

**Ventura County Medi-Cal Managed
Care Commission (VCMMCC) dba
Gold Coast Health Plan
Executive / Finance Committee Meeting**

DATE: Wednesday, February 9, 2011
TIME: 3:30-5:30 pm
PLACE: 2240 E. Gonzales Road, Suite 200, Oxnard CA 93036

**UPDATED
AGENDA**

Call to Order. Welcome and Roll Call

Public Comment / Correspondence

- | | | |
|----|---|---|
| 1. | <u>Approve Minutes - January 24, 2011 Meeting</u> | <i>Action Required</i> |
| 2. | <u>Accept and File CEO Update:</u>
a. Workplan Efforts / Go Live Date, etc.
b. <u>Milestone Status Report</u>
c. <u>State Deliverable Status Report</u> | <i>For Information</i>
<i>For Information</i>
<i>For Information</i> |
| 3. | <u>Accept and File Financial Report:</u>
a. <u>Updated Cash Flow</u> | <i>For Information</i> |
| 4. | <u>Management Recommendations:</u>
a. <u>Procedure for Public Comment</u>
b. <u>Consumer Advisory Group</u>
c. <u>Quality / Credentialing Committee</u>
d. Medical Management System Selection
e. <u>PCP Capitation Services List</u> | <i>Action Required</i>
<i>Action Required</i>
<i>Action Required</i>
<i>(deferred)</i>
<i>Action Required</i> |

Comments from Commissioners

Adjourn

Meeting agenda available at <http://www.vchca.org/financial-information/cohs.aspx>

**Ventura County Medi-Cal Managed Care Commission
(VCMCC) dba Gold Coast Health Plan (GCHP)
Executive / Finance Committee Meeting Minutes**

January 24, 2011

(Unofficial until approved)

CALL TO ORDER

Chair Greenia called the meeting to order at 2:34 p.m. in Suite 200 at the Ventura County Public Health Building located at 2240 E. Gonzales Road, Oxnard, CA 93036.

COMMITTEE MEMBERS PRESENT

Lanyard Dial, MD, Ventura County Medical Association

Rick Jarvis, Private Hospitals / Healthcare System

Catherine Rodriguez, Ventura County Medical Health System

EXCUSED / ABSENT COMMITTEE MEMBERS

Roberto S. Juarez, Clinicas del Camino Real, Inc.

Tim Maurice, Private Hospitals / Healthcare System

STAFF EX OFFICIO COMMITTEE MEMBERS

Earl Greenia, Chair, CEO

Darlane Johnsen, Vice-Chair, Interim CFO

ADDITIONAL STAFF IN ATTENDANCE

Traci R. McGinley, Clerk of the Board

Lezli Stroh, Administrative Assistant

Audra Lucas, Administrative Assistant

Candice Limousin, Human Resources Director

1. CALL TO ORDER

Chair Greenia called the meeting to order at 3:30 p.m. at the Ventura County Public Health Building located at 2240 E. Gonzales Road, Suite 200, Oxnard, CA 93036.

2. APPROVAL OF MINUTES

The Minutes of the January 12, 2011 Executive / Finance Committee Meeting were presented for review and approval.

Corrections noted were as follows for Agenda Item #5, *ACS Proposal*, the first paragraph shall read as follows:

“Discussion was held regarding the financial impact of different scenario’s comparing the current agreement versus the proposal, as well as if the Go-Live date is May 1,

May 2, 2011, or other dates. The Committee requested alternatives and clarification of the details of this proposal.”

Committee Member Dial moved to approve the minutes as amended, Member Rodriguez seconded and the motion carried. **Approved 3-0.**

3. PUBLIC COMMENT / CORRESPONDENCE

None.

4. COMMENTS FROM COMMITTEE MEMBERS

None.

ADJOURNMENT

Chair Greenia adjourned the meeting at 2:40 p.m.

