



CenCal Health Board of Directors Committee Reports

October 21, 2026

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CCS Family Advisory Committee (FAC) Board Report

Date: October 21, 2026

From: Ana Stenersen, RN, BSN
Director, Utilization Management
Chair, CCS Family Advisory Committee

Through: Maya Heinert, MD, MBA, FAAP
Chief Medical Officer

Executive Summary

The California Children's Services (CCS) Family Advisory Committee (FAC) met on May 21, 2026. Ms. Amy Buesker Pallotti, Manager of Help Me Grow (HMG) Santa Barbara, was introduced as the new member of the committee. HMG is a no cost service to families of young children from birth to age 5 that promotes early childhood development and ensures children reach their full potential.

A new requirement for all Medi-Cal Rx prescriptions to include an ICD-10 diagnosis code for claims processing will be implemented in the fall of 2026. The goal is to streamline prior authorization processes. Prescriptions without the required code will reject with a pharmacy message directing the pharmacy to obtain the code from the prescriber.

A presentation was given regarding CCS members with Unsatisfactory Immigration Status (UIS). Per the dictates of the HR-1 Bill, CCS with UIS will be disenrolled from CenCal Health's Whole Child Model Program and will be case managed by the local CCS County Programs in San Luis Obispo and Santa Barbara effective January 1, 2027. The CCS County Programs will manage the services related to the child's CCS conditions while State Fee-for-Service Medi-Cal will be responsible for the non-CCS conditions. Efforts were shared on how CenCal Health will ensure a smooth transition to promote the least disruption in services.

Background

The CCS Family Advisory Committee (FAC) was established in July 2018 as part of the implementation of the Whole Child Model (WCM). The FAC serves as a forum for CenCal Health's California Children's Services (CCS) and WCM stakeholders, including CCS members, family members, family advocates, family support groups, and community agencies to discuss issues of shared interest and importance to the CCS population. The committee also provides an opportunity for members, parents,

advocates, and agencies to offer input on the CenCal Health's compliance with requirements related to CCS. The FAC convenes on a quarterly basis.

Meeting Highlights

Pharmacy Update

Providers will be required to enroll in Medi-Cal using their Type 1 National Provider Identifier (NPI) before claims can be processed. The implementation timeline has been postponed from mid-2026 to the second quarter of 2027 and will be phased in through a wave-based approach rather than being implemented simultaneously across all providers. Provider Services was conducting outreach to approximately 35 prescribers in the area who had prescribed for CenCal members without being enrolled. Beginning August 21, 2026, Medi-Cal Rx limited pharmacist overrides for early-refill edits to once in a 365-day period. Vacation and lost-medication overrides remain possible once annually, but additional incidents will require a prior authorization. The change applies to adults aged 21 and older and does not apply to the pediatric population.

CCS Advisory Group (AG) Meeting

The last AG meeting was held on January 15, 2026. The transition of CCS members to adulthood remains a key statewide priority. Other topics discussed include monthly transition planning meetings, reporting on Whole Child Model referral data, and development of statewide training to improve consistency across counties, particularly as staff retire and institutional knowledge is lost.

Whole Child Model Update

CCS Numbered letter 03-0926 was released providing guidance for CCS members with UIS and their transition to Fee-for-Service Medi-Cal. There is ongoing collaboration with DHCS, managed care plans, and county partners regarding NICU and High-Risk Infant Follow-Up (HIRF) referral processes. Work continues on updating referral forms, NICU eligibility guidelines, and workflow development. Additionally, DHCS has initiated discussions on utilizing the Provider Electronic Data Interchange (PEDI) system to support electronic submission and sharing of CCS referrals, annual medical reviews, and other required documentation, reducing reliance on fax and email processes.

Enhanced Care Management (ECM) and CCS

There are 1,243 CCS members currently enrolled in ECM. The ECM network is approaching 60 contracted providers across all nine populations of focus. Alpha Resource Center, Family Care Network, MICOP, and Sunlight Health were identified among providers serving the CCS population. For streamlined referrals, providers have

25 days to complete outreach, including successful or unsuccessful attempts. Providers are encouraged to use phone calls, mailings, business cards, community partnerships, and in-person contact when appropriate. Closed-loop referrals are reported back to the referring entity within 30 days with the outcome. A success story was shared with the committee of a CCS member who completed ECM goals after receiving help with medical appointments, ENT care and ear tubes, Women Infants and Children (WIC) and Learn, Engage, Advocate and Partner (LEAP) connections, food and utility resources, school Individualized Education Program (IEP) support, personal care, medically tailored meals, respite, and housing navigation. The member was able to transition successfully out of ECM after goals were met.

