 <b>Meeting Agenda/Notes</b>		<u><b>Anthem &amp; San Andreas Regional Center</b></u> <b>Meeting Title:</b> Q1-2025 San Andreas Regional Center MOU Meeting <b>Date/Time of Meeting:</b> 3/21/2025 – 10:00 a.m. – 11:00 a.m. <b>Location:</b> MS Teams <b>Frequency:</b> Quarterly <b>Dial in:</b>	
<b>Meeting Leader:</b>		<b>Kalil Macklin, Anthem</b>	
<b>Anthem</b>	<b>Yes/No</b>	<b>San Andreas Regional Center</b>	<b>Yes/No</b>
Kalil Macklin, County Account Manager	X	Julie Lussier	X
Patricia Lacanfora, BH Case Manager	X	Azelin Ellis	
Karen Olivares, Provider Experience			
Fargol Riahi, BH Case Manager			
Mina Farag, GBD Specialty Programs			
Alana Pfeffinger, RPM			
<b>I.</b>	<b>Introductions</b>		All 5MIN
<b>II.</b>	<b>Regional Center Updates:</b> - Request for Internal Contacts: - Need for a list of contact persons for different programs at Anthem (Liaisons) - Purpose: Direct communication for resolving member issues, e.g., pharmaceutical refusals - Current Approach: Already implemented similar arrangements with Santa Clara Family Health Plan and Kaiser. Would like to have the list ready for potential issues. -Benefit: Facilitates direct communication and problem-solving via email without needing to go through intermediaries		SARC 20MIN
<b>III.</b>	<b>Anthem Health Plan Updates:</b> <b>MOU:</b> MOU needs further discussion and review. DHCS did accept the majority of SARC suggested edits to the MOU.  Julie: - DHCS Guidance: DHCS vocabulary aligns with company options. Rework needed on redacted language by lawyers - Training & Staffing Concerns: Required training and tracking of new employees/providers seen as challenging. Current staffing levels inadequate to support these tasks - Revising Documents: Suggested use of DHCS language while addressing staffing concerns. Highlight discrepancies and return to lawyers for revision Section-Specific Issues: Section 7 for referrals/provision not applicable to regional centers. Suggestions to revert to original language for non-regional center responsibilities - Overall Strategy: Return revised sections not applicable to regional centers. Avoid prolonged revisions and strive for a timely resolution. Prefer a break from MOUs after current revisions complete  Kalil - Quality Improvement Section: Required for care coordination. - Policy & Procedures Requirements: Must remain in place - MCP Obligations: Many elements are the responsibility of MCPs - MOU Coverage: Clearly states it does not govern regional center provisions.  Julie:		Kalil 20MIN

- Push Back Strategy: Consider pushing back on certain requirements that affect training or document sharing
- Repercussions: Acknowledge potential burdens on both parties; note no obligation to perform for the other
- Document Sharing: Unlikely to happen due to no service agreements and separate roles
- Complaint Handling: Clients, not regional centers, would address service denials
- DHCS Flexibility: Lack thereof could impact agreement acceptance
- Negotiation Approach: Aim to resolve most areas, leaving few for DHCS revision. Attach DHCS responses to new document version for legal review. Strive for internal alignment on implementation.

Kalil:

- Action Plan: Incorporate edits as indicated by DHCS. Send revised document for legal review on both sides. Follow DHCS edits and send revised document for review (done).
- Review Steps: Both parties' legal teams will review the revisions. Forward again to DHCS for additional review if necessary. Minimize back-and-forth, align document with DHCS suggestions.
- Next Steps: Operationalize, amend, and execute the MOU. Expect to send revisions within the next week. (done)

Julie:

- Gratitude for the ongoing efforts
- Clarification: Highlight that some requests pertain to MCP, not regional centers. Confidence in resolving closer to final agreement. Regret for not initially distinguishing MCP-related language, could have reduced back-and-forth

Kalil:

- Review Process: Wait for your legal team to review the document first to avoid confusion and unnecessary back-and-forth with legal teams. After your legal team provides feedback, forward suggestions to our legal team for agreement. Aim for agreement on terms to streamline the process.
- Preferred end date for MOUs is December 31, 2028, aligned with contract duration. Effective date set as the date of the last MOU signature, as DHCS does not accept backdated agreements.

#### **CHA/CHIP PHM/PNA: Community Health Assessment/ Community Health Improvement Plan Population Health Management/Population Needs Assessment :**

Conducting regular meetings to discuss our Goals, Deliverables, Time Frames, Measurables, Budget, Funding Proposals, etc.

**GOAL 1:** Lead: By the end of 2025, all health plans will achieve DHCS's Bold Goal of exceeding the 50th percentile for children's preventative care measures in partnership with Santa Clara County Public Health Department (SCC PHD) by supporting the Childhood Lead Poisoning Prevention Program (CLPPP), through the expansion of the number of lead awareness and outreach events by xx%, through the contribution of resources, data sharing, and by assisting with the planning of targeted provider education campaigns and follow up services.

**GOAL 2:** Oral Health: By the end of 2025, all health plans will achieve DHCS's Bold Goal of exceeding the 50th percentile for children's preventive care measures, in Partnership with the County of Santa Clara Public Health Department (SCC PHD) to move forward the Oral Health Strategic Plan, through training, data sharing, promotion and outreach, and referrals to improve the oral-systemic health among members ages 1-20.

#### **Latino Health Assessment:**

- Housing and Neighborhood Conditions
- Access to Care
- Acute and Chronic Conditions
- Maternal and Child Health

We are currently collaborating on the 2024 Annual DHCS Strategy Deliverable Template for the CHA/CHIP.

