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

Community Advisory Committee Meeting

Wednesday, April 24, 2019, 4:00 p.m.
Gold Coast Health Plan, 711 E. Daily Drive, Community Room, Camarillo, CA 93010

AGENDA

CALL TO ORDER
PLEDGE OF ALLEGIANCE
ROLL CALL

PUBLIC COMMENT

The public has the opportunity to address the Community 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.

CONSENT ITEMS

1. Approval of the Community Advisory Committee Meeting
   Regular Meeting of January 30, 2019
   Presenter: Committee Chair Rita Duarte-Weaver

2. Nominations and Election of Committee Vice-Chair
   Nominate and elect new CAC Vice-Chair
   Presenter: Committee Chair Rita Duarte-Weaver

COMMITTEE MEMBER COMMENTS/QUESTIONS
   Lead by: Committee Chair Rita Duarte-Weaver

DISCUSSION

3. Community Advisory Committee Report to Commission – 30 minutes
   Discuss planned report for the Commission meeting on May 20, 2019
   Presenter: Rita Duarte-Weaver, Committee Chairperson

Meeting Agenda available at http://www.goldcoasthealthplan.org
VENTURA COUNTY MEDI-CAL MANAGED CARE COMMISSION (VCMCC) DBA GOLD COAST HEALTH PLAN (GCHP)

APRIL 24, 2019 COMMUNITY ADVISORY COMMITTEE MEETING AGENDA (CONTINUED)

LOCATION: COMMUNITY ROOM AT 711 E. DAILY DRIVE, CAMARILLO, CA 93010

TIME: 4:00 P.M.

4. DISCUSSION OF COMMUNITY RELATIONS AND STRATEGIC PLAN – 20 MINUTES
   - Discussion of Community Relations and Strategic planning
   - Staff: Marlen Torres, Director of Government Relations

PRESENTATIONS

5. CARE MANAGEMENT – 30 MINUTES
   - Report on Care Management process
   - Staff: Rachel Lambert, Manager of Care Management

6. HEALTH NAVIGATOR PROGRAM – 10 MINUTES
   - Report on transportation services to dialysis centers, postpartum hospital discharge visit,
     DHCS health disparity conference call, etc.
   - Staff: Lupe Gonzalez, Director of Health Education, Cultural and Linguistic Services

ADJOURNMENT

Unless otherwise determined by the Committee, the next regular meeting of the Community Advisory Committee will be held on July 31, 2019, 4:00 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 1:00 p.m. to enable GCHP to make reasonable arrangements for accessibility to this meeting.

The agenda was posted at the Gold Coast Health Plan Notice Board and on its website.
CALL TO ORDER

GCHP Member Services Specialist Connie Harden called the meeting to order at 4:05 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
Estelle Cervantes, Beneficiary Member
Frisa Herrera, Casa Pacifica
Paula Johnson, ARC of Ventura County
Laurie Jordan, Rainbow Connection / Tri-Counties Regional Center
Ruben Juarez, County Health Care Agency
Curtis Updike, County Human Services Agency (HSA)
Pablo Velez, Amigo Baby

ABSENT COMMITTEE MEMBERS
Norma Gomez, Mixteco Indigena Community Organizing Project
Katharine Raley, County of Ventura Area Agency on Aging

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

PUBLIC COMMENT / CORRESPONDENCE

None

APPROVE MINUTES

1. Regular Meeting of July 18, 2018
Committee Member Estelle Cervantes motioned to approve the meeting minutes of July 18, 2018. Committee Member Curtis Updike seconded the motion. The motion carried with the following vote:

AYES: Duarte-Weaver, Cervantes, Herrera, Johnson, Juarez, Updike
NOES: None
ABSTAIN: Jordan, Velez
ABSENT: Gomez, Raley

2. Special Meeting of September 26, 2018
Committee Member Rita Duarte-Weaver motioned to approve the meeting minutes of September 26, 2018. Committee Member Estelle Cervantes seconded the motion. The motion carried with the following vote:

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January 30, 2019 - Page 1 of 4
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AYES: Duarte-Weaver, Cervantes, Herrera, Johnson, Jordan, Juarez, Updike
NOES: None
ABSTAIN: Velez
ABSENT: Gomez, Raley

GCHP REPORTS

3. SSI and CalFresh change
Connie Harden presented information on the new state policy which allows qualifying SSI/SSP recipients to receive CalFresh benefits. The information states that in the summer of 2019, the “cash-out” policy currently banning SSI recipients from receiving CalFresh (food stamps) will end. Committee Member Updike reported that this policy will begin on June 1, 2019. In Ventura County there are about 16,000 people on SSI which works out to about 10,000 households. Discussion was held about the process to sign up and the benefit available.