CCS County Programs and Medical Therapy Programs

Santa Barbara (SB) CCS reported that therapy funding allocations were reduced, limiting the program's ability to fill vacant positions in the CCS Medical Therapy Program (MTP). To address staffing shortages, SB CCS is seeking county funding options to support limited-term staff or traveling therapists. Ongoing staffing challenges in both administrative and therapy roles resulted in the implementation of a therapy waitlist. Cases are triaged by the CCS County Medical Director and therapy supervisors. There is no therapy waitlist in CCS San Luis Obispo (SLO).

Next Steps:

- Provide an update on CCS members with Unsatisfactory Immigration Status and their transition out of CenCal Health to CCS County Programs and State Medi-Cal Fee-for-Service (FFS).
- Monitor the impacts of the therapy waitlist on CCS members' access to health care.

Recommendation

This memo is for informational purposes only and does not need any action from the Board.

Family Advisory Committee (FAC) Meeting Minutes

Agenda

Date	May 21, 2026
Time	11:00 am – 12:30 pm
Location	Microsoft Teams
Chairperson & Facilitator	Ana Stenersen, BSN, RN, PHN, Utilization Management Director
Recorder	Megan Jones, Interim Executive Assistant

FAC Membership	
Santa Barbara County	Affiliation
1. Felisa Strickland	Parent Alpha
2. Mariana Murillo	Parent
3. Jane Harpster	CCS Santa Barbara
4. Tanesha Castaneda	CCS Santa Barbara
5. Jennifer Griffin	Parent LGS
6. Dena Davis	Parent Alpha
7. Dorothy Blasing	CCS Santa Barbara
8. Mayra Oseguera	Parent Alpha
San Luis Obispo County	Affiliation
9. Jennifer Monge	CCS SLO
10. Regina Samson	CCS SLO
11. Pamela Benadiba	Parent PHP SLO
12. Edit Diaz	PHP SLO
13. Natalie Angelo	CCS SLO
14. Lynn Bellomi	Parent PHP SLO
Tri-County	Affiliation
15. Tamika Harris	TCRC
16. Sophia Hampp	TCRC
CenCal Health	Title
17. Dianna Myers, MD	Medical Director
18. Shelby Stockdale, RN	Pediatric Health Services Manager
19. Adam Horn, PharmD	Pharmacy Services Clinical Manager
20. Diana Robles	Lead Health Navigator, Member Services
21. Heather Te, LPCC, CCM	Enhanced Care Management Manager

Agenda Items	Minutes
1. Welcome and Introductions • Megan Jones • Sophia Hampp	Ms. Stenersen facilitated introductions and welcomed Megan Jones to the FAC Meeting. Ms. Harris shared that she has been promoted to Assistant Director and introduced Sophia Hampp as TCRC's new Santa Barbara Early Childhood Manager. Ms. Hampp will replace Ms. Harris in the FAC.
2. Approval of February 19, 2026 meeting minutes	Ms. Stenersen requested a motion to approve the February 19, 2025, FAC meeting minutes. Ms. Strickland made a motion to approve the minutes which were seconded by Ms. Oseguera, resulting in official approval.
3. CCS Advisory Group (AG) Meeting Highlights CCS AG Meeting: April 15, 2026 Next CCS AG Meeting: July 15, 2026	Ms. Stenersen and Ms. Strickland confirmed that Ms. Stabile, Ms. Stockdale, and Dr. Myers were unable to attend today's meeting. As a result, participants agreed to table this agenda item until the next meeting with highlights from two meetings.
4. Pharmacy Update	Dr. Horn explained that Medi-Cal will soon require all prescribers, including doctors, nurse practitioners, physician assistants, and pharmacists, to be individually enrolled as Medi-Cal providers to have their prescriptions reimbursed. This change, originally set for June 15th, will be implemented in phases with no confirmed go-live date yet. The update aims to ensure compliance with state and federal regulations, and Dr. Horn noted that further details would be provided in future meetings. Dr. Horn described an upcoming policy, expected in mid-2026, requiring all Medi-Cal Rx prescriptions to include an ICD-10 diagnosis code for claims processing. He clarified in response to Ms. Stenersen's question that prescriptions without a diagnosis code will be blocked at the pharmacy, as claims are adjudicated in real time. The goal is to streamline prior authorization processes and reduce provider burden by linking medications to diagnosis codes. Dr. Horn reported that, effective April 1st, Wegovy no longer requires prior authorization for MASH (non-cirrhotic metabolic dysfunction associated with steatohepatitis) indications. He emphasized that weight loss indications for pediatric members under 21 remain covered under the EPSDT benefit, while adult coverage is more limited. Ms. Stenersen and Dr. Horn discussed CCS eligibility for related conditions, and he confirmed that other GLP-1 indications, such as obstructive sleep apnea, still require prior authorization.
5. CCS Whole Child Model Update • Newly Released Numbered Letters • No letters to report out • Upcoming Numbered Letters/Information Notices in the Queue for DHCS • No letters to report out	Ms. Stenersen provided an update on the CCS Whole Child Model, noting that while several numbered letters are scheduled for release—including those related to EPSDT services for members receiving PDN (particularly case management), inter-county transfers, NICU and HRIF, DME guidelines, and hemodialysis services—none have been newly released, with some still in final executive review. Ms. Stenersen referenced the CCS AG page where these pending items are listed. She also introduced the transition planning resource list as a topic to be discussed further by Ms. Collins. Ms. Stenersen highlighted updates related to authorization timelines, referring to recent discussions from the CCS AG meeting. She explained that, effective January 1, prior authorization processing timelines changed from five business days to seven calendar days, a stricter requirement due to the inclusion of