We just completed the LHJ/MCP Worksheet.

CHIP Priorities: 1: Behavioral Health

2: Access to Care

3: Economic Opportunity

Funding Proposal:

Total membership in Santa Clara is 417,837 members.  
SCFHP has 67% of membership with 280,606 members.  
Anthem has 22% of the membership with 92,487 members.  
Kaiser has 11% of the membership with 44,744 members

The financial support from Anthem would be \$15,400 based on the membership breakdown and our commitment based upon that membership breakdown. Let me know if you have any questions.

### **CalAIM:**

Anthem is continuing to implement CalAIM in San Francisco County with regular meetings occurring with key organizations.

1. [CalAIM Overview](#)
1. [Community Health Workers \(ca.gov\)](#)
2. [ECM Overview](#)
3. [CS Overview](#)

### **Community Health Worker:**

[California Advancing and Innovating Medi-Cal \(CalAIM\) | Anthem Blue Cross](#)



CABC-CD-015396-22 Community Health Worker Overview\_FINAL.pdf



CABC-CD-014756-22 EXPRESS CHW Certification Tool\_FINAL.pdf



2541329 1000712CAMENABC Community Health Worker Member Flier UPD CM 04 21.pdf



2541329 1000712CAMSPABC Community Health Worker Member Flier UPD CM 04 21.pdf



ACAPEC-2783-21 CA Community Health Referral Form FINAL FILLABLE.pdf

### **Community Supports:**

[California Advancing and Innovating Medi-Cal \(CalAIM\) | Anthem Blue Cross](#)



CA\_CalAIMCSmemberreferralfom.pdf



CABC-CD-049197-24 CalAIM CS Flyer\_FINAL 1.pdf



ENGLISH CalAIM CS One-Pager FINAL.pdf



CA\_CalAIMILOSflier.  
pdf

### **Enhanced Care Management:**

When providers are fully contracted they are posted on our website under "Find Care." [Find Care & Estimate Costs for Doctors Near You | Anthem.com](#) Type ECM Field-Based in the search bar. That is the most real time update as required by DHCS.

[California Advancing and Innovating Medi-Cal \(CalAIM\) | Anthem Blue Cross](#)

[Care Management | California Medicaid Anthem](#)

ECM Referral Form Updates:

- ECM referral forms (for both adults and children & youth) will be revised and become available in Jan 2025 to include [standardized referral language as set by the DHCS](#). You may continue using the current ECM referral forms until Jan 2025.



CA\_CAID\_ECMProviderDirectory.pdf



CalAIM ECM Referral Form\_FINAL\_Fillable.pdf



CalAIM-ECM Referral Form with Checklist\_CABC-CD-047080-23 \_V3\_fillable.pdf



CABC-CD-049193-24 EXPRESS CalAIM ECM Flier\_FINAL (1) 2.pdf



CABC-CD-053882-24 EXPRESS Hlthy Rwrds Prg Flier\_FINAL.pdf

#### **Benefits, Programs, and Services:**

[Medi-Cal Plan Benefits and Programs | California Medicaid Anthem](#)

#### **Healthy Rewards Program:**

Through our Healthy Rewards Program, members can earn \$10 to \$80 for getting certain health services. At the same time, you increase your practice's quality scores by providing members with the vaccinations, screening visits, and medications they need. When an Anthem member meets the eligibility criteria for the activities listed below and completes the service, they will earn the corresponding reward amount after the service is confirmed by the Claims department. The reward dollars are loaded into the member's Healthy Rewards account and can be redeemed for a variety of retail gift cards. Please ensure you file your claims timely so the members can receive their awards.



12292504 1057170CAMSPABC Healthy Rewards BR MKT 02 24.pdf










12292504 1057170CAMENABC Healthy Rewards BR MKT 02 24.pdf



CA\_CAID\_PU\_HealthyRewardsProgram.pdf

Provider Flier only.

**LiveHealth Online:**

	<p>Kalil: Live Health Online can be used by everyone. Encourage our members to use this platform. Will continue to talk about it until our utilization increases.</p> <p><a href="#">Urgent Care - See a Doctor 24/7 - LiveHealth Online</a></p> <div> <div>  <p>Live Health Online Flyer FINALv6.pdf</p> </div> <div>  <p>LHO User Instructions Flier.pdf</p> </div> </div> <div> <div>  <p>LHO Overview FINAL.pdf</p> </div> <div>  <p>LHO SP.pdf</p> </div> </div> <p><b>Transportation/ModivCare Services:</b></p> <p><a href="#">Non-emergency medical transportation — provider certification statements - Provider News (anthem.com)</a></p> <div> <div>  <p>Transportation BR FINAL 12 21 (2).pdf</p> </div> <div>  <p>Transportation BR Flier Spanish HR 12 21.pdf</p> </div> </div>	
VI.	<p><b>Data: Utilization Reports</b></p> <ul style="list-style-type: none"> <li>• Anthem membership</li> <li>• Behavioral Health Utilization</li> <li>• LiveHealth Online Utilization</li> <li>• Modivcare Transportation Utilization</li> </ul> <div>  <p>Q1 2025 Anthem Blue Cross _ San Andreas Regional Center MOU _Reports_3.21.2025.pdf</p> </div>	Kalil 10MIN
VII.	<p><b>Follow-Up Items:</b></p> <ul style="list-style-type: none"> <li>• Kalil to get Julie a list of contact persons for different programs at Anthem (Liaisons)</li> </ul>	All 5MIN

**Next Meeting: June 5, 2025 @ 9:30 am**