

# MOU Annual Reporting Template Instructions

Pursuant to the 2024 Managed Care Plan Contract (MCP), Exhibit A, Attachment III, Section 5.6 and All Plan Letter (APL) 23-029, Medi-Cal MCPs, are required to execute Memoranda of Understanding (MOUs) with a number of Third-Party Entities, including local health departments, local educational and governmental agencies, such as county behavioral health departments for specialty mental health care and substance use disorder treatment services, and other local programs and services. Starting in 2025, MCPs must submit to the Department of Health Care Services (DHCS), via the Managed Care Operations Division (MCOD)-MCP Submission Portal, an MOU Annual Report that includes: updates from the required quarterly meetings with the Third-Party Entities, the process and outcomes of their annual MOU review, and reports to MCP's compliance officer.

## **MOU Annual Report**

The MOU Annual Report is intended to summarize the MCPs annual review process, any amendments that were made to the MOU or policies and procedures, and the outcomes of the review. This report is not intended to be duplicative of MOU quarterly reports, where MCPs demonstrate a good faith effort to execute MOUs. An executed MOU means an MOU that has been reviewed and approved by DHCS, if applicable, and subsequently signed by all relevant parties to the MOU. MCPs must complete and submit this MOU Annual Report as outlined below.

Annually, MCPs must report on each executed MOU that was in effect during the reporting year. For MOUs that become effective during the reporting year, MCPs must report on the MOU-related activities during the period that the MOU was effective. For example, MOUs effective 07/01/2024 shall report for the period of 07/01/2024 - 12/31/2024.

MCPs that operate in more than one county must report on all counties within the same MOU Annual Report.

MOU Annual Reports must be submitted to the MCP-MCOD Submission Portal no later than the last business day of January of each year. In addition, MOU Annual Reports must be posted to MCP's website no later than March 1st each year. MCPs must submit the Web Posting link of the MOU Annual Report to the MCP-MCOD Submission Portal by the close of business on March 10th of the reporting year. As the information in the report may be viewed by the public, **do not include any Members' Personal Health Information (PHI) or any other confidential information in the report.**

## **Annual MOU Review**

MCPs must review their executed MOUs annually with the Other Parties to see if any amendments to the MOU are necessary. This includes, but is not limited to, incorporating any new MCP contract requirements and/or policy guidance. When submitting the MOU Annual Report, MCPs must attest that they performed the annual review and supporting documentation must be retained by the MCP for potential auditing purposes. MOUs that are amended as a result of the MCPs annual MOU review must be submitted to the MCOD-MCP Submission Portal using the appropriate MOU submission artifact (links located below).

## **Attestation**

MCPs must attest to completing the Annual Review of the MOU and Quarterly Reporting for the specified year, as required by the 2024 Managed Care Contract (Exhibit A, Attachment III, Subsection 5.6.3.B.3). MCPs must also certify that all information in this report is true, accurate, and complete to the best of their knowledge. MCPs will submit the MOU Annual Report artifact for File and Use and the report will not receive official DHCS approval. Please see Attestation tab for instructions.

Unless otherwise noted in the instructions below, please do not include any attachments with your report, as unsolicited attachments will not be accepted. If you have additional questions or concerns, please contact MCPMOUS@dhcs.ca.gov.

<b>Links for MCOB-MCP Submission Portal</b>	<a href="#">Submission Portal</a>
	<a href="#">Helpful Guides</a>
<b>MOU Annual Report</b>	
<b>Location</b>	<b>Explanation</b>

<b>MOU Effective Date (Column A)</b>	List all MOU types, whether executed or not. For executed MOUs, enter the effective date and complete all fields. The effective date is the date that the MOU goes into effect. If no MOUs are executed, enter "N/A," complete field B, and leave the remaining fields blank.
<b>MOU Type (Column B)</b>	Select the MOU type from the drop-down list. If the MCP has executed MOUs with multiple organizations for the same MOU type, report each on a separate row. List all individual executed MOUs. For combined MOUs, select one type and specify the combined MOU name in Column D. Ex. If MCP executed combined MOUs for IHSS, SMHS, and DMC-ODS select "IHSS" in Column B and enter IHSS,SMHS, DMC-ODS in Column D.
<b>Combined MOU (Column C)</b>	Is the MOU a combination of more than one type of MOU? Select "Yes" or "No" from the drop-down menu.
<b>Description of Combined MOU (Column D)</b>	If the MOU is a combination of multiple types, specify the types in this field. If it is a singular type, enter "N/A" in this field. Ex. If MCP executed combined MOUs for IHSS, SMHS, and DMC-ODS select "IHSS" in Column B and enter IHSS,SMHS, DMC-ODS in Column D.
<b>Plan Code (Column E)</b>	From the drop-down menu, select the applicable Plan Code. MCPs that operate in more than one county should report on all counties within one MOU Annual Report by reporting separate rows for each applicable plan code.
<b>Plan Name (Column F)</b>	This field auto-populates when the Plan Code is entered in Column E. MCPs that operate in more than one county should report on all counties within one MOU Annual Report by reporting separate rows for each applicable plan code.
<b>County (Column G)</b>	This field auto-populates when the Plan Code is entered in Column E. MCPs that operate in more than one county should report on all counties within one MOU Annual Report by reporting separate rows for each applicable plan code.
<b>Reporting Year (Column H)</b>	Enter the corresponding reporting year for the data reported using the drop-down list provided. The reporting year is the year in which the MOU-related activities occurred. For example, for the Annual Report due on 01/31/25, the reporting year is 2024.
<b>Other Party Organization &amp; Name (Column I)</b>	Enter the organization and name of the Other Party to the MOU. This may be the County Department or another applicable agency name. MCPs must list all executed MOUs, along with the respective organization and name, in this section.
<b>Multi-Party MOU (Column J)</b>	From the drop-down list, select "Yes" or "No" to indicate if the MOU included more than one MCP and/or Other Party who signed an MOU.
<b>Description of Multi-Party MOU (Column K)</b>	If "Yes" is selected in Column J, list all parties to the MOU (including subcontractors) and describe the arrangement of all parties to the MOU. If "No" is selected in Column J, enter "N/A." Limit responses to 1000 characters.

<b>Meeting Attendees (Column L)</b>	Provide a list of all attendees of the specified Quarterly Meeting. Include the name and title of the MOU Liaison.
<b>Topic: Care Coordination (Column M)</b>	Describe the common themes, concerns, and/or discussion items from the Quarterly Meetings regarding care coordination, eligibility, screening, assessment, evaluation, and/or Medical Necessity determination. If any care coordination-related changes were made (to the MOU, processes, and/or policies and procedures) based on these discussions, please note those changes in this section. If this topic was not discussed at the meeting(s), then provide an explanation. Limit responses to 1000 characters.
<b>Topic: Referrals (Column N)</b>	Describe the common themes, concerns, and/or discussion items from the Quarterly Meetings regarding referrals. If any referral-related changes were made (to the MOU, processes, and/or policies and procedures) based on these discussions, please note those changes in this section. If this topic was not discussed at the meeting(s), then provide an explanation. Limit responses to 1000 characters.
<b>Topic: Strategies to Avoid Duplication of Services (Column O)</b>	Describe the common themes, concerns, and/or discussion items from the Quarterly Meetings regarding strategies to avoid duplication of services. If any changes regarding duplication of services were made (to the MOU, processes, and/or policies and procedures) based on these discussions, please note those changes in this section. If this topic was not discussed at the meeting(s), then provide an explanation. Limit responses to 1000 characters.
<b>Topic: Dispute Resolution (Column P)</b>	Describe any significant disputes between the parties that were discussed at the Quarterly Meetings. What was the resolution? If the dispute is still unresolved, what are the next steps towards resolving the matter? If any changes regarding dispute resolution were made (to the MOU, processes, and/or policies and procedures) based on these discussions, please note those changes in this section. If this topic was not discussed at the meeting(s), then provide an explanation. Limit responses to 1000 characters.
<b>Topic: Collaboration (Column Q)</b>	Describe any discussion at the Quarterly Meetings regarding effective collaboration between the MCP and Other Party, including strengths, barriers, and plans for improvement. If any changes regarding collaboration between MCPs and Other Party were made (to the MOU, processes, and/or policies and procedures) based on these discussions, please note those changes in this section. If this topic was not discussed at the meetings(s), then provide an explanation. Limit responses to 1000 characters.
<b>Topic: Member Engagement (Column R)</b>	Describe any discussion at the Quarterly Meetings regarding Member engagement challenges and successes. If any changes regarding Member Engagement were made (to the MOU, processes, and/or policies and procedures) based on these discussions, please note those changes in this section. If this topic was not discussed at the meetings(s), then provide an explanation. Limit responses to 1000 characters.

# MOU Annual Reporting Attestation

## Attestation for MOU Annual Reporting and Quarterly Reporting

I hereby attest that an Annual Review of the MOU has been conducted for the specified year, as required by the 2024 Managed Care Contract (Exhibit A, Attachment III, Subsection 5.6.3.B.3), and that all information provided in this report is true, accurate, and complete to the best of my knowledge.

I hereby attest that I have reported to the Compliance Officer of the Managed Care Plan regarding the MOUs on at least a quarterly basis, as required by the Managed Care Contract (Exhibit A, Attachment III, Subsection 5.6.3.B.4).

## Signature

If your MCP has no executed MOUs to report for this year, please submit an attestation that your MCP is demonstrating a good faith effort to execute these MOUs and confirm this by selecting and attesting below.

If this section does not apply to your MCP, you may disregard and leave the check box blank.

## Signature

Name of Signee	Title	Managed Care Plan	Email Address

MOU Effective Date	MOU Type	Combined MOU	Description of Combined MOU	Plan Code	Plan Name (auto-populates)	County (auto-populates)	Reporting Year	Other Party Organization & Name	Multi-Party MOU	Description of Multi-Party MOU	Meeting Attendees	Topic: Care Coordination	Topic: Referrals	Topic: Strategies to Avoid Duplication of Services	Topic: Dispute Resolution	Topic: Collaboration	Topic: Member Engagement
N/A	LHD: Local Health Departments	No	N/A	543	Partnership HealthPlan of California	Butte	2024	County of Butte	No	Not applicable							
N/A	SMHS: Local Government Agencies/Social Services Departments: Specialty Mental Health Services	No	N/A	543	Partnership HealthPlan of California	Butte	2024	County of Butte	No	Not applicable							
N/A	DMC-SP: Local Government Agencies/County Behavioral Health Departments: Alcohol and Substance Use Disorder treatment services, DMC State Plan	No	N/A	543	Partnership HealthPlan of California	Butte	2024	County of Butte	No	Not applicable							
N/A	IHSS: Local Government Agencies: In-Home Supportive Services	No	N/A	543	Partnership HealthPlan of California	Butte	2024	County of Butte	No	Not applicable							
N/A	CW: Local Government Agencies/Social Services Departments: Social Services and Child Welfare	No	N/A	543	Partnership HealthPlan of California	Butte	2024	County of Butte	No	Not applicable							
N/A	RC: Regional Centers	No	N/A	543	Partnership HealthPlan of California	Butte	2024	Far Northern Regional Center	No	Not applicable							
N/A	WIC: Local Health Departments/WIC	No	N/A	543	Partnership HealthPlan of California	Butte	2024	County of Butte	No	Not applicable							
N/A	TCM: Local Government Agencies: Targeted Case Management	No	N/A	543	Partnership HealthPlan of California	Butte	2024	Not applicable	Not applicable	Not applicable							
N/A	WCM: Whole Child Model	No	N/A	543	Partnership HealthPlan of California	Butte	2024	County of Butte	No	Not applicable							

