 DeFazio (OR)  S. 764 Wyden (OR)	<p><b>Crisis Assistance Helping Out On The Streets (CAHOOTS) Act:</b> Would allow State Medicaid programs to provide 24/7 community-based mobile crisis intervention services — under a State Plan Amendment or waiver — for those experiencing a mental health or substance use disorder crisis. Would provide states a 95% Federal Medical Assistance Percentage (FMAP) to cover such services for three years as well as a total of \$25 million in planning grants.</p> <p><i>Potential CalOptima Impact: Subject to further action by the California Department of Health Care Services (DHCS), increased behavioral health and substance use disorder services to CalOptima Medi-Cal members.</i></p>	03/16/2021 Introduced; referred to committees	08/05/2021 CalOptima: Support
AB 552 Quirk-Silva	<p><b>Integrated School-Based Behavioral Health Partnership Program:</b> Would establish the Integrated School-Based Behavioral Health Partnership Program to expand prevention and early intervention behavioral health services for students. This would allow a county mental health agency and local education agency to develop a formal partnership whereby county mental health professionals would deliver brief school-based services to any student who has, or is at risk of developing, a behavioral health condition or substance use disorder.</p> <p><i>Potential CalOptima Impact: Increased coordination with the Orange County Health Care Agency and school districts to ensure non-duplication of other school-based behavioral health services and initiatives.</i></p>	01/31/2022 Passed Assembly floor; referred to Senate	CalOptima: Watch



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## COVERED BENEFITS

Bill Number Author	Bill Summary	Bill Status	Position/Notes
<b>H.R. 56 Biggs (AZ)</b>	<p><b>Patient Access to Medical Foods Act:</b> Would expand the federal definition of medical foods to include food prescribed as a therapeutic option when traditional therapies have been exhausted or may cause adverse outcomes. Effective January 1, 2022, medical foods, as defined, would be covered by private health insurance providers and federal public health programs, including Medicare, TRICARE, Children's Health Insurance Program (CHIP) and Medicaid, as a mandatory benefit.</p> <p><b>Potential CalOptima Impact:</b> New covered benefit for CalOptima's lines of business.</p>	<b>01/04/2021</b> Introduced; referred to committees	CalOptima: Watch
<b>H.R. 1118 Dingell (MI)</b>	<p><b>Medicare Hearing Aid Coverage Act of 2021:</b> Effective January 1, 2022, would require Medicare Part B coverage of hearing aids and related examinations.</p> <p><b>Potential CalOptima Impact:</b> New covered benefit for CalOptima OneCare, OneCare Connect and Program of All-Inclusive Care for the Elderly (PACE).</p>	<b>02/18/2021</b> Introduced; referred to committees	CalOptima: Watch
<b>H.R. 4187 Schrier (WA)</b>	<p><b>Medicare Vision Act of 2021:</b> Effective January 1, 2024, would require Medicare Part B coverage of vision services, including eyeglasses, contact lenses, routine eye examinations and fittings.</p> <p><b>Potential CalOptima Impact:</b> New covered benefits for CalOptima OneCare and Program of All-Inclusive Care for the Elderly (PACE).</p>	<b>06/25/2021</b> Introduced; referred to committees	CalOptima: Watch
<b>H.R. 4311 Doggett (TX)</b>  <b>S. 2618 Casey (PA)</b>	<p><b>Medicare Dental, Vision, and Hearing Benefit Act of 2021:</b> Effective no sooner than January 1, 2022, would require Medicare Part B coverage of the following benefits:</p> <ul style="list-style-type: none"> <li>■ <u>Dental</u>: Routine dental cleanings and examinations, basic and major dental services, emergency dental care, and dentures</li> <li>■ <u>Vision</u>: Routine eye examinations, eyeglasses, contact lenses and low vision devices</li> <li>■ <u>Hearing</u>: Routine hearing examinations, hearing aids and related examinations</li> </ul> <p>The Senate version would also increase the Medicaid FMAP for hearing, vision and dental services to 90%.</p> <p><b>Potential CalOptima Impact:</b> New covered benefits for CalOptima OneCare, OneCare Connect and Program of All-Inclusive Care for the Elderly (PACE); higher federal funding rate for current Medi-Cal benefits.</p>	<b>07/01/2021</b> Introduced; referred to committees	CalOptima: Watch
<b>H.R. 4650 Kelly (IL)</b>	<p><b>Medicare Dental Coverage Act of 2021:</b> Effective January 1, 2025, would require Medicare Part B coverage of dental and oral health services, including routine dental cleanings and examinations, basic and major dental treatments, and dentures.</p> <p><b>Potential CalOptima Impact:</b> New covered benefits for CalOptima OneCare and Program of All-Inclusive Care for the Elderly (PACE).</p>	<b>07/22/2021</b> Introduced; referred to committees	CalOptima: Watch

