



BRIEF

Supporting Medi-Cal Youth and Families: What Plans Need to Know About The DHCS Release of Guiding Principles

Table of Contents

Introduction	2
Guiding Principles	3
New Leadership Structure	4
Strengthen Coverage Base	5
Fortify Pediatric Foundation	6
Pediatric Vaccinations	7
Accountability for Care	8
Family-Centered Approach	9
Behavioral Health Crisis	10
Foster Care Model	11
Conclusion	12

Introduction

In March 2022, DHCS released key guiding principles and considerations Medi-Cal plans need to consider when designing programs for their Medicaid members, specifically youth and families. With 1 in 3 Californians insured under Medi-Cal, and over 13 million members at stake, these principles should be key focus areas for plans in 2023 and beyond.

The Challenge

To set the stage, in 2019–20, Medi-Cal brought in more than \$65 billion in federal funds and accounted for nearly 16% of all state general fund spending. People with disabilities comprise 9% of Medi-Cal enrollees, and account for 31% of total spending. Children account for 17% of enrollees, but only 6% of the total spend.

And, quality measures haven't seen much improvement, with more than half of the measures staying the same or declining from 2009 to 2018. In summary, quality of care has declined on 4 measures, and hasn't improved on 12 measures. What's worse, 3 of the 4 measures that did decline were related to the care of children covered under Medi-Cal. Six of the 9 measures related to children declined or stayed the same, with only three measures seeing improvement. The decline in quality prompted state-wide action, which led to DHCS creating 8 guiding principles to improve health outcomes at scale.

This report will study each of the 8 principles and provide plans with insights and opportunities to apply DHCS strategy in supporting families and children covered by Medi-Cal while enhancing health outcomes for the nation's most vulnerable population.



GUIDING PRINCIPLE 1

Implement a New Leadership Structure and Engagement Approach



- Identify a DHCS child health champion whose dedicated position includes actively participating in identifying how Medi-Cal plans can better serve children, while overseeing the implementation of continued efforts to enhance population health.
- In addition to the child health champion, all key stakeholders will proactively work to ensure Medi-Cal families and children's voices inform policies.
- To further this effort, a new DHCS Consumer Advisory Committee will be instated.

Opportunity

By gathering first-hand experiences and needs from their members, plans can continually refine their approach to engagement. The addition of a designated role, inclusion of key stakeholders, and an advisory committee will ensure a broad spectrum of voices are heard and considered. Plans can help enforce this effort by combining plan data with benchmark data to forecast member needs based on a spectrum of socioeconomic factors. Enhanced data means more accuracy in determining member needs and providing tailored resources that allow plan programs and solutions to scale faster and more efficiently.

Using the SDoH Index to Harness Insights

mPulse Mobile helps you collect, analyze, and optimize data sets to create highly accurate predictions about your member population using our proprietary Social Determinants of Health (SDoH) Index. By combining public, private, and plan data sets, we tailor programs while continually enhancing program efficacy using experiential data.

Conversational insights are collected and analyzed through each member's preferred communication channel, whether that be email, interactive voice response (IVR), short message service (SMS), Mobile Web, or rich communication services (RCS). By asking members open-ended or multiple-choice questions, we can gather barrier insights and follow-up with personalized education and plan resources, while simultaneously validating and improving the index's accuracy.

GUIDING PRINCIPLE 2

Strengthen the Coverage Base for California's Children



- Premiums will be reduced to zero to ensure accessibility for all Medi-Cal families.
- Presumptive eligibility will expand to ensure families and children in need can receive care more quickly.

Opportunity

California has ensured a simplified enrollment and eligibility process for Medi-Cal, which has enabled the state to rank among the top third in the country in its child health coverage rates. California reduced the uninsured rate for Latino children to less than half the national average. Unfortunately, progress has declined in recent years, and the uninsured rate is beginning to gradually increase. With zero-dollar premiums and presumptive eligibility, plans will need to onboard and educate members about their benefits faster.

mPulse Improves Member Knowledge of Plan Benefits by 91%

Strategy: Deploy 2-way text messaging to gauge new members' understanding of plan benefits and available resources, educate and improve utilization of plan benefits.

