



**Ventura County Medi-Cal Managed Care Commission (VCMCC)  
dba Gold Coast Health Plan (GCHP)**

**Consumer Advisory Committee Meeting**

**Wednesday, April 19, 2017, 5:00 p.m.**

**Gold Coast Health Plan, 711 E. Daily Drive, Community Room, Camarillo, CA 93010**

**AGENDA**

**CALL TO ORDER**

**PLEDGE OF ALLEGIANCE**

**OATH OF OFFICE**

**ESTABLISH QUORUM**

**PUBLIC COMMENT**

The public has the opportunity to address the Consumer Advisory Committee (CAC). Persons wishing to address the Committee should complete and submit a Speaker Card.

Persons wishing to address the CAC are limited to three minutes. Comments regarding items not on the agenda must be within the subject matter jurisdiction of the Committee.

**APPROVE MINUTES**

1. Regular Meeting of January 18, 2017

**REPORTS**

2. **Chief Executive Officer (CEO) Update**
3. **Chief Finance Officer (CFO) Update**
4. **Community Health Investment Initiative**

Staff: Ralph Oyaga, Executive Director of Government, Regulatory and External Relations and Karen Escalante-Dalton, Consultant

Meeting Agenda available at <http://www.goldcoasthealthplan.org>

**Ventura County Medi-Cal Managed Care Commission (VCMCC) dba Gold Coast Health Plan (GCHP)  
April 19, 2017 Consumer Advisory Committee Meeting Agenda (*continued*)  
LOCATION: Community Room at 711 E. Daily Drive, Camarillo, CA 93010  
TIME: 5:00 p.m.**

- 5. Pharmacy Benefit Manager (PBM) Update**  
Staff: Al Reeves, MD, Chief Medical Officer
- 6. Opioid Policy Summit**  
Staff: Marlen Torres, Manager of Government and External Relations
- 7. Health Education Update – Community Resource Fair**  
Staff: Lupe Gonzalez, Director of Health Education

### **INFORMATION / DISCUSSION ITEMS**

- 8. Action Item review from January 18, 2017 meeting**  
Staff: Luis Aguilar, Member Services Manager

### **COMMENTS FROM COMMITTEE MEMBERS**

### **ADJOURNMENT**

Unless otherwise determined by the Committee, the next regular meeting of the Consumer Advisory Committee will be held on July 19, 2017, 5:00 p.m. at Gold Coast Health Plan, 711 E. Daily Drive, Suite 110, Camarillo, CA 93010.

Meeting Agenda available at <http://www.goldcoasthealthplan.org>

Administrative Reports relating to this agenda are available at 711 East Daily Drive, Suite #106, Camarillo, California, during normal business hours and on <http://goldcoasthealthplan.org>. Materials related to an agenda item submitted to the Committee after distribution of the agenda packet are available for public review during normal business hours at the office of the Secretary of the Committee.

In compliance with the Americans with Disabilities Act, if you need assistance to participate in this meeting, please contact (805) 437-5562. Notification for accommodation must be made by the Monday prior to the meeting by 3:00 p.m. to enable GCHP to make reasonable arrangements for accessibility to this meeting.

The agenda was posted on April 14, 2017 at the Gold Coast Health Plan Notice Board and on its website.

**Ventura County Medi-Cal Managed Care Commission  
(VCOMMCC) dba Gold Coast Health Plan (GCHP)  
Consumer Advisory Committee (CAC) Minutes  
January 18, 2017  
(Not official until approved)**

**CALL TO ORDER**

Connie Harden, Member Services Specialist called the meeting to order at 5:07 p.m. at the offices of Gold Coast Health Plan (GCHP), 711 E. Daily Drive, Suite 106, Camarillo, CA 93010, in the Community Room. The Pledge of Allegiance was recited.

**ROLL CALL**

**COMMITTEE MEMBERS IN ATTENDANCE**

**Rita Duarte-Weaver**, Ventura County Public Health Department  
**Frisa Herrera**, Casa Pacifica  
**Norma Gomez**, Mixteco / Indigena Community Organizing Project  
**Laurie Jordan**, Rainbow Connection / Tri-Counties Regional Center  
**Ruben Juarez**, County Health Care Agency  
**Pedro Mendoza**, Amigo Baby  
**Katharine Raley**, County of Ventura Area Agency on Aging  
**Curtis Updike**, County Human Services Agency (HSA)

**ABSENT COMMITTEE MEMBERS**

**Paula Johnson**, ARC of Ventura County  
**Alicia Flores**, La Hermandad

Language interpreting and translating services were provided by GCHP from Lourdes González Campbell and Associates.

**PUBLIC COMMENT / CORRESPONDENCE**

None

**APPROVAL MINUTES**

**1. Regular Meeting of October 19, 2016**

Committee Member Katharine Raley moved to approve the Meeting Minutes of October 19, 2016. Committee Member Ruben Juarez seconded. The motion carried with the following vote:

|          |  |
|----------|--|
| AYES:    | Duarte-Weaver, Gomez, Herrera, Jordan, Juarez, Mendoza and Raley |
| NOES:    | None   |
| ABSTAIN: | Updike   |
| ABSENT:  | Flores and Johnson   |

## **FORMAL ACTION ITEMS**

### **2. Consumer Advisory Committee (CAC) Member Update - Proposed New Beneficiary Committee Member**

Connie Harden, Member Services Specialist introduced Estelle Cervantes who is replacing Gilda Macias as our Beneficiary Member. Estelle Cervantes qualifies for the seat of Beneficiary Member as a Medi-Cal member. Approval of her appointment to the CAC will be requested from the Commission this month.