4. Membership Report
Director of Operations, Chris Hodina provided a report on Membership and Call Center statistics. Ms. Hodina stated that as discussed in the past, our call center was having challenges around staffing and their ability to respond to calls quickly. She reported that Conduent has opened another call center in Tempe, AZ. Beginning in December the center was fully staffed, taking calls and meeting all metrics. The quality of the agents in the Tempe center is equaling that of the seasoned agents in Lexington, KY. COO Watson commented that Member Services Manager Luis Aguilar has been actively involved in setting up the call center and deserves a lot of the credit for this accomplishment. Mr. Aguilar stated that he spent a week at the Tempe center and was able to identify some opportunities to improve the call center agents quality and productivity.

5. GCHP Strategic Planning Meeting
COO Ruth Watson introduced Chief Administrative Officer (CAO) Melissa Scrymgeour who spoke about the recent GCHP Strategic Planning meeting. Ms. Watson stated that she had provided a report to the GCHP Executive Committee on the CAC special meeting held with Margaret Tatar to help facilitate a relationship between CAC and the Commission. CAO Scrymgeour is responsible for GCHP community outreach and the GCHP strategic plan, and wanted the opportunity to address the Committee about some of the things being considered in that realm and present the GCHP strategic plan to the CAC.

CAO Scrymgeour provided history on GCHP strategic planning which began in 2015 under the leadership of Ruth Watson. Ms. Watson was the catalyst for getting us from the organizational perspective to thinking about the future and not what was just ahead of us. The first plan presented was a twelve-month plan which was then expanded out to a three-year view. The Commission asked us to then expand this out to a five-year plan, which can be challenging in a health care plan. January 17, 2019 was the date of the strategic planning retreat. The Strategic Plan 2018-2022 report was provided to all Committee members.

6. CAC Next Steps
COO Watson stated that having an understanding of what we feel our strategic plan is and what we worked out with Commission is important. Input from the CAC will help GCHP to develop our strategic plan as the CAC are in direct contact with our members. Committee Member Curtis Updike commented that all strategic plans have to have tactics and they have to be operational and as those are developed and updated and requested that they be reported back to the CAC.
CEO Dale Villani commented that the Commission wants to know what is going on in the community, what are the member’s experiences with the system’s care; what can we do as a system of care to do a better job. The feedback to the Commission is essential. We need to provide them input as the Commission gives us direction.

A group discussion lead to the decision that an ad hoc committee of four CAC members would determine the content of a presentation to the Commission. CAC Committee Chairwoman Rita Duarte-Weaver will make the presentation to the Commission.

Committee Member Pablo Velez commented that one way to remain connected on a permanent basis with the Commission would be to request a seat on the Commission. Strategically this may be a way for our voice to always be there. COO Villani replied that it is the Board of Supervisors who write the bylaws and determined the seats and which type of organization fills them.

Committee Member Velez stated CAC members all have at least one success story they would like to bring forward as the families want to thank GCHP for changing their lives. Committee Member Velez went on to talk about the changes in the way members receive Medi-Cal services in Ventura county since the inception of GCHP, the improvements and barriers removed.

Committee Member Updike stated that the Member Services Resource guide came out of feedback from the CAC. Also possibly GCHP would be willing to go out on the road and address groups. Any actions taken by GCHP as a result of feedback from the CAC should be reported out. CMO Dr. Wharfield stated that the new Urgent Care brochure is one of those items. The brochure was initially presented to the CAC by Dr. Lupe Gonzalez for comments. The document was revised based on that feedback and is now ready for distribution.

Committee Member Velez reported that there are some studies in California that have looked at the results of the County Organized Health System (COHS) model and the acceptance and quality for the members, it’s the best model. What can we do to make this the standard? CEO Villani replied that topic has come to the Commission recently that the COHS model is the more successful model.

Specific topics suggested for the report to the Commission were:

- CAC members in attendance each introduce themselves. Who you are, what your role is in the community. That you bring feedback from the community to the CAC/plan.
- It is requested that as many of the CAC members attend the May 20, 2019 Commission meeting as possible to introduce themselves to the Commission, to put a face on the CAC.
- Request a seat on the Commission.
- Member Service Resource Guide, how it came about and how it has impacted our members and our partners.
- We need a way for members to share the positive stories with GCHP and not just their grievances. Members will share their good news stories.
- Partnerships that came out of the CAC. Ex-committee member Pedro Mendoza partnered with GCHP Health Services to provide Thanksgiving dinners for 500 families. Committee Member Ruben Juarez partnered with GCHP staff to provide hundreds of pairs of new socks for the homeless.
- Funds to create informational videos to be played in the provider’s offices.
ADJOURNMENT

Meeting adjourned at 6:10 p.m.

Submitted by Connie Harden

Approved by: ________________________________

Connie Harden, Member Services Specialist

Date: ____________________
AGENDA ITEM 2

To: Gold Coast Health Plan Community Advisory Committee (CAC)

From: Ruth Watson Chief Operating Officer
Speaker: Rita Duarte-Weaver, CAC Committee Chairperson

Date: April 24, 2019

Re: Nominations and Election of CAC Committee Vice-Chairperson

SUMMARY:

The Community Advisory Committee consists of eleven (11) seated members. The Committee nominated and elected a Committee Chairperson and Vice-Chair in January 2017. The Committee Vice-Chair resigned the position in 2018 resulting in a vacancy. The CAC Charter requires a new vice-Chairperson be nominated and an election to be held.