By using demographic datasets from our SDoH Index, we assessed and segmented the target population. Interactive polls, on-demand resources and open-ended questions were sent to members to continually gather insights while pointing them toward tailored resources.

Outcome: 91% of members found the text messages helped improve their understanding of the plan's benefits and services. The number of members who reported they would visit the ER for a minor condition dropped from 11% to 4%. The engagement score, based on response and sentiment, was 2.5 times higher than the control group.

GUIDING PRINCIPLE 3

Fortify the Pediatric Preventive and Primary Care Foundation



- A new population health management (PHM) strategy will be implemented to establish a checklist for plans to identify and serve children in need of care coordination.
- New resources will be implemented in practice transformation for pediatric providers and primary care providers serving pregnant and youth members.
- An educational outreach campaign will be deployed for EPSDT for members, providers, and MCPs.
- Improve criteria and procedures used to determine when children receive behavioral health services, specialty mental health services, and substance use disorder treatment.
- Expansion of preventive pediatric dental benefits.
- Participate in CMS infant well-child visits learning collaborative for health care payment learning and action network state transformation collaborative (STC).
- Continued support for the ACEs Aware Initiative and provider training grants.

Opportunity

Early Periodic Screening, Diagnostic, and Treatment (EPSDT) is the foundation for necessary adolescent care. Contract requirements in the upcoming Medi-Cal MCP procurement will create greater visibility and enforcement of EPSDT services under DHCS. Ensuring members receive education and information on the importance of these services is essential in building member self-efficacy.

mPulse Drives 66% Well-Child Visit Attendance

Strategy: Better manage children's health outcomes by driving awareness of well-child visits, immunizations, and primary care visits via 2-way text messages.

Outcome: 66% of members attended at least one well-care visit. 83% of targeted members had their child vaccinated. 29% of members aged 18-21 successfully transitioned from a pediatrician to a primary care provider.

GUIDING PRINCIPLE 4

Strengthen Access to Pediatric Vaccinations



- Deploy COVID-19 pediatric vaccines to meet California’s “Vaccinate All 58” goals.
- Develop a Vaccines for Children (VFC) plan with CDPH to increase vaccinations and increase vaccine education.
- Increase vaccination rate of pregnant Medi-Cal members.

Opportunity

The United States saw a country-wide decline in vaccination rates throughout the pandemic with a 40% reduction in childhood vaccination rates in April 2020. California saw a vaccination rate of 35% in children for 2020. To prioritize increasing the Medi-Cal vaccination rate, more work will be required by plans in developing programs and initiatives that support vaccine education and helping overcome vaccine hesitancy.

mPulse Uses Streaming Health Education to Increase Vaccine Readiness

Strategy: Build self-efficacy and increase vaccine readiness by providing visual storybooks and using behavioral science techniques to help overcome barriers and vaccine hesitancy. 2.6 million messages were sent, and 1.8 million dialogues were initiated in both English and Spanish translation.

Outcome: 18.9% of members replied to a message or clicked a link. 72% of members who interacted with our vaccine storybook were more likely to get vaccinated.



GUIDING PRINCIPLE 5

Enhance Accountability for High-Quality and Equitable Care for Children



- Improve Plan oversight while strengthening value-based payments by adjusting base capitation rates based on quality and equity. Plans will be required to report primary care expenses, alternative payment arrangements with providers, and strengthen Medical Loss Ratio (MLR) requirements.
- MCP standards to increase for pediatric and maternity care performance.
- Support and expand local educational agency-billing option program through outreach campaign, training items, and technical assistance.
- Deliver statewide continuum of care, and require plans to provide preventive services, and adolescent health services provided by schools or school-affiliated health providers.
- Enhance pediatric provider payments to increase preventive and screening services for children and families.
- Enhance transparency and usability of DHCS pediatric dashboards.

