

# Whole Child Model Clinical Advisory Committee

## Meeting Agenda

Thursday, December 19, 2024

12:00 p.m. - 1:00 p.m.



### Held Via Teleconference

1. Members of the public wishing to join the meeting may do so as follows:

**Join on your computer, mobile app, or room device.**

[Join the meeting now](#)

**Meeting ID:** 281 289 953 509

**Passcode:** HmHuhB

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#### Dial in by phone:

[+1 872-242-9041, 953172409#](#) United States, Chicago

[Find a local number](#)

Phone conference ID: 953 172 409#

2. Members of the public wishing to provide public comment on items not listed on the agenda that are within jurisdiction of the Committee or to address an item that is listed on the agenda may do so in one of the following ways.
  - a. Email comments by 5:00 p.m. on Wednesday, December 18 to the Clerk of the Advisory Committee at [tneves@ccah-alliance.org](mailto:tneves@ccah-alliance.org)
    - i. Indicate in the subject line "Public Comment." Include your name, organization, agenda item number, and title of the item in the body of the e-mail along with your comments.
    - ii. Comments will be read during the meeting and are limited to five minutes.
  - b. Public comment during the meeting when that item is announced.
    - i. State your name and organization prior to providing comment.
    - ii. Comments are limited to five minutes.
3. Mute your phone during presentations to eliminate background noise.
  - a. State your name prior to speaking during comment periods.
  - b. Limit background noise when unmuted (i.e., paper shuffling, cell phone calls, etc.)

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#### 1. Call to Order by Chairperson Myers 12:00 p.m.

A. Roll call.

B. Supplements and deletions to the agenda.

**HEALTHY PEOPLE. HEALTHY COMMUNITIES.**

**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 September 19, 2024.**

- A. Reference materials: Minutes as above.
- B. Grievance Update S. Sanders

**Regular Agenda Items: 12:20 p.m.**

**4. New Business**

- |                                |   |
|--------------------------------|---|
| A. WCM Update/Referral Volumes | K. Riggs, RN, A. McEowen, RN, J. Stromsoe, RN |
| B. Enhanced Care Management    | T. Hoeffel, RN                                |
| C. WCM Expansion Update        | K. Riggs, RN                                  |

**5. Open Discussion: 12:50 p.m.**

- A. Group to have roundtable discussion

**6. Adjourn: 1:00 p.m.**

**The next meeting of the Whole Child Model Clinical Advisory Group, after this December 19, 2024 meeting:**

- Thursday, March 20, 2025 12:00-1:00 p.m.  
Locations: Teleconference via MS Teams

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

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The complete agenda packet is available for review on the Alliance website at: [www.ccah-alliance.org](http://www.ccah-alliance.org) bottom of page under Community – Meetings and Events.



**HEALTHY PEOPLE. HEALTHY COMMUNITIES.**

# Whole Child Model Clinical Advisory Committee



## Meeting Minutes

**Thursday, September 19, 2024**

12:00 p.m. - 1:00 p.m.

## Teleconference Meeting

### **Committee Members Present:**

Salvador Sandoval, MD	Provider Representative
John Mark, MD	Provider Representative
Lena Malik, MD	Provider Representative
Sarah Smith, MD	Provider Representative
James Rabago, MD	Board Representative
Ibraheem Al Shareef, MD	Provider Representative
Allyson Garcia, MD	Provider Representative
Camille Guzel, MD	Provider Representative
Nicole Shelton, PA	Provider Representative
Devon Francis, MD	Provider Representative
Hue Nguyen, MD	Provider Representative

### **Committee Members Absent:**

Jennifer Yu, MD	Provider Representative
Cal Gordon, MD	Provider Representative

### **Staff Present:**

Dianna Myers, MD	Medical Officer
Elizabeth Leary	Care Management Director
Cynthia Bali	Provider Relations Supervisor
Kelsey Riggs, RN	Pediatric Complex Case Mgmt. Manager
Jenna Stromsoe, RN	Complex Case Management Supervisor
Ashley McEowen, RN	Complex Case Management Supervisor
Jacqueline Morales	Provider Relations Representative
Sarah Sanders	Grievance & Quality Manager
Azura Sanchez	Administrative Assistant

### **Other Representatives Present:**

Michelle Perez, MD	Provider Representative
Becky Shaw	Provider Representative

### **1. Call to Order by Chairperson Myers.**

Chairperson Dr. Dianna Myers called the meeting to order at 12:00 p.m.  
Roll call was taken.