• Transition Planning Resource List	weekends and holidays. She emphasized that CenCal must meet these regulatory timelines for all authorization requests, including CCS and non-CCS members, and that these metrics are closely monitored and reported. Ms. Stenersen noted that first-quarter performance exceeded the 95% timeliness threshold, reflecting strong team adaptation and diligence in meeting requirements despite the challenges presented by weekends and holidays.
6. CCS Transition Planning Refresher	Ms. Collins outlined the transition planning process, which begins with informational mailings to CCS members at ages 14, 16, and 18, followed by adolescent transition conferences at ages 16, 18, and 20. These conferences involve the member, authorized representative, nurse case manager, and social worker, focusing on medical, psychosocial, educational, and legal needs. Targeted outreach is conducted based on age-out reports and annual medical reviews. Members are transferred to adult case management at age 21, and will be monitored for three years. If no active case management needs are identified, the member is monitored through an annual check-in. If unresolved case management needs remain, the member is referred to an adult case manager for continued support in addressing barriers and working toward their care plan goals. Ms. Collins and Ms. Griggs discussed common challenges, such as limited engagement from members and families, especially in encouraging member empowerment and participation. Ms. Griggs noted that many members prefer to have parents handle the process, making it difficult to foster independence. Ms. Murillo asked if there is lower engagement among Spanish-speaking and Mixteco families due to language barriers and literacy issues. Ms. Collins confirmed these challenges, explaining that additional education and encouragement are often needed. Ms. Stenersen and Ms. Collins described efforts to involve Spanish-speaking social workers and the use of language line services to improve outreach. Ms. Stenersen and Ms. Collins agreed to consider these suggestions, especially for families with language barriers. Ms. Strickland thanked the presenters and shared that her family's transition experience was similar, noting that CCS was not heavily involved at the time, possibly due to the transition occurring several years ago during the early stages of the Whole Child Model and near the end of COVID. Ms. Stenersen acknowledged the feedback and explained that CCS engagement is especially focused on MTU members, with the goal of involving CCS, Special Education, and TCRC partners in transition planning whenever possible. She emphasized the importance of ensuring members have needed support, especially with durable medical equipment, before aging out. Ms. Strickland and Ms. Stenersen discussed improving communication with families by developing a script or checklist to better connect mailed notices with follow-up phone calls. Ms. Murillo shared her experience with delays in obtaining a wheelchair for her adult son after aging out of CCS, highlighting paperwork and communication challenges. Ms. Stenersen, Ms. Strickland, and Ms. Collins discussed the complexities of DME authorization post-CCS, including insurance requirements and the role