GOLD COAST HEALTH PLAN		Go-Live Milestones	Updated: 7 February 2011		
	Action Steps	Due Date	Status	%	
1	Establish COHS	---	Completed	100%	
2	Establish Governance	---	Completed	100%	
3	Establish Management Structure				
	3.1 Secure planning/development funding	---	Completed	100%	
	3.2 Execute Staffing Plan	4/30/2011	In process	30%	
	3.3 Develop Facilities Plan; Negotiate Lease	---	Completed	100%	
	3.4 Acquire/Install furniture & equipment	4/30/2011	In process	40%	
	3.5 Tenet Improvements	4/30/2011	In process	15%	
4	Key DHCS Deliverables				
	4.1 Review Medi-Cal volume and payment data	---	Completed	100%	
	4.2 Submit Required Policies/Documentation	3/4/2011	In process	88%	
	4.3 DHCS Contract: rate negotiation	1/31/2011	In process	75%	
5	Financial Resources Management				
	5.1 Review/Negotiate Vendor Contracts	1/31/2011	In process	70%	
	5.2 Develop Investment and Risk Management Policies/Strategies	1/31/2011	In process	75%	
	5.3 Establish Banking Relationship	---	Completed	100%	
	5.4 Review/Select Accounting System	---	Completed	100%	
	5.5 Develop/Implement Financial Systems	3/4/2011	In process	20%	
	5.6 Develop Provider Compensation Arrangements	1/21/2011	In process	60%	
6	Member Services				
	6.1 Assess Language/Cultural Needs & Capabilities	2/15/2011	In process	10%	
	6.2 Establish relationships with community and social service agencies	4/30/2011	In process	20%	
	6.3 Medi-Cal Field Office Transition Planning	2/15/2011		0%	
	6.4 Establish Consumer Advisory Committee	3/1/2011	In process	25%	
	6.5 Develop/Implement Community / Member Outreach Plan	4/30/2011	In process	10%	
	6.6 Create Member Enrollment / Provider Directory / Welcome Package	2/15/2011	In process	20%	
7	Provider Network Development				
	7.1 Develop Provider Network Strategy	---	Completed	100%	
	7.2 Develop Standard Provider Contract & Reimbursement Templates	---	Completed	100%	
	7.3 Develop Credentialing Process and Tools	1/21/2011	In process	60%	
	7.4 Execute Provider Contracts	2/18/2011	In process	40%	
	7.5 Create Provider Manual; Obtain DHCS Approval	3/4/2011	In process	10%	
	7.6 Conduct provider orientation meetings and workshops	4/15/2011		0%	
8	Medical Management Operations				
	8.1 Develop Quality Management & Assurance Programs	2/15/2011	In process	50%	
	8.2 Evaluate/Select Medical Management System	1/31/2011	In process	50%	
	8.3 Establish Provider Advisory Committee and Peer Review Structure	2/28/2011	In process	50%	
	8.4 Develop Process/Tools for Facility Site Reviews	1/31/2011	In process	75%	
	8.5 Establish MOUs with Public Health and Service agencies	1/31/2011	In process	50%	
	8.6 Establish Drug Formulary & Protocols	2/18/2011	Completed	100%	
	8.7 Conduct Primary Care Facility Site Reviews	3/6/2011		0%	
	8.8 Develop Health Education Programs	2/15/2011		50%	
	8.9 Develop Case Management / Utilization Management Programs	2/15/2011		75%	
	8.10 Management of Carved-Out Services	1/31/2011		0%	
9	Claims Management & IT Operations				
	9.1 IT System Development, Testing & Implementation	3/15/2011	In process	20%	
	9.1.1 - Eligibility Verification system	3/15/2011	In process	20%	
	9.1.2 - Member Benefits System Configuration	3/15/2011	In process	20%	
	9.1.3 - Provider Database / Payment System Configuration	3/15/2011	In process	10%	
	9.1.4 - Data Loads	3/15/2011		10%	
	9.2 Data Warehouse Implementation	3/15/2011	In process	5%	
	9.3 ACS Staff Selection, Hiring & Training	3/15/2011	In process	10%	
	9.4 Call Center Implementation	3/1/2011	In process	20%	
	9.5 Develop/Implement Vendor Oversight Program	3/15/2011	In process	30%	

Overall Target is 80% by March 1st and 100% by April 30

STATE DELIVERABLES TRACKING

REVISED: 02/07/11

STATUS	EARL:	CMO/Pam:	Connie:	Paul:	Jim:	Andre:	Darlane:
Completed:	3	36	2	9	5	10	4
On Track:	2	22	2	5	0	5	5
Not Yet Submitted		10	1	3		1	2