### **2. Oral Communications.**

Chairperson Dr. Myers 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.

**3. Consent Agenda Items.****A. Approval of WCMCAC Minutes**

Minutes from the June 20, 2024 meeting were reviewed.

**B. Grievance Update**

Grievance data was provided to the Committee.

**M/S/A** Consent agenda items approved.

**4. Regular Business Items.****A. County Expansion Update**

Kelsey Riggs, RN provided an update on the expansion of the Whole Child Model program into San Benito and Mariposa Counties, effective January 1, 2025. The planning is on track, involving collaboration with county California Children's Services (CCS) teams and DHCS, focusing on provider networks and member notices. Other Alliance teams involved in the work includes Member Services, Provider Services, Utilization Management, and the pediatric team moving though deliverables to DHCS. Examples of the work are demonstrating an appropriate provider network and member notices, and mailings. Additionally, care management has had to provide extensive information on Alliance processes and workflows. The Alliance will send our 60 day member notices and DHCS sends similar notices. Information is also included on the Alliance website and outreach is taking place. The new counties are dependent models, so CCS medical eligibility determination is a division within DHCS which impacts the work. The Alliance continues to meet with DHCS on a regular basis..

**B. CCS Provider Education**

Dr. Myers discussed the need for provider education regarding CCS Whole Child Model, referrals, and the importance of provider paneling. This is in response to ongoing misunderstandings and to ensure that children with CCS conditions receive appropriate care. Information would be shared regarding specially referrals, how referrals are made, types of referrals, and those that need to be referred to the medical therapy units. There will be meetings with the larger practices in Monterey County explaining the WCM program and CCS. Providers will be informed that referrals are still needed, and providers need to be paneled for CCS. Dr. Myers asked the Committee about their general knowledge of the programs. A provider noted ongoing provider education would be valuable as there is still a disconnect and some issues with the medical therapy program. Another provider noted they did have provider education but there is still confusion about paneling. It was noted, specialists need to be paneled and pediatricians that are ordering for CCS conditions. Primary care providers should also be paneled. Under WCM the child receives more comprehensive care and if they are CCS, the care needs to come from a CCS paneled provider. A provider noted, San Benito County would like more information and education as they receive different information from the county, Dr. Myers noted care will come from the Alliance once the county is onboard. Dr. Myers asked the Committee if they would like additional information regarding the medical therapy units, general CCS or any other topics. The Pediatric Resources document was shared with the Committee and will be sent after the meeting. A provider asked about communication with practices around WCM and CCS and it was noted it is important that patients are being treated by a paneled provider and the most appropriate physician. DHCS is checking eligibility, and that care is being provided by a paneled provider. When a patient is part of CCS, they are automatically assigned a case manager, and this is also available for children with complex needs (a referral needs to be made). Dr. Myers asked the Committee if naloxone distribution information would be helpful. A provider noted it might be good to provide the information if schools are providing the naloxone..

**C. WCM Referral Volumes**

Ashley McEowen, RN shared CCS referral data trends from January 2024 to June 2024 for Q1 & Q2 with a dip in volumes in March and June and this is monitored regularly. Data from Q1 of last year was also presented for comparison purposes. Overall, volumes are fairly consistent with a dip in volumes in June.

Quarter 2 Alliance Referral Count Rates by County:

- Merced: 208 (Q1 – 154)
- Monterey: 131 (Q1 – 194)
- Santa Cruz: 61 (Q1 – 81)
- Total Referrals: 400 (Q1 – 429)

Are seeing an increase from last year.