RECOMMENDATION:

Nominate and elect a Community Advisory Committee Vice-Chairperson.
AGENDA ITEM 3

To: Gold Coast Health Plan Community Advisory Committee (CAC)

From: Ruth Watson, Chief Operating Officer
Speaker: Rita Duarte-Weaver, CAC Committee Chairperson

Date: April 24, 2019

Re: Community Advisory Committee Report to the Commission

SUMMARY:

As directed by GCHP’s Commission, CAC shall report every six months to the GCHP Commission and shall provide advice and recommendations to the GCHP Commission relative to GCHP’s programs and initiatives.

BACKGROUND/DISCUSSION:

An ad hoc committee was formed consisting of three CAC members and four GCHP staff. CAC members and Staff met in late March to discuss the approach for presenting to the GCHP commission. CAC members and Staff determined that the first presentation would be held at the GCHP Commission meeting on May 20, 2019.

The CAC Chairperson will present the CAC members along with a brief description of accomplishments and initiatives. The CAC will also present a request to have a CAC member be awarded a seat on the GCHP Commission.

RECOMMENDATION:

Finalize the presentation which is scheduled to be presented to the Commission on May 20, 2019.

ATTACHMENT:

Draft presentation
Community Advisory Committee (CAC)
Report to the Commission

Rita Duarte-Weaver
CAC Committee Chairperson
Monday, May 20, 2019
CAC/GCHP Collaboration

• CAC members regularly attend GCHP meetings, including those held by GCHP Health Services

• CAC members routinely reach out to GCHP Member Services for assistance in resolving member issues

• CAC and GCHP Employee Activities Committee work collaboratively to meet the needs of the community, including events such as:
  • County Healthcare Agency Sock Drive
  • Amigo Baby Thanksgiving Meal Delivery
Accomplishments

• CAC/GCHP collaborated to realign quarterly CAC meetings to better reflect CAC issues/concerns/requests of the Plan

• GCHP responded to a request from the CAC for Member Resource Guide which was completed and distributed to members in 2018
Initiatives

• CAC/GCHP partnering to find innovative methods to assist members with understanding the role of GCHP- leading to better communication and trust

• Identifying barriers for members with the goal of empowering and educating members with regard to:
  • Navigating the healthcare system
  • Understanding benefits
  • Understanding their Grievance and Appeals rights and process

• Collaborating on the creation of a members “Rights and Responsibilities” resource document
The Community Advisory Committee is requesting consideration for a CAC member to retain a seat on the GCHP Commission for the purpose of fostering open dialogue between the community groups, the GCHP Commission and the Plan to further better the members.
AGENDA ITEM 4

To: Gold Coast Health Plan Community Advisory Committee (CAC)

From: Marlen Torres, Director of Government Relations

Date: April 24, 2019

Re: Community Relations and Strategic Plan

VERBAL PRESENTATION
AGENDA ITEM 5

To: Gold Coast Health Plan Community Advisory Committee (CAC)

From: Rachel Lambert, Manager, Care Management
      Paula Bossoletti, Manager, Health Services

Date: April 24, 2019

Re: Care Management

PowerPoint Presentation attached
Gold Coast Health Plan
Care Management
Care Management

• What is Care Management?
• Referrals
• Social Determinants of Health (SDH)
• Adult/Pediatric
• Special Populations TCRC/CCS /WPC
• Measurement of effectiveness
What is Care Management?

- Care management is a collaborative process that involves:
  - Member
  - Member’s Care Team (family, guardians, PCPs, specialists)
  - GCHP Care Management Team
    - Registered Nurse Care Managers
    - Licensed Clinical Social Worker Care Managers
    - Care Management Coordinators

- Through telephonic interactions Care Management utilizes person centered planning and collaboration with the member to address member’s stated health or psychosocial needs
Care Management Process

- **Non-Complex Care Management**
  - Low or emerging risk, typically shorter-term interventions

- **Complex Care Management**
  - Higher risk, vulnerable to fragmented care, multiple comorbidities
Referrals

- GCHP UM staff
- Physicians
- Hospital Case Managers
- Community Partners
- Pharmacy
- Behavioral Health
- Self referrals from member or member’s family/guardian
Social Determinants of Health

- Conditions in the places where people live, learn, work, and play affect a wide range of health risks and outcomes.
  
  (CDC, 2018)
CARE MANAGEMENT SPECIALTIES

Pediatrics
- Pediatric Care Management
- CCS population
- Transition from CCS pediatric to GCHP adult providers (T-21)

Adult General
- Palliative Care