Deliverable Number	Assigned To	Status	Due To DHCS	DHCSStatus	Sent to DHCS	Approved	Notes
1.A Org / Admin	Earl	Completed	9/24/2010	Approved	10/12/2010	10/12/2010	
1.B	Earl	Submitted 01/10/11	9/24/2010	AIR	10/13/2010		
1.C	Earl	Completed	9/24/2010	Approved	10/28/2010	10/28/2010	
1.D	Earl	Completed	6/7/2010		6/30/2010		
2.A Financial	Darlane	Completed		Approved	1/13/2011	1/28/2011	
2.B	Darlane	Submitted 01/27/2011	2/1/2011	In Review	1/27/2011		
2.C	Darlane		2/3/2011				
2.D	Darlane	Submitted 02/01/2011	2/1/2011	In Review	2/1/2011		
2.E	Darlane	Submitted 02/01/2011	2/1/2011	In Review	2/1/2011		
2.F	Darlane		2/3/2011				
2.G	Darlane	Submitted 02/03/2011	2/2/2011	In Review	2/3/2011		
2.H	Darlane	Submitted 01/19/11	2/1/2011	In Review	1/19/2011		
2.I	Darlane	Submitted 02/03/2011	2/2/2011	In Review	2/3/2011		
3.A MIS	Jim	Submitted 01/13/11	1/13/2011	In Review	1/13/2011		
3.B	Jim/ACS	Resubmitted 01/24/2011	1/21/2011	In Review	1/24/2011		
3.C	Jim/ACS	Submitted 01/19/2011	1/21/2011	In Review	1/19/2011		
3.D	Jim/ACS	Submitted 01/20/2011	1/21/2011	In Review	1/20/2011		
3.E	Jim/ACS	Submitted 01/20/11	1/21/2011	In Review	1/20/2011		
4.A QI	CMO	Submitted 01/25/11	1/31/2011	AIR	1/25/2011		
4.B	CMO		1/31/2011		1/20/2011		
4.C	CMO	Resubmitted 02/03/2011	1/31/2011	In Review	2/3/2011		Originally sent to DHCS 01/24/31
4.D	CMO		1/31/2011		1/20/2011		
4.E	CMO/HSD		1/31/2011		1/20/2011		
4.F	CMO/HSD		2/15/2011				
4.G	CMO/HSD		2/15/2011				
4.H	CMO		1/31/2011	In Review	1/31/2011		
5.A UM	CMO	Resubmitted 01/27/2011	2/15/2011	In Review	1/27/2011		
5.B	CMO	Submitted 02/03/2011	2/15/2011	In Review	2/3/2011		
6.A Network	Paul		Ongoing				

AGENDA ITEM 2(c)

Deliverable Number	Assigned To	Status	Due To DHCS	DHCSStatus	Sent to DHCS	Approved	Notes
6.B	Paul/CMO	Completed	9/24/2010	Approved	10/28/2010	12/28/2010	
6.C	Paul/CMO	Completed	10/29/2010	Approved	11/22/2010	12/28/2010	
6.D	CMO	Completed	9/24/2010	Approved	10/13/2010	12/28/2010	
6.E	Paul		Ongoing				
6.F	Paul	Completed	9/24/2010	Approved		10/28/2010	
6.G	CMO/Paul/		Ongoing				
6.H	CMO/Paul	Submitted 02/01/2011	1/31/2011	In Review	2/1/2011		
6.I	Paul		Ongoing				
6.J	Paul/CMO	Completed	9/24/2010	Approved	10/1/2010	12/28/2010	
6.K	Paul	Submitted 01/10/11	2/15/2011	AIR	1/13/2011		
6.L	Paul/CMO	Completed	1/31/2011	Approved	1/13/2011	1/19/2011	
7.A Prov Relations	CMO/Conni	Resubmitted 01/31/2011	1/31/2011	In Review	1/31/2011		
7.B	Connie	Completed	1/31/2011	Approved	1/13/2011	1/19/2011	
7.C	CMO		2/28/2011				
8.A Compensation	CMO/Darla	Submitted 02/03/2011	1/31/2011	In Review	2/3/2011		
8.B	Connie	Submitted 01/10/11		In Review	1/13/2011		
8.C	CMO/Conni		1/31/2011	In Review	1/31/2011		
8.D	Paul/Darlan		2/15/2011				
8.E	Paul/Darlan	Submitted 02/02/2011	1/31/2011	In Review	2/2/2011		
8.F	Darlane/Pa		4/15/2011				
9.A Access/Avail	CMO/HSD	Resubmitted 01/27/2011	2/18/2011	In Review	1/27/2011		
9.B	CMO	Submitted 01/10/11	9/24/2010	AIR	10/18/2010		
9.C	CMO	Completed		Approved	1/13/2011	1/18/2011	
9.D	CMO	Resubmitted 01/20/2011	9/24/2010	In Review	1/20/2011		
9.E	CMO	Completed		Approved	1/13/2011	1/18/2011	
9.F	CMO/HSD	Completed	9/24/2010	Approved	1/20/2011	1/20/2011	
9.G	CMO/HSD	Completed	9/24/2010	Approved		12/28/2010	
9.H	CMO/HSD	Completed	9/24/2010	Approved	10/1/2010	12/28/2010	
9.I	CMO/HSD	Completed	9/24/2010	Approved	10/1/2010	12/28/2010	
10.A Scope/Service	CMO	Submitted 01/31/2011	1/31/2011	In Review	1/31/2011		
10.B	CMO	Submitted 01/25/2011	2/15/2011	In Review	1/25/2011		
10.C	CMO	Submitted 02/03/2011	2/15/2011	In Review	2/3/2011		
10.D	CMO		2/15/2011				
10.E	Andre/Paul	Completed	1/31/2011	Approved		1/18/2011	
10.F	CMO	Submitted 01/31/2011	1/31/2011	In Review	1/31/2011		
10.G	CMO/HSD		1/31/2011				
10.H	CMO	Resubmitted 02/01/2011	1/31/2011	In Review	2/1/2011	1/25/2011	10(1) Submitted 02/01/2011
10.I	CMO	Submitted 01/27/2011	1/31/2011	In Review		1/27/2011	