MOU Effective Date	MOU Type	Combined MOU	Description of Combined MOU	Plan Code	Plan Name (auto-populates)	County (auto-populates)	Reporting Year	Other Party Organization & Name	Multi-Party MOU	Description of Multi-Party MOU	Meeting Attendees	Topic: Care Coordination	Topic: Referrals	Topic: Strategies to Avoid Duplication of Services	Topic: Dispute Resolution	Topic: Collaboration	Topic: Member Engagement
N/A	LHD: Local Health Departments	No	N/A	544	Partnership HealthPlan of California	Colusa	2024	County of Colusa	No	Not applicable							
6/26/2024	SMHS: Local Government Agencies/Social Services Departments: Specialty Mental Health Services	No	N/A	544	Partnership HealthPlan of California	Colusa	2024	County of Colusa	No	Not applicable	Tony Hobson  Tony Hobson	Carelon Behavioral Health provided info and presentation of how referrals are processed. Sac Valley MedShare provided update on county participation and Continuity of Care Documents. Discussed county participation.  Carelon Behavioral Health provided info and presentation of how referrals are processed. Sac Valley MedShare provided update on county participation and Continuity of Care Documents. Discussed county participation.	Carelon Behavioral Health provided data on how members are screened, referrals, raw data / breakdown of quantities by county, and penetration rates. Closed Loop Tracker county participation discussed. Ad hoc meetings offered to counties.  Carelon Behavioral Health provided data on how members are screened, referrals, raw data / breakdown of quantities by county, and penetration rates. Closed Loop Tracker county participation discussed	Closed Loop Tracker discussed to ensure members are being seen.  SacValley MedShare discussed Continuity of Care Document to members' care is visible. Closed Loop Tracker discussed to ensure members are being seen. Partnership to follow up with members.	MOU county completion progress information was shared.  MOU county completion progress information was shared.	Discussed Closed Loop Referral Tracking with counties. Provided info on which county's trackers are up to date, needing info, etc. Discussed importance of updated trackers for Partnership to accurately follow up with members. Sac Valley MedShare provided info on county progress. SVMS is getting CCDs (Continuity of Care Document) from EMRs. Counties can see integrated records. MOU county completion progress information was shared.  Discussed Closed Loop Referral Tracking with counties. Provided info on which county's trackers are up to date, needing info, etc. Discussed importance of updated trackers for Partnership to accurately follow up with members. Sac Valley MedShare provided info on county progress. SVMS is getting CCDs (Continuity of Care Document) from EMRs. Counties can see integrated records. MOU county completion progress information was shared.	MOU county completion progress information was shared. Carelon Behavioral Health provided data on member engagement and utilization by county, age, etc.  Discussed SB (Senate Bill) 1019 to develop the outreach and education plan for NSMHS. Discussed with counties helpful ways to inform about NSMHS. Asked counties to advise Partnership of any upcoming events to attend or have handouts. Carelon Behavioral Health provided data on member preference of telehealth vs. face-to-face.
8/13/2024	DMC-SP: Local Government Agencies/County Behavioral Health Departments: Alcohol and Substance Use Disorder treatment services, DMC State Plan	No	N/A	544	Partnership HealthPlan of California	Colusa	2024	County of Colusa	No	Not applicable	Tony Hobson  Tony Hobson	ECM and CS utilization provided. Reminder of workflow to refer to PHC care coordination, ECM and CS services.  ECM and CS utilization provided. Reminder of workflow to refer to PHC care coordination, ECM and CS services.	Provided an overview of SABIRT services indicating referrals made to county services.  Provided an overview of SABIRT services indicating referrals made to county services.	Provided an overview of SABIRT services indicating referrals made to county services.  Discussed potential for HIE use in 2025. Shared new plan data feed file from DHCS including SUD for the first time in November.	Policy ADM52 was presented and provided to counties.  Policy ADM52 was presented and provided to counties.	Shared workflows for SUD, validating process and ensuring counties have insight into how calls are supported through warm handoff (when appropriate)  Discussed HSAG strategy for PMV related to identification of members included in data pull.	Highlighted members who received SUD, CS, and ECM services and most utilized benefits. Indicates where engagement activities are working, most specifically through our SUD programs with full continuums.  Counties would like transportation information to share with members when determined to be a barrier to care, specifically with out of county referrals.
N/A	IHSS: Local Government Agencies: In-Home Supportive Services	No	N/A	544	Partnership HealthPlan of California	Colusa	2024	County of Colusa	No	Not applicable							
N/A	CW: Local Government Agencies/Social Services Departments: Social Services and Child Welfare	No	N/A	544	Partnership HealthPlan of California	Colusa	2024	County of Colusa	No	Not applicable							
10/7/2024	RC: Regional Centers	No	N/A	544	Partnership HealthPlan of California	Colusa	2024	Alta California Regional Centers	No	Not applicable	Partnership: Brigid Gast (Senior Director of Care Management), Cassia Martinez ( Manager of CC), Danielle Lewis (Administrative Assistant I), Jocelle Fresno-Lee (Supervisor of Case Mgmt.), Nadyne Bergerson (Supervisor of Case Mgmt), Sarah Wilson(Manager of CC) ACRC: Camelia Houston, Faye Tait, Jennifer Bloom, Kizi Smith, T. Brown, J. Xiong	Parties discussed if there would be different policies for MOU. No different policies or procedures, and no changes to MOU required.	No changes to MOU required. Transportation referrals discussed.	There were no concerns of duplication raised during the meeting; therefore, no resolutions were required.	There were no disputes or disagreements raised during the meeting; therefore, no resolutions were required.	MCP and Regional Center discussed collaboration on Transportation. No changes to MOU required.	MCP and Regional Center discussed Supported Decision Making law and omplications to members and regional centers. No changes to MOU required.
N/A	WIC: Local Health Departments/WIC	No	N/A	544	Partnership HealthPlan of California	Colusa	2024	Not applicable	Not applicable	Not applicable							
N/A	TCM: Local Government Agencies: Targeted Case Management	No	N/A	544	Partnership HealthPlan of California	Colusa	2024	County of Colusa	No	Not applicable							
N/A	WCM: Whole Child Model	No	N/A	544	Partnership HealthPlan of California	Colusa	2024	County of Colusa	No	Not applicable							

MOU Effective Date	MOU Type	Combined MOU	Description of Combined MOU	Plan Code	Plan Name (auto-populates)	County (auto-populates)	Reporting Year	Other Party Organization & Name	Multi-Party MOU	Description of Multi-Party MOU	Meeting Attendees	Topic: Care Coordination	Topic: Referrals	Topic: Strategies to Avoid	Topic: Dispute Resolution	Topic: Collaboration	Topic: Member Engagement
N/A	LHD: Local Health Departments	No	N/A	523	Partnership HealthPlan of California	Del Norte	2024	County of Del Norte, Department of Health and Human Services	No	Not applicable							
12/10/2024	SMHS: Local Government Agencies/Social Services Departments: Specialty Mental Health Services	No	N/A	523	Partnership HealthPlan of California	Del Norte	2024	County of Del Norte, Department of Health and Human Services	No	Not applicable	Shiann Hogan (Invited) Ranell Brown (Invited)	Carelon Behavioral Health provided info and presentation of how referrals are processed. Sac Valley MedShare provided update on county participation and Continuity of Care Documents. Discussed county participation.	Carelon Behavioral Health provided data on how members are screened, referrals, raw data / breakdown of quantities by county, and penetration rates. Closed Loop Tracker county participation discussed.	SacValley MedShare discussed Continuity of Care Document to members' care is visible. Closed Loop Tracker discussed to ensure members are being seen. Partnership to follow up with members.	MOU county completion progress information was shared.	Discussed Closed Loop Referral Tracking with counties. Provided info on which county's trackers are up to date, needing info, etc. Discussed importance of updated trackers for Partnership to accurately follow up with members. Sac Valley MedShare provided info on county progress. SVMS is getting CCDs (Continuity of Care Document) from EMRs. Counties can see integrated records. MOU county completion progress information was shared.	Discussed SB (Senate Bill) 1019 to develop the outreach and education plan for NSMHS. Discussed with counties helpful ways to inform about NSMHS. Asked counties to advise Partnership of any upcoming events to attend or have handouts. Carelon Behavioral Health provided data on member preference of telehealth vs. face-to-face.
N/A	DMC-SP: Local Government Agencies/County Behavioral Health Departments: Alcohol and	No	N/A	523	Partnership HealthPlan of California	Del Norte	2024	County of Del Norte, Department of Health and Human Services	No	Not applicable							
N/A	IHSS: Local Government Agencies: In-Home Supportive Services	No	N/A	523	Partnership HealthPlan of California	Del Norte	2024	County of Del Norte, Department of Health and Human Services	No	Not applicable							
N/A	CW: Local Government Agencies/Social Services Departments: Social Services and	No	N/A	523	Partnership HealthPlan of California	Del Norte	2024	County of Del Norte, Department of Health and Human Services	No	Not applicable							
N/A	RC: Regional Centers	No	N/A	523	Partnership HealthPlan of California	Del Norte	2024	Redwood Coast Regional Center	No	Not applicable							
N/A	WIC: Local Health Departments/WIC	No	N/A	523	Partnership HealthPlan of California	Del Norte	2024	County of Del Norte, Department of Health and Human Services	No	Not applicable							
N/A	TCM: Local Government Agencies: Targeted Case Management	No	N/A	523	Partnership HealthPlan of California	Del Norte	2024	Not applicable	No	Not applicable							
N/A	WCM: Whole Child Model	No	N/A	523	Partnership HealthPlan of California	Del Norte	2024	County of Del Norte, Department of Health and Human Services	No	Not applicable							

MOU Effective Date	MOU Type	Combined MOU	Description of Combined MOU	Plan Code	Plan Name (auto-populates)	County (auto-populates)	Reporting Year	Other Party Organization & Name	Multi-Party MOU	Description of Multi-Party MOU	Meeting Attendees	Topic: Care Coordination	Topic: Referrals	Topic: Strategies to Avoid Duplication of Services	Topic: Dispute Resolution	Topic: Collaboration	Topic: Member Engagement
N/A	LHD: Local Health Departments	No	N/A	545	Partnership HealthPlan of California	Glenn	2024	County of Glenn	No	Not applicable							
6/27/2024	SMHS: Local Government Agencies/Social Services Departments: Specialty Mental Health Services	No	N/A	545	Partnership HealthPlan of California	Glenn	2024	County of Glenn	No	Not applicable	Joe Hallett  Joe Hallett (Invited)	Carelon Behavioral Health provided info and presentation of how referrals are processed. Sac Valley MedShare provided update on county participation and Continuity of Care Documents. Discussed county participation.  Carelon Behavioral Health provided info and presentation of how referrals are processed. Sac Valley MedShare provided update on county participation and Continuity of Care Documents. Discussed county participation.	Carelon Behavioral Health provided data on how members are screened, referrals, raw data / breakdown of quantities by county, and penetration rates. Closed Loop Tracker county participation discussed. Ad hoc meetings offered to counties.  Carelon Behavioral Health provided data on how members are screened, referrals, raw data / breakdown of quantities by county, and penetration rates. Closed Loop Tracker county participation discussed.	Closed Loop Tracker discussed to ensure members are being seen.  SacValley MedShare discussed Continuity of Care Document to members' care is visible. Closed Loop Tracker discussed to ensure members are being seen. Partnership to follow up with members.	MOU county completion progress information was shared.  MOU county completion progress information was shared.	Discussed Closed Loop Referral Tracking with counties. Provided info on which county's trackers are up to date, needing info, etc. Discussed importance of updated trackers for Partnership to accurately follow up with members. Sac Valley MedShare provided info on county progress. SVMS is getting CCDs (Continuity of Care Document) from EMRs. Counties can see integrated records. MOU county completion progress information was shared.  Discussed Closed Loop Referral Tracking with counties. Provided info on which county's trackers are up to date, needing info, etc. Discussed importance of updated trackers for Partnership to accurately follow up with members. Sac Valley MedShare provided info on county progress. SVMS is getting CCDs (Continuity of Care Document) from EMRs.	MOU county completion progress information was shared. Carelon Behavioral Health provided data on member engagement and utilization by county, age, etc.  Discussed SB (Senate Bill) 1019 to develop the outreach and education plan for NSMHS. Discussed with counties helpful ways to inform about NSMHS. Asked counties to advise Partnership of any upcoming events to attend or have handouts. Carelon Behavioral Health provided data on member preference of telehealth vs. face-to-face.
7/10/2024	DMC-SP: Local Government Agencies/County Behavioral Health Departments: Alcohol and Substance Use Disorder treatment services, DMC State Plan	No	N/A	545	Partnership HealthPlan of California	Glenn	2024	County of Glenn	No	Not applicable	Joe Hallett Eloise Jones  Joe Hallett Eloise Jones	ECM and CS utilization provided. Reminder of workflow to refer to PHC care coordination, ECM and CS services.  ECM and CS utilization provided. Reminder of workflow to refer to PHC care coordination, ECM and CS services.	Provided an overview of SABIRT services indicating referrals made to county services.  Provided an overview of SABIRT services indicating referrals made to county services.	Provided an overview of SABIRT services indicating referrals made to county services.  Discussed potential for HIE use in 2025. Shared new plan data feed file from DHCS including SUD for the first time in November.	Policy ADM52 was presented and provided to counties.  Policy ADM52 was presented and provided to counties.	Shared workflows for SUD, validating process and ensuring counties have insight into how calls are supported through warm handoff (when appropriate)  Discussed HSAG strategy for PMV related to identification of members included in data pull.	Highlighted members who received SUD, CS, and ECM services and most utilized benefits. Indicates where engagement activities are working, most specifically through our SUD programs with full continuums. Counties would like transportation information to share with members when determined to be a barrier to care, specifically with out of county referrals.
N/A	IHSS: Local Government Agencies: In-Home Supportive Services	No	N/A	545	Partnership HealthPlan of California	Glenn	2024	County of Glenn	No	Not applicable							
N/A	CW: Local Government Agencies/Social Services Departments: Social Services and Child Welfare	No	N/A	545	Partnership HealthPlan of California	Glenn	2024	County of Glenn	No	Not applicable							
N/A	RC: Regional Centers	No	N/A	545	Partnership HealthPlan of California	Glenn	2024	Far Northern Regional Center	No	Not applicable							
N/A	WIC: Local Health Departments/WIC	No	N/A	545	Partnership HealthPlan of California	Glenn	2024	County of Glenn	No	Not applicable							
N/A	TCM: Local Government Agencies: Targeted Case Management	No	N/A	545	Partnership HealthPlan of California	Glenn	2024	Not applicable	No	Not applicable							
N/A	WCM: Whole Child Model	No	N/A	545	Partnership HealthPlan of California	Glenn	2024	County of Glenn	No	Not applicable							