	of external assessment companies. Ms. Stenersen asked Adult UM follow-up with Ms. Murillo offline and asked Ms. Collins and Ms. Griggs to share the Transition Planning Resource List with this committee.
7. Member Services Update Area specific CCS data report	Ms. Robles noted a request from the previous meeting for a breakdown of new CCS member data by zip codes. She explained that data is currently available by region (north, central, south, out of county) rather than by zip code due to reporting limitations. For the first quarter, 220 new CCS cases were added, with breakdowns by county provided. Ms. Stenersen requested rolling 12-month membership data and information on case closures and disenrollment, which Ms. Robles agreed to include in future reports to support internal renewal process monitoring. Ms. Robles confirmed that the member portal is not yet available for minors, but members 18 and older can access it.
8. ECM Update	Ms. Te explained that the Justice Involved Initiative supports members in correctional facilities by coordinating with ECM providers to ensure a smooth transition and necessary support upon reentry into the community. She reported that for CCS members, 824 members are receiving ECM outreach, with 635 CCS members enrolled, 28 in San Luis Obispo awaiting assignment, and 421 in Santa Barbara County waiting for provider assignment. The provider network has expanded significantly to address these needs. Ms. Te listed new and existing ECM providers, including American Indian Health and Services, Center for Family Strengthening, Children's Hospital of Los Angeles, Communify, Family Care Network, and others, noting that expanded capacity allows for more timely outreach and assignment. She described the referral process, explaining that some providers accept direct referrals from community organizations or members, while others are assigned by the ECM team based on member needs, location, and language. She also provided the Enhanced Care Management contact information. Ms. Stenersen noted the provider network has grown but asked about delays in assigning members. Ms. Te clarified delays are due to limited outreach capacity, with providers accepting new referrals only after completing outreach to current members. In response to Ms. Stenersen's suggestion, Ms. Te agreed to present a success story involving CCS members and ECM services at the next meeting, highlighting positive outcomes and provider efforts.
9. CCS & MTP Staffing Update Medical Therapy Program	Ms. Castaneda reported ongoing staffing challenges in both administrative and therapy roles, leading to the implementation of a therapy waitlist. Cases are triaged by the medical director and therapy staff, and efforts are made to ensure all families are contacted and DME needs are addressed. Staff are being reassigned to cover those on leave, and burst therapy is offered to maximize service delivery. She described how therapists from Santa Barbara and Santa

	Maria are covering Lompoc due to limited staff, with Heather Harpster serving as the supervising therapist and licensed PT in Lompoc. Ms. Castaneda highlighted Jane's efforts to educate PT students about the CCS therapy program, which has generated interest among students to work in the program after graduation, potentially benefiting county staffing in the future. Ms. Stenersen encouraged them to reach out if CenCal can help in any way. Ms. Castaneda and Ms. Stenersen discussed celebrating CCS turning 100 years old. Ms. Ramirez shared that the county is currently down to one occupational therapist and is actively recruiting. She is covering patient service representative duties temporarily, and the team is working to ensure all children receive necessary therapy.
10. Roundtable Discussion & News from Agencies	Ms. Stenersen thanked Ms. Strickland for her Caring Futures presentation, noting that the utilization management and case management teams really enjoyed it. Ms. Strickland shared that a new class series is starting next Thursday at 1:00 PM. Families in need of support with future planning or self-care are encouraged to enroll or be referred.
11. Next Meeting: August 20, 2026 In-Person in Santa Barbara Office	Ms. Stenersen announced that the next meeting will be held on August 20th, with plans for an in-person gathering at the Santa Barbara office and virtual participation available. Ms. Jones will coordinate logistics and communicate details to participants.
12. Adjournment	Ms. Stenersen adjourned the meeting and thanked participants for their participation and advocacy.

Pediatric Clinical Advisory Committee Report & Minutes for October 21, 2026, BOD Meeting

Date: October 21, 2026

From: Dianna Myers, MD, FAAP
Medical Director, Pediatrics

Through: Maya Heinert, MD, MBA, FAAP
Chief Medical Officer

Executive Summary

The purpose of this memo is to summarize the highlights of the PCAC meeting that occurred on June 3, 2026.

Background

Pediatric Clinical Advisory Committee (PCAC) was formed as part of Whole Child Model (WCM) implementation in July 2018 (SB 586, Section 14094.17(a)). It provides a forum for CenCal Health, SB and SLO County CCS Medical Directors and community CCS paneled physicians to discuss issues of interest and importance. The purpose of PCAC is to advise the Health Plan on clinical issues relating to CCS conditions. PCAC reports to the Quality Improvement & Health Equity Committee (QIHEC) and to the Board of Directors. The committee meets on a quarterly basis.

Transportation Benefit

The Committee received an overview of transportation benefits available to members, including transportation scheduling, grievance processes, service delays, car seat requirements, and reimbursement programs for mileage, lodging, meals, and parking.

Discussion highlighted the importance of ensuring members and families have timely access to transportation resources and support. Leadership reinforced the value of reporting transportation concerns and submitting grievances when appropriate, as member feedback is essential to identifying service gaps and driving quality improvement efforts.

Committee members expressed appreciation for the ongoing support provided to members and families and recognized staff responsiveness, accessibility, and commitment to helping members navigate transportation benefits and services. Overall, the discussion underscored the organization's continued focus on improving member experience and access to care through effective transportation support.

Medi-Cal Rx Updates

The Committee received updates on key **Medi-Cal Rx** initiatives affecting provider enrollment, pharmacy claim requirements, and medication coverage. Implementation

of the requirement that prescribers be enrolled as Medi-Cal providers to prescribe through Medi-Cal Rx has been postponed, with state officials considering a phased approach to minimize disruption. Ongoing provider outreach and education efforts continue to support enrollment readiness.