### **3. Nominations and vote on Committee Chair and Vice-Chair positions**

Connie Harden, Member Services Specialist stated the need to formalize the nominations and voting on the Committee Chair and Vice-Chair positions. Committee Member Curtis Updike nominated Committee Member Rita Duarte-Weaver for the position of Committee Chair. Committee Member Frisa Herrera seconded the motion. Committee Member Laurie Jordan nominated Committee Member Pedro Mendoza for the position of Vice-Chair. Committee Member Ruben Juarez seconded the motion. The motions carried with the following vote:

|          |  |
|----------|--|
| AYES:    | Duarte-Weaver, Gomez, Herrera, Jordan, Juarez, Mendoza, Raley and Updike |
| NOES     | None   |
| ABSTAIN: | None   |
| ABSENT:  | Flores and Johnson   |

## **REPORTS**

### **4. Chief Executive Officer (CEO) Update**

Dale Villani, Chief Executive Officer (CEO) provided his perspective on the article published in the Ventura County Star newspaper regarding potential job losses in the county as a result of the repeal of the Affordable Care Act.

Committee Member Jordan asked about the benefits usage of the 55,000 adult expansion members; asking if we should be encouraging them to take care of medical issues this year? CEO Villani responded that yes, they should. Chief Financial Officer (CFO) Patricia Mowlavi stated that the adult expansion population were using fewer services than the state originally anticipated. She added that we have seen over time that they have engaged in the system and started receiving more services however, the utilization of services remains lower compared to other populations.

### **5. Chief Finance Officer (CFO) Update**

Patricia Mowlavi, Chief Financial Officer (CFO) reported on the financial update in the meeting materials.

Chief Operating Officer (COO) Ruth Watson and Committee Member Updike discussed GCHPs Medi-Cal enrollment and enrollment churn. Committee Member Updike concluded by saying that the Human Services Agency (HAS) hasn't seen a significant drop in the population, unlike some of the other eligibility programs such as CalFresh and CalWorks, where we have seen a decline in the case load numbers. This is not the case with Medi-Cal.

Committee Member Updike commented that there was a benefit not covered by Medi-Cal but GCHP thought it was an important service and decided to make it a benefit for all members. He asked for general thoughts on how GCHP or the Commission is thinking about using this excess money. He went on to ask if the CAC can help make decisions on where those funds could be directed.

CEO Villani stated that there are ways the CAC members could participate. He added GCHP has put money into our Alternative Resources for Community Health (ARCH) program. Associate CMO Dr. Nancy Wharfield has formed a group that is looking specifically at benefits. There are a number of benefits not covered by Medi-Cal, but by being in a good position financially, we are able to look at what are best practices and have begun approving services like cardiac rehab, pulmonary rehab and podiatry. CEO Villani stated that GCHP does not have a foundation right now but there are agencies out there that are underfunded and looking for additional funds to continue the services they provide. GCHP will be rolling out a formal program on how that will be structured and take it to our Commission on Monday night for their approval. We will have more information on the program in the next month or so.

COO Watson stated that the CAC could also have an ad hoc meeting since we meet quarterly. If this is of enough importance to the Committee, we could convene an ad hoc meeting and do some brainstorming with our medical team and with Ralph Oyaga, Exec. Director of Government, Regulatory and External Relations, to get us more connected with some of the community needs. Lupe Gonzalez, Director of Health Education, provided information on GCHP's sponsorship program. Committee Member Frisa Herrera thanked GCHP for sponsorship funding for Casa Pacifica for one of their events.

Chief Medical Officer (CMO) Dr. Al Reeves provided an update on GCHP's contract with the new Pharmacy Benefits Manager (PBM). The Commission ultimately decided on OptumRx. This change will go into effect June 1, 2017 for the members. This should be mostly seamless for the members. Members will receive a new ID card and a welcome kit the first week of May. Specialty medication transition will also be seamless for members. There was additional discussion regarding pharmacies, the GCHP formulary and Medicare Part D.

## **6. GCHP and California Children's Services (CCS) Present their Collaboration Efforts**

Vickie Lemmon, GCHP Director of Health Services and Patty Chan, Public Health Division Manager presented information regarding the working relationship between GCHP and the Ventura County CCS program which is part of Public Health. Ms. Lemmon stated that the specific question she and Patty Chan were asked to address is how GCHP and CCS are working together on the whole-child model. The whole-child model is a CCS program model. This is a law signed into effect last September and integrates the CCS program into the county operated health plan. The purpose is to ensure that the care coordination between our common children is seamless and that there are as few gaps as possible. Ventura County is not one of the counties moving into the whole-child model this year; there are other county operated health plans that are. The plan is for the whole-child model and CCS merger to occur before 2022. Mrs. Lemmon went on to say that, she and Patty Chan are committed to the whole-child model and we do not have to merge to continue to work towards those goals. Vickie Lemmon discussed the information provided in the meeting materials.

Committee Member Juarez stated that he has helped members with the great CCS program. While the first goal is a determination of medical necessity, what if parents choose not to use CCS coverage or benefits. Ms. Lemmon stated that they do not have a choice if member is Medi-Cal

eligible. If it is a CCS eligible condition, and they meet CCS criteria, then participation is not optional if coverage for services is requested. Ms. Chan stated that the whole-child model only covers children who are Medi-Cal assigned. CCS does cover children who do not qualify for full-scope Medi-Cal. SB586 is wrapping the child into the whole-child model where one payer source pays for services. Further discussion continued regarding eligibility.

Committee Member Laurie Jordan commented on the importance of a medical home for these CCS children. She went on to say GCHP has changed member's lives by obtaining a contract with UCLA. Further discussion was held about coverage of non-CCS benefits and barriers to care.

COO Watson stated that this is a very complicated and cumbersome process for our members. This is a testament to how hard we work to try to make this better for the members.

## **RECESS**

A break was provided at 6:20 p.m. The meeting reconvened at 6:35 p.m.