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N/A	LHD: Local Health Departments	No	N/A	517	Partnership HealthPlan of California	Humboldt	2024	Humboldt County Department of Health and Human Services	No	Not applicable							
N/A	SMHS: Local Government Agencies/Social Services Departments: Specialty Mental Health Services	No	N/A	517	Partnership HealthPlan of California	Humboldt	2024	Humboldt County Department of Health and Human Services	No	Not applicable							
11/25/2024	DMC-ODS: Local Government Agencies/County Behavioral Health Departments: Alcohol and Substance Use Disorder treatment services, DMC-ODS	No	N/A	517	Partnership HealthPlan of California	Humboldt	2024	Humboldt County Department of Health and Human Services	No	Not applicable	Deanna Bay	ECM and CS utilization provided. Reminder of workflow to refer to PHC care coordination, ECM and CS services.	Provided an overview of SABIRT services indicating referrals made to county services.	Discussed potential for HIE use in 2025. Shared new plan data feed file from DHCS including SUD for the first time in November.	Policy ADM52 was presented and provided to counties.	Discussed HSAG strategy for PMV related to identification of members included in data pull.	Counties would like transportation information to share with members when determined to be a barrier to care, specifically with out of county referrals.
N/A	IHSS: Local Government Agencies: In-Home Supportive Services	No	N/A	517	Partnership HealthPlan of California	Humboldt	2024	Humboldt County Department of Health and Human Services	No	Not applicable							
N/A	CW: Local Government Agencies/Social Services Departments: Social Services and Child Welfare	No	N/A	517	Partnership HealthPlan of California	Humboldt	2024	Humboldt County Department of Health and Human Services	No	Not applicable							
N/A	RC: Regional Centers	No	N/A	517	Partnership HealthPlan of California	Humboldt	2024	Redwood Coast Regional Center	No	Not applicable							
N/A	WIC: Local Health Departments/WIC	No	N/A	517	Partnership HealthPlan of California	Humboldt	2024	Humboldt County Department of Health and Human Services	No	Not applicable							
N/A	TCM: Local Government Agencies: Targeted Case Management	No	N/A	517	Partnership HealthPlan of California	Humboldt	2024	Humboldt County Department of Health and Human Services	No	Not applicable							
N/A	WCM: Whole Child Model	No	N/A	517	Partnership HealthPlan of California	Humboldt	2024	Humboldt County Department of Health and Human Services	No	Not applicable							

MOU Effective Date	MOU Type	Combined MOU	Description of Combined MOU	Plan Code	Plan Name (auto-populates)	County (auto-populates)	Report ing Year	Other Party Organization & Name	Multi-Party MOU	Description of Multi-Party MOU	Meeting Attendees	Topic: Care Coordination	Topic: Referrals	Topic: Strategies to Avoid Duplication of Services	Topic: Dispute Resolution	Topic: Collaboration	Topic: Member Engagement
N/A	LHD: Local Health Departments	No	N/A	511	Partnership HealthPlan of California	Lake	2024	Lake County	No	Not applicable							
3/12/2024	SMHS: Local Government Agencies/Social Services Departments: Specialty Mental Health Services	No	N/A	511	Partnership HealthPlan of California	Lake	2024	Lake County Behavioral Health Services Department	No	Not applicable	Elise Jones (Invited)  Elise Jones  Elise Jones (Invited)	SacValley MedShare introduced. All counties are working toward meeting the requirements of data sharing. County participation progress shared. Carelon Behavioral Health shared county breakdown of providers.  Carelon Behavioral Health provided info and presentation of how referrals are processed. Sac Valley MedShare provided update on county participation and Continuity of Care Documents. Discussed county participation.  Carelon Behavioral Health provided info and presentation of how referrals are processed. Sac Valley MedShare provided update on county participation and Continuity of Care Documents. Discussed county participation.	Carelon Behavioral Health provided data on how members are screened, referrals, raw data / breakdown of quantities by county, and penetration rates. Closed Loop Tracker county participation discussed.  Carelon Behavioral Health provided data on how members are screened, referrals, raw data / breakdown of quantities by county, and penetration rates. Closed Loop Tracker county participation discussed. Ad hoc meetings offered to counties.  Carelon Behavioral Health provided data on how members are screened, referrals, raw data / breakdown of quantities by county, and penetration rates. Closed Loop Tracker county participation discussed.	Closed Loop Tracker discussed to ensure members are being seen.  Closed Loop Tracker discussed to ensure members are being seen.	MOU progress shared. Partnership policies shared.  MOU county completion progress information was shared.  MOU county completion progress information was shared.	Discussed Closed Loop Referral Tracking with counties. Carelon and Partnership offered ad hoc meetings with counties for training in utilizing the tracker. Sac Valley MedShare introduced and shared county set-up progress. MOU county completion progress information was shared.  Discussed Closed Loop Referral Tracking with counties. Provided info on which county's trackers are up to date, needing info, etc. Discussed importance of updated trackers for Partnership to accurately follow up with members. Sac Valley MedShare provided info on county progress. SVMS is getting CCDs (Continuity of Care Document) from EMRs. Counties can see integrated records. MOU county completion progress information was shared.  Discussed Closed Loop Referral Tracking with counties. Provided info on which county's trackers are up to date, needing info, etc. Discussed importance of updated trackers for Partnership to accurately follow up with members. Sac Valley MedShare provided info on county progress. SVMS is getting CCDs (Continuity of Care Document) from EMRs. Counties can see integrated records. MOU county completion progress information was shared.	Carelon Behavioral Health was introduced. SOP was created for screening tool. Utilizer data was shared. Counties invited to share ideas.  MOU county completion progress information was shared. Carelon Behavioral Health provided data on member engagement and utilization by county, age, etc.  Discussed SB (Senate Bill) 1019 to develop the outreach and education plan for NSMHS. Discussed with counties helpful ways to inform about NSMHS. Asked counties to advise Partnership of any upcoming events to attend or have handouts. Carelon Behavioral Health provided data on member preference of telehealth vs. face-to-face.
5/9/2024	DMC-ODS: Local Government Agencies/County Behavioral Health Departments: Alcohol and Substance Use Disorder treatment services, DMC-ODS	No	N/A	511	Partnership HealthPlan of California	Lake	2024	Lake County Behavioral Health Services Department	No	Not applicable	Elise Jones April Giambra  Elise Jones April Giambra  Elise Jones April Giambra	Reviewed Policies & Procedures • MCUP3101: Screening and Treatment for Substance Use Disorder • MPCP2017: Scope of Primary Care – Behavioral Health and Indicators for Referral Guidelines • MCCP2032 CalAIM ECM • MCUP3142 Community Supports  ECM and CS utilization provided. Reminder of workflow to refer to PHC care coordination, ECM and CS services.  ECM and CS utilization provided. Reminder of workflow to refer to PHC care coordination, ECM and CS services.	Provided an overview of SABIRT services indicating referrals made to county services.  Provided an overview of SABIRT services indicating referrals made to county services.  Provided an overview of SABIRT services indicating referrals made to county services.	Provided an overview of SABIRT services indicating referrals made to county services.  Provided an overview of SABIRT services indicating referrals made to county services.  Discussed potential for HIE use in 2025.  Shared new plan data feed file from DHCS including SUD for the first time in November.	Policy ADM52 was presented and provided to counties.  Policy ADM52 was presented and provided to counties.  Policy ADM52 was presented and provided to counties.	Shared workflows for SUD, validating process and ensuring counties have insight into how calls are supported through warm handoff (when appropriate)  Shared workflows for SUD, validating process and ensuring counties have insight into how calls are supported through warm handoff (when appropriate)  Discussed HSAG strategy for PMV related to identification of members included in data pull.	Shared referral channels for SUD, ECM, CS. Validated referral pathways and responded to inquiries to improve member experience.  Highlighted members who received SUD, CS, and ECM services and most utilized benefits. Indicates where engagement activities are working, most specifically through our SUD programs with full continuums.  Counties would like transportation information to share with members when determined to be a barrier to care, specifically with out of county referrals.
N/A	IHSS: Local Government Agencies: In-Home Supportive Services	No	N/A	511	Partnership HealthPlan of California	Lake	2024	Lake County Health Services Department	No	Not applicable							
N/A	CW: Local Government Agencies/Social Services Departments: Social Services and Child Welfare	No	N/A	511	Partnership HealthPlan of California	Lake	2024	Lake County Department of Social Services (LCDSS)	No	Not applicable							
N/A	RC: Regional Centers	No	N/A	511	Partnership HealthPlan of California	Lake	2024	Redwood Coast Regional Center	No	Not applicable							
N/A	WIC: Local Health Departments/WIC	No	N/A	511	Partnership HealthPlan of California	Lake	2024	Not Applicable	No	Not applicable							
N/A	TCM: Local Government Agencies: Targeted Case Management	No	N/A	511	Partnership HealthPlan of California	Lake	2024	Lake County	No	Not applicable							
N/A	WCM: Whole Child Model	No	N/A	511	Partnership HealthPlan of California	Lake	2024	Lake County	No	Not applicable							





MOU Effective Date	MOU Type	Combined MOU	Description of Combined MOU	Plan Code	Plan Name (auto-populates)	County (auto-populates)	Reporting Year	Other Party Organization & Name	Multi-Party MOU	Description of Multi-Party MOU	Meeting Attendees	Topic: Care Coordination	Topic: Referrals	Topic: Strategies to Avoid Duplication of	Topic: Dispute Resolution	Topic: Collaboration	Topic: Member Engagement
10/24/2024	LHD: Local Health Departments	No	N/A	512	Partnership HealthPlan of California	Mendocino	2024	County of Mendocino	No	Not applicable	Invited: Angle Slater & Katheryn Reihl (Mendocino)	Invited	Invited	Invited	Invited	Invited	Invited
6/3/2024	SMHS: Local Government Agencies/Social Services Departments: Specialty Mental Health Services	No	N/A	512	Partnership HealthPlan of California	Mendocino	2024	Mendocino County Behavioral Health and Recovery Services	No	Not applicable	Jenine Miller Jenine Miller	Carelon Behavioral Health provided info and presentation of how referrals are processed. Sac Valley MedShare provided update on county participation and Continuity of Care Documents. Discussed county participation.  Carelon Behavioral Health provided info and presentation of how referrals are processed. Sac Valley MedShare provided update on county participation and Continuity of Care Documents. Discussed county participation.	Carelon Behavioral Health provided data on how members are screened, referrals, raw data / breakdown of quantities by county, and penetration rates. Closed Loop Tracker county participation discussed. Ad hoc meetings offered to counties.  Carelon Behavioral Health provided data on how members are screened, referrals, raw data / breakdown of quantities by county, and penetration rates. Closed Loop Tracker county participation discussed.	Closed Loop Tracker discussed to ensure members are being seen.  SacValley MedShare discussed Continuity of Care Document to members' care is visible. Closed Loop Tracker discussed to ensure members are being seen. Partnership to follow up with members.	MOU county completion progress information was shared.  MOU county completion progress information was shared.	Discussed Closed Loop Referral Tracking with counties. Provided info on which county's trackers are up to date, needing info, etc. Discussed importance of updated trackers for Partnership to accurately follow up with members. Sac Valley MedShare provided info on county progress. SVMS is getting CCDs (Continuity of Care Document) from EMRs. Counties can see integrated records. MOU county completion progress information was shared.  Discussed Closed Loop Referral Tracking with counties. Provided info on which county's trackers are up to date, needing info, etc. Discussed importance of updated trackers for Partnership to accurately follow up with members. Sac Valley MedShare provided info on county progress. SVMS is getting CCDs (Continuity of Care Document) from EMRs. Counties can see integrated records. MOU county completion progress information was shared.	MOU county completion progress information was shared. Carelon Behavioral Health provided data on member engagement and utilization by county, age, etc.  Discussed SB (Senate Bill) 1019 to develop the outreach and education plan for NSMHS. Discussed with counties helpful ways to inform about NSMHS. Asked counties to advise Partnership of any upcoming events to attend or have handouts. Carelon Behavioral Health provided data on member preference of telehealth vs. face-to-face.
7/10/2024	DMC-ODS: Local Government Agencies/County Behavioral Health Departments: Alcohol and Substance Use Disorder treatment services, DMC-ODS	No	N/A	512	Partnership HealthPlan of California	Mendocino	2024	Mendocino County Behavioral Health and Recovery Services	No	Not applicable	Jenine Miller Jenine Miller	ECM and CS utilization provided. Reminder of workflow to refer to PHC care coordination, ECM and CS services.  ECM and CS utilization provided. Reminder of workflow to refer to PHC care coordination, ECM and CS services.	Provided an overview of SABIRT services indicating referrals made to county services.  Provided an overview of SABIRT services indicating referrals made to county services.	Provided an overview of SABIRT services indicating referrals made to county services.  Discussed potential for HIE use in 2025. Shared new plan data feed file from DHCS including SUD for the first time in November.	Policy ADM52 was presented and provided to counties.  Policy ADM52 was presented and provided to counties.	Shared workflows for SUD, validating process and ensuring counties have insight into how calls are supported through warm handoff (when appropriate)  Discussed HSAG strategy for PMV related to identification of members included in data pull.	Highlighted members who received SUD, CS, and ECM services and most utilized benefits. Indicates where engagement activities are working, most specifically through our SUD programs with full continuums.  Counties would like transportation information to share with members when determined to be a barrier to care, specifically with out of county referrals.
N/A	IHSS: Local Government Agencies: In-Home Supportive Services	No	N/A	512	Partnership HealthPlan of California	Mendocino	2024	County of Mendocino	No	Not applicable							
N/A	CW: Local Government Agencies/Social Services Departments: Social Services and Child Welfare	No	N/A	512	Partnership HealthPlan of California	Mendocino	2024	County of Mendocino	No	Not applicable							
N/A	RC: Regional Centers	No	N/A	512	Partnership HealthPlan of California	Mendocino	2024	Redwood Coast Regional Center	No	Not applicable							