Quarter 2 Referral Approval Rates by County:

- Merced: 76% (Q1 – 78.6%)
- Monterey: 82% (Q1 – 71.6%)
- Santa Cruz: 78.7% (Q1 – 79%)

Average approval rate of 77.8% compared to Quarter 1 which was 75.5%. there was an increase in approval volumes in Monterey. Member volumes for Quarter 2 were shared with the Committee. There was a total enrollment for WCM of 7,686 and WCM age-out count of 70. Many factors go into CCS eligibility and, the Alliance works with the counties monthly. There was an increase in enrollment from Quarter 1. Age-out. Members age-out of the program at 21 years of age. A provider asked about referrals for San Benito and Mariposa, Dr Myers noted they will not be part of the program until January. Another provider inquired if there is a mechanism to keep track to see if those patients have accessed care after the transition. Kelsey noted there is a warm hand off to the adult care management team and the process begins at age 17 with discussions regarding conservatorship, The adult team tracks the member annually and continues follow-up.. **Action:** the Alliance will follow-up with the adult CM team regarding the numbers of age-out members for next time. A provider noted it would be beneficial to have additional information regarding the process. Dr. Myers suggested possible ECM and WCM updates for future meetings.

## 5. Open Discussion.

Dr. Myers opened the floor for the Committee to have an open discussion.

A provider from Santa Cruz County noted she is not certain who has CCS and their coordination of DME has been challenging. The Provider is unclear on the process. Provider also noted transition of care can be challenging. It was noted the care management team is here to assist and information was provided to the Committee. The care team can help with those without CCS conditions as well. Another provider noted, some patients were not receiving Beyfortus last year and utilizing pharmacies, and he is hoping for success with the vaccine this year.

## Adjourn.

The meeting adjourned at 1:00 p.m.

Respectfully submitted.

Ms. Tracy Neves  
Clerk of the Advisory Committee

The Whole Child Model Clinical Advisory Committee is a public meeting.



# Whole Child Model Grievances

**Q3 2024 Appeal & Grievance (AG) Review**

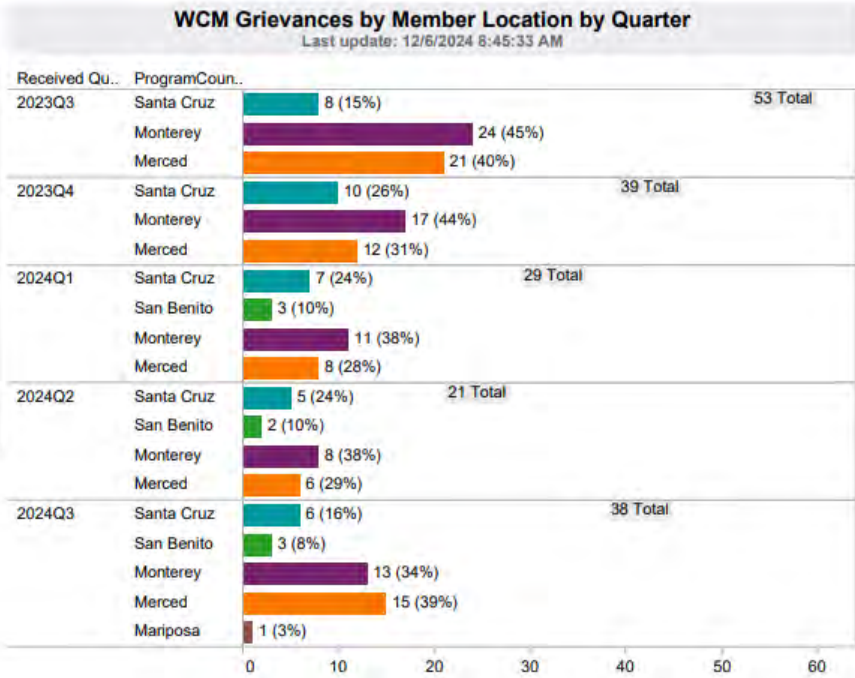
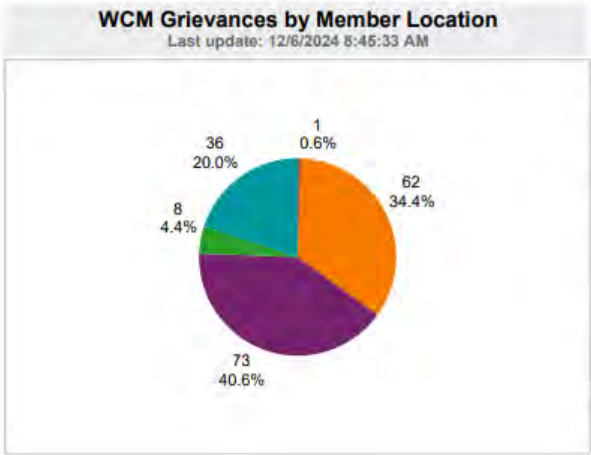
Whole Child Model, Clinical Advisory Committee: WCMCAC