Committee members were also informed that the requirement to include **ICD-10 diagnosis codes** on pharmacy claims has been delayed until a later implementation date, providing additional time for providers to prepare and integrate the requirement into prescribing workflows.

The Committee reviewed recent updates to **GLP-1 medication coverage criteria**, including streamlined access for certain diagnoses when appropriate diagnosis codes are submitted and continued eligibility considerations for pediatric members under EPSDT. Additional coverage guidance related to metabolic dysfunction-associated steatohepatitis (MASH) and obstructive sleep apnea indications were also discussed. The update concluded with a review of available provider resources and support tools, emphasizing continued efforts to ensure providers are prepared for upcoming Medi-Cal Rx changes and can efficiently access pharmacy benefit information and assistance.

CenCal Health Update

The committee received updates on the ongoing declines in Medi-Cal and CCS membership. Current CCS membership trends suggest continued reductions, attributed to CCS annual medical review requirements and challenges obtaining timely medical records from specialists. CenCal Health has dedicated resources to improve the annual renewal process and timely submission of documentation.

Discussion focused heavily on barriers obtaining records from tertiary care centers and specialty hospitals. Providers expressed interest in collaborating on workflow improvements and assisting with record acquisition.

CCS/WCM Advisory Group Update

Ana Stenerson, Utilization Management Director, presented key takeaways from the April 15 CCS Advisory Group meeting, highlighting priority improvement areas identified through member surveys. These included reducing provider paneling timelines, strengthening transition planning for CCS members aging out of the program, improving CCS enrollment and Service Authorization Request (SAR) timeliness, ensuring continuity of Enhanced Care Management (ECM) services, and streamlining facility review timelines.

Ana also provided updates on issues affecting undocumented immigration status (UIS) populations and discussed anticipated CCS guidance documents expected to support future program implementation and operations.

Additionally, stakeholders were encouraged to identify and refer CCS families interested in serving on the CCS Family Advisory Committee to strengthen family engagement and inform ongoing program improvements.

County CCS Liaison Update

Tanesha Castaneda reported that Santa Barbara County has implemented a waitlist for Medical Therapy Program (MTP) services due to significant staffing shortages and increasing caseloads. New cases are being triaged based on clinical need while efforts continue to secure contractor support and advocate for increased state funding.

Regina Samson reported San Luis Obispo County is similarly experiencing occupational therapy staffing challenges, though a formal waitlist has not yet been implemented.

Both counties emphasized the impact staffing shortages have on service delivery and turnaround times.

County CCS Medical Director Update

Dr. Rhonda Gordon discussed several pending CCS policy updates. DHCS has reaffirmed that counties are responsible for determining NICU and HRF eligibility. She reported ongoing discussions regarding future CCS eligibility effective dates potentially being tied to referral submission dates rather than retroactive coverage. Dr. Rhonda Gordon also reviewed CCS annual medical review requirements, emphasizing that patients must have documentation from a CCS-paneled physician within the required review period for each CCS-eligible condition. Potential extensions of review timelines from 12 to 18 months are under consideration but have not yet been finalized. Discussion also included impacts on children with UIS status who may transition to state Medi-Cal coverage beginning in 2027. Committee members expressed concerns regarding provider access and continuity of care for affected populations.

Provider Services/Relations Updates

The committee received provider recruitment updates, including new ABA providers in Santa Barbara and San Luis Obispo Counties, expanded ophthalmology/optometry access in San Luis Obispo County, and addition of a nutrition services provider. Committee members expressed concerns regarding evidence-based pediatric nutrition practices related to a newly contracted provider. Gisela Taboada, Provider Relations Manager, reviewed CenCal Health's credentialing and peer review processes and agreed to further investigate the provider's concerns and report back. Discussion also highlighted broader concerns regarding behavioral health, ABA services, and access to evidence-based care.

Next Steps

The next PCAC meeting is scheduled for September 2, 2026. Anticipated agenda topics include Medi-Cal Rx Update, Q&A About Medi-Cal's ABA Benefit, CenCal Health

Update, CCS Advisory Group Meeting summary, update from the County CCS Medical Director from CCS Regional and Statewide meetings, County CCS Liaison Updates from Santa Barbara & San Luis Obispo counties, Provider Services/Relations update, and Measurement Year 2025 Quality of Care Performance for CCS & TCRC Members Report.

Recommendation

The PCAC report is informational and is presented for the Board of Directors' acceptance. No additional action is requested currently.

Attachments:

1. June 3, 2026, approved minutes
2. September 2, 2026, agenda



***Whole Child Model Program
Pediatric Clinical Advisory Committee (PCAC)
Meeting Agenda***

Date: September 2, 2026

Time: 12:00 – 1:30 p.m.

