2025 MOU Annual Report

MOU Effective Date	MOU Type	Contracted MOU	Description of Contracted MOU	Plan Code	Plan Name (Medi-Cal/Medicare)	County Administrative Office	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
01/2020	DSS: Local Health Departments	No	Per Local Health Department MOU with San Bernardino County Department of Public Health (Communicable Disease, Lead Poisoning, Tuberculosis, Children CBAS requirements	09	Inland Empire Health Plan	San Bernardino	2024	San Bernardino County Department of Public Health	No	N/A	CLIP Yolanda Skelo, Vice President, Population Health & CalAIM Jennifer Sills, Director, Population Health Community Services Carolyn Jackson, Supervisor Program Manager Jessica Ortiz, Program Manager Andrew Falls, Senior Provider Relations Manager Amelia Vera-Jaso, Manager, Provider Contracting Jessica Ortiz, Program Manager, Population Health Jodi Ruiz, County Program Center Jessica Ortiz, Program Manager, Population Health Lorena Chavolla, Vice President, Health Equity Beth Gonzales, Manager, Quality Improvement Strategy Theodore Nace-Bernardino, Director, Health Education, Promotion & Prevention San Bernardino Department of Public Health: Jennifer Sills, Director John Pratt, Assistant Director Bassar Bawg, Health Officer Dr. Jennifer Sills, Director, Community and Family Health Paul Bagatian, Chief Financial Officer Rex Johnston, Division Chief Compliance Officer Dr. Jennifer Sills, Director, Disease Chief Vincent Frank Lee Prevention Jennifer Sills, Director Chief Division and Bureau Department	Weekly member referrals were not discussed during the CLIP MOU meeting. Instead, Department, IEHP and San Bernardino County Behavioral Health discuss coordination and coordination on a case by case basis. Additionally, the Bernardino County, which offers primary care, pediatrics, immunizations, and reproductive health services, is reimbursed for services through a Per Service (PS) model.	Strategies to avoid duplication of services were not discussed during the CLIP MOU and San Bernardino County defined identify any duplication of services during the reporting period.	Strategies to avoid duplication of services were not discussed during the CLIP MOU and San Bernardino County defined identify any duplication of services during the reporting period.	During the reporting period, IEHP production training sessions for San Bernardino County. The training covered available services for members, including preventive care services, educational materials, and provider resources.	Impact assistance was not discussed during the CLIP MOU meeting.	Impact of the training provided by IEHP, provider services shared information on where to access brochures detailing available member services and instructions on how to order or enroll members.
n/a	1) Local Government Agencies: Jails, Juvenile Facilities and Probation Departments	No		09	Inland Empire Health Plan	San Bernardino	2024	Arrowhead Regional Medical Center, San Bernardino County (Department of Behavioral Health, Department of Public Health, Sheriff's Department, San Bernardino County Probation	No	Multiple MOP stakeholders (that include County Stakeholders involved in benefits administration	CLIP Jim Porter, Program Manager Angela Kelsey, HIS Nilda Chavez, 2-1 Liaison DPH Matthew Wray, Director HSD Marne Cramer, Director ECM Nicky Garcia-Martinez , Sr. Director Integrated Care Management J.R. Garcia, Manager HSD Vince Pedlar , Supervisor HSD Aurelia Camarena, Manager Integrated Care Management Sonja Prunella, Special Programs Manager HSD Jolene Perez, County Programs Liaison Ilana Ferris, Practice Coach and 2-1 Liaison Karen Pensavento Jace Bin El Ayadi , Implementation Consultant Jennifer Sibley Sheriff's Department Sarah Hayes , Analyst Angela Kelsey, HIS Eric Allen, Sheriff, Lieutenant Jessica Ortiz, Program Manager Sr. Jessica Lazarte MPH Sr. Jessica Ortiz Heather Hernandez SWCBD Melanie Reid Livingston DPH Monique Gonzalez	EHP supports the coordination of medical, behavioral, and social services for partner involved members (example: Behavioral Health Services, Public Health, Jails, Probation, Conditions. EHP collaboration with correctional facilities to share necessary health information accurately and timely. Information shared includes medical records, behavioral health information, and other relevant information. EHP establishes clear pathways for behavioral health, physical health, and social support services. EHP conducts regular monitoring and quarterly meetings to evaluate effectiveness and resolve coordination challenges.	EHP accepts and processes referrals for Enhanced Care Management (ECM) and Community Supports during the CLIP meeting. Referrals are submitted via secure electronic systems to confirm service delivery and communicate referral status back to correctional facilities. EHP maintains clear pathways for referrals, ensuring timely and accurate service delivery. EHP establishes clear pathways for behavioral health, physical health, and social support services. EHP conducts regular monitoring and quarterly meetings to evaluate effectiveness and resolve coordination challenges.	EHP develops policies and quality improvement activities to prevent overlapping services between EHP, correctional facilities, and county behavioral health agencies. EHP collaborates with these entities to share necessary information regarding to ensure comprehensive, coordinated care. EHP establishes clear pathways for referrals, ensuring timely and accurate service delivery. EHP maintains member engagement and ensures that services are tailored to meet the unique needs of incarcerated facilities and advocate services to clarify roles and responsibilities for service delivery.	