Prepared by: Sarah Sanders, Grievance and Quality Manager

12/19/2024



# WCM Q3 2023– Q3 2024 GRIEVANCES by LOCATION

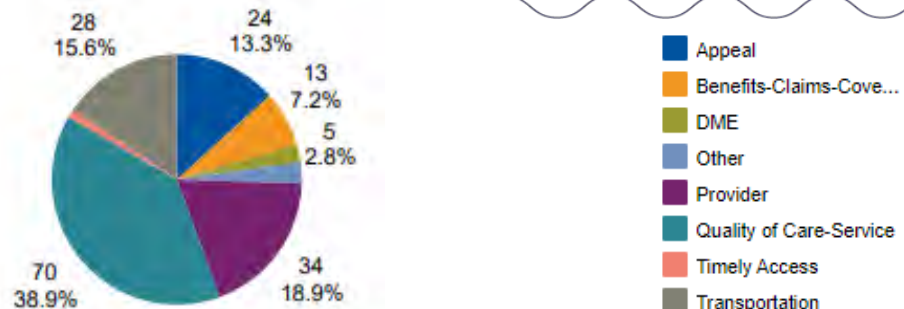
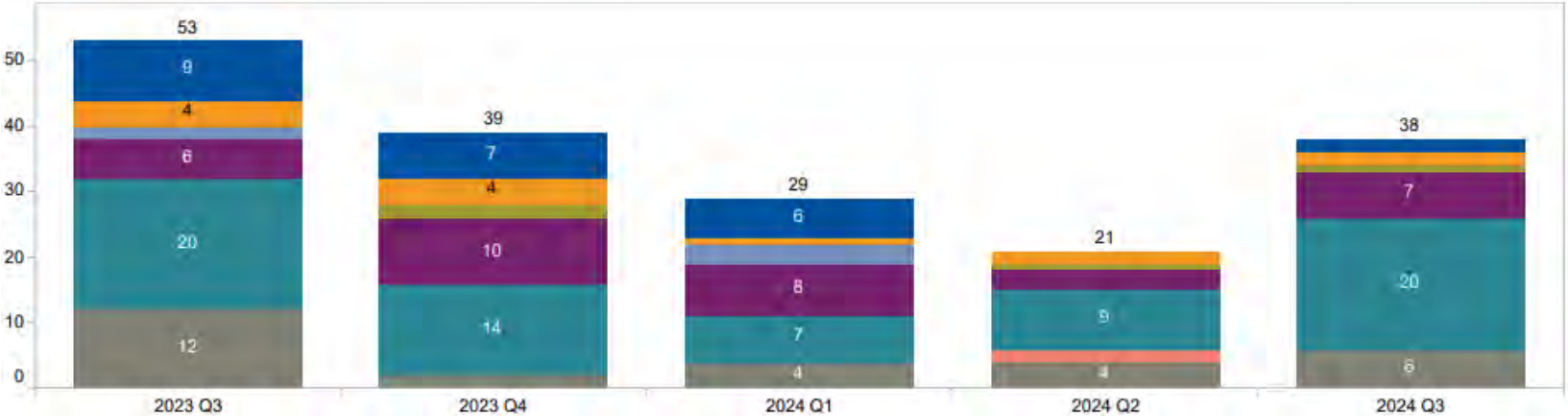