## 2021–22 Legislative Tracking Matrix (continued)

Bill Number Author	Bill Summary	Bill Status	Position/Notes
<b>SB 245 Gonzalez</b>	<p><b>Abortion Services:</b> Would prohibit a health plan from imposing Medi-Cal cost-sharing on all abortion services, including any pre-abortion or follow-up care, no sooner than January 1, 2022. Likewise, a health plan may not require a prior authorization or impose an annual or lifetime limit on such coverage.</p> <p><b>Potential CalOptima Impact:</b> <i>Modified Utilization Management (UM) procedures for a covered Medi-Cal benefit.</i></p>	<p><b>01/20/2022</b> Passed Assembly Appropriations Committee; referred to Assembly floor</p> <p><b>06/01/2021</b> Passed Senate floor</p>	CalOptima: Watch CAHP: Oppose
<b>SB 912 Limón</b>	<p><b>Biomarker Testing:</b> No later than July 1, 2023, would add biomarker testing, including whole genome sequencing, as a Medi-Cal covered benefit to diagnose, treat or monitor a disease.</p> <p><b>Potential CalOptima Impact:</b> <i>New Medi-Cal covered benefit.</i></p>	<b>02/02/2022</b> Introduced	CalOptima: Watch

## MEDI-CAL OPERATIONS AND ADMINISTRATION

Bill Number Author	Bill Summary	Bill Status	Position/Notes
<b>H.R. 1738 Dingell (MI)</b>  <b>S. 646 Brown (OH)</b>	<p><b>Stabilize Medicaid and CHIP Coverage Act of 2021:</b> Would provide 12 months of continuous eligibility and coverage for any Medicaid or CHIP beneficiary.</p> <p><b>Potential CalOptima Impact:</b> <i>Increased number of CalOptima Medi-Cal members.</i></p>	<b>03/10/2021</b> Introduced; referred to committees	CalOptima: Watch ACAP: Support
<b>H.R. 5610 Bera (CA)</b>  <b>S. 3001 Van Hollen (MD)</b>	<p><b>Easy Enrollment in Health Care Act:</b> To streamline and increase enrollment into public health insurance programs, would allow taxpayers to request their federal income tax returns include a determination of eligibility for Medicaid, CHIP or advance premium tax credits to purchase insurance through a health plan exchange. Taxpayers could also consent to be automatically enrolled into any such program or plan if they would be subject to a zero net premium.</p> <p><b>Potential CalOptima Impact:</b> <i>Increased number of CalOptima Medi-Cal members.</i></p>	<b>10/19/2021</b> Introduced; referred to committees	CalOptima: Watch ACAP: Support
<b>AB 1355 Levine</b>	<p><b>Medi-Cal Independent Medical Review (IMR) System:</b> Would require DHCS to establish an IMR system for Medi-Cal managed care plans (MCPs), effective January 1, 2023. The bill would also provide every Medi-Cal beneficiary filing a grievance with access to an IMR.</p> <p><b>Potential CalOptima Impact:</b> <i>Implementation of an additional Grievance and Appeals process for CalOptima Medi-Cal members.</i></p>	<b>01/27/2022</b> Passed Assembly floor; referred to Senate	CalOptima: Watch