EHP establishes uniform procedures for resolving disputes with correctional facilities regarding service delivery. These procedures include clear communication channels, regular meetings to address concerns promptly, and a structured dispute resolution process. The goal is to maintain a collaborative and transparent relationship, ensuring that all parties are informed and accountable.	EHP maintains ongoing collaboration with regional DSP providers, correctional facilities, and other county partners through quarterly meetings and ad-hoc discussions. These meetings focus on coordination, quality improvement, and patient/member discharge planning. EHP maintains open communication channels to address any concerns promptly and ensure smooth transitions for members. EHP participates in local financial and county level initiatives to strengthen community partnerships. EHP documents collaborative activities and reports updates to DHCS as required.	EHP engages in referral to CIN Provider within 5 days. EHP presents members understandable and accessible materials to ensure they are informed about their rights and responsibilities. The goal is to empower members to make informed decisions and participate actively in their care. EHP conducts regular member engagement assessments and incorporates feedback into quality improvement efforts.
n/a	1) Local Government Agencies: Jails, Juvenile Facilities and Probation Departments	No		01	Inland Empire Health Plan	Riverside	2024	Riverside County Department of Public Health (Communicable Disease Services, Vector Services), Riverside County Probation	No	Multiple MOP stakeholders (that include County Stakeholders involved in benefits administration	CLIP Jim Porter, Program Manager Angela Kelsey, HIS Nilda Chavez, 2-1 Liaison DPH Matthew Wray, Director HSD Marne Cramer, Director ECM Nicky Garcia-Martinez , Sr. Director Integrated Care Management J.R. Garcia, Manager HSD Vince Pedlar , Supervisor HSD Aurelia Camarena, Manager Integrated Care Management Sonja Prunella, Special Programs Manager HSD Jolene Perez, County Programs Liaison Ilana Ferris, Practice Coach and 2-1 Liaison Karen Pensavento Jace Bin El Ayadi , Implementation Consultant Jennifer Sibley Sheriff's Department Sarah Hayes , Analyst Angela Kelsey, HIS Eric Allen, Sheriff, Lieutenant Jessica Ortiz, Program Manager Sr. Jessica Lazarte MPH Sr. Jessica Ortiz Heather Hernandez SWCBD Melanie Reid Livingston DPH Monique Gonzalez	EHP supports the coordination of medical, behavioral, and social services for partner involved members (example: Behavioral Health Services, Public Health, Jails, Probation, Conditions. EHP collaboration with correctional facilities to share necessary health information accurately and timely. Information shared includes medical records, behavioral health information, and other relevant information. EHP establishes clear pathways for behavioral health, physical health, and social support services. EHP conducts regular monitoring and quarterly meetings to evaluate effectiveness and resolve coordination challenges.	EHP accepts and processes referrals for Enhanced Care Management (ECM) and Community Supports during the CLIP meeting. Referrals are submitted via secure electronic systems to confirm service delivery and communicate referral status back to correctional facilities. EHP maintains clear pathways for referrals, ensuring timely and accurate service delivery. EHP establishes clear pathways for behavioral health, physical health, and social support services. EHP conducts regular monitoring and quarterly meetings to evaluate effectiveness and resolve coordination challenges.	EHP develops policies and quality improvement activities to prevent overlapping services between EHP, correctional facilities, and county behavioral health agencies. EHP collaborates with these entities to share necessary information regarding to ensure comprehensive, coordinated care. EHP establishes clear pathways for referrals, ensuring timely and accurate service delivery. EHP maintains member engagement and ensures that services are tailored to meet the unique needs of incarcerated facilities and advocate services to clarify roles and responsibilities for service delivery.	EHP establishes uniform procedures for resolving disputes with correctional facilities regarding service delivery. These procedures include clear communication channels, regular meetings to address concerns promptly, and a structured dispute resolution process. The goal is to maintain a collaborative and transparent relationship, ensuring that all parties are informed and accountable.	EHP maintains ongoing collaboration with regional DSP providers, correctional facilities, and other county partners through quarterly meetings and ad-hoc discussions. These meetings focus on coordination, quality improvement, and patient/member discharge planning. EHP maintains open communication channels to address any concerns promptly and ensure smooth transitions for members. EHP participates in local financial and county level initiatives to strengthen community partnerships. EHP documents collaborative activities and reports updates to DHCS as required.	EHP measures members understand and access available services during pre-release and post-release periods. EHP provides educational materials, workshops, and resources to ensure members are informed about their rights and responsibilities. The goal is to empower members to make informed decisions and participate actively in their care. EHP conducts regular member engagement assessments and incorporates feedback into quality improvement efforts.