### **7. Government Relations Update on the Mega Rule and D-SNP**

Marlen Torres, Manager, Government and External Relations presented information on the Medicaid Mega-Rule. The Mega-Rule was published on May 6, 2016. Implementation will begin in one-to-three years. Many of the contract revisions will begin July 1, 2017 and thereafter. Discussion continued about the materials presented in the meeting packet.

### **8. Cultural & Linguistics Training and Health Education and Outreach Event Calendar**

Lupe Gonzalez, Director of Health Education, Outreach, Cultural & Linguistic Services reviewed information provided in the committee packet. Reviewed were the Outreach Schedule and the Cultural Competency Training for Health Care providers.

Dr. Gonzalez stated that the Health Education department is developing a series of workshops around different themes.

Dr. Gonzalez reported that part of GCHP cultural and linguistic services is to increase awareness about the diverse population we have through our medical providers and community. We recently hosted a successful event. Dr. Donaldson from the Santa Paula Medical Center was our guest speaker as well as Shawn Baker who is a licensed marriage/family therapist. The topic was cultural sensitivity. There were 160 participants at the event. Both slide presentations from the meeting are included in the meeting packet. Dr. Gonzales added that the presentation was recorded and is being uploaded to our YouTube website. Future topics being considered are Asian-American health care services, Latino health, adolescent health and the issue of domestic violence.

Committee Member Updike said he was impressed with all of the community events put on by Health Education. "I think it is wonderful and I know you spearhead that effort and I think it is just great." He went on to state he was pleased how enlightened we are about this particular discussion.

Committee Member Katharine Raley said it is good to see that GCHP is participating in and conducting events all over the county and not just in West County.

Committee Chair Rita Duarte-Weaver stated she attended the meeting and felt it could have been presented as a series. There was so much information and not enough time for questions. She added that this is a safe place for this discussion and people walked away saying they wish they had time to ask questions. Dr. Gonzalez said that the form in the package allowed for questions. The Health Education team will be forwarding these questions to the speakers, and mailing the answers out to everyone who participated in the training.

#### **9. Action Item Review from October 19, 2016 meeting**

Connie Harden, Member Services Specialist stated that all action items have been completed with the exception of the Frequently Asked Questions (FAQ) for the new PBM, which we will have by the next CAC meeting.

#### **Comments from Committee Members**

Committee Member Jordan stated that she was talking to a behavioral therapist who was asking about the member's insurance. When told it was Gold Coast Health Plan, the therapist stated, "you have Beacon, no problems; they are the easiest ones to work with." Committee Member Jordan also stated that while attending a meeting on the "Help me Grow" program the GCHP team members in attendance were quick to say "of course we will help with that."

Committee Member Updike commented that if anybody on the committee would like to have someone from the Human Services Agency (HSA) come and talk about any of the HSA programs, CalFresh, Medi-Cal, CalWorks, to contact him and he will have somebody come out and talk about the details of the programs.

Committee Member Frisa Herrera asked for an update on the proposed Community Resource Center in downtown Oxnard as discussed at the October 19, 2016 meeting. CEO Villani responded that a preliminary review was conducted to see what was available and the findings were brought to the Commission. The Commissioners did not see the value in moving forward with the Community Resource Center at this time.

#### **ADJOURNMENT**

Meeting was adjourned at 7:18 p.m.



## **AGENDA ITEM NO. 2**

To: Gold Coast Health Plan Consumer Advisory Committee  
FROM: Dale Villani, Chief Executive Officer  
DATE: April 19, 2017  
SUBJECT: CEO Update

VERBAL PRESENTATION



### **AGENDA ITEM 3**

To: Gold Coast Health Plan Consumer Advisory Committee  
From: Patricia Mowlavi, Chief Financial Officer  
Date: April 19, 2017  
Re: Financial Update