## 2021–22 Legislative Tracking Matrix (continued)

Bill Number Author	Bill Summary	Bill Status	Position/Notes
<b>AB 1400</b> <b>Kalra, Lee, Santiago</b>	<p><b>California Guaranteed Health Care for All:</b> Would create the California Guaranteed Health Care for All program (CalCare) to provide a comprehensive universal single-payer health care benefit for all California residents. Would require CalCare cover a wide range of medical benefits and other services and would incorporate the health care benefits and standards of CHIP, Medi-Cal, Medicare, the Knox-Keene Act, and ancillary health care or social services covered by regional centers for people with developmental disabilities.</p> <p><b>Potential CalOptima Impact:</b> <i>Unknown but potentially significant impacts to the Medi-Cal delivery system and MCPs, including changes to administration, covered benefits, eligibility, enrollment, financing and organization.</i></p>	<b>01/31/2022</b> Died on Assembly floor	CalOptima: Watch CAHP: Oppose
<b>SB 853</b> <b>Wiener</b>	<p><b>Medication Access Act:</b> Effective January 1, 2023, would require a health plan to cover a prescribed medication for the duration of utilization review and any appeals. Would prohibit a plan from seeking reimbursement from a beneficiary if a denial is sustained.</p> <p><b>Potential CalOptima Impact:</b> <i>Modified UM and Grievance and Appeals requirements for prescribed drugs covered by CalOptima; increased CalOptima costs for drug coverage.</i></p>	<b>01/19/2022</b> Introduced	CalOptima: Watch
<b>SB 858</b> <b>Wiener</b>	<p><b>Health Plan Civil Penalties:</b> Would increase the civil penalty amount that the California Department of Managed Health Care (DMHC) could levy on a health plan from no more than \$2,500 per violation to no less than \$25,000 per violation per impacted beneficiary per day. The penalty amount would be adjusted annually, beginning January 1, 2024.</p> <p><b>Potential CalOptima Impact:</b> <i>Increased civil penalties for any violations of managed health care laws and regulations under the jurisdiction of DMHC.</i></p>	<b>01/19/2022</b> Introduced	CalOptima: Watch
<b>SB 923</b> <b>Wiener</b>	<p><b>TGI Inclusive Care Act:</b> Would require health plan staff and contracted providers to complete cultural humility training to help provide inclusive health care services for individuals who identify as transgender, gender nonconforming or intersex (TGI). In addition, no later than July 31, 2023, would require a health plan to include in its provider directory any in-network providers who offer gender-affirming services.</p> <p><b>Potential CalOptima Impact:</b> <i>Additional training requirement for CalOptima employees and contracted providers; additional requirement for provider directory publication.</i></p>	<b>02/03/2022</b> Introduced	CalOptima: Watch