Opportunity

In 2019, a state auditor discovered that roughly 2.4 million children enrolled in Medi-Cal weren't receiving preventive services such as well-child visits, developmental screenings, and other necessary care. In 2019–20, there was a 30% decline in outpatient visits, and a 40% decline in dental visits. Plans will need to build programs that reinforce prevention and wellness for their members in addition to the initiatives planned by DHCS to improve utilization of these services.

mPulse Supports Improvement in HEDIS® Measures

Strategy: Automated text messages were sent across 40 topics to nearly 20,000 members with topics prioritized based on each member's SDoH Index score and engagement data sets. mPulse sent 81 unique dialogues to ensure optimal engagement outcomes.

Outcome: Over the course of 1 year, 444,700 conversations were generated. Compared to control groups, we saw a 13.6pp increase in aged 0-11 Well-Child visits, a 9.8pp increase in aged 12-19 Well-Visits, 8.8pp increase in dental visits, a 9.5pp increase in Lead Screenings, and an 11.5pp increase in cervical cancer screenings.

GUIDING PRINCIPLE 6

Apply a Family-Centered Approach



- Extend pregnant and postpartum care to 12 months postpartum while participating in quality improvement initiatives.
- Medi-Cal Coverage of services provided by community health workers and doulas.
- Dental services covered for families with children.
- Family therapy covered as a behavioral health benefit.
- Plan to maximize enrollment of eligible Medi-Cal children and families in the CalFresh program and WIC program.

Opportunity

Children's health is dependent on several factors including their housing, their access to healthy food, their community and support systems, and overall safety. Ensuring members have access to these necessities will guarantee greater health and better outcomes. Plans can adopt a family-centered approach by pursuing outreach programs that drive awareness and utilization of available benefits to support their long-term health and well-being.

mPulse improves Prenatal Preventive Care Engagement

Strategy: Send weekly text reminders to pregnant members needing to complete a notification of pregnancy (NOP) and/or need a prenatal visit.

Outcome: Less than 3% of members chose to opt out, and 60.8% of targeted members engaged with the program.

mPulse Alleviates Food Insecurity

Strategy: Increase the number of members signing up for supplemental food benefits using text messages and email outreach to drive awareness of CalFresh, while destigmatizing negative perceptions regarding the program and providing links to apply to the online application.

Outcome: 20.5% of members engaged with the program, with a 62% higher likelihood of members applying for the benefit when using both text messages and email vs texting alone. The program generated over \$4.4 million in health plan savings.

GUIDING PRINCIPLE 7

Address the Child and Adolescent Behavioral Health Crisis



- Create a virtual behavioral health services platform to expedite behavioral health services and referrals for Medi-Cal youth.
- Implement fee schedule to ensure continual accessibility of behavioral health services in schools.
- Create new position of Behavioral Health Coach to support workforce development.
- Distribute state grants to increase accessibility of behavioral health services within schools.
- Creation of the behavioral health continuum infrastructure program will include expansion of treatment facilities for children and families.
- Launch training for pediatric primary care adolescent behavioral health conditions.
- Expand the CalHOPE student support program.
- Launch public health campaign that is culturally and linguistically inclusive to reduce behavioral health stigma.
- Launch Medi-Cal managed care incentive program to improve and increase access to preventive, early intervention, and behavioral health services provided by school health providers.

Opportunity

The overwhelming need to focus on behavioral health for Medi-Cal members is undeniable. Over 16,000 children in California lost a parent/ caregiver due to COVID-19, the highest in the nation, with 2 out of 3 deaths Latino. One in 13 children in California has experienced or witnessed abuse. Since 2007, California has seen a 30% increase in youth ages 15 to 24 dying by suicide, and a 38% increase in hospitalization related to mental health for children ages 5-19, which has only continued to rise throughout the pandemic. In 2020, California ranked 48th for providing access and resources to children who need mental health services. The Children and Youth Behavioral Health Initiative (CYBHI) is a proposal instated in the 2021 Budget Act that is working to create a system in which children are screened and supported for any identified behavioral health concerns. \$4.7 billion is being allocated through 2026 to support CYBHI. To

take this initiative a step further, plans can leverage outreach programs to drive utilization of available resources and provide education on behavioral health to drive awareness and reduce stigma.

mPulse Improves Access to Behavioral Health Support Services

Strategy: Text messages were sent to targeted eligible members identified as needing behavioral health support. Members were directed via a link to access the plan's online therapy resources. Clinical and demographic datasets were analyzed to determine need state and risk factor surveillance.