ProgramCounty

- Santa Cruz
- San Benito
- Monterey
- Merced



# WCM Q3 2023 through Q3 2024 GRIEVANCES by TYPE







WCM Review

## Q3 2024 TRENDS

### REVIEW and TRENDS:

1. WCM Grievances are closely monitored to identify trends by the Staff Grievance Review Committee (SGRC)
2. Overall WCM Grievance volume **increased** from the past two historically low quarters
3. Rate of QOC/QOS **increased**
4. Common Themes continued:
  - ❖ QOC/QOS
  - ❖ Provider Billing
  - ❖ Transportation

# WCM **GRIEVANCE** Actions



- Continue engaged monitoring and interventions.
- Monitoring adults exiting from WCM program.
- **Solicit input:** Clinical Partners, please share any questions or suggestions to [ssanders@ccah-alliance.org](mailto:ssanders@ccah-alliance.org)





# WCM Referral Volumes

## Pediatric Complex CM

Kelsey Riggs, Peds CCM Manager

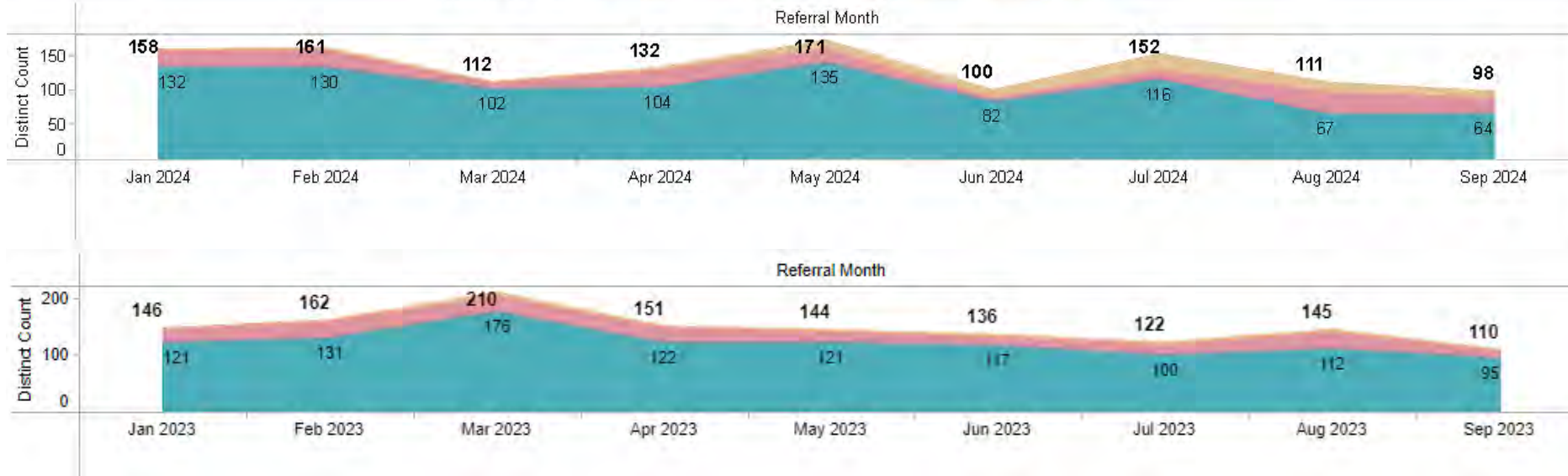
Ashley McEowen, Peds CCM Supervisor

Jenna Stromsoe, Peds CCM Supervisor

December 19, 2024

# CCAH CCS Referral Trending – 2023 & 2024

**CM CCS Referral Assessments: Referral Trending**  
 Last Refresh date: 12/12/2024 10:54:40 AM      Counties: Merced, Monterey, Santa Cruz