## OLDER ADULT SERVICES

Bill Number Author	Bill Summary	Bill Status	Position/Notes
<b>H.R. 4131</b> <b>Dingell (MI)</b>  <b>S. 2210</b> <b>Casey (PA)</b>	<p><b>Better Jobs Better Care Act:</b> Would make permanent the enhanced 10% FMAP for Medicaid home- and community-based services (HCBS) enacted by the American Rescue Plan Act of 2021. Would also provide states with \$100 million in planning grants to develop HCBS infrastructure and workforces. Additionally, would make permanent spousal impoverishment protections for those receiving HCBS.</p> <p><i><b>Potential CalOptima Impact:</b> Continuation of current federal funding rate for HCBS; expansion of HCBS opportunities.</i></p>	<b>06/24/2021</b> Introduced; referred to committees	CalOptima: Watch NPA: Support
<b>H.R. 4941</b> <b>Blumenauer (OR)</b>	<p><b>PACE Part D Choice Act of 2021:</b> Would allow a Medicare-only PACE participant to opt out of drug coverage provided by the PACE program and instead enroll in a standalone Medicare Part D prescription drug plan that results in equal or lesser out-of-pocket costs. PACE programs would be required to educate their participants about this option.</p> <p><i><b>Potential CalOptima Impact:</b> Increased enrollment into CalOptima PACE by Medicare-only beneficiaries due to decreased out-of-pocket costs.</i></p>	<b>08/06/2021</b> Introduced; referred to committees	CalOptima: Watch NPA: Support
<b>S. 1162</b> <b>Casey (PA)</b>	<p><b>PACE Plus Act:</b> Would increase the number of PACE programs nationally by making it easier for states to adopt PACE as a model of care and providing grants to organizations to start PACE centers or expand existing PACE centers.</p> <p>Would incentivize states to expand the number of seniors and people with disabilities eligible to receive PACE services beyond those deemed to require a nursing home level of care. Would provide states a 90% FMAP to cover the expanded eligibility.</p> <p><i><b>Potential CalOptima Impact:</b> Subject to further DHCS authorization, expanded eligibility for CalOptima PACE; additional federal funding to expand the service area of a current PACE center or to establish a new PACE center(s).</i></p>	<b>04/15/2021</b> Introduced; referred to committee	CalOptima: Watch CalPACE: Support NPA: Support

## SOCIAL DETERMINANTS OF HEALTH

Bill Number Author	Bill Summary	Bill Status	Position/Notes
<b>H.R. 379</b> <b>Barragan (CA)</b>  <b>S. 104</b> <b>Smith (MN)</b>	<p><b>Improving Social Determinants of Health Act of 2021:</b> Would require the Centers for Disease Control and Prevention (CDC) to establish a social determinants of health (SDOH) program to coordinate activities to improve health outcomes and reduce health inequities. CDC would be required to consider SDOH in all relevant grant awards and other activities as well as issue new grants of up to \$50 million to health agencies, nonprofit organizations and/or institutions of higher education to address or study SDOH.</p> <p><i><b>Potential CalOptima Impact:</b> Increased availability of federal grants to address SDOH.</i></p>	<b>01/21/2021</b> Introduced; referred to committees	CalOptima: Watch

## 2021–22 Legislative Tracking Matrix (continued)

Bill Number Author	Bill Summary	Bill Status	Position/Notes
<b>H.R. 943 McBath (GA)</b>  <b>S. 851 Blumenthal (CT)</b>	<b>Social Determinants for Moms Act:</b> Would require HHS to convene a task force to coordinate federal efforts on social determinants of maternal health as well as award grants to address SDOH, eliminate disparities in maternal health and expand access to free childcare during pregnancy-related appointments. Would also extend postpartum eligibility for the Special Supplemental Nutrition Program for Women, Infants, and Children from six months postpartum to two years postpartum.  <i><b>Potential CalOptima Impact:</b> Additional federal guidance or requirements as well as increased availability of federal grants to address social factors affecting maternal health.</i>	<b>02/08/2021</b> Introduced; referred to committees	CalOptima: Watch
<b>H.R. 2503 Bustos (IL)</b>	<b>Social Determinants Accelerator Act of 2021:</b> Would establish the Social Determinants Accelerator Interagency Council to award state and local health agencies up to 25 competitive grants totaling no more than \$25 million as well as provide technical assistance to improve coordination of medical and non-medical services to a targeted population of high-need Medicaid beneficiaries.  <i><b>Potential CalOptima Impact:</b> Increased availability of federal grants to address the SDOH of members with complex needs.</i>	<b>07/15/2021</b> Passed House Energy and Commerce Committee's Subcommittee on Health; referred to full Committee	CalOptima: Watch
<b>H.R. 3894 Blunt Rochester (DE)</b>	<b>Collecting and Analyzing Resources Integral and Necessary for Guidance (CARING) for Social Determinants Act of 2021:</b> Would require the Centers for Medicare & Medicaid Services (CMS) to update guidance at least once every three years to help states address SDOH in Medicaid and CHIP programs.  <i><b>Potential CalOptima Impact:</b> Increased opportunities for CalOptima to address SDOH.</i>	<b>12/08/2021</b> Passed House floor; referred to Senate Committee on Finance	CalOptima: Watch
<b>H.R. 4026 Burgess (TX)</b>	<b>Social Determinants of Health Data Analysis Act of 2021:</b> Would require the Comptroller General of the United States to submit a report to Congress outlining the actions taken by HHS to address SDOH. The report would include an analysis of interagency efforts, barriers and potential duplication of efforts as well as recommendations on how to foster private-public partnerships to address SDOH.  <i><b>Potential CalOptima Impact:</b> Increased opportunities for CalOptima to address SDOH.</i>	<b>11/30/2021</b> Passed House floor; referred to Senate Committee on Health, Education, Labor, and Pensions	CalOptima: Watch