MOU Effective Date	MOU Type	Combined MOU	Description of Combined MOU	Plan Code	Plan Name (auto-populates)	County (auto-populates)	Reporting Year	Other Party Organization & Name	Multi-Party MOU	Description of Multi-Party MOU	Meeting Attendees	Topic: Care Coordination	Topic: Referrals	Topic: Strategies to Avoid Duplication of Services	Topic: Dispute Resolution	Topic: Collaboration	Topic: Member Engagement
8/27/2024	LHD: Local Health Departments	No	N/A	519	Partnership HealthPlan of California	Modoc	2024	Modoc County Public Health	No	Not applicable	Invited: Tanya Schulz & Cheyanne O'Sullivan (Modoc)						
5/23/2024	SMHS: Local Government Agencies/Social Services Departments: Specialty Mental Health Services	No	N/A	519	Partnership HealthPlan of California	Modoc	2024	Modoc County Behavioral Health	No	Not applicable	Stacy Sphar (Invited) Michael Traverso (Invited) Stacy Sphar (Invited) Michael Traverso (Invited)	SacValley MedShare introduced. All counties are working toward meeting the requirements of data sharing. County participation progress shared. Carelon Behavioral Health shared county breakdown of providers.  Carelon Behavioral Health provided info and presentation of how referrals are processed. Sac Valley MedShare provided update on county participation and Continuity of Care Documents. Discussed county participation.  Carelon Behavioral Health provided info and presentation of how referrals are processed. Sac Valley MedShare provided update on county participation and Continuity of Care Documents. Discussed county participation.	Carelon Behavioral Health provided data on how members are screened, referrals, raw data / breakdown of quantities by county, and penetration rates. Closed Loop Tracker county participation discussed.  Carelon Behavioral Health provided data on how members are screened, referrals, raw data / breakdown of quantities by county, and penetration rates. Closed Loop Tracker county participation discussed. Ad hoc meetings offered to counties.  Carelon Behavioral Health provided data on how members are screened, referrals, raw data / breakdown of quantities by county, and penetration rates. Closed Loop Tracker county participation discussed.	Closed Loop Tracker discussed to ensure members are being seen.  Closed Loop Tracker discussed to ensure members are being seen.  SacValley MedShare discussed Continuity of Care Document to members' care is visible. Closed Loop Tracker discussed to ensure members are being seen. Partnership to follow up with members.	MOU progress shared. Partnership policies shared.  MOU county completion progress information was shared.  MOU county completion progress information was shared.	Discussed Closed Loop Referral Tracking with counties. Carelon and Partnership offered ad hoc meetings with counties for training in utilizing the tracker. Sac Valley MedShare introduced and shared county set-up progress. MOU county completion progress information was shared.  Discussed Closed Loop Referral Tracking with counties. Provided info on which county's trackers are up to date, needing info, etc. Discussed importance of updated trackers for Partnership to accurately follow up with members. Sac Valley MedShare provided info on county progress. SVMS is getting CCDs (Continuity of Care Document) from EMRs. Counties can see integrated records. MOU county completion progress information was shared.  Discussed Closed Loop Referral Tracking with counties. Provided info on which county's trackers are up to date, needing info, etc. Discussed importance of updated trackers for Partnership to accurately follow up with members. Sac Valley MedShare provided info on county progress. SVMS is getting CCDs (Continuity of Care Document) from EMRs. Counties can see integrated records. MOU county completion progress information was shared.	Carelon Behavioral Health was introduced. SOP was created for screening tool. Utilizer data was shared. Counties invited to share ideas.  MOU county completion progress information was shared. Carelon Behavioral Health provided data on member engagement and utilization by county, age, etc.  Discussed SB (Senate Bill) 1019 to develop the outreach and education plan for NSMHS. Discussed with counties helpful ways to inform about NSMHS. Asked counties to advise Partnership of any upcoming events to attend or have handouts. Carelon Behavioral Health provided data on member preference of telehealth vs. face-to-face.
5/23/2204	DMC-ODS: Local Government Agencies/County Behavioral Health Departments: Alcohol and Substance Use Disorder treatment services, DMC-ODS	No	N/A	519	Partnership HealthPlan of California	Modoc	2024	Modoc County Behavioral Health	No	Not applicable	Dolores Navarro Turner Dolores Navarro Turner Dolores Navarro Turner	Reviewed Policies & Procedures • MCUP3101: Screening and Treatment for Substance Use Disorder • MPCP2017: Scope of Primary Care – Behavioral Health and Indications for Referral Guidelines • MCCP2032 CalAIM ECM • MCUP3142 Community Supports  ECM and CS utilization provided. Reminder of workflow to refer to PHC care coordination, ECM and CS services.  ECM and CS utilization provided. Reminder of workflow to refer to PHC care coordination, ECM and CS services.	Provided an overview of SABIRT services indicating referrals made to county services.  Provided an overview of SABIRT services indicating referrals made to county services.  Provided an overview of SABIRT services indicating referrals made to county services.	Provided an overview of SABIRT services indicating referrals made to county services.  Provided an overview of SABIRT services indicating referrals made to county services.  Discussed potential for HIE use in 2025. Shared new plan data feed file from DHCS including SUD for the first time in November.	Policy ADM52 was presented and provided to counties.  Policy ADM52 was presented and provided to counties.  Policy ADM52 was presented and provided to counties.	Shared workflows for SUD, validating process and ensuring counties have insight into how calls are supported through warm handoff (when appropriate)  Shared workflows for SUD, validating process and ensuring counties have insight into how calls are supported through warm handoff (when appropriate)  Discussed HSAG strategy for PMV related to identification of members included in data pull.	Shared referral channels for SUD, ECM, CS. Validated referral pathways and responded to inquiries to improve member experience.  Highlighted members who received SUD, CS, and ECM services and most utilized benefits. Indicates where engagement activities are working, most specifically through our SUD programs with full continuums.  Counties would like transportation information to share with members when determined to be a barrier to care, specifically with out of county referrals.
N/A	IHSS: Local Government Agencies: In-Home Supportive Services	No	N/A	519	Partnership HealthPlan of California	Modoc	2024	Modoc County Department of Social Services	No	Not applicable							
N/A	CW: Local Government Agencies/Social Services Departments: Social Services and Child Welfare	No	N/A	519	Partnership HealthPlan of California	Modoc	2024	Modoc County Department of Social Services	No	Not applicable							
N/A	RC: Regional Centers	No	N/A	519	Partnership HealthPlan of California	Modoc	2024	Far Northern Regional Center	No	Not applicable							
N/A	WIC: Local Health Departments/WIC	No	N/A	519	Partnership HealthPlan of California	Modoc	2024	Not Applicable	No	Not applicable							
N/A	TCM: Local Government Agencies: Targeted Case Management	No	N/A	519	Partnership HealthPlan of California	Modoc	2024	Not Applicable	No	Not applicable							
N/A	WCM: Whole Child Model	No	N/A	519	Partnership HealthPlan of California	Modoc	2024	Modoc County Department of Social Services	No	Not applicable							

MOU Effective Date	MOU Type	Combined MOU	Description of Combined MOU	Plan Code	Plan Name (auto-populates)	County (auto-populates)	Reporting Year	Other Party Organization & Name	Multi-Party MOU	Description of Multi-Party MOU	Meeting Attendees	Topic: Care Coordination	Topic: Referrals	Topic: Strategies to Avoid Duplication of Services	Topic: Dispute Resolution	Topic: Collaboration	Topic: Member Engagement
N/A	LHD: Local Health Departments	No	N/A	507	Partnership HealthPlan of California	Napa	2024	Napa County Health and Human Services Agency	No	Not applicable							
N/A	SMHS: Local Government Agencies/Social Services Departments: Specialty Mental Health Services	No	N/A	507	Partnership HealthPlan of California	Napa	2024	Napa County Health and Human Services Agency	No	Not applicable							
N/A	DMC-ODS: Local Government Agencies/County Behavioral Health Departments: Alcohol and Substance Use Disorder treatment services, DMC-ODS	No	N/A	507	Partnership HealthPlan of California	Napa	2024	Napa County Health and Human Services Agency	No	Not applicable							
N/A	IHSS: Local Government Agencies: In-Home Supportive Services	No	N/A	507	Partnership HealthPlan of California	Napa	2024	Napa County Health and Human Services Agency	No	Not applicable							
N/A	CW: Local Government Agencies/Social Services Departments: Social Services and Child Welfare	No	N/A	507	Partnership HealthPlan of California	Napa	2024	Napa County Health and Human Services Agency	No	Not applicable							
N/A	RC: Regional Centers	No	N/A	507	Partnership HealthPlan of California	Napa	2024	North Bay Regional Center	No	Not applicable							
N/A	WIC: Local Health Departments/WIC	No	N/A	507	Partnership HealthPlan of California	Napa	2024	Napa County Health and Human Services Agency	No	Not applicable							
N/A	TCM: Local Government Agencies: Targeted Case Management	No	N/A	507	Partnership HealthPlan of California	Napa	2024	Napa County Health and Human Services Agency	No	Not applicable							
N/A	WCM: Whole Child Model	No	N/A	507	Partnership HealthPlan of California	Napa	2024	Napa County Health and Human Services Agency	No	Not applicable							