Location: Microsoft Teams Virtual Meeting

Chairperson: Dianna Myers, MD, FAAP, Medical Director, Pediatrics

Committee Members: Maya Heinert, MD, MBA, Chief Medical Officer; Tanya Phares, DO, MPH, CPE, FACP, FACPM, Senior Medical Director; Gowthamy Balakumaran, MD; Cindy Blifeld, MD; Kara Garcia, MD; Rhonda Gordon, MD; James McGhee, MD, MPH, FAAP; Carl Owada, MD, FACC, FSCAI; Miriam Parsa, MD; Tami Taketani, MD; Julie Anselmo, MD; Emy Berger, Interim Pediatric Health Services Manager; Cathy Slaughter, Provider Relations Director; Tanesha Castaneda, Program Manager, Children's Medical Services, County of Santa Barbara; Regina Samson, MSN, RN, PHN, Supervising Public Health Nurse, County of San Luis Obispo

Staff Attendees: Adam Horn, Pharm.D.; Ana Stenerson, Utilization Management Director; Ahalya Pitchaikannu, Quality Measurement Analyst

Secretary: Pauline Perez, Executive Assistant

Agenda Item	Facilitator	Time
1. <i>Welcome, Announcements, and Introductions</i>	Dr. Dianna Myers	5
2. Approval of Minutes of June 3, 2026, Meeting	Committee	2
3. Medi-Cal Rx Update	Adam Horn, Pharm.D., Pharmacy Services Clinical Manager	5
4. Q&A About Medi-Cal's ABA Benefit	Neal Adams, MD, MPH, Medical Director, Behavioral Health – General Psychiatry & Rachel Lambert, LMFT, MBA-HCM, Behavioral Health Director	5
5. CenCal Health Update CCS UIS Transition	Ana Stenerson, Utilization Management Director	5

6. CCS WCM Advisory Group Update	Ana Stenerson, Utilization Management Director	10
7. Provider Services/Relations Update	Cathy Slaughter, Director, Provider Relations	5
8. County CCS Liaison Update	Tanesha Castaneda, Program Manager, CCS, County of Santa Barbara and Regina Samson, MSN, RN, PHN, Supervising Public Health Nurse, CLPPP Coordinator, HCPCFC Program Administrator, County of San Luis Obispo	10
9. County CCS Medical Director Update	Rhonda Gordon, MD, Medical Director, CCS	15
10. Measurement Year (MY) 2025 Quality of Care Performance for CCS & TCRC Members Report – move to Dec mtg	Ahalya Pitchaikannu, Quality Measurement Analyst	10
11. Pediatric Provider Updates/Roundtable Discussion	Dr. Dianna Myers	5
12. Next Meeting date – December 2, 2026	Dr. Dianna Myers	1
13. Adjournment	Dr. Dianna Myers	2

*CCS Advisory Group - <https://www.dhcs.ca.gov/services/ccs/Pages/AdvisoryGroup.aspx>



Pediatric Clinical Advisory Committee (PCAC) Meeting Minutes

Date: June 3, 2026

Time: 6:00 p.m. – 7:30 p.m.

Location: Microsoft *Teams Virtual Meeting*

Chairperson: Dianna Myers, MD, FAAP, Medical Director, Pediatrics

Committee Members: Maya Heinert, MD, MBA, FAAP, Chief Medical Officer, Cathy Slaughter, Provider Relations Director; Shelby Stockdale, MSN, RN, PHN; Gowthamy Balakumaran, MD; Cindy Blifeld, MD; Kara Garcia, MD; Rhonda Gordon, MD; James McGhee, MD, MPH, FAAP; Carl Owada, MD, FACC, FSCAI; Miriam Parsa, MD; Tami Taketani, MD; Tanesha Castaneda, Program Manager, Children's Medical Services, County of Santa Barbara; Regina Samson, MSN, RN, PHN, Supervising Public Health Nurse, County of San Luis Obispo Health Agency

Attendance of Voting Members:

Name of Voting Committee Member	Present	Absent
Dianna Myers, MD, FAAP - Chairperson	X	
Maya R. Heinert, MD, MBA, FAAP		X
Tanya Phares, DO, MPH, CPE, FACP, FACPM		X
Cathy Slaughter – <i>Gisela Taboada for</i>		X
Shelby Stockdale, MSN, RN, PHN – <i>Ana Stenerson for</i>		X
<i>Gowthamy Balakumaran, MD</i>		X
<i>Cindy Blifeld, MD</i>	X	
Tanesha Castaneda	X	
Kara Garcia, MD		X
Rhonda Gordon, MD	X	
James McGhee, MD, MPH, FAAP	X	
<i>Carl Y. Owada, MD, FACC, FSCAI</i>	X	
<i>Miriam Parsa, MD</i>	X	
<i>Regina Samson, MSN, RN, PHN</i>	X	
<i>Tami Taketani, MD</i>	X	