## TELEHEALTH

Bill Number Author	Bill Summary	Bill Status	Position/Notes
<b>H.R. 366 Thompson (CA)</b>	<b>Protecting Access to Post-COVID-19 Telehealth Act of 2021:</b> Would allow HHS to waive or modify any telehealth service requirements in the Medicare program during a national disaster or public health emergency and for 90 days after one is terminated. Would also permit Medicare reimbursement for telehealth services provided by a Federally Qualified Health Center (FQHC) or Rural Health Center (RHC) as well as allow patients to receive telehealth services in the home without restrictions.  <i><b>Potential CalOptima Impact:</b> Continuation and expansion of certain telehealth flexibilities allowed during the COVID-19 pandemic for CalOptima OneCare, OneCare Connect and PACE.</i>	<b>01/19/2021</b> Introduced; referred to committees	CalOptima: Watch



## 2021–22 Legislative Tracking Matrix (continued)

Bill Number Author	Bill Summary	Bill Status	Position/Notes
<b>H.R. 2166</b> <b>Sewell (AL)</b>	<p><b>Ensuring Parity in MA and PACE for Audio-Only Telehealth Act of 2021:</b> Would require CMS to include audio-only telehealth diagnoses in the determination of risk adjustment payments for Medicare Advantage (MA) and PACE plans during the COVID-19 public health emergency.</p> <p><i><b>Potential CalOptima Impact:</b> For CalOptima OneCare, OneCare Connect and PACE, members' risk scores and risk adjustment payments would accurately reflect diagnoses.</i></p>	<b>03/23/2021</b> Introduced; referred to committees	<b>08/05/2021</b> CalOptima: Support  ACAP: Support NPA: Support
<b>H.R. 2903</b> <b>Thompson (CA)</b>  <b>S. 1512</b> <b>Schatz (HI)</b>	<p><b>Creating Opportunities Now for Necessary and Effective Care Technologies (CONNECT) for Health Act of 2021:</b> Would expand telehealth services for those receiving Medicare benefits and remove restrictions in the Medicare program that prevent physicians from using telehealth technology. Specifically, would:</p> <ul style="list-style-type: none"> <li>■ Remove all geographic restrictions for telehealth services</li> <li>■ Allow beneficiaries to receive telehealth in their own homes, in addition to other locations determined by HHS</li> <li>■ Remove restrictions on the use of telehealth in emergency medical care</li> <li>■ Allow FQHCs and RHCs to provide telehealth services</li> </ul> <p><i><b>Potential CalOptima Impact:</b> Continuation and expansion of telehealth flexibilities for CalOptima OneCare, OneCare Connect and PACE.</i></p>	<b>04/28/2021</b> Introduced; referred to committees	CalOptima: Watch
<b>H.R. 3447</b> <b>Smith (MO)</b>	<p><b>Permanency for Audio-Only Telehealth Act:</b> Would permanently extend the following current flexibilities, which have been temporarily authorized by CMS during the COVID-19 public health emergency:</p> <ul style="list-style-type: none"> <li>■ Medicare providers may be reimbursed for providing certain services via audio-only telehealth, including evaluation and management, behavioral health and substance use disorder services, or any other service specified by HHS.</li> <li>■ Medicare beneficiaries may receive telehealth services at any location, including their homes.</li> </ul> <p><i><b>Potential CalOptima Impact:</b> Permanent continuation of certain telehealth flexibilities for CalOptima OneCare, OneCare Connect and PACE.</i></p>	<b>05/20/2021</b> Introduced; referred to committees	CalOptima: Watch
<b>H.R. 4058</b> <b>Matsui (CA)</b>  <b>S. 2061</b> <b>Cassidy (LA)</b>	<p><b>Telemental Health Care Access Act of 2021:</b> Would remove the requirement that Medicare beneficiaries be seen in-person within six months of being treated for behavioral health services via telehealth.</p> <p><i><b>Potential CalOptima Impact:</b> For CalOptima OneCare and OneCare Connect, decreased in-person behavioral health encounters and increased telehealth behavioral health encounters.</i></p>	<b>06/22/2021</b> Introduced; referred to committees	CalOptima: Watch
<b>S. 150</b> <b>Cortez Masto (NV)</b>	<p><b>Ensuring Parity in MA for Audio-Only Telehealth Act of 2021:</b> Would require CMS to include audio-only telehealth diagnoses in the determination of risk adjustment payments for MA plans during the COVID-19 public health emergency.</p> <p><i><b>Potential CalOptima Impact:</b> For CalOptima OneCare and OneCare Connect, members' risk scores and risk adjustment payments would accurately reflect diagnoses.</i></p>	<b>02/02/2021</b> Introduced; referred to committee	CalOptima: Watch ACAP: Support NPA: Support