Deliverable Number	Assigned To	Status	Due To DHCS	DHCSStatus	Sent to DHCS	Approved	Notes
10.J	CMO/Script	Submitted 02/03/2011	2/15/2011	In Review	2/3/2011		
10.K	CMO/Script	Submitted 02/03/2011	2/15/2011	In Review	2/3/2011		
10.L	CMO	Submitted 02/03/2011	2/15/2011	In Review	2/3/2011		
11.A Case Mgt	CMO	Submitted 01/25/2011	1/31/2011	In Review	1/25/2011		
11.B	CMO/HSD	Submitted 01/25/2011	1/31/2011	In Review	1/25/2011		
11.C	CMO	Submitted 02/4/2011	1/31/2011	In Review	2/4/2011		
11.D	CMO/HSD	Completed	1/31/2011	Approved	1/20/2011	1/21/2011	
11.E	CMO/HSD	Submitted 01/25/2011	1/31/2011	In Review	1/25/2011		
11.F	CMO/HSD	Submitted 01/27/2011	1/31/2011	In Review	1/27/2011		
11.G	CMO/HSD	Submitted 01/20/2011	1/31/2011	In Review	1/20/2011		
11.H	CMO/HSD	Submitted 02/04/2011	1/31/2011	In Review	2/4/2011		
11.I	CMO/HSD	Submitted 01/27/2011	1/31/2011	In Review	1/27/2011		
11.J	CMO/HSD	Submitted 01/20/2011	1/31/2011	In Review	1/20/2011		
11.K	CMO/HSD	Submitted 01/20/2011	1/31/2011	In Review	1/20/2011		
11.L	CMO/HSD	Submitted 01/20/2011	1/31/2011	In Review	1/20/2011		
11.M	CMO/HSD	Submitted 01/20/2011	1/31/2011	In Review	1/20/2011		
11.N	CMO/HSD	Submitted 02/04/2011	1/31/2011	In Review	2/4/2011		
11.O	CMO/HSD	Completed	1/31/2011	Approved	1/20/2011	1/28/2011	
11.P	CMO/HSD	Submitted 01/20/2011	1/31/2011	In Review	1/20/2011		
11.Q	CMO/HSD	Submitted 01/25/2011	1/31/2011	In Review	1/25/2011		
11.R	CMO/HSD	Submitted 01/27/2011	1/31/2011	In Review	1/27/2011		
11.S	CMO/HSD	Submitted 01/27/2011	1/31/2011	In Review	1/27/2011		
11.T	CMO/HSD	Completed	1/31/2011	Approved	1/20/2011	1/28/2011	
11.U	CMO/HSD	Resubmitted 02/01/2011	1/31/2011	In Review	2/1/2011		Missing 11-U.3
12.A LHD MOU	CMO/HSD		2/15/2011				
12.B	CMO/HSD		2/15/2011				
12.C	CMO/HSD	Submitted	2/15/2011	In Review	1/25/2011		
13.A Mbr Services	Andre	Submitted 01/10/11	2/13/2011	AIR	1/10/2011		
13.B	Andre	Completed	10/9/2010	Approved	1/13/2011	1/13/2011	
13.C	Andre	Completed		Approved	1/10/2011	1/13/2011	
13.D	Andre	Completed		Approved	1/10/2011	1/13/2011	
13.E	Andre		2/15/2011				
13.F	Andre	Completed		Approved	1/10/2011	1/19/2011	
13.G	Andre	Resubmitted 02/07/2011	1/31/2011	AIR	2/7/2011		
13.H	Andre	Completed		Approved	1/10/2011	1/19/2011	
13.I	CMO/Andre	Submitted 01/10/11	1/1/1900	In Review	1/20/2011		
13.J	CMO/Conni	Completed	10/9/2010	Approved			
14.A Mbr Grievance	Andre	Completed		Approved	1/10/2011	1/13/2011	