Staff Attendees: Adam Horn, PharmD, Pharmacy Services Clinical Manager

Recorder: Pauline Perez, Executive Assistant

Topic	Discussion	Action
1. Welcome, Announcements & Introductions Dr. Dianna Myers	Dr. Myers welcomed everyone with no announcements or introductions needed. Quorum was met and the meeting proceeded.	No
2. Approval of Minutes for March 3, 2026, meeting	Motion made by Dr. Blifeld to approve March 4, 2026, minutes; seconded by Dr. Parsa. Motion passed.	Yes
3. Transportation Benefit Ashley Garcia, Clinical Support Associate – NEMT – Utilization Management	Ashley Garcia provided an overview of transportation benefits available to CenCal Health members. Discussion included transportation scheduling, member grievances, transportation delays, car seat requirements, mileage reimbursement, lodging reimbursement, meal reimbursement, and parking reimbursement. Monitoring and Resolution of Transportation Issues - Ashley Garcia emphasized the importance of reporting transportation concerns promptly. Members were encouraged to: • Contact Ashley directly for same-day transportation issues. • Submit grievances when service concerns occur so trends can be tracked, investigated, and addressed. Ana Stenersen noted that transportation concerns are reviewed through the organization's Transportation Oversight Committee, including grievance and appeal monitoring processes. Transportation Utilization Challenges Ana Stenersen reported ongoing concerns regarding high rates of appointment cancellations and no-shows. Last-minute cancellations affect driver scheduling and can contribute to transportation delays for other members. Efforts continue with Ventura Transit to improve service coordination and reduce operational impacts. CCS and Transportation Benefits Ashley clarified that mileage reimbursement is available for all CenCal members, including both in-county and out-of-county appointments. Additional Travel Reimbursement Benefits Committee members (Dr. Gordon, Tanesha, and Regina) inquired about additional reimbursement options available to members: • Mileage reimbursement • Parking reimbursement (up to \$10 with receipt) • Meal reimbursement (up to \$30 per day with receipts) • Lodging reimbursement (up to \$150 per night when approved and medically necessary) Lodging may be approved for appointments requiring significant travel, including early morning or late afternoon appointments when overnight accommodations are appropriate.	No

	MTU Appointment Support • Transportation-related reimbursement benefits also apply to Medical Therapy Unit (MTU) appointments. • Families may submit recurring MTU visits for reimbursement through established processes. Access to Transportation Resources Committee members were reminded that: • Transportation information is available in the member handbook. • Transportation forms, including PCS and triage forms, are available on the provider section of the website. • Providers and families may contact transportation staff directly for assistance. Committee members thanked Ashley Garcia for her informative presentation and continued support of members and families. Leadership emphasized the importance of reporting transportation concerns and filing grievances when needed to help improve service quality and member experience. Ashley was recognized for her responsiveness, accessibility, and commitment to helping members navigate and access transportation benefits.	
4. Medi-Cal Rx Update Adam Horn, PharmD, Pharmacy Services Clinical Manager	Adam Horn provided updates regarding Medi-Cal Rx initiatives. Provider Enrollment Requirement: DHCS has postponed implementation of the requirement for prescribers to be enrolled as Medi-Cal providers to prescribe through Medi-Cal Rx. DHCS is considering a phased rollout to reduce disruption. CenCal Health continues to outreach to providers who are not yet enrolled and encourages providers to review enrollment resources. ICD-10 Diagnosis Code Requirement: Implementation requiring ICD-10 codes on pharmacy claims has also been delayed, likely until later in 2026 (fall of 2026). Providers were encouraged to begin including ICD-10 codes on prescriptions now to avoid future disruptions. GLP-1 Coverage Updates: Effective April 1, coverage criteria were updated for GLP-1 medications. Certain diagnoses may be processed without prior authorization when appropriate diagnosis codes are submitted. Pediatric members under EPSDT may continue to qualify for GLP-1 medications for weight-related indications. Updates regarding MASH and obstructive sleep apnea indications were also reviewed. Adam concluded with available Medi-Cal Rx resources and provider support tools.	No
5. CenCal Health Update Ana Stenerson, Utilization Management Director	Ana Stenerson reported ongoing declines in Medi-Cal and CCS membership. Current membership trends suggest continued reductions, largely attributed to CCS annual medical review requirements and challenges obtaining timely medical records from specialists. CenCal Health has dedicated resources to improve the annual renewal process and timely submission of documentation.	No