## YOUTH SERVICES

Bill Number Author	Bill Summary	Bill Status	Position/Notes
<b>H.R. 66</b> <b>Buchanan (FL)</b>	<b>Comprehensive Access to Robust Insurance Now Guaranteed (CARING) for Kids Act:</b> Would permanently extend authorization and funding of CHIP and associated programs, including the Medicaid and CHIP express lane eligibility option, which enables states to expedite eligibility determinations by referencing enrollment in other public programs.  <b>Potential CalOptima Impact:</b> Continuation of current federal funding and eligibility requirements for CalOptima Medi-Cal members eligible under CHIP.	<b>01/04/2021</b> Introduced; referred to committee	CalOptima: Watch
<b>H.R. 1390</b> <b>Wild (PA)</b>  <b>S. 453</b> <b>Casey (PA)</b>	<b>Children’s Health Insurance Program Pandemic Enhancement and Relief (CHIPPER) Act:</b> Would retroactively extend CHIP’s temporary 11.5% FMAP increase, enacted by the HEALTHY KIDS Act (2018), from September 30, 2020, until September 30, 2022, to meet increased health care needs during the COVID-19 public health emergency.  <b>Potential CalOptima Impact:</b> Increased federal funds for CalOptima Medi-Cal members eligible under CHIP.	<b>02/25/2021</b> Introduced; referred to committees	CalOptima: Watch

### Two-Year Bills

The following bills did not meet the deadline to be passed by both houses of the State Legislature in 2021 but are still eligible for reconsideration in 2022:

- AB 4 (Arambula)
- AB 32 (Aguiar-Curry)
- AB 114 (Maienschein)
- AB 470 (Carrillo)
- AB 540 (Petrie-Norris)
- AB 563 (Berman)
- AB 586 (O’Donnell)
- AB 1132 (Wood)
- SB 17 (Pan)
- SB 56 (Pan)
- SB 250 (Pan)
- SB 256 (Pan)
- SB 293 (Limón)
- SB 316 (Eggman)
- SB 371 (Caballero)
- SB 523 (Leyva)
- SB 562 (Portantino)
- SB 773 (Roth)