Deliverable Number	Assigned To	Status	Due To DHCS	DHCSStatus	Sent to DHCS	Approved	Notes
14.B	Andre	Completed	10/29/2010	Approved		1/13/2011	
14.C	Andre	Completed		Approved	1/13/2011	1/13/2011	
15.A Marketing	Andre	Submitted 01/31/2011	1/31/2011	In Review	1/31/2011		
15.B	Andre	Submitted 01/31/2011	1/31/2011	In Review	1/31/2011		
16.A Enrollment	Paul/ACS	Submitted 01/13/2011		AIR	1/13/2011		
17.A Confidentiality	Andre/ACS	Completed	9/24/2010	Approved	9/28/2010	12/28/2010	
18.A HIPAA	Paul	Completed	1/13/2011	Approved	1/13/2011	1/13/2011	

Total Deliverables	110	
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Approved	28	25.5%
Submitted to DHCS /		
Under Review	69	62.7%
In Process / Not		
Submitted	13	<u>11.8%</u>
		100.0%

Gold Coast Health Plan
CashFlow Projection- Preoperational Period
Revised 2/7/2011

	YTD	November	December	January	February	March	April	May
Cumulative Enrollment	0	0	0	0	0	0	0	0
Total Staff	2	8	9	12	18	22	36	37
Incremental Staff Increase	2	6	1	3	6	4	14	1
Beginning Cash Balance	-	260,043	581,566	457,701	351,155	349,532	76,710	479,442
Cash In-Flow								
Revenue from State								24,000,000
ACS - LOC*	330,000	330,000			265,000	395,000	980,000	
Total Receipts	330,000	330,000	-	-	265,000	395,000	980,000	24,000,000
Cash Out-Flows								
Salaries & Benefits***	25,854		23,910	33,192	114,520	148,996	181,204	232,068
Other Benefits	-				19,300	25,000	5,000	5,000
Consultants	5,805			6,450	3,025	3,025	2,000	2,000
Consultants - FSR						13,000	13,000	
Other Professional Services			2,000					
RGS Fees*						3,234	4,624	7,224
Occupancy Office Lease	-					14,640	14,640	14,640
Furniture & Equipment		6,058	55,000	2,385	26,569	1,000		
Computers, Monitors, Printers (Non- Capitalized)			10,281	519	10,624	7,200	4,800	16,800
Computer Equipment (Capitalized)					19,301			
Telecommunications Equipment				2,270	1,275	2,550	1,700	5,950
General Liability Insurance		2,419						
Info Systems - License Fees++				38,700	11,600	5,100	5,100	5,100
Info Systems (Depreciation)								
Info Systems - Software**	-					100,000	100,000	100,000
Info Systems - Maintenance & Expenses					104			
Pharmacy Mgt Expense								
Travel & Entertainment					519	1,000	1,000	1,000
Copiers				4,461	7,058	10,800	13,200	21,600
Supplies								
ACS Fees								
Printing outsourcer	-					105,000		
Printing						209,000	2,500	2,500
Postage					-	-	210,000	3,000
Prof Liab, D&O Insurance	6,744							
Errors & Omissions Insurance					20,000			
Legal fees	12,284		15,272	2,996	3,407	3,000	3,000	3,000
Actuary fees	19,270		17,402	14,600	27,528	15,000	15,000	15,000
Audit fees	-							
Miscellaneous Operating Fees+				973	1,793	277	500	500
Sub Total Administrative Expense	69,957	8,477	123,865	106,546	266,623	667,822	577,268	435,382
ENDING CASH BALANCE	260,043	581,566	457,701	351,155	349,532	76,710	479,442	24,044,060