#### Financial Update

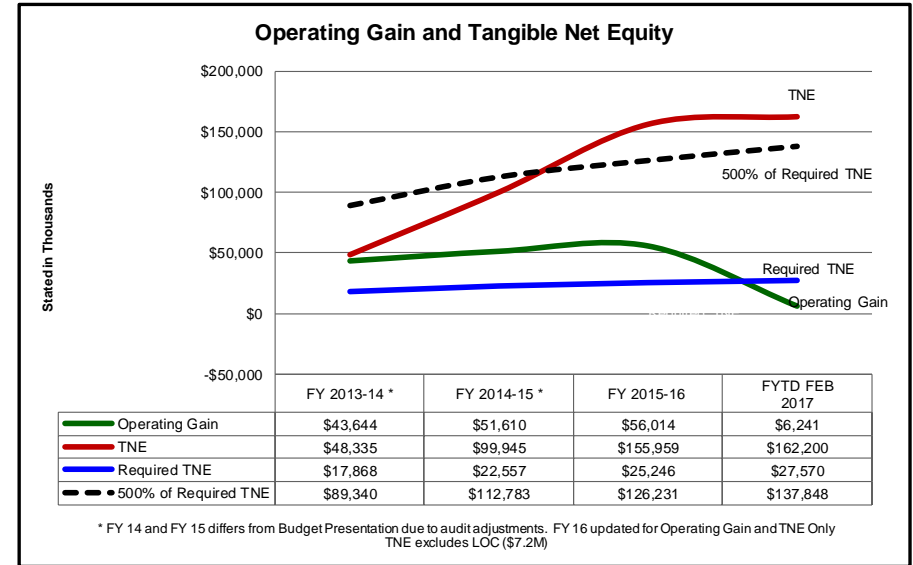
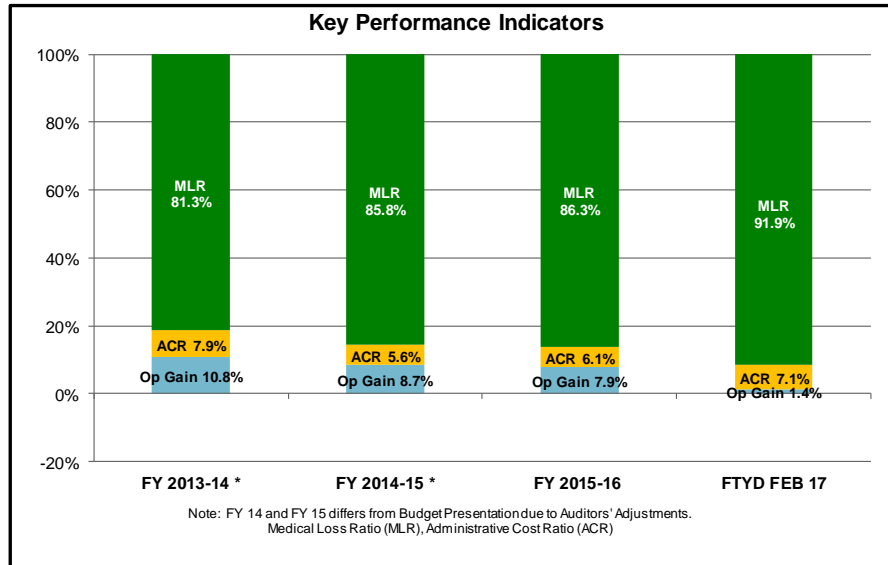
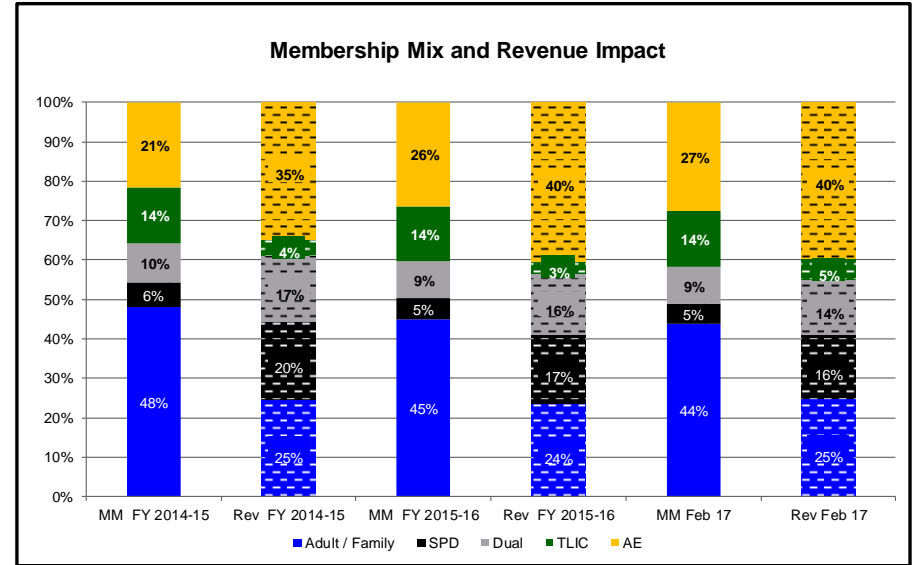
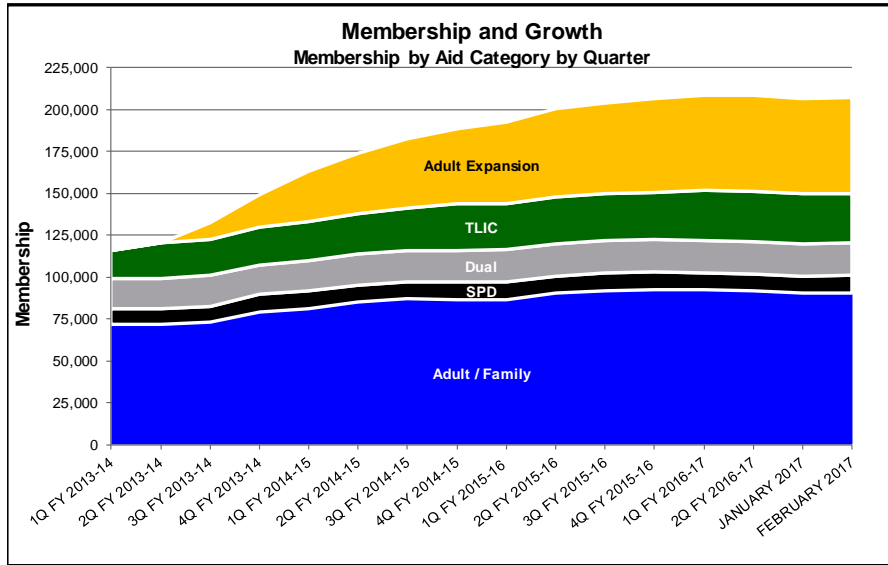
For the eight months ended February 28, 2017, the Plan's performance was a gain in net assets of \$6.2 million which was \$8.4 million higher than budget. This was driven by administrative savings, which were largely due to timing of projects.

The Plan's fiscal year-to-date operating performance resulted in Tangible Net Equity (TNE) of approximately \$162.2 million, which was \$11.3 million higher than budget. The Plan's TNE at February 28 was 588% of required TNE.

February membership of 206,970 was below budget by 5,908 members. The Adult and Child aid categories were below budget, however this was largely offset by growth in the Adult Expansion (AE) aid category, with higher than budgeted membership.

The current value of the Plan's investment portfolio was \$288.9 million at February 28, 2017. The portfolio includes both short term and long term investments with a current average yield of approximately 0.86%. All investments are in compliance with the Plan's investment policy.