MOU Effective Date	MOU Type	Combined MOU	Description of Combined MOU	Plan Code	Plan Name (auto-populates)	County (auto-populates)	Reporting Year	Other Party Organization & Name	Multi-Party MOU	Description of Multi-Party MOU	Meeting Attendees	Topic: Care Coordination	Topic: Referrals	Topic: Strategies to Avoid Duplication of Services	Topic: Dispute Resolution	Topic: Collaboration	Topic: Member Engagement
N/A	LHD: Local Health Departments	No	N/A	546	Partnership HealthPlan of California	Nevada	2024	County of Nevada	No	Not applicable							
6/13/2024	SMHS: Local Government Agencies/Social Services Departments: Specialty Mental Health Services	No	N/A	546	Partnership HealthPlan of California	Nevada	2024	County of Nevada	No	Not applicable	Phebe Bell (Invited)  Phebe Bell	Carelon Behavioral Health provided info and presentation of how referrals are processed. Sac Valley MedShare provided update on county participation and Continuity of Care Documents. Discussed county participation.  Carelon Behavioral Health provided info and presentation of how referrals are processed. Sac Valley MedShare provided update on county participation and Continuity of Care Documents. Discussed county participation.	Carelon Behavioral Health provided data on how members are screened, referrals, raw data / breakdown of quantities by county, and penetration rates. Closed Loop Tracker county participation discussed. Ad hoc meetings offered to counties.  Carelon Behavioral Health provided data on how members are screened, referrals, raw data / breakdown of quantities by county, and penetration rates. Closed Loop Tracker county participation discussed.	Closed Loop Tracker discussed to ensure members are being seen.  SacValley MedShare discussed Continuity of Care Document to members' care is visible. Closed Loop Tracker discussed to ensure members are being seen. Partnership to follow up with members.	MOU county completion progress information was shared.  MOU county completion progress information was shared.	Discussed Closed Loop Referral Tracking with counties. Provided info on which county's trackers are up to date, needing info, etc. Discussed importance of updated trackers for Partnership to accurately follow up with members. Sac Valley MedShare provided info on county progress. SVMS is getting CCDs (Continuity of Care Document) from EMRs. Counties can see integrated records. MOU county completion progress information was shared.  Discussed Closed Loop Referral Tracking with counties. Provided info on which county's trackers are up to date, needing info, etc. Discussed importance of updated trackers for Partnership to accurately follow up with members. Sac Valley MedShare provided info on county progress. SVMS is getting CCDs (Continuity of Care Document) from EMRs. Counties can see integrated records. MOU county completion progress information was shared.	MOU county completion progress information was shared. Carelon Behavioral Health provided data on member engagement and utilization by county, age, etc.  Discussed SB (Senate Bill) 1019 to develop the outreach and education plan for NSMHS. Discussed with counties helpful ways to inform about NSMHS. Asked counties to advise Partnership of any upcoming events to attend or have handouts. Carelon Behavioral Health provided data on member preference of telehealth vs. face-to-face.
6/13/2024	DMC-ODS: Local Government Agencies/County Behavioral Health Departments: Alcohol and Substance Use Disorder treatment services, DMC-ODS	No	N/A	546	Partnership HealthPlan of California	Nevada	2024	County of Nevada	No	Not applicable	Kelly Miner-Gann  Kelly Miner-Gann	ECM and CS utilization provided. Reminder of workflow to refer to PHC care coordination, ECM and CS services.  ECM and CS utilization provided. Reminder of workflow to refer to PHC care coordination, ECM and CS services.	Provided an overview of SABIRT services indicating referrals made to county services.  Provided an overview of SABIRT services indicating referrals made to county services.	Provided an overview of SABIRT services indicating referrals made to county services.  Discussed potential for HIE use in 2025. Shared new plan data feed file from DHCS including SUD for the first time in November.	Policy ADM52 was presented and provided to counties.  Policy ADM52 was presented and provided to counties.	Shared workflows for SUD, validating process and ensuring counties have insight into how calls are supported through warm handoff (when appropriate)  Discussed HSAG strategy for PMV related to identification of members included in data pull.	Highlighted members who received SUD, CS, and ECM services and most utilized benefits. Indicates where engagement activities are working, most specifically through our SUD programs with full continuums.  Counties would like transportation information to share with members when determined to be a barrier to care, specifically with out of county referrals.
N/A	IHSS: Local Government Agencies: In-Home Supportive Services	No	N/A	546	Partnership HealthPlan of California	Nevada	2024	County of Nevada	No	Not applicable							
N/A	CW: Local Government Agencies/Social Services Departments: Social Services and Child Welfare	No	N/A	546	Partnership HealthPlan of California	Nevada	2024	County of Nevada	No	Not applicable							
10/7/2024	RC: Regional Centers	No	N/A	546	Partnership HealthPlan of California	Nevada	2024	Alta California Regional Centers	No	Not applicable	Partnership: Brigid Gast (Senior Director of Care Management), Cassia Martinez ( Manager of CC), Danielle Lewis (Administrative Assistant I), Jocelle Fresno-Lee (Supervisor of Case Mgmt.), Nadyne Bergerson (Supervisor of Case Mgmt), Sarah Wilson(Manager of CC) ACRC: Camelia Houston, Faye Tait, Jennifer Bloom, Kizi Smith, T. Brown, J. Xiong	Parties discussed if there would be different policies for MOU. No different policies or procedures, and no changes to MOU required.	No changes to MOU required. Transportation referrals discussed.	There were no concerns of duplication raised during the meeting; therefore, no resolutions were required.	There were no disputes or disagreements raised during the meeting; therefore, no resolutions were required.	MCP and Regional Center discussed collaboration on Transportation. No changes to MOU required.	MCP and Regional Center discussed Supported Decision Making law and omplications to members and regional centers. No changes to MOU required.
N/A	WIC: Local Health Departments/WIC	No	N/A	546	Partnership HealthPlan of California	Nevada	2024	County of Nevada	No	Not applicable							
N/A	TCM: Local Government Agencies: Targeted Case Management	No	N/A	546	Partnership HealthPlan of California	Nevada	2024	Not Applicable	No	Not applicable							
N/A	WCM: Whole Child Model	No	N/A	546	Partnership HealthPlan of California	Nevada	2024	County of Nevada	No	Not applicable							



MOU Effective Date	MOU Type	Combined MOU	Description of Combined MOU	Plan Code	Plan Name (auto-populates)	County (auto-populates)	Reporting Year	Other Party Organization & Name	Multi-Party MOU	Description of Multi-Party MOU	Meeting Attendees	Topic: Care Coordination	Topic: Referrals	Topic: Strategies to Avoid Duplication of Services	Topic: Dispute Resolution	Topic: Collaboration	Topic: Member Engagement	
N/A	LHD: Local Health Departments	No	N/A	548	Partnership HealthPlan of California	Plumas	2024	County of Plumas	No	Not applicable								
5/9/2024	SMHS: Local Government Agencies/Social Services Departments: Specialty Mental Health Services	No	N/A	548	Partnership HealthPlan of California	Plumas	2024	County of Plumas	No	Not applicable	Sharon Sousa (Invited) Sharon Sousa (Invited) Sharon Sousa (Invited)	SacValley MedShare introduced. All counties are working toward meeting the requirements of data sharing. County participation progress shared. Carelon Behavioral Health shared county breakdown of providers.  Carelon Behavioral Health provided info and presentation of how referrals are processed. Sac Valley MedShare provided update on county participation and Continuity of Care Documents. Discussed county participation.  Carelon Behavioral Health provided info and presentation of how referrals are processed. Sac Valley MedShare provided update on county participation and Continuity of Care Documents. Discussed county participation.	Carelon Behavioral Health provided data on how members are screened, referrals, raw data / breakdown of quantities by county, and penetration rates. Closed Loop Tracker county participation discussed.  Carelon Behavioral Health provided data on how members are screened, referrals, raw data / breakdown of quantities by county, and penetration rates. Closed Loop Tracker county participation discussed. Ad hoc meetings offered to counties.  Carelon Behavioral Health provided data on how members are screened, referrals, raw data / breakdown of quantities by county, and penetration rates. Closed Loop Tracker county participation discussed.	Closed Loop Tracker discussed to ensure members are being seen.  Closed Loop Tracker discussed to ensure members are being seen.  SacValley MedShare discussed Continuity of Care Document to members' care is visible. Closed Loop Tracker discussed to ensure members are being seen. Partnership to follow up with members.	MOU progress shared. Partnership policies shared.  MOU county completion progress information was shared.  MOU county completion progress information was shared.	Discussed Closed Loop Referral Tracking with counties. Carelon and Partnership offered ad hoc meetings with counties for training in utilizing the tracker. Sac Valley MedShare introduced and shared county set-up progress. MOU county completion progress information was shared.  Discussed Closed Loop Referral Tracking with counties. Provided info on which county's trackers are up to date, needing info, etc. Discussed importance of updated trackers for Partnership to accurately follow up with members. Sac Valley MedShare provided info on county progress. SVMS is getting CCDs (Continuity of Care Document) from EMRs. Counties can see integrated records. MOU county completion progress information was shared.	Discussed Closed Loop Referral Tracking with counties. Provided info on which county's trackers are up to date, needing info, etc. Discussed importance of updated trackers for Partnership to accurately follow up with members. Sac Valley MedShare provided info on county progress. SVMS is getting CCDs (Continuity of Care Document) from EMRs. Counties can see integrated records. MOU county completion progress information was shared.	Carelon Behavioral Health was introduced. SOP was created for screening tool. Utilizer data was shared. Counties invited to share ideas.  MOU county completion progress information was shared. Carelon Behavioral Health provided data on member engagement and utilization by county, age, etc.  Discussed SB (Senate Bill) 1019 to develop the outreach and education plan for NSMHS. Discussed with counties helpful ways to inform about NSMHS. Asked counties to advise Partnership of any upcoming events to attend or have handouts. Carelon Behavioral Health provided data on member preference of telehealth vs. face-to-face.
N/A	DMC-SP: Local Government Agencies/County Behavioral Health Departments: Alcohol and Substance Use Disorder treatment services, DMC State Plan	No	N/A	548	Partnership HealthPlan of California	Plumas	2024	County of Plumas	No	Not applicable								
N/A	IHSS: Local Government Agencies: In-Home Supportive Services	No	N/A	548	Partnership HealthPlan of California	Plumas	2024	County of Plumas	No	Not applicable								
N/A	CW: Local Government Agencies/Social Services Departments: Social Services and Child Welfare	No	N/A	548	Partnership HealthPlan of California	Plumas	2024	County of Plumas	No	Not applicable								
N/A	RC: Regional Centers	No	N/A	548	Partnership HealthPlan of California	Plumas	2024	Far Northern Regional Center	No	Not applicable								
N/A	WIC: Local Health Departments/WIC	No	N/A	548	Partnership HealthPlan of California	Plumas	2024	Not Applicable	No	Not applicable								
N/A	TCM: Local Government Agencies: Targeted Case Management	No	N/A	548	Partnership HealthPlan of California	Plumas	2024	Not Applicable	No	Not applicable								
N/A	WCM: Whole Child Model	No	N/A	548	Partnership HealthPlan of California	Plumas	2024	County of Plumas	No	Not applicable								

MOU Effective Date	MOU Type	Combined MOU	Description of Combined MOU	Plan Code	Plan Name (auto-populates)	County (auto-populates)	Reporting Year	Other Party Organization & Name	Multi-Party MOU	Description of Multi-Party MOU	Meeting Attendees	Topic: Care Coordination	Topic: Referrals	Topic: Strategies to Avoid Duplication of Services	Topic: Dispute Resolution	Topic: Collaboration	Topic: Member Engagement
N/A	LHD: Local Health Departments	No	N/A	520	Partnership HealthPlan of California	Shasta	2024	County of Shasta, through its Health and Human Services Agency, Behavioral Health and Social Services Branch	No	Not applicable							
N/A	SMHS: Local Government Agencies/Social Services Departments: Specialty Mental Health Services	No	N/A	520	Partnership HealthPlan of California	Shasta	2024	County of Shasta, through its Health and Human Services Agency, Behavioral Health and Social Services Branch	No	Not applicable							
N/A	DMC-ODS: Local Government Agencies/County Behavioral Health Departments: Alcohol and Substance Use Disorder treatment services, DMC-ODS	No	N/A	520	Partnership HealthPlan of California	Shasta	2024	County of Shasta, through its Health and Human Services Agency, Behavioral Health and Social Services Branch	No	Not applicable							
N/A	IHSS: Local Government Agencies: In-Home Supportive Services	No	N/A	520	Partnership HealthPlan of California	Shasta	2024	County of Shasta, through its Health and Human Services Agency, Behavioral Health and Social Services Branch	No	Not applicable							
N/A	CW: Local Government Agencies/Social Services Departments: Social Services and Child Welfare	No	N/A	520	Partnership HealthPlan of California	Shasta	2024	County of Shasta, through its Health and Human Services Agency, Behavioral Health and Social Services Branch	No	Not applicable							
N/A	RC: Regional Centers	No	N/A	520	Partnership HealthPlan of California	Shasta	2024	Far Northern Regional Center	No	Not applicable							
N/A	WIC: Local Health Departments/WIC	No	N/A	520	Partnership HealthPlan of California	Shasta	2024	County of Shasta, through its Health and Human Services Agency, Behavioral Health and Social Services Branch	No	Not applicable							

MOU Effective Date	MOU Type	Combined MOU	Description of Combined MOU	Plan Code	Plan Name (auto-populates)	County (auto-populates)	Reporting Year	Other Party Organization & Name	Multi-Party MOU	Description of Multi-Party MOU	Meeting Attendees	Topic: Care Coordination	Topic: Referrals	Topic: Strategies to Avoid Duplication of Services	Topic: Dispute Resolution	Topic: Collaboration	Topic: Member Engagement
N/A	TCM: Local Government Agencies: Targeted Case Management	No	N/A	520	Partnership HealthPlan of California	Shasta	2024	County of Shasta, through its Health and Human Services Agency, Behavioral Health and Social Services Branch	No	Not applicable							
N/A	WCM: Whole Child Model	No	N/A	520	Partnership HealthPlan of California	Shasta	2024	County of Shasta, through its Health and Human Services Agency, Behavioral Health and Social Services Branch	No	Not applicable							