	Discussion focused heavily on barriers obtaining records from tertiary care centers and specialty hospitals. Providers expressed interest in collaborating on workflow improvements and assisting with record acquisition. Follow-Up: Ana Stenersen to connect with Dr. Parsa and Dr. Blifeld regarding CCS medical record workflows and share updated submission guidance and contact information with committee members.	
6. CCS WCM Advisory Group Update Ana Stenersen, Utilization Management Director	Ana presented highlights from the April 15 CCS Advisory Group meeting, including priority areas identified through member surveys: improving provider paneling timelines, transition planning for aging-out CCS members, improving CCS enrollment and SAR timeliness, ECM continuity, and facility review timelines. Ana also provided updates regarding undocumented immigration status (UIS) populations and anticipated future CCS guidance documents. Additionally, Ana encouraged referrals of CCS families interested in participating in the CCS Family Advisory Committee.	No
7. County CCS Liaison Update Tanesha Castaneda, PM, CCS, County of Santa Barbara And Regina Samson, MSN, RN, PHN, Supervising Public Health Nurse, CLPPP Coordinator, HCPCFC Program Administrator, County of San Luis Obispo	Tanesha Castaneda reported that Santa Barbara County has implemented a waitlist for Medical Therapy Program (MTP) services due to significant staffing shortages and increasing caseloads. New cases are being triaged based on clinical need while efforts continue to secure contractor support and advocate for increased state funding. Regina Samson reported San Luis Obispo County is similarly experiencing occupational therapy staffing challenges, though a formal waitlist has not yet been implemented. Both counties emphasized the impact staffing shortages have on service delivery and turnaround times.	No
8. County CCS Medical Director Update Dr. Rhonda Gordon	Dr. Gordon discussed several pending CCS policy updates. DHCS has reaffirmed that counties are responsible for determining NICU and HRIF eligibility. She reported ongoing discussions regarding future CCS eligibility effective dates potentially being tied to referral submission dates rather than retroactive coverage. Dr. Gordon also reviewed CCS annual medical review requirements, emphasizing that patients must have documentation from a CCS-paneled physician within the required review period for each CCS-eligible condition. Potential extensions of review timelines from 12 to 18 months are under consideration but have not yet been finalized. Discussion also included impacts on children with UIS status who may transition to state Medi-Cal coverage beginning in 2027. Committee members expressed concerns regarding provider access and continuity of care for affected populations.	No

	Follow-Up: Continue monitoring DHCS guidance regarding CCS eligibility timelines, annual medical review requirements, NICU/HRIF eligibility guidance, and UIS policy changes.	
9. Pediatric Provider Updates Pediatrician Committee Members		
10. Provider Services/Relations Update Gisela Taboada,	Gisela Taboada shared provider recruitment updates, including new ABA providers in Santa Barbara and San Luis Obispo Counties, expanded ophthalmology/optometry access in San Luis Obispo County, and addition of a nutrition services provider. Committee members expressed concerns regarding evidence-based pediatric nutrition practices related to one newly contracted provider. Gisela reviewed CenCal Health's credentialing and peer review processes and agreed to further investigate the provider concerns and report back. Discussion also highlighted broader concerns regarding behavioral health, ABA services, and access to evidence-based care. Follow-Up: Provider Relations team to review concerns regarding Gut Glow LLC and provide additional information. Behavioral Health team to be invited to a future meeting to discuss ABA services, evaluations, access concerns, and available resources.	
11. Roundtable Discussion	Committee members discussed the impact of CCS membership declines, barriers to obtaining records from tertiary care centers such as CHLA, and opportunities for provider advocacy related to CCS renewal requirements. Dr. Parsa emphasized the need for streamlined workflows and collaboration among providers, health plans, and counties to maintain member eligibility and continuity of care. Discussion included advocacy opportunities related to future public comment periods and state funding decisions affecting therapy services.	No
12. Discussion Moving Forward: a) Future Agenda Topics b) Meeting times – Poll to be sent c) Recommendations for SLO County Provider Membership	Members requested future discussion regarding behavioral health services, ABA access, evidence-based interventions, CCS issues, and ongoing policy changes impacting children and families.	No
13. Next Meeting	The next meeting will be on September 2, 2026.	No
14. Adjournment	Dr. Myers thanked participants for their engagement, collaboration, and commitment to supporting children and families in the community. The meeting adjourned at approximately 7:22 p.m.	No

Respectfully Submitted,

Pauline I. Perez

Pauline I. Perez
Executive Assistant

August 17, 2026
Date

Approved,

A handwritten signature in black ink, appearing to read "Dianna Myers", written over a horizontal line.

Dianna Myers, MD, FAAP
Medical Director, Pediatrics

August 17, 2026
Date