**FINANCIAL PERFORMANCE DASHBOARD  
FOR MONTH ENDING FEBRUARY 28, 2017**





Gold Coast  
Health Plan<sup>SM</sup>  
A Public Entity

Press  
Release

For Immediate Release

April 11, 2017 - 3:00 PM PST

## Gold Coast Health Plan Launches Grantmaking Program

*Medi-Cal Plan Introduces Community Health Investment Program  
to Address Social Determinants of Health*

**CAMARILLO, Calif., April 11, 2017** - Gold Coast Health Plan (GCHP) today announced the launch of its Community Health Investment program that awards monetary grants to locally qualified organizations that are addressing social determinants of health.

"It's important that plans like ours evolve and develop strategies that help support the overall well-being of the communities we serve," said Dale Villani, GCHP's chief executive officer. "This program is focused on identifying and funding organizations committed to providing integrated care and care coordination across the continuum, because maintaining good health for our membership is more than just health care."

The World Health Organization defines social determinants of health as the conditions in which people are born, grow, work, live, and age, and the wider set of forces and systems shaping the conditions of daily life. Social determinants play a critical role in determining the health of individuals and communities.

The Plan, which serves nearly 203,000 Medi-Cal members in Ventura County, has selected three social determinants of health as priorities for this first year of grant funding: access to quality health care, access to quality and affordable food options, and neighborhood and built environments.

"Working collaboratively with community partners and identifying issues like food insecurity and homelessness leads to healthier outcomes for our members," said Dr. Nancy Wharfield, GCHP's associate chief medical officer.

With oversight and guidance from the Ventura County Medi-Cal Managed Care Commission (VCOMMCC), GCHP's executive management team has appointed executive sponsors to oversee the review and selection of potential awardees.

To be eligible for a grant, applicants must be a 501(c)(3) tax-exempt organization with a 509(a) designation indicating that the organization is not a private foundation, a public or government entity, and provide high-quality health care and/or health-enhancing supportive services primarily to Medi-Cal recipients and to other medically indigent populations within Ventura County.

The maximum total award is \$150,000 per project lasting up to 12 months. The submission includes a proposal application, a detailed work plan, a budget and budget narrative, the most recent financial statements for the applicant organization, and a list of the members of its board of directors. Collaborative partnerships are encouraged but not required. All applicants must demonstrate competency, experience with the targeted population and selected social determinant of health, financial stability, business integrity and the ability to successfully implement the proposed project.

All applications must be received by GCHP no later than 4 p.m. on May 1 and be completed using GCHP provided templates and guidance materials. For more detailed information and instructions, visit [www.goldcoasthealthplan.org](http://www.goldcoasthealthplan.org).

## About Gold Coast Health Plan

Gold Coast Health Plan is an independent public entity created by County Ordinance and authorized through Federal Legislation. However, Gold Coast Health Plan is not a county agency. The Ventura County Board of Supervisors approved implementation of a County Organized Health System (COHS) model, transitioning from fee-for-service Medi-Cal to managed care, on June 2, 2009. The purpose of Gold Coast Health Plan is to serve Medi-Cal beneficiaries, enhance the quality of healthcare, provide greater access, improve service and provide choice. The Plan provides health benefits to nearly 203,000 beneficiaries in Ventura County, Calif. To learn more about Gold Coast Health Plan, visit us at: [www.goldcoasthealthplan.org](http://www.goldcoasthealthplan.org).

## Quick Web Links

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## COMMUNITY HEALTH INVESTMENTS 2016-2017, SOCIAL DETERMINANTS OF HEALTH I Request for Applications (RFA)

Due no later than Monday, May 1 at 4 p.m.  
2016-2017 Fiscal Year

### I. PURPOSE

Gold Coast Health Plan (GCHP) is pleased to release its *Social Determinants of Health I Request for Applications* (RFA) through its Community Health Investments grantmaking program, which was established in 2016 to provide monetary grants to external organizations addressing the social determinants impacting the health and well-being of the Plan's members.

As a public health plan serving Ventura County, GCHP is committed to providing access and quality care for its members, promoting positive health outcomes through integrated care and care coordination across the continuum, and promoting community health. Yet, while the highest quality care is essential to improving community health, it is not sufficient by itself. Social determinants play a critical role in determining the health of the Plan's Medi-Cal members as well as the health of the communities in which they live.

Social determinants of health, as defined by the World Health Organization, are “the circumstances in which people are born, grow up, live, work and age, and the systems put in place to deal with illness. These circumstances are in turn shaped by a wider set of forces: economics, social policies, and politics.”<sup>1</sup> Some examples of social determinants of health include: income level, employment, educational attainment, access to health and health care systems, housing, food security, literacy, access to transportation, neighborhood safety, etc. Social determinants of health can significantly influence the life-long health outcomes and well-being of community members. In fact, research has increasingly demonstrated that social and economic conditions contribute to approximately 40% of a person's health status; health behaviors, themselves largely determined by social and physical environments, contribute to 30% of a person's health; clinical care — both access and quality — to 20% of a person's health; and the physical environments to about 10%.<sup>2</sup> Therefore, in order to attain tangible improvements in population health, it is essential to provide quality health services while simultaneously addressing the social determinants of health.

For its 2016-2017 Social Determinants of Health I RFA, GCHP has selected the following three social determinants of health as priority areas:

- **Access to quality health care**
- **Access to quality and affordable food options**
- **Neighborhood and built environments**

1. World Health Organization. “Social Determinants of Health: Key Concepts.” 2015. [http://www.who.int/social\\_determinants/thecommission/finalreport/key\\_concepts/en/](http://www.who.int/social_determinants/thecommission/finalreport/key_concepts/en/)

2. County Health Rankings & Roadmaps. “Our Approach” 2016 <http://www.countyhealthrankings.org/our-approach>

## II. GOLD COAST HEALTH PLAN

Gold Coast Health Plan (GCHP) is an independent public entity created by a Ventura County ordinance and authorized through Federal Legislation. GCHP is not a county agency. The Ventura County Board of Supervisors approved implementation of a County Organized Health System (COHS) model, transitioning from fee-for-service Medi-Cal to managed care on June 2, 2009. The purpose of GCHP is to serve Medi-Cal beneficiaries, enhance the quality of health care, provide greater access, improve service and provide choice. The Plan provides health benefits to more than 200,000 beneficiaries throughout the county.