### Signed Bills

- H.R. 1868 (Yarmuth [KY])
- AB 128 (Ting)
- AB 133 (Committee on Budget)
- AB 161 (Ting)
- AB 164 (Ting)
- AB 361 (Rivas)
- AB 1082 (Waldron)
- SB 48 (Limón)
- SB 65 (Skinner)
- SB 129 (Skinner)
- SB 171 (Committee on Budget and Fiscal Review)
- SB 221 (Wiener)
- SB 306 (Pan)
- SB 510 (Pan)

### Vetoed Bills

- AB 369 (Kamlager)
- AB 523 (Nazarian)
- SB 365 (Caballero)
- SB 682 (Rubio)

Information in this document is subject to change as bills proceed through the legislative process.

ACAP: Association for Community Affiliated Plans

CAHP: California Association of Health Plans

CalPACE: California PACE Association

LHPC: Local Health Plans of California

NPA: National PACE Association

Last Updated: February 9, 2022



## 2021–22 Legislative Tracking Matrix (continued)

### 2022 Federal Legislative Dates

<b>January 3</b>	117th Congress, Second Session convenes
<b>April 11–22</b>	Spring recess
<b>August 1–12</b>	Summer recess for House
<b>August 8–September 5</b>	Summer recess for Senate
<b>December 10</b>	Second Session adjourns

### 2022 State Legislative Dates

<b>January 3</b>	Legislature reconvenes
<b>January 14</b>	Last day for policy committees to hear and report to fiscal committees any fiscal bills introduced in that house in 2021
<b>January 21</b>	Last day for any committee to hear and report to the floor any bill introduced in that house in 2021
<b>January 31</b>	Last day for each house to pass bills introduced in that house in 2021
<b>February 18</b>	Last day for legislation to be introduced
<b>April 7–18</b>	Spring recess
<b>April 29</b>	Last day for policy committees to hear and report to fiscal committees any fiscal bills introduced in that house in 2022
<b>May 6</b>	Last day for policy committees to hear and report to the floor any non-fiscal bills introduced in that house in 2022
<b>May 20</b>	Last day for fiscal committees to hear and report to the floor any bills introduced in that house in 2022
<b>May 23–27</b>	Floor session only
<b>May 27</b>	Last day for each house to pass bills introduced in that house in 2022
<b>June 15</b>	Budget bill must be passed by midnight
<b>July 1</b>	Last day for policy committees to hear and report bills in their second house to fiscal committees or the floor
<b>July 1–August 1</b>	Summer recess
<b>August 12</b>	Last day for fiscal committees to report bills in their second house to the floor
<b>August 15–31</b>	Floor session only
<b>August 25</b>	Last day to amend bills on the floor
<b>August 31</b>	Last day for each house to pass bills; final recess begins upon adjournment
<b>September 30</b>	Last day for Governor to sign or veto bills passed by the Legislature

Sources: 2022 State Legislative Deadlines, California State Assembly: <http://assembly.ca.gov/legislative deadlines>



A Public Agency

# CalOptima

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## OneCare 2023

Formerly known as OCC Transition Planning

OneCare Connect Member Advisory Committee  
March 10, 2022

Ladan Khamseh, Executive Director Operations

# Background

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- On April 1, 2014, the Department of Health Care Services (DHCS) implemented the Coordinated Care Initiative (CCI)
- On July 1, 2015, CalOptima implemented OneCare Connect (OCC) Cal MediConnect (CMC) Plan (Medicare-Medicaid Plan)
- The CMC demonstration period, initially set to end December 31, 2017, was extended through December 31, 2022
- CMC will sunset December 31, 2022, and members will transition into Dual Eligible Special Needs Plans (D-SNP), which in CalOptima's case is OneCare