MOU Effective Date	MOU Type	Combined MOU	Description of Combined MOU	Plan Code	Plan Name (auto-populates)	County (auto-populates)	Reporting Year	Other Party Organization & Name	Multi-Party MOU	Description of Multi-Party MOU	Meeting Attendees	Topic: Care Coordination	Topic: Referrals	Topic: Strategies to Avoid Duplication of Services	Topic: Dispute Resolution	Topic: Collaboration	Topic: Member Engagement
N/A	LHD: Local Health Departments	No	N/A	549	Partnership HealthPlan of California	Sierra	2024	County of Sierra	No	Not applicable							
N/A	SMHS: Local Government Agencies/Social Services Departments: Specialty Mental Health Services	No	N/A	549	Partnership HealthPlan of California	Sierra	2024	County of Sierra	No	Not applicable							
8/22/2024	DMC-SP: Local Government Agencies/County Behavioral Health Departments: Alcohol and Substance Use Disorder treatment services, DMC State Plan	No	N/A	549	Partnership HealthPlan of California	Sierra	2024	County of Sierra	No	Not applicable	Lea Salas (invited) Sheryll Prinz-McMillan (invited)  Lea Salas (invited) Sheryll Prinz-McMillan (invited)	ECM and CS utilization provided. Reminder of workflow to refer to PHC care coordination, ECM and CS services.  ECM and CS utilization provided. Reminder of workflow to refer to PHC care coordination, ECM and CS services.	Provided an overview of SABIRT services indicating referrals made to county services.  Provided an overview of SABIRT services indicating referrals made to county services.	Provided an overview of SABIRT services indicating referrals made to county services.  Discussed potential for HIE use in 2025. Shared new plan data feed file from DHCS including SUD for the first time in November.	Policy ADM52 was presented and provided to counties.  Policy ADM52 was presented and provided to counties.	Shared workflows for SUD, validating process and ensuring counties have insight into how calls are supported through warm handoff (when appropriate)  Discussed HSAG strategy for PMV related to identification of members included in data pull.	Highlighted members who received SUD, CS, and ECM services and most utilized benefits. Indicates where engagement activities are working, most specifically through our SUD programs with full continuums.  Counties would like transportation information to share with members when determined to be a barrier to care, specifically with out of county referrals.
N/A	IHSS: Local Government Agencies: In-Home Supportive Services	No	N/A	549	Partnership HealthPlan of California	Sierra	2024	County of Sierra	No	Not applicable							
N/A	CW: Local Government Agencies/Social Services Departments: Social Services and Child Welfare	No	N/A	549	Partnership HealthPlan of California	Sierra	2024	County of Sierra	No	Not applicable							
10/7/2024	RC: Regional Centers	No	N/A	549	Partnership HealthPlan of California	Sierra	2024	Alta California Regional Centers	No	Not applicable	Invited: Barbara Longo, Hannah Singletary, Jayson Vial, Lisa Chandler	During our quarterly meeting, we provided an update regarding which counties had invited Partnership to their ILT meetings and how that has helped the Care Coordination for those Child Welfare-involved members. We also had open discussions specific to Care Coordination, where strategies were discussed to strengthen coordination.	During our quarterly meeting, we reviewed referral data for the Child Welfare-involved youth population. We also had a space for open discussion regarding coordinating referrals and go-to contacts for Child Welfare-involved members.	During our quarterly meeting, we had an opportunity to have an open discussion regarding duplication of services. Several spoke about the successes of having a single point person to support Child Welfare-involved members so that they can get served as quickly as possible.	During our quarterly meeting, we reviewed the Child Welfare Liaison's specific responsibilities, including dispute resolution. We discussed scenarios where the Liaison supported the county and other providers in assisting Child Welfare-involved youth. We also reviewed our grievance and appeals data.	During our quarterly meeting, we provided an update regarding collaboration efforts with CWDA and a convening we organized, inviting all the Managed Care Plan Child Welfare Liaisons in California. This was a kick-off meeting to discuss what we can do collectively to help support the intent of the Child Welfare MOU and share best practices.	During our quarterly meeting, we discussed how members have been supported by Partnership and what are additional strategies that we can collectively adopt to engage with our members. This included conversations on training current and new staff on knowing resources in Partnership's network.
N/A	WIC: Local Health Departments/WIC	No	N/A	549	Partnership HealthPlan of California	Sierra	2024	County of Sierra	No	Not applicable							
N/A	TCM: Local Government Agencies: Targeted Case Management	No	N/A	549	Partnership HealthPlan of California	Sierra	2024	Not Applicable	No	Not applicable							
N/A	WCM: Whole Child Model	No	N/A	549	Partnership HealthPlan of California	Sierra	2024	County of Sierra	No	Not applicable							



MOU Effective Date	MOU Type	Combined MOU	Description of Combined MOU	Plan Code	Plan Name (auto-populates)	County (auto-populates)	Reporting Year	Other Party Organization & Name	Multi-Party MOU	Description of Multi-Party MOU	Meeting Attendees	Topic: Care Coordination	Topic: Referrals	Topic: Strategies to Avoid Duplication of Services	Topic: Dispute Resolution	Topic: Collaboration	Topic: Member Engagement
N/A	LHD: Local Health Departments	No	N/A	504	Partnership HealthPlan of California	Solano	2024	Solano County Health and Social Services	No	Not applicable							
12/4/2024	SMHS: Local Government Agencies/Social Services Departments: Specialty Mental Health Services	No	N/A	504	Partnership HealthPlan of California	Solano	2024	Solano County Health and Social Services	No	Not applicable	Emery Cowan Jen Mullane (Invited)	Carelon Behavioral Health provided info and presentation of how referrals are processed. Sac Valley MedShare provided update on county participation and Continuity of Care Documents. Discussed county participation.	Carelon Behavioral Health provided data on how members are screened, referrals, raw data / breakdown of quantities by county, and penetration rates. Closed Loop Tracker county participation discussed.	SacValley MedShare discussed Continuity of Care Document to members' care is visible. Closed Loop Tracker discussed to ensure members are being seen. Partnership to follow up with members.	MOU county completion progress information was shared.	Discussed Closed Loop Referral Tracking with counties. Provided info on which county's trackers are up to date, needing info, etc. Discussed importance of updated trackers for Partnership to accurately follow up with members. Sac Valley MedShare provided info on county progress. SVMS is getting CCDs (Continuity of Care Document) from EMRs. Counties can see integrated records. MOU county completion progress information was shared.	Discussed SB (Senate Bill) 1019 to develop the outreach and education plan for NSMHS. Discussed with counties helpful ways to inform about NSMHS. Asked counties to advise Partnership of any upcoming events to attend or have handouts. Carelon Behavioral Health provided data on member preference of telehealth vs. face-to-face.
10/9/2024	DMC-ODS: Local Government Agencies/County Behavioral Health Departments: Alcohol and Substance Use Disorder treatment services, DMC-ODS	No	N/A	504	Partnership HealthPlan of California	Solano	2024	Solano County Health and Social Services	No	Not applicable	Emery Cowan Jennifer Mullane	ECM and CS utilization provided. Reminder of workflow to refer to PHC care coordination, ECM and CS services.  ECM and CS utilization provided. Reminder of workflow to refer to PHC care coordination, ECM and CS services.	Provided an overview of SABIRT services indicating referrals made to county services.  Provided an overview of SABIRT services indicating referrals made to county services.	Provided an overview of SABIRT services indicating referrals made to county services.  Discussed potential for HIE use in 2025. Shared new plan data feed file from DHCS including SUD for the first time in November.	Policy ADM52 was presented and provided to counties.  Policy ADM52 was presented and provided to counties.	Shared workflows for SUD, validating process and ensuring counties have insight into how calls are supported through warm handoff (when appropriate)  Discussed HSAG strategy for PMV related to identification of members included in data pull.	Highlighted members who received SUD, CS, and ECM services and most utilized benefits. Indicates where engagement activities are working, most specifically through our SUD programs with full continuums.  Counties would like transportation information to share with members when determined to be a barrier to care, specifically with out of county referrals.
N/A	IHSS: Local Government Agencies: In-Home Supportive Services	No	N/A	504	Partnership HealthPlan of California	Solano	2024	Solano County Health and Social Services	No	Not applicable							
N/A	CW: Local Government Agencies/Social Services Departments: Social Services and Child Welfare	No	N/A	504	Partnership HealthPlan of California	Solano	2024	Solano County Health and Social Services	No	Not applicable							
N/A	RC: Regional Centers	No	N/A	504	Partnership HealthPlan of California	Solano	2024	North Bay Regional Center	No	Not applicable							
N/A	WIC: Local Health Departments/WIC	No	N/A	504	Partnership HealthPlan of California	Solano	2024	Solano County Health and Social Services	No	Not applicable							
N/A	TCM: Local Government Agencies: Targeted Case Management	No	N/A	504	Partnership HealthPlan of California	Solano	2024	Not Applicable	No	Not applicable							
N/A	WCM: Whole Child Model	No	N/A	504	Partnership HealthPlan of California	Solano	2024	Solano County Health and Social Services	No	Not applicable							



MOU Effective Date	MOU Type	Combined MOU	Description of Combined MOU	Plan Code	Plan Name (auto-populates)	County (auto-populates)	Reporting Year	Other Party Organization & Name	Multi-Party MOU	Description of Multi-Party MOU	Meeting Attendees	Topic: Care Coordination	Topic: Referrals	Topic: Strategies to Avoid Duplication of Services	Topic: Dispute Resolution	Topic: Collaboration	Topic: Member Engagement
N/A	LHD: Local Health Departments	No	N/A	513	Partnership HealthPlan of California	Sonoma	2024	County of Sonoma	No	Not applicable							
8/22/2024	SMHS: Local Government Agencies/Social Services Departments: Specialty Mental Health Services	No	N/A	513	Partnership HealthPlan of California	Sonoma	2024	County of Sonoma	No	Not applicable	Sid McColley (Invited) Serina Sanchez Cristina Marlow Jan Cobaleda-Kegler (Invited)  Wendy Wheelwright (Invited) Masha McCarthy (Invited) Katrina Surprise Jennifer Pimentel (Invited) Jan Cobaleda-Kegler (Invited) Christina Marlow (Invited) Serina Sanchez	Carelon Behavioral Health provided info and presentation of how referrals are processed. Sac Valley MedShare provided update on county participation and Continuity of Care Documents. Discussed county participation.  Carelon Behavioral Health provided info and presentation of how referrals are processed. Sac Valley MedShare provided update on county participation and Continuity of Care Documents. Discussed county participation.	Carelon Behavioral Health provided data on how members are screened, referrals, raw data / breakdown of quantities by county, and penetration rates. Closed Loop Tracker county participation discussed. Ad hoc meetings offered to counties.  Carelon Behavioral Health provided data on how members are screened, referrals, raw data / breakdown of quantities by county, and penetration rates. Closed Loop Tracker county participation discussed.	Closed Loop Tracker discussed to ensure members are being seen.  SacValley MedShare discussed Continuity of Care Document to members' care is visible. Closed Loop Tracker discussed to ensure members are being seen. Partnership to follow up with members.	MOU county completion progress information was shared.  MOU county completion progress information was shared.	Discussed Closed Loop Referral Tracking with counties. Provided info on which county's trackers are up to date, needing info, etc. Discussed importance of updated trackers for Partnership to accurately follow up with members. Sac Valley MedShare provided info on county progress. SVMS is getting CCDs (Continuity of Care Document) from EMRs. Counties can see integrated records. MOU county completion progress information was shared.  Discussed Closed Loop Referral Tracking with counties. Provided info on which county's trackers are up to date, needing info, etc. Discussed importance of updated trackers for Partnership to accurately follow up with members. Sac Valley MedShare provided info on county progress. SVMS is getting CCDs (Continuity of Care Document) from EMRs. Counties can see integrated records. MOU county completion progress information was shared.	MOU county completion progress information was shared. Carelon Behavioral Health provided data on member engagement and utilization by county, age, etc.  Discussed SB (Senate Bill) 1019 to develop the outreach and education plan for NSMHS. Discussed with counties helpful ways to inform about NSMHS. Asked counties to advise Partnership of any upcoming events to attend or have handouts. Carelon Behavioral Health provided data on member preference of telehealth vs. face-to-face.
6/27/2024	DMC-ODS: Local Government Agencies/County Behavioral Health Departments: Alcohol and Substance Use Disorder treatment services, DMC-ODS	No	N/A	513	Partnership HealthPlan of California	Sonoma	2024	County of Sonoma	No	Not applicable	Will Gayowski Katrina Surprise  Will Gayowski Katrina Surprise	ECM and CS utilization provided. Reminder of workflow to refer to PHC care coordination, ECM and CS services.  ECM and CS utilization provided. Reminder of workflow to refer to PHC care coordination, ECM and CS services.	Provided an overview of SABIRT services indicating referrals made to county services.  Provided an overview of SABIRT services indicating referrals made to county services.	Provided an overview of SABIRT services indicating referrals made to county services.  Discussed potential for HIE use in 2025. Shared new plan data feed file from DHCS including SUD for the first time in November.	Policy ADM52 was presented and provided to counties.  Policy ADM52 was presented and provided to counties.	Shared workflows for SUD, validating process and ensuring counties have insight into how calls are supported through warm handoff (when appropriate)  Discussed HSAG strategy for PMV related to identification of members included in data pull.	Highlighted members who received SUD, CS, and ECM services and most utilized benefits. Indicates where engagement activities are working, most specifically through our SUD programs with full continuums.  Counties would like transportation information to share with members when determined to be a barrier to care, specifically with out of county referrals.
N/A	IHSS: Local Government Agencies: In-Home Supportive Services	No	N/A	513	Partnership HealthPlan of California	Sonoma	2024	County of Sonoma	No	Not applicable							
N/A	CW: Local Government Agencies/Social Services Departments: Social Services and Child Welfare	No	N/A	513	Partnership HealthPlan of California	Sonoma	2024	County of Sonoma	No	Not applicable							
N/A	RC: Regional Centers	No	N/A	513	Partnership HealthPlan of California	Sonoma	2024	North Bay Regional Center	No	Not applicable							
N/A	WIC: Local Health Departments/WIC	No	N/A	513	Partnership HealthPlan of California	Sonoma	2024	County of Sonoma	No	Not applicable							
N/A	TCM: Local Government Agencies: Targeted Case Management	No	N/A	513	Partnership HealthPlan of California	Sonoma	2024	County of Sonoma	No	Not applicable							
N/A	WCM: Whole Child Model	No	N/A	513	Partnership HealthPlan of California	Sonoma	2024	County of Sonoma	No	Not applicable							
8/22/2024	DMC-SP: Local Government Agencies/County Behavioral Health Departments: Alcohol and Substance Use Disorder treatment services, DMC State Plan	No	N/A	513	Partnership HealthPlan of California	Sonoma	2024	County of Sonoma	No	Not applicable	Will Gayowski Katrina Surprise	ECM and CS utilization provided. Reminder of workflow to refer to PHC care coordination, ECM and CS services.	Provided an overview of SABIRT services indicating referrals made to county services.	Provided an overview of SABIRT services indicating referrals made to county services.	Policy ADM52 was presented and provided to counties.	Shared workflows for SUD, validating process and ensuring counties have insight into how calls are supported through warm handoff (when appropriate)	Highlighted members who received SUD, CS, and ECM services and most utilized benefits. Indicates where engagement activities are working, most specifically through our SUD programs with full continuums.