In May 2016, GCHP established the Alternative Resources for Community Health (ARCH), an initiative designed to invest a percentage of GCHP's revenue in health care and social services in Ventura County. The ARCH program aims to improve the health of GCHP members through four main strategies: 1) the provision of incentives to its network of providers for value-based performance, 2) reimbursement of enhanced clinical services, based on evidence-based medicine, that are not typically reimbursed by Medi-Cal, 3) the provision of Community Health Investments (CHI) or monetary grants to external organizations that work to improve the health of members by addressing social determinants of health, and 4) the provision of sponsorships to outside organizations in support of specific events with the potential to offer positive visibility to GCHP's mission.

This *Social Determinants of Health I RFA* is the first to be issued by GCHP through ARCH's Community Health Investments grantmaking program.

## III. ELIGIBILITY

To be eligible for a Community Health Investments grant, applicants must meet the following minimum requirements:

- Be a 501(c)(3) tax-exempt organization with a 509(a) designation indicating that the organization is not a private foundation, or
- Be a public or government entity, and
- Provide high-quality health care and/or health-enhancing supportive services primarily to Medi-Cal recipients and to other medically indigent populations within Ventura County.

## IV. QUALIFIED PROJECTS

Under its Social Determinants of Health I RFA, GCHP will consider funding applications that address one of the three social determinants of health prioritized under this funding cycle as described below:

- 1. Access to quality health care.** In spite of having health insurance coverage through GCHP, some of the Plan's members may continue to encounter barriers that preclude them from accessing the health and health-supportive services they need to attain optimal health outcomes. Some examples of these barriers may include provider availability, provider location, linguistic and cultural competency of providers, and effective provider ability to link clinical care to community-based health-enhancing supportive programs, among other barriers. GCHP will consider funding requests for programs that effectively address these and other well-documented barriers impacting access and utilization of health and health-promoting services by GCHP members.

- 2. Access to quality and affordable food options.** Food is fundamental to health and well-being. And yet, many low-income populations are at high risk of experiencing food insecurity. As defined by the U.S. Department of Agriculture's Economic Research Services, food insecurity may indicate reduced quality, variety, or desirability of diet with little or no indication of reduced food intake; or it may indicate disrupted eating patterns and reduced food intake.<sup>3</sup> Individuals must have a sufficient caloric intake to thrive and prevent the onset of certain diseases. Equally important, excessive consumption of highly processed foods with high content of sugar and/or sodium can lead to obesity, cancer, diabetes, hypertension and heart disease, among other health conditions. GCHP will consider funding applications for programs that make it possible for vulnerable populations, including seniors, low-income children and youth, the homeless, underserved communities and others to have consistent access to high quality, nutritious and affordable food options in the community. Priority will be given to projects that can demonstrate that a majority of those benefiting from the proposed project will be GCHP members.
  
- 3. Neighborhood and built environments.** The physical environments in which people live can also greatly affect their health. For example, lack of affordable housing and/or overcrowded slum housing with poor ventilation may lead to increases in respiratory ailments and other diseases; lack of sidewalks, playgrounds and parks in neighborhoods may decrease walkability and discourage residents from engaging in outdoor physical activity, which in turn may lead to obesity, diabetes and cardiovascular disease; poor air, water and soil quality also increases the risk of cancer and respiratory ailments; and lack of adequate transportation systems isolate communities and constitute a barrier to accessing health care services, educational, and employment opportunities. GCHP will consider applications seeking to improve the local neighborhood and built environments impacting the health and well-being of GCHP members.

Applicant organizations must:

- Select one of the three social determinants of health listed above and clearly articulate how the selected determinant impacts the health of vulnerable Ventura County residents in general and GCHP members in particular.
- Identify and document the specific health issue(s) impacted by the selected social determinant.
- Identify the population and the geographic area targeted by the proposed project.
- Identify the specific strategies that will be implemented to address the selected social determinant of health and describe how the proposed strategies will lead to tangible health improvements.
- Demonstrate how a majority of the individuals that will benefit from the proposed project will be GCHP members.
- Explain how the proposed strategies will be implemented over the course of 12 months.
- Identify the expected outcomes that you seek to attain through the proposed project.
- Provide specific, measurable, attainable, realistic and time-based goals and objectives.
- Outline the duties and responsibilities of key staff who will be implementing the proposed project.
- Describe how you will assess progress towards attainment of the grant goals and objectives.

The maximum total award is \$150,000 per project lasting up to 12 months. The application includes a proposal application, a detailed work plan, a budget and budget narrative, the most recent financial statements for the applicant organization, and a list of the members of the board of directors. Collaborative partnerships are encouraged but not required. All applicants must demonstrate competency, experience with the targeted population and selected social determinant of health, financial stability, business integrity and the ability to successfully implement the proposed project. Applications must include all required components and be complete at the time of submission in order to be considered. All application components must be completed using GCHP provided templates and guidance materials.

For detailed information and instructions on how to complete and submit a funding application under GCHP's *Social Determinants of Health I RFA*, please refer to section VIII.

3. U.S. Department of Agriculture. "Definitions of Food Security" 2016.  
<https://www.ers.usda.gov/topics/food-nutrition-assistance/food-security-in-the-us/definitions-of-food-security/>



## V. USE OF FUNDS

GCHP funds may be used for staff salaries and benefits, operating expenses and equipment directly related to the proposed activities. The maximum allowable indirect cost rate is 10% of salaries and wages only.