n/a	1) Local Government Agencies: Jails, Juvenile Facilities and Probation Departments	No		01	Inland Empire Health Plan	Riverside	2024	CIOS (Rubio Valley)	No	Multiple MOP Stakeholders and DSW for benefits administration	CI-10 Morgan Lynn Pierce, DSW, SVDCT Policy Advisor Bryan Donahue, OpenMind Ventures (Professional Services representing DSW in terms of Program Management Administration)	EHP supports the coordination of medical, behavioral, and social services for partner involved members (example: Behavioral Health Services, Public Health, Jails, Probation, Conditions. EHP collaboration with correctional facilities to share necessary health information accurately and timely. Information shared includes medical records, behavioral health information, and other relevant information. EHP establishes clear pathways for behavioral health, physical health, and social support services. EHP conducts regular monitoring and quarterly meetings to evaluate effectiveness and resolve coordination challenges.	EHP accepts and processes referrals for Enhanced Care Management (ECM) and Community Supports during the CLIP meeting. Referrals are submitted via secure electronic systems to confirm service delivery and communicate referral status back to correctional facilities. EHP maintains clear pathways for referrals, ensuring timely and accurate service delivery. EHP establishes clear pathways for behavioral health, physical health, and social support services. EHP conducts regular monitoring and quarterly meetings to evaluate effectiveness and resolve coordination challenges.	EHP develops policies and quality improvement activities to prevent overlapping services between EHP, correctional facilities, and county behavioral health agencies. EHP collaborates with these entities to share necessary information regarding to ensure comprehensive, coordinated care. EHP establishes clear pathways for referrals, ensuring timely and accurate service delivery. EHP maintains member engagement and ensures that services are tailored to meet the unique needs of incarcerated facilities and advocate services to clarify roles and responsibilities for service delivery.	EHP establishes uniform procedures for resolving disputes with correctional facilities regarding service delivery. These procedures include clear communication channels, regular meetings to address concerns promptly, and a structured dispute resolution process. The goal is to maintain a collaborative and transparent relationship, ensuring that all parties are informed and accountable.	EHP maintains ongoing collaboration with regional DSP providers, correctional facilities, and other county partners through quarterly meetings and ad-hoc discussions. These meetings focus on coordination, quality improvement, and patient/member discharge planning. EHP maintains open communication channels to address any concerns promptly and ensure smooth transitions for members. EHP participates in local financial and county level initiatives to strengthen community partnerships. EHP documents collaborative activities and reports updates to DHCS as required.	EHP measures members understand and access available services during pre-release and post-release periods. EHP provides educational materials, workshops, and resources to ensure members are informed about their rights and responsibilities. The goal is to empower members to make informed decisions and participate actively in their care. EHP conducts culturally sensitive outreach and engagement activities to ensure all members feel seen and heard. EHP monitors engagement outcomes and incorporates feedback into quality improvement efforts.
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01/01/2020	DSS: Local Health Departments	No		01	Inland Empire Health Plan	Riverside	2024	Riverside County, Department of Public and Social Services - Children's Services Division	No	N/A	Kick-Off Riverside w/DHCP, Molina, Kinder,	Yes-1 Riverside has requested to pause all meeting until further notice since June 2019.	The Parties must implement policies and procedures to ensure that the minimum necessary Member information is used or disclosed only as permitted or required by law, exchanged timely and maintained securely and confidentially, and in compliance with the requirements