Assumptions:

Base assumption - 30 day payment lag

* **LOC Draws are based on the following assumptions:**

YTD & November are actual cash received

No draws anticipated for December & January

February - assume 66% of the deliverables will be sent to the state (phase 1 @ 200K) and plan rates will be finalized (phase 2 @ 5%) March

- assumes 100% of deliverables will have been sent to the state (phase 1 @ 200K) and Provider Network is set up (phase 2 @ 15%)

April - assumes code, build and configuration will be completed (phase 2 @ 10%), Assumes Contract has been Signed (phase 1 @ \$200K) and testing has been completed (phase 2 @ 20%)

Also assumes ACS will provide final payment for implementation once the DHCS provides the plan with approval of it's "go live" status.

** Assumes that the Medical Management system may be paid in 6 monthly installments of \$100,000

*** Assumes that payments will be made two month in arrears from the invoiced due date. At April 30th accrued payroll and fees will be ~ \$720,000 for the month of March and April.

+ Includes Dues, Subscriptions, Bank Fees, Maintenance Fees, miscellaneous licenses

++ Includes only costs known to-date



AGENDA ITEM 4(a)

To: Gold Coast Health Plan Executive / Finance Committee

From: Earl Greenia, CEO

Date: February 9, 2011

Re: Procedure for Public Comment at Meetings

Recommendation: That the Commission approve the proposed policy / process for receiving Public Comment and Input.

Background: As a public entity all GCHP meetings are subject to the Brown Act. With regard to public comment / input at GCHP meetings, section 54954.3a of the Brown Act states that every agenda for regular meetings shall provide an opportunity for members of the public to directly address the Commission on any matter under the Commission's jurisdiction. However, Section 54954.2 of the Brown Act states that the agenda need not provide an opportunity to members of the public to address the Commission on any item that has already been considered by a committee composed exclusively of members of the Commission. Specifically, at a public meeting where members of the public were afforded the opportunity to address the committee on the item, before or during the committee's consideration of the item, unless the item has been substantially changed since the committee heard the item.

The following is Management's Recommendation for receiving public input and comment at public meetings.

Proposed Policy:

Anyone wishing to speak or provide written testimony during public comment on a particular item will be requested to complete a "Request to Speak" form (which may be located on the counter and are available in English and Spanish). Request to Speak Forms must be turned in prior to the public comment portion of the meeting.

The public comment period will generally be early in the agenda. The chair will have the discretion to recognize and allow members of the public to provide additional comments once the public comment period has closed. Comments will be limited to three (3) minutes. Speakers will be alerted when they have one (1) minute remaining and when their time is up. Speakers will then asked to return to their seats and no further comments will be permitted.

Remarks from those seated or standing in other parts of the room will not be permitted. All those wishing to speak, including Commission / Committee Members and Staff need to be recognized by the Chair before speaking.

Under provisions of the Brown Act, the Commission / Committee is prohibited from taking action on items not on the agenda. Also, in accordance with State Law, remarks during public comment are to be limited to topics within the Commission's / Committee's jurisdiction.



AGENDA ITEM 4(b)

To: Gold Coast Health Plan Executive / Finance Committee

From: Earl Greenia, CEO

Date: February 9, 2011

Re: Consumer Advisory Committee

Recommendation: Management requests that the Committee provide input and recommendations for Provider Advisory Committee appointments as described below.

Background: The VCMHC enabling ordinance (4409, April 2010) and the California Department of Health Care Services, Medi-Cal Managed Care Division, both require the establishment of a Consumer Advisory Committee. This committee meets at least quarterly and makes recommendations, review policies and programs, explore issues and discuss how the plan may best fulfill its mission. The Commission decided that the Consumer Advisory Committee would consist of ten members with two permanent seats; one for the Ventura County Health Care Agency (VCHCA) and one for the Ventura County Human Services Agency. The other members would represent the following populations: Foster Children, Medi-Cal Beneficiaries, Beneficiaries with Chronic Medical Conditions, Persons with Disabilities, Persons with Special Needs, and Seniors. Each of the appointed members, with the exception of permanent seats, would serve a two-year term, and individuals could apply for re- appointment as there are no term limits.