The following types of grants are eligible for funding:

- **Project Support** (funds to support a specific, connected set of activities, with a beginning and an end, with explicit objectives and predetermined cost; ongoing projects will be considered)
- **Direct Services** (funding for the provision of services directly to clients)
- **Systemic Change** (funding designed to change the way in which a system or systems operate in order to improve its functioning)
- **Seed Funding** (funding that supports the start-up costs of a new program)
- **Capital and Equipment** (funds to help an organization with long-lasting physical assets. For capital requests, GCHP will only consider requests for the last funds needed to complete a capital renovation. Capital requests are limited to \$50,000 and the proposed program that will reside in the renovated structure must commence within nine months of the grant award)

Grant funds cannot be used for:

- Providing direct medical care to the uninsured.
- Paying for medical services billable to other payers.
- Individuals.
- Research.
- Endowments and annual fund drives.
- Deficit or debt retirement.
- “Miscellaneous” line items.

## VI. SELECTION PROCESS

All applications will be reviewed by a Review Committee made up of GCHP staff and an expert consultant. The Review Committee members may consider a variety of criteria including, but not limited to:

- Organizational background and capacity to address selected social determinant of health.
- Project targets diverse populations and contributes to geographic equity in Ventura County.
- Clear articulation of how selected determinant affects health, demonstrated need, and alignment with GCHP selected priorities.
- Proposal request is sound and feasible and clearly articulates the roles of collaborative partners and staff.
- Proposal identifies measurable and attainable benchmarks.
- Appropriate budget development, justification and indirect costs.
- Availability of in-kind or matching funds.
- Evidence of sustainability beyond the grant period by grantee demonstration of adequate revenue streams and ability to secure additional funding.
- Demonstrated capacity to evaluate the project.
- Evidence that a significant number of those benefiting from the proposed project will be GCHP beneficiaries.

All applicants selected for funding will be required to enter into the Grant Agreement provided by GCHP.



## VII. MONITORING AND EVALUATION

During the course of the grant award contract, GCHP will monitor the organizations selected for funding to ensure that they are performing according to the terms of their grant award agreement. Grantees will be required to submit progress reports every six months that provide complete and accurate documentation of program activities using forms provided by GCHP. Such documentation must include specific information about the evaluation benchmarks and expenditures to date.

## VIII. APPLICATION COMPLETION AND SUBMISSION

Follow the steps below to complete and submit your application. **Incomplete applications may not be reviewed.**

### Step 1: Complete Application Forms

Complete PDF Application Forms 1 – 4 by clicking on the links below and filling in your answers in the spaces provided. Once completed, save the documents to your computer.

1. [Application Narrative](#)
2. [Workplan - Attachment A](#). To complete your Workplan, please refer to the [Workplan Guidance Sample Document](#)
3. [Budget - Attachment B](#), which includes the budget – Tab 1 of spreadsheet; a budget narrative – Tab 2 of spreadsheet; and a worksheet identifying other sources of support for the project – Tab 3 of the spreadsheet
4. [Acknowledgement - Attachment C](#)

### Step 2: Email Completed Application Forms 1–4

Email completed PDF Application Forms 1–4 to [grants@goldchp.org](mailto:grants@goldchp.org).

The subject line of your email should read: *Organization's Name, Social Determinants of Health I Application.*

- Attach completed PDF application forms 1–4 to your email. Attachments must be titled as follows:
  - » Organization's Name, SDH I, Application Narrative 2016-17
  - » Organization's Name, SDH I, Workplan – Attachment A 2016-17
  - » Organization's Name, DDH I, Budget – Attachment B 2016-17
  - » Organization's Name, SDH I, Acknowledgement – Attachment C 2016-17

### Step 3 Overnight Mail

Overnight (e.g., FedEx) seven hard copies and a signed original copy of completed Forms 1–4 above, **PLUS** one hard copy **ONLY** of the following documents:

- [Signed Form W-9](#)
- 501(c)(3) IRS notification letter
- Most recent audited financial statements and Tax Form 990
- Lists of Board of Directors or Board of Governors and senior management staff. Include names, titles, and connections to GCHP. If no connection to GCHP, please write “no connection” next to each name.
- Memorandum of Understanding (MOU) for organizations applying through a fiscal agent

**Overnight hard copies to:**

Sarah Palomino  
Community Health Investments Grantmaking Program  
Gold Coast Health Plan  
711 E. Daily Drive, Suite106  
Camarillo, CA 93010

All electronic and hard copies must arrive at GCHP no later than Monday, May 1 at 4 p.m.  
Due to volume and potential confusion in tracking applications, walk-ins will not be accepted for consideration.

**Step 4. Application Checklist**

Please click on the link below and complete the Application Checklist Form to make sure that you have submitted all the required digital and hard-copy application documents. Print the Checklist and use it as a cover sheet for your signed original printed application.

- [Application Checklist](#)

Missing entire documents or pages of a document may be considered as an incomplete application and may not be reviewed.

**IX. INFORMATIONAL CALL/WEBINAR**

**GCHP will be holding an informational conference call/webinar to answer questions regarding the RFA. Prospective applicants are encouraged to participate.**

**Informational Conference Call/Webinar - Social Determinants of Health I RFA 2016-2017**

Wednesday, April 19, 2017 from 11 a.m to 12:30 p.m. PDT

Please join the call/webinar from your computer, tablet or smartphone at: <https://global.gotomeeting.com/join/905747229>  
You can also dial in using your phone at: (646) 749-3112 Access Code: 905-747-229.