# DHCS Transition Goals

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- Support seamless member transition
  - OCC members will be transitioned effective 1/1/23 into OneCare, an Exclusively Aligned Enrollment (EAE) D-SNP
  - Minimal interruptions to benefits, provider access, and minimal confusion for beneficiaries and providers
  - Leverage lessons learned/best practices from the demonstration, it is anticipated that DHCS and Centers for Medicare & Medicaid Services (CMS) will carry forward CMC requirements into D-SNP; for example, Model of Care, integrated member materials, Quality metrics, and reporting

# Anticipated Member Notice and Enrollment Timeline

Beneficiary Noticing and Enrollment	Timeline*
CalOptima sends Annual Notice of Change and Evidence of Coverage to OneCare enrollees	Sep-22
CalOptima sends 90-day Non-Renewal Notice and FAQ to OCC enrollees	Oct-22
CalOptima to conduct outbound calls to transitioning OCC enrollees	Oct-22
Open Enrollment begins (new enrollments in OneCare D-SNP effective 1/1/23)	Oct-22
CalOptima sends 45-day confirmation letter/plan information in the form of an integrated Medicare/Medi-Cal notice and FAQ to OCC enrollees	Nov-22
Last enrollment effective date into OCC	12/1/22
CalOptima sends integrated information about the EAE D-SNP plan to members transitioned to OneCare (late December)	Dec-22
OCC sunsets; members transition to OneCare	1/1/23

\* Tentative timeline of CMC transition and D-SNP activities subject to change, as per CMS-DHCS-Plan Key Dates – CMS CMC Transition 2023

# Our Mission

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

## Connect with Us

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## OMBUDSMAN UPDATE March 10, 2022

Sara Lee, Supervising Attorney

Health Consumer Action Center (HCAC) of CLA SoCal

OSP Toll Free: 1-855-501-3077

Hotline: 1-800-834-5001

## PHE /Medi-Cal Update

- CLA SoCal receives warm transfer calls from CalOptima re: Medi-Cal eligibility and Proposed OCC/OC termination.
- Warm Transfer to 714-571-5263 or Legal Aid Hotline 1-800-834-5001
- Extension of PHE for 90 days – extended to April 16, 2022
- Due to the Public Health Emergency(PHE), there is no negative action on Medi-Cal eligibility except Agency Error or Fraud After Conviction.  
(Refer to ACWDL 21-16)





## •Cases Handled by CLA SoCal Health Unit

- Assist OneCare Connect (OCC) and OneCare (OC) clients with enrollment- helping with erroneous SOC assessment and Medi-Cal termination, so that they can remain eligible for OCC/CMC enrollment
- Advise clients on Public Health Emergency Moratorium and permissible actions
- Assist with Working Disabled Program premium waiver



## •Cases Handled by CLA SoCal Health Unit

- Educate eligible clients about Qualified Medicare Beneficiary (QMB) program and Conditional Medicare Part A/B application process
- Assist married seniors and disabled adults who meet nursing level of care obtain Medi-Cal applying the Expanded Spousal Impoverishment Rule which allow them to stay in their homes and communities
- Educate clients about Medi-Cal waiver programs and assist with HCBS waiver process
- Assist with delay or barriers in obtaining medically necessary services including DME
- Assist with IHSS issues mostly regarding reduction of hours



# CLA SoCal as the Ombudsman for the OCC plan

- CLA SoCal as the Ombudsman for the OCC plan advise on Medi-Cal eligibility matters.
- CLA SoCal assists dual eligible consumers with SOC affordability issues such as:
  - whether the SOC determination is correct.
  - whether they were placed in the correct Medi-Cal Aid Code, which will not be a barrier for OCC enrollment.

- CLA SoCal assists consumers with accessing services under the CMC/OCC plan, as well as assisting with grievances and appeals.
- CLA SoCal represents members in State Fair Hearing appeals on Medi-Cal eligibility Issues, and Medi-Cal/OCC/OC Service denials.
- CLA SoCal provides outreach presentation on its services and and Ombudsman role for the OCC Plan.
- CLA SoCal also assists with balance billing or billing matters.