Discussion:

Efforts continue to identify candidates for our Consumer Advisory Committee. Staff as had contact with various agencies and groups; such as: Area Agency on Aging, Casa Pacifica, First 5, Head Start, HELA, HICAP, League of United Latin American Citizens (LULAC), Tri-County Glad, and Ventura County Public Health. The constituencies are:

- Foster Children
- Medi-Cal Beneficiaries
- Chronic Medical Conditions
- Persons with Disabilities
- Persons with Special Needs
- Seniors
- County Health Care Agency
- County Human Services Agency

To date, we have identified four potential members, brief biographies follow.

Julianna Fjeld, Regional Director, Tri County GLAD. Julianna Fjeld was born deaf to a military family in Minneapolis, Minnesota. She graduated from Gallaudet University in Washington, D.C. with B.A. in English Literature in 1970. She moved to Ventura, CA in 2003 from Bay Area to eventually become Regional Director of Tri-County GLAD, a subsidiary of the Greater Los Angeles Agency on Deafness, Inc, in 2004. The agency provides communication services, advocacy, peer counseling, employment referral, independent living skills, information and referral and community education. It is one-stop center for deaf and hard of hearing in Ventura, Santa Barbara and San Luis Obispo. Before she joined Tri-County GLAD, she was in Entertainment Industry as an actress, director and Emmy winning Co-Executive Producer since 1970 in New York and Hollywood. With her experiences in the Entertainment Industry, she wants to give something back to the community by working with deaf and hard of hearing community as Regional Director of Tri-County GLAD.

Guadalupe Gonzalez, Ph.D., MPH. Dr. Gonzalez has over 20 years of experience in working with underserved and vulnerable populations including migrant families, farmworkers, and uninsured women. Dr. Gonzalez current is the Education and Outreach Supervisor for the Coalition to End Family Violence. In addition, she works directly with teens in developing school based youth violence prevention classes. She has experience in working on a variety of public and mental health issues at the statewide and local level. Dr. Gonzalez recently completed a four year postdoctoral research fellowship in Cancer Prevention and Control at the UCLA School of Public Health, Jonsson Comprehensive Cancer Center. Dr. Gonzalez received her doctorate from the University of California Santa Barbara in Counseling/Clinical/School Psychology and she received her Master's in Public Health from the University of California Los Angeles, School of Public Health, with an emphasis in Health Education.

Frisa Herrera, Casa Pacifica Health Clinic. Frissa has been employed at Casa Pacifica since March 1999, initially as a Certified Medical Assistant. Currently, she serves as both the Clinic Administrator and Medi-Cal biller. It is her stated goal to, "be the voice for the foster community" given her familiarity with their needs.

Curtis S. Updike, Deputy Director, Ventura County Human Services Agency. Curtis Updike currently serves as the Deputy Director of the Ventura County Human Services Agency where he oversees Medi-Cal and CalFresh (formerly known as Food Stamps) eligibility determination. As of September 2011, more than 113,000 Ventura County residents were enrolled in Medi-Cal and nearly 60,000 residents received CalFresh benefits. Prior to his selection as Deputy Director in 2005, Curtis served as manager of the County's East County Intake and Eligibility Center from 2002 to 2005. The East County IEC processes intake and continuing cases in Medi-Cal and Food Stamps. Before joining HSA, Curtis served as a Chief of Staff for County Supervisor Kathy Long and as a Field Deputy for Supervisor Maggie Kildee. Curtis received an Associates of Arts degree in Business, a Bachelor of Science Degree in Mass Communications and a Masters in Public Administration.



AGENDA ITEM 4(c)

To: Gold Coast Health Plan Executive / Finance Committee

From: Earl Greenia, CEO

Date: February 9, 2011

Re: Credentialing Committee

Recommendation: Management requests that your Committee provide input and recommendations for Credentialing Committee appointments as described below.

Background: On April 26, 2010, the Commission established parameters for the Credentialing Committee. The committee will consist of a minimum of 8 voting members, appointed by the Commission and representative of the composition of the contracted provider network. Each of the appointed members serves a two-year term and may reapply for additional terms, as there are no term limits. Chaired by the Chief Medical Officer, the committee includes physicians from major disciplines, including primary care and specialty practices. The committee has the option of inviting additional specialists, if necessary, to review case records, either in writing or in person. Participants are bound by confidentiality and conflict of interest rules.