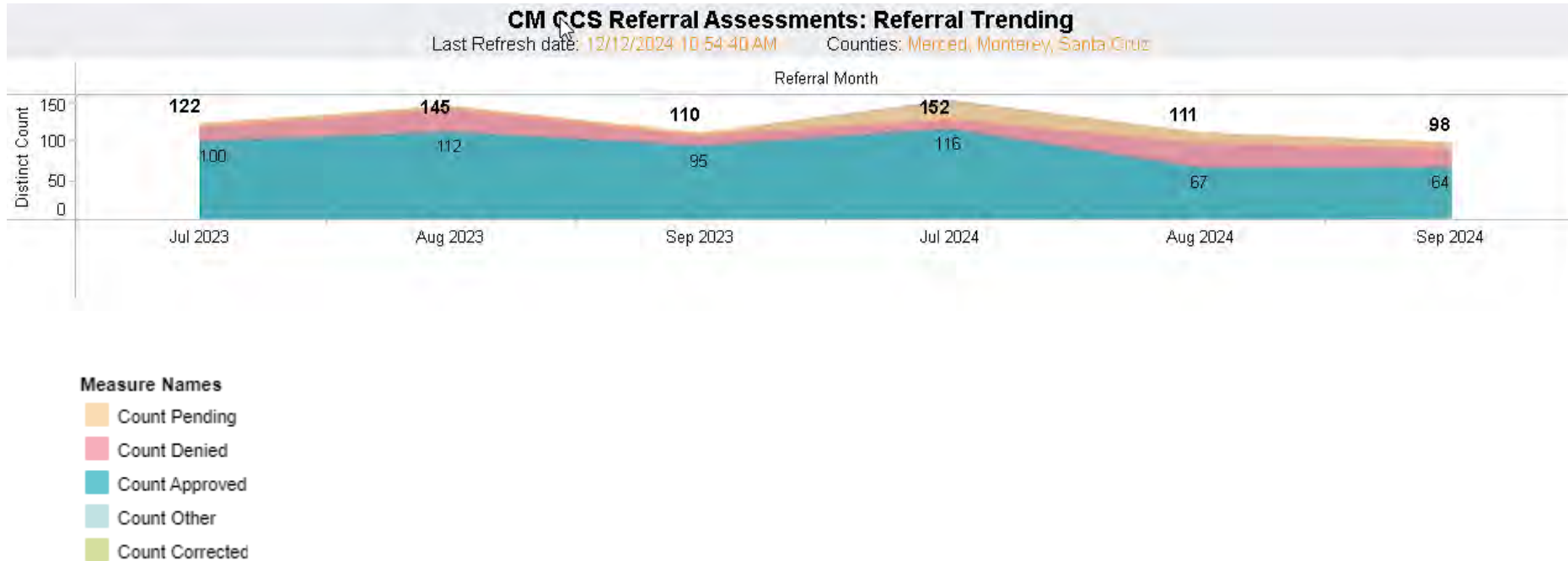


## Measure Names

- Count Pending
- Count Denied
- Count Approved
- Count Other
- Count Corrected



# CCAH CCS Referral Trending – Q3 2023 vs Q3 2024



# Referral Counts

## Q3: Alliance Referrals by County

- Merced: 144
- Monterey: 162
- Santa Cruz: 55
- Total Referrals: 361





# Referral Approval Rates

## Q3: CCS Referral Approval Rates by County

- Merced: 53.5%
- Monterey: 79.6%
- Santa Cruz: 74.5%
- Average Approval Rate: 68.4%



# WCM Summary

## Member Volumes – Q3 September 2024

- Total WCM Enrollment: 7,884
- WCM Age Out Count: 205 in Q3 2024





# QUESTIONS?





# Whole Child Model Clinical Advisory Committee Meeting Calendar 2025

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Thursday, March 20	12:00 - 1:00 PM
Thursday, June 26	12:00 - 1:00 PM
Thursday, September 18	12:00 - 1:00 PM
Thursday, December 18	12:00 - 1:00 PM

**Meetings will be held via MS Teams**