Outcome: 79% of weekly therapy sign-ups were attributed to mPulse text messaging outreach, compared to 11% from online promotion and 10% from direct mail outreach methods.

GUIDING PRINCIPLE 8

Next Steps on the Foster Care Model of Care



- Continue work with CDSS and associated stakeholder to develop and implement new model of care focused on establishing a framework to advance equity and improve services and care for Medi-Cal youth in foster programs.

Opportunity

Approximately 60,000 Medi-Cal youth aged 20 and younger live in the California foster care system. Working to improve health care services while simultaneously supporting children and youth in the system will enable members to live a healthier life.

News: California Government Benefit Provides Cell Phones to Medi-Cal Youth in Foster

iFoster, a part of California's lifeline Program, is overseen by the Public Utilities commission and implemented a \$22.3 million-dollar federal pilot program to get cell phones into the hands of California youth in foster. Youth across 56 counties have received phones through the program, and more than 11,000 phones have been distributed across 56 counties. Starting February 2023, the program will become permanent with an additional \$10 million in funding. iFoster plans to distribute 350-400 phones to youth in need each month. This program allows young Californians to participate in school programs, communicate about jobs, and stay in touch with their support network. It also allows Medi-Cal plans to connect with more members in a frictionless way and educate them about their health and available plan resources.

Why Plans Should Leverage Text Messaging Outreach

In 2019, more than 94% of California households had internet access, although significant gaps remain with families of color and lower incomes having less access than white households. With organizations like iFoster, the California Emerging Technology Fund (CETF), and California LifeLine working to provide internet access and cell phones to those who need it most, cell phone and internet access will only continue to increase.

Compliance Considerations

When it comes to healthcare, communicating with members through text messaging can be somewhat daunting. mPulse Mobile is both HITRIST, HIPAA, and TCPA-compliant and has deployed programs with leading Medi-Cal plans while ensuring compliance and member privacy is top of mind.

The TCPA healthcare exemption enables health organizations to deliver messages without prior express consent, as long as they abide by the following rules:

- Must be HIPAA compliant, and not promotional or soliciting.
- Messages can only be sent to the phone number provides and must state the name and contact information of the sender.
- Voice messages must be under 1 minute, and text messages less than 160 characters.

- Messaging frequency needs to be less than once per day, and no more than three times per week.
- Messages must offer an opt-out and opt-outs must be honored accordingly.

As a company 100% focused on health engagement, security and compliance are mPulse Mobile's highest priority, and all our solutions are designed with compliance as the foundation.

Conclusion

To improve quality measures and enhance outcomes for Medi-Cal youth and families, DHCS will be enforcing these policies and principles alongside Medi-Cal plans to increase utilization of new resources and services. mPulse Mobile's suite of solutions are designed to drive engagement and increase utilization of plan benefits. Our frictionless engagement methods are proven to empower health literacy and self-efficacy. By partnering with us, plans can proactively implement DHCS principles into their enterprise strategy to deliver outcomes that matter most: healthier communities and greater quality of care for California's most vulnerable members.

About mPulse Mobile

mPulse Mobile, the leader in Conversational AI solutions for the healthcare industry, drives improved health outcomes and business efficiencies by engaging individuals with tailored and meaningful dialogue. mPulse Mobile combines behavioral science, analytics and industry expertise that helps healthcare organizations activate their consumers to adopt healthy behaviors.

With over a decade of experience, 180+ healthcare customers and more than 500 million conversations annually, mPulse Mobile has the data, the expertise and the solutions to drive healthy behavior change.

To ask a question or request a call, go to: mpulsemobile.com/contact