Discussion: Dr. Cho continues to identify candidates for our Credentialing Committee, with the goal to recruit well-respected clinical experts from the community. To date, we have identified eight potential members:

1. Miguel Cervantes, Medical Director, Las Islas Family Medical Group, FP
2. John Fankhauser, Medical Director, Ventura County Medical Center, FP
3. Eugene Fussell, CMO, St. John's Regional Medical Center, Orthopedist
4. John Keats, President, California Health First, OB-GYN
5. Albert Reeves, Medical Director, Ventura County Health Care Plan, FP
6. Richard Reisman, Medical Director, Center for Family Health, CMH, OB-GYN
7. Dr. Rios, Clinicas del Camino Real
8. Josephine Soliz, Rose Avenue Family Medical Group, FP

Scope of Capitated Primary Care Services

OFFICE VISITS

CPT Code – New Patient

99201	Problem focused history and exam; straight forward; 10 minutes
99202	Expanded problem focused history and exam; straight forward; 20 minutes
99203	Detailed history and exam; low complexity; 30 min
99204	Comprehensive history and exam; moderate complexity; 45 minutes
99205	Comprehensive history and exam; high complexity; 60 minutes

Established Patient

99211	Minimal Problem; physician supervised services; 5 minutes
99212	Problem focused history and exam; straight forward; 10 minutes
99213	Expanded problem focused history and exam; straight forward; 15 minutes
99214	Detailed history and exam; moderate complexity; 25 minutes
99215	Comprehensive history and exam; high complexity; 40 minutes

PREVENTIVE MEDICINE SERVICES *(if not covered by CHDP)*

99381	Initial Evaluation and Management of Healthy Individual
99382	Early Childhood – age 1 to 4 years
99383	Late Childhood – age 5 to 11 years
99384	Adolescent – age 12 to 17 years
99385	18 – 39 years
99386	40 – 64 years
99387	65 years and older

Established Patient

99391	Periodic Reevaluation and management of Healthy Individual
99392	Early Childhood – age 1 to 4 years
99393	Late Childhood – age 5 to 11 years
99394	Adolescent – age 12 to 17 years
99395	18 – 39 years
99396	40 – 64 years
99397	65 years and older

MINOR SURGICAL AND OTHER MISCELLANEOUS PROCEDURES

Surgical Procedures

10060	Drainage of Boil
10080	Drainage of Pilonidal Cyst
10120	Remove Foreign
10140	Drainage of Hematoma
10160	Puncture Drainage of Lesion
11740	Drain Blood from under Nail
11900	Injection into Skin Lesions
16000	Initial Treatment of Burn(s)
20600	Arthrocentesis, Aspiration and/or Injection; Small Joint, Burns or Ganglion Cyst
26720	Treat Finger Fracture, Each
28490	Treat Big Toe Fracture
28510	Treatment of Toe Fracture

Splints

29105	Application of long arm splint (shoulder to hand)
29125	Application of short arm splint (forearm to hand); static
29126	dynamic
29130	Application of finger splint; static
29131	dynamic
29505	Application of long leg splint (thigh to ankle or toes)
29515	Application of short leg splint (calf to foot)

Strapping – Any Age

29200	Strapping; thorax
29220	low back
29240	shoulder (eg.Velpeau)
29260	elbow or wrist
29280	hand or finger
29520	Strapping; hip
29530	knee
29540	ankle
29550	toes

46600	Diagnostic Anoscopy
51701	Insertion of non-indwelling bladder catheter
51702	Insertion of temporary indwelling bladder catheter
65205	Removal of Foreign Body, Eye
69200	Clear Outer Ear Canal
69210	Remove Impacted Ear Wax

Laboratory

81000	Urinalysis with Microscopy
81002	Routine Urine Analysis
81005	Urinalysis; Chemical, qualitative
81205	Urine Pregnancy Test, by Visual Color Comparison Methods
82270	Blood; Occult, Feces
82271	Blood; Occult – Other Sources
82948	Stick Assay Blood Glucose
82947	Glucose; Quantitative
85014	Hematocrit
85018	Hemoglobin, Colorimetric
85025	Automated Hemogram
86580	TB Intradermal Test
87081/87084	Bacteria Culture screen only, e.g., Rapid Strep test
87205	Smear, Stain & Interpretation - Routine Stain
87210	Smear, Stain & Interpretation – Wet Mount
87220	Tissue Examination for Fungi (KOH Slide)

ECG, Hearing Test, Supplies, Miscellaneous

90471	Immunization Administration
93005	Electrocardiogram, tracing only
93041	Rhythm ECG, Tracing
92567	Tympanometry
Z0316	Tympanometry codes
99070	Special Supplies