Please RSVP for the conference call/webinar and send in your questions in advance via email to [KEscalante@goldchp.org](mailto:KEscalante@goldchp.org)  
**by April 17 at 12 p.m.**

**Funding announcements will be made by the end of June.**

**All decisions are final, and there will be no appeal process.**



**Gold Coast  
Health Plan**<sup>SM</sup>  
A Public Entity

# Pharmacy Benefits Manager (PBM)

## Implementation Update

C. Albert Reeves, MD, Chief Medical Officer

**Integrity**

**Accountability**

**Collaboration**

**Trust**

**Respect**

# PBM Implementation

## What is a PBM?

- Processes claims from pharmacy providers
- Maintains formulary listing within the system for claim processing
- Contracts with retail, mail, and specialty pharmacies

## Who is the new PBM?

- OptumRx will be the new PBM for GCHP
  - National presence
  - Experience in Medicaid, Medicare, and Commercial lives
  - Service over 60 million lives
- Go-Live: 6/1/2017

# PBM Implementation - Key Elements

## Pharmacy Benefits

- Pharmacy benefits will NOT change.
- GCHP's Pharmacy and Therapeutics (P&T) make all benefit determinations
- Transition/grandfathering process

## Pharmacy Providers

- Retail Pharmacy Network:
  - Duplication of existing network
  - 17 pharmacies identified that need to be contracted (9 are Kaiser); in process
- Specialty Pharmacy: BriovaRx
  - Open refill transfer file
- Mail Order Pharmacy: Optum Home Delivery
  - New prescriptions needed

# Communication Timelines

## Provider and Internal Communications

- Week of 4/17/2017 – internal memo to GCHP staff and vendors
  - Internal memo with contact information
  - Copy of member letter
  - Copy of member FAQs
- Week of 4/24/2017 – Provider Update sent via email to all providers
  - Provider letter with contact information
  - Copy of member letter
  - Copy of member FAQs

## Members

- Week of 5/8/2018: Welcome Kit
  - Welcome letter cobranded with OptumRx and GCHP
  - Instructions on how to reach OptumRx
  - FAQs
  - Brochure on OptumRX
- Beginning 5/17/2017
  - ID Card with OptumRx phone number
  - Brief letter providing contact information for OptumRx



# OPIOID POLICY SUMMIT



Gold Coast Health Plan (GCHP), in collaboration with the Ventura County Behavioral Health (VCBH) department, will be holding an Opioid Policy Summit on Friday, May 5.

The abuse of prescription opioid medications has been of serious concern at the national, state, and local levels. Policy makers are attempting to combat the opioid epidemic in their communities by proposing and passing legislation to address the issue.

With the Opioid Policy Summit, the goal of GCHP and VCBH is to engage community stakeholders in a discussion about strategies that can be used to address the opioid epidemic in Ventura County.

The summit will take place at the Ventura Beach Marriott from 7:30 a.m. to 12 p.m. (Breakfast will be served from 7:30 to 8:30 a.m. The program will begin at 8:30 a.m.). You will be receiving an invitation to the event early next week.

## Please make certain to RSVP.

The keynote speaker will be Dr. Corey Waller, an addiction, pain, and emergency medicine specialist and the senior medical director for education and policy at the National Center for Complex Health and Social Needs/Camden Coalition of Healthcare Providers (CCHP). Dr. Waller will be discussing the efforts being made on a national level to combat the crisis.

Dr. Kelly Pfeifer will also be speaking. She is the director of the California Health Care Foundation's High-Value Care Team, which supports policies and care models that align with patient preferences, are proven effective, and are affordable. Dr. Pfeifer will be focusing on the opioid epidemic on a state level.

State Assemblymember Jacqui Irwin will serve as a moderator for a panel of local experts who will discuss Ventura County's approach to the opioid crisis.

We look forward to seeing you at the Opioid Policy Summit.

If you have any questions, please contact Marlen Torres, GCHP's manager of government and external relations, at [mtorres@goldchp.org](mailto:mtorres@goldchp.org) or 805-437-5535.

Sincerely,

C. Albert Reeves, M.D.  
Chief Medical Officer, Gold Coast Health Plan





# 6<sup>th</sup> Annual Community

# Resource Fair

- \* Free Health Screenings
- \* Entertainment
- \* Resource Booths
- \* Zumba® Demonstration

## Saturday, May 13, 2017

10:00 am – 2:00 pm

Plaza Park, Downtown Oxnard

500 S. C Street, Oxnard, CA 93030

For more information please call the Health Education Department at:

### 805.437.5606

### TTY 1.888.310.7347



**Gold Coast Health Plan**<sup>SM</sup>  
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If you need interpreting services or special assistance to participate, please contact us at least 5 days prior to the event.







# 6ª Feria Anual de Recursos

# Comunitarios

- \* Exámenes de Salud Gratis
- \* Entretenimiento
- \* Mesas de Recursos
- \* Demostración de Zumba®

**sábado, 13 de mayo de 2017**

**10:00 am – 2:00 pm**

**La Placita en el Centro de Oxnard  
500 S. C Street, Oxnard, CA 93030**

Para más información por favor llame al  
Departamento de Educación para la Salud al:

**805.437.5606**

**TTY 1.888.310.7347**



**Gold Coast Health Plan**<sup>SM</sup>  
A Public Entity

Si necesita servicios de intérprete o asistencia especial para participar, por favor llame 5 días antes del evento.





**Ventura County Medi-Cal Managed  
Care Commission (VCMCC) dba  
Gold Coast Health Plan  
Action Items**

**Consumer Advisory Committee Meetings - 2017**

| Date      | Owner         | Department    | Action Required  | Response                              | Date Completed |
|-----------|---------------|---------------|--|---------------------------------------|----------------|
| 1/18/2017 | Marlen Torres | Gov't Affairs | Forward Senate Health Committee Meeting link to all members.   | Link emailed to members.              | 3/7/2017       |
| 1/18/2017 | Ralph Oyaga   | Gov't Affairs | Provide Committee with information and involvement opportunities for the Grant and Sponsorship Programs. | Agenda item at the 4/19/2017 meeting. | 4/19/2017      |
| 1/18/2017 |               |               |  |                                       |                |
| 1/18/2017 |               |               |  |                                       |                |
| 1/18/2017 |               |               |  |                                       |                |
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