MOU Effective Date	MOU Type	Combined MOU	Description of Combined MOU	Plan Code	Plan Name (auto-populates)	County (auto-populates)	Reporting Year	Other Party Organization & Name	Multi-Party MOU	Description of Multi-Party MOU	Meeting Attendees	Topic: Care Coordination	Topic: Referrals	Topic: Strategies to Avoid Duplication of Services	Topic: Dispute Resolution	Topic: Collaboration	Topic: Member Engagement
N/A	LHD: Local Health Departments	No	N/A	550	Partnership HealthPlan of California	Sutter	2024	County of Sutter	No	Not applicable							
N/A	SMHS: Local Government Agencies/Social Services Departments: Specialty Mental Health Services	No	N/A	550	Partnership HealthPlan of California	Sutter	2024	County of Sutter	Yes	MOU is for both Sutter and Yuba County							
N/A	DMC-SP: Local Government Agencies/County Behavioral Health Departments: Alcohol and Substance Use Disorder treatment services, DMC State Plan	No	N/A	550	Partnership HealthPlan of California	Sutter	2024	County of Sutter	Yes	MOU is for both Sutter and Yuba County							
N/A	IHSS: Local Government Agencies: In-Home Supportive Services	No	N/A	550	Partnership HealthPlan of California	Sutter	2024	County of Sutter	No	Not applicable							
N/A	CW: Local Government Agencies/Social Services Departments: Social Services and Child Welfare	No	N/A	550	Partnership HealthPlan of California	Sutter	2024	County of Sutter	No	Not applicable							
10/7/2024	RC: Regional Centers	No	N/A	550	Partnership HealthPlan of California	Sutter	2024	Alta California Regional Centers	No	Not applicable	Partnership: Brigid Gast (Senior Director of Care Management), Cassia Martinez ( Manager of CC), Danielle Lewis (Administrative Assistant I), Jocelle Fresno-Lee (Supervisor of Case Mgmt.), Nadyne Bergerson (Supervisor of Case Mgmt), Sarah Wilson(Manager of CC) ACRC: Camelia Houston, Faye Tait, Jennifer Bloom, Kizi Smith, T. Brown, J. Xiong	Parties discussed if there would be different policies for MOU. No different policies or procedures, and no changes to MOU required.	No changes to MOU required. Transportation referrals discussed.	There were no concerns of duplication raised during the meeting; therefore, no resolutions were required.	There were no disputes or disagreements raised during the meeting; therefore, no resolutions were required.	MCP and Regional Center dicussed collaboration on Transportation. No changes to MOU required.	MCP and Regional Center discussed Supported Decision Making law and omplications to members and regional centers. No changes to MOU required.
N/A	WIC: Local Health Departments/WIC	No	N/A	550	Partnership HealthPlan of California	Sutter	2024	County of Sutter	No	Not applicable							
N/A	TCM: Local Government Agencies: Targeted Case Management	No	N/A	550	Partnership HealthPlan of California	Sutter	2024	County of Sutter	No	Not applicable							
N/A	WCM: Whole Child Model	No	N/A	550	Partnership HealthPlan of California	Sutter	2024	County of Sutter	No	Not applicable							

MOU Effective Date	MOU Type	Combined MOU	Description of Combined MOU	Plan Code	Plan Name (auto-populates)	County (auto-populates)	Reporting Year	Other Party Organization & Name	Multi-Party MOU	Description of Multi-Party MOU	Meeting Attendees	Topic: Care Coordination	Topic: Referrals	Topic: Strategies to Avoid Duplication of Services	Topic: Dispute Resolution	Topic: Collaboration	Topic: Member Engagement
N/A	LHD: Local Health Departments	No	N/A	551	Partnership HealthPlan of California	Tehama	2024	County of Tehama	No	Not applicable							
N/A	SMHS: Local Government Agencies/Social Services Departments: Specialty Mental Health Services	No	N/A	551	Partnership HealthPlan of California	Tehama	2024	County of Tehama	No	Not applicable							
N/A	DMC-SP: Local Government Agencies/County Behavioral Health Departments: Alcohol and Substance Use Disorder treatment services, DMC State Plan	No	N/A	551	Partnership HealthPlan of California	Tehama	2024	County of Tehama	No	Not applicable							
N/A	IHSS: Local Government Agencies: In-Home Supportive Services	No	N/A	551	Partnership HealthPlan of California	Tehama	2024	County of Tehama	No	Not applicable							
N/A	CW: Local Government Agencies/Social Services Departments: Social Services and Child Welfare	No	N/A	551	Partnership HealthPlan of California	Tehama	2024	County of Tehama	No	Not applicable							
N/A	RC: Regional Centers	No	N/A	551	Partnership HealthPlan of California	Tehama	2024	Far Northern Regional Center	No	Not applicable							
N/A	WIC: Local Health Departments/WIC	No	N/A	551	Partnership HealthPlan of California	Tehama	2024	County of Tehama	No	Not applicable							
N/A	TCM: Local Government Agencies: Targeted Case Management	No	N/A	551	Partnership HealthPlan of California	Tehama	2024	Not Applicable	No	Not applicable							
N/A	WCM: Whole Child Model	No	N/A	551	Partnership HealthPlan of California	Tehama	2024	County of Tehama	No	Not applicable							

MOU Effective Date	MOU Type	Combined MOU	Description of Combined MOU	Plan Code	Plan Name (auto-populates)	County (auto-populates)	Reporting Year	Other Party Organization & Name	Multi-Party MOU	Description of Multi-Party MOU	Meeting Attendees	Topic: Care Coordination	Topic: Referrals	Topic: Strategies to Avoid Duplication of Services	Topic: Dispute Resolution	Topic: Collaboration	Topic: Member Engagement
N/A	LHD: Local Health Departments	No	N/A	522	Partnership HealthPlan of California	Trinity	2024	County of Trinity through its H&HS Public Health Branch	No	Not applicable							
3/14/2024	SMHS: Local Government Agencies/Social Services Departments: Specialty Mental Health Services	No	N/A	522	Partnership HealthPlan of California	Trinity	2024	County of Trinity through its H&HS Public Health Branch	No	Not applicable	<p>Connie Smith</p> <p>Torri Cardilino (Invited) Debbie Klein (Invited) Connie Smith (Invited)</p> <p>Connie Smith (Invited)</p>	<p>SacValley MedShare introduced. All counties are working toward meeting the requirements of data sharing. County participation progress shared. Carelon Behavioral Health shared county breakdown of providers.</p> <p>Carelon Behavioral Health provided info and presentation of how referrals are processed. Sac Valley MedShare provided update on county participation and Continuity of Care Documents. Discussed county participation.</p> <p>Carelon Behavioral Health provided info and presentation of how referrals are processed. Sac Valley MedShare provided update on county participation and Continuity of Care Documents. Discussed county participation.</p>	<p>Carelon Behavioral Health provided data on how members are screened, referrals, raw data / breakdown of quantities by county, and penetration rates. Closed Loop Tracker county participation discussed.</p> <p>Carelon Behavioral Health provided data on how members are screened, referrals, raw data / breakdown of quantities by county, and penetration rates. Closed Loop Tracker county participation discussed. Ad hoc meetings offered to counties.</p> <p>Carelon Behavioral Health provided data on how members are screened, referrals, raw data / breakdown of quantities by county, and penetration rates. Closed Loop Tracker county participation discussed.</p>	<p>Closed Loop Tracker discussed to ensure members are being seen.</p> <p>Closed Loop Tracker discussed to ensure members are being seen.</p> <p>SacValley MedShare discussed Continuity of Care Document to members' care is visible. Closed Loop Tracker discussed to ensure members are being seen. Partnership to follow up with members.</p>	<p>MOU progress shared. Partnership policies shared.</p> <p>MOU county completion progress information was shared.</p> <p>MOU county completion progress information was shared.</p>	<p>Discussed Closed Loop Referral Tracking with counties. Carelon and Partnership offered ad hoc meetings with counties for training in utilizing the tracker. Sac Valley MedShare introduced and shared county set-up progress. MOU county completion progress information was shared.</p> <p>Discussed Closed Loop Referral Tracking with counties. Provided info on which county's trackers are up to date, needing info, etc. Discussed importance of updated trackers for Partnership to accurately follow up with members. Sac Valley MedShare provided info on county progress. SVMS is getting CCDs (Continuity of Care Document) from EMRs. Counties can see integrated records. MOU county completion progress information was shared.</p> <p>Discussed Closed Loop Referral Tracking with counties. Provided info on which county's trackers are up to date, needing info, etc. Discussed importance of updated trackers for Partnership to accurately follow up with members. Sac Valley MedShare provided info on county progress. SVMS is getting CCDs (Continuity of Care Document) from EMRs. Counties can see integrated records. MOU county completion progress information was shared.</p>	<p>Carelon Behavioral Health was introduced. SOP was created for screening tool. Utilizer data was shared. Counties invited to share ideas.</p> <p>MOU county completion progress information was shared. Carelon Behavioral Health provided data on member engagement and utilization by county, age, etc.</p> <p>Discussed SB (Senate Bill) 1019 to develop the outreach and education plan for NSMHS. Discussed with counties helpful ways to inform about NSMHS. Asked counties to advise Partnership of any upcoming events to attend or have handouts. Carelon Behavioral Health provided data on member preference of telehealth vs. face-to-face.</p>
7/12/2024	DMC-SP: Local Government Agencies/County Behavioral Health Departments: Alcohol and Substance Use Disorder treatment services, DMC State Plan	No	N/A	522	Partnership HealthPlan of California	Trinity	2024	County of Trinity through its H&HS Public Health Branch	No	Not applicable	<p>Connie Smith</p> <p>Connie Smith</p> <p>Connie Smith (invited)</p>	<p>Reviewed Policies &amp; Procedures</p> <ul style="list-style-type: none"> <li>• MCUP3101: Screening and Treatment for Substance Use Disorder</li> <li>• MCP2017: Scope of Primary Care – Behavioral Health and Indications for Referral Guidelines</li> <li>• MCP2032 CalAIM ECM</li> <li>• MCUP3142 Community Supports</li> </ul> <p>ECM and CS utilization provided. Reminder of workflow to refer to PHC care coordination, ECM and CS services.</p> <p>ECM and CS utilization provided. Reminder of workflow to refer to PHC care coordination, ECM and CS services.</p>	<p>Provided an overview of SABIRT services indicating referrals made to county services.</p> <p>Provided an overview of SABIRT services indicating referrals made to county services.</p> <p>Provided an overview of SABIRT services indicating referrals made to county services.</p>	<p>Provided an overview of SABIRT services indicating referrals made to county services.</p> <p>Provided an overview of SABIRT services indicating referrals made to county services.</p> <p>Discussed potential for HIE use in 2025.</p> <p>Shared new plan data feed file from DHCS including SUD for the first time in November.</p>	<p>Policy ADM52 was presented and provided to counties.</p> <p>Policy ADM52 was presented and provided to counties.</p> <p>Policy ADM52 was presented and provided to counties.</p>	<p>Shared workflows for SUD, validating process and ensuring counties have insight into how calls are supported through warm handoff (when appropriate)</p> <p>Shared workflows for SUD, validating process and ensuring counties have insight into how calls are supported through warm handoff (when appropriate)</p> <p>Discussed HSAG strategy for PMV related to identification of members included in data pull.</p>	<p>Shared referral channels for SUD, ECM, CS. Validated referral pathways and responded to inquiries to improve member experience. Highlighted members who received SUD, CS, and ECM services and most utilized benefits. Indicates where engagement activities are working, most specifically through our SUD programs with full continuums. Counties would like transportation information to share with members when determined to be a barrier to care, specifically with out of county referrals.</p>
N/A	IHSS: Local Government Agencies: In-Home Supportive Services	No	N/A	522	Partnership HealthPlan of California	Trinity	2024	County of Trinity through its H&HS Public Health Branch	No	Not applicable							
N/A	CW: Local Government Agencies/Social Services Departments: Social Services and Child Welfare	No	N/A	522	Partnership HealthPlan of California	Trinity	2024	County of Trinity through its H&HS Public Health Branch	No	Not applicable							
N/A	RC: Regional Centers	No	N/A	522	Partnership HealthPlan of California	Trinity	2024	Far Northern Regional Center	No	Not applicable							
N/A	WIC: Local Health Departments/WIC	No	N/A	522	Partnership HealthPlan of California	Trinity	2024	County of Trinity through its H&HS Public Health Branch	No	Not applicable							
N/A	TCM: Local Government Agencies: Targeted Case Management	No	N/A	522	Partnership HealthPlan of California	Trinity	2024	County of Trinity through its H&HS Public Health Branch	No	Not applicable							
N/A	WCM: Whole Child Model	No	N/A	522	Partnership HealthPlan of California	Trinity	2024	County of Trinity through its H&HS Public Health Branch	No	Not applicable							

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N/A	LHD: Local Health Departments	No	N/A	509	Partnership HealthPlan of California	Yolo	2024	Yolo County Health and Human Services Agency (HHS)	No	Not applicable								
4/22/2024	SMHS: Local Government Agencies/Social Services Departments: Specialty Mental Health Services	No	N/A	509	Partnership HealthPlan of California	Yolo	2024	Yolo County Health and Human Services Agency (HHS)	No	Not applicable	Karleen Jakowski Samantha Fusselman (Invited) Tony Kildare  Karleen Jakowski (Invited) Samantha Fusselman (Invited) Tony Kildare (Invited)  Karleen Jakowski (Invited) Samantha Fusselman (Invited) Tony Kildare (Invited)	SacValley MedShare introduced. All counties are working toward meeting the requirements of data sharing. County participation progress shared. Carelon Behavioral Health shared county breakdown of providers.  Carelon Behavioral Health provided info and presentation of how referrals are processed. Sac Valley MedShare provided update on county participation and Continuity of Care Documents. Discussed county participation.  Carelon Behavioral Health provided info and presentation of how referrals are processed. Sac Valley MedShare provided update	Carelon Behavioral Health provided data on how members are screened, referrals, raw data / breakdown of quantities by county, and penetration rates. Closed Loop Tracker county participation discussed.  Carelon Behavioral Health provided data on how members are screened, referrals, raw data / breakdown of quantities by county, and	Closed Loop Tracker discussed to ensure members are being seen.  Closed Loop Tracker discussed to ensure members are being seen.  SacValley MedShare discussed Continuity of Care Document to members' care is visible. Closed Loop Tracker discussed to ensure members are being seen. Partnership to follow up with members.	MOU progress shared. Partnership policies shared.  MOU county completion progress information was shared.  MOU county completion progress information was shared.	Discussed Closed Loop Referral Tracking with counties. Carelon and Partnership offered ad hoc meetings with counties for training in utilizing the tracker. Sac Valley MedShare introduced and shared county set-up progress. MOU county completion progress information was shared.  Discussed Closed Loop Referral Tracking with counties. Provided info on which county's trackers are up to date, needing info, etc. Discussed importance of updated trackers for Partnership to accurately follow up with members. Sac Valley MedShare provided info on county progress. SVMS is getting CCDs (Continuity of Care Document) from EMRs. Counties can see integrated records. MOU county completion progress information was shared.	Discussed Closed Loop Referral Tracking with counties. Provided info on	Carelon Behavioral Health was introduced. SOP was created for screening tool. Utilizer data was shared. Counties invited to share ideas.  MOU county completion progress information was shared. Carelon Behavioral Health provided data on member engagement and utilization by county, age, etc.  Discussed SB (Senate Bill) 1019 to develop the outreach and education plan for NSMHS. Discussed with counties helpful ways to inform about NSMHS. Asked counties to advise Partnership of any upcoming events to attend or have handouts. Carelon Behavioral Health provided data on member preference of telehealth vs. face-to-face.
4/22/2024	DMC-SP: Local Government Agencies/County Behavioral Health Departments: Alcohol and Substance Use Disorder treatment services, DMC State Plan	No	N/A	509	Partnership HealthPlan of California	Yolo	2024	Yolo County Health and Human Services Agency (HHS)	No	Not applicable	Julie Frieras  Julie Frieras  Julie Frieras (invited)	Reviewed Policies & Procedures • MCUP3101: Screening and Treatment for Substance Use Disorder • MPCP2017: Scope of Primary Care – Behavioral Health and Indications for Referral Guidelines • MCCP2032 CalAIM ECM • MCUP3142 Community Supports  ECM and CS utilization provided. Reminder of workflow to refer to PHC care coordination, ECM and CS services.  ECM and CS utilization	Provided an overview of SABIRT services indicating referrals made to county services.  Provided an overview of SABIRT services indicating referrals made to county services.  Provided an overview of SABIRT services indicating referrals made to county services.	Provided an overview of SABIRT services indicating referrals made to county services.  Discussed potential for HIE use in 2025. Shared new plan data feed file from DHCS including SUD for the first time in November.	Policy ADM52 was presented and provided to counties.  Policy ADM52 was presented and provided to counties.  Policy ADM52 was presented and provided to counties.	Shared workflows for SUD, validating process and ensuring counties have insight into how calls are supported through warm handoff (when appropriate)  Shared workflows for SUD, validating process and ensuring counties have insight into how calls are supported through warm handoff (when appropriate)  Discussed HSAG strategy for PMV related to identification of members included in data pull.	Shared referral channels for SUD, ECM, CS. Validated referral pathways and responded to inquiries to improve member experience.  Highlighted members who received SUD, CS, and ECM services and most utilized benefits. Indicates where engagement activities are working, most specifically through our SUD programs with full continuums.  Counties would like transportation information to share with members when determined to be a barrier to care, specifically with out of county referrals.	
10/10/2024	IHSS: Local Government Agencies: In-Home Supportive Services	No	N/A	509	Partnership HealthPlan of California	Yolo	2024	Yolo County Health and Human Services Agency (HHS)	No	Not applicable		N/A signed fourth quarter	N/A signed fourth quarter	N/A signed fourth quarter	N/A signed fourth quarter	N/A signed fourth quarter	N/A signed fourth quarter	
N/A	CW: Local Government Agencies/Social Services Departments: Social Services and Child Welfare	No	N/A	509	Partnership HealthPlan of California	Yolo	2024	Yolo County Health and Human Services Agency (HHS)	No	Not applicable								
10/7/2024	RC: Regional Centers	No	N/A	509	Partnership HealthPlan of California	Yolo	2024	Alta California Regional Centers	No	Not applicable	Partnership: Brigid Gast (Senior Director of Care Management), Cassia Martinez ( Manager of CC), Danielle Lewis (Administrative Assistant I), Jocelle Fresno-Lee (Supervisor of Case Mgmt.), Nadyne Bergerson (Supervisor of Case Mgmt), Sarah Wilson(Manager of CC) ACRC: Camelia Houston, Faye Tait, Jennifer Bloom, Kizi Smith, T. Brown, J. Xiong	Parties discussed if there would be different policies for MOU. No different policies or procedures, and no changes to MOU required.	No changes to MOU required. Transportation referrals discussed.	There were no concerns of duplication raised during the meeting; therefore, no resolutions were required.	There were no disputes or disagreements raised during the meeting; therefore, no resolutions were required.	MCP and Regional Center discussed collaboration on Transportation. No changes to MOU required.	MCP and Regional Center discussed Supported Decision Making law and implications to members and regional centers. No changes to MOU required.	
10/24/2024	WIC: Local Health Departments/WIC	No	N/A	509	Partnership HealthPlan of California	Yolo	2024	Yolo County Health and Human Services Agency (HHS)	No	Not applicable	Invited Brian Vaughn and Helen Ng,Laurie (Somerhausen) Walker; did not attend	Complex cases are referred to Care Coordination; Think about WIC members that are eligible and perfect candidates in PHCs programs	Closed loop referrals	Counties interested in a single MOU with PHC and Kaiser; counties advised they can submit a redline. Not something that PHC can do but the county would need to discuss it with Kaiser.No issues discussed	no disputes	PHC expressed interest in collaborating with WIC on various levels. PHC created a comprehensive breast pump DME list that was shared with WIC. Would like to work with WIC regional breastfeeding liaisons so that they can provide suggestions for the process. PHC will check with their internal perinatal workgroup and Provider Relations to see if acute care hospitals are ordering formula for preemie babies before they leave the hospital.	Population Health is responsible for a lot of the outreach to PHC members with a focus on pregnant moms, children and chronic disease. Some of PHCs programs are incentivized. PHC assists members in scheduling appointments and finding a provider to ensure they are connected to care and ensures they are educated on their benefits.	
N/A	TCM: Local Government Agencies: Targeted Case Management	No	N/A	509	Partnership HealthPlan of California	Yolo	2024	Not applicable	No	Not applicable								
N/A	WCM: Whole Child Model	No	N/A	509	Partnership HealthPlan of California	Yolo	2024	Yolo County Health and Human Services Agency (HHS)	No	Not applicable								

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N/A	LHD: Local Health Departments	No	N/A	552	Partnership HealthPlan of California	Yuba	2024	County of Yuba	No	Not applicable							
N/A	SMHS: Local Government Agencies/Social Services Departments: Specialty Mental Health Services	No	N/A	552	Partnership HealthPlan of California	Yuba	2024	Not Applicable	Yes	MOU is for both Yuba and Suuter							
N/A	DMC-SP: Local Government Agencies/County Behavioral Health Departments: Alcohol and Substance Use Disorder treatment services, DMC State Plan	No	N/A	552	Partnership HealthPlan of California	Yuba	2024	Not Applicable	Yes	MOU is for both Yuba and Suuter							
N/A	IHSS: Local Government Agencies: In-Home Supportive Services	No	N/A	552	Partnership HealthPlan of California	Yuba	2024	County of Yuba	No	Not applicable							
N/A	CW: Local Government Agencies/Social Services Departments: Social Services and Child Welfare	No	N/A	552	Partnership HealthPlan of California	Yuba	2024	County of Yuba	No	Not applicable							
10/7/2024	RC: Regional Centers	No	N/A	552	Partnership HealthPlan of California	Yuba	2024	Alta California Regional Centers	No	Not applicable	Partnership: Brigid Gast (Senior Director of Care Management), Cassia Martinez ( Manager of CC), Danielle Lewis (Administrative Assistant I), Jocelle Fresno-Lee (Supervisor of Case Mgmt.), Nadyne Bergerson (Supervisor of Case Mgmt), Sarah Wilson(Manager of CC) ACRC: Camelia Houston, Faye Tait, Jennifer Bloom, Kizi Smith, T. Brown, J. Xiong	Parties discussed if there would be different policies for MOU. No different policies or procedures, and no changes to MOU required.	No changes to MOU required. Transportation referrals discussed.	There were no concerns of duplication raised during the meeting; therefore, no resolutions were required.	There were no disputes or disagreements raised during the meeting; therefore, no resolutions were required.	MCP and Regional Center discussed collaboration on Transportation. No changes to MOU required.	MCP and Regional Center discussed Supported Decision Making law and omplications to members and regional centers. No changes to MOU required.
N/A	WIC: Local Health Departments/WIC	No	N/A	552	Partnership HealthPlan of California	Yuba	2024	Not Applicable	No	Not applicable							
N/A	TCM: Local Government Agencies: Targeted Case Management	No	N/A	552	Partnership HealthPlan of California	Yuba	2024	Not Applicable	No	Not applicable							
N/A	WCM: Whole Child Model	No	N/A	552	Partnership HealthPlan of California	Yuba	2024	County of Yuba	No	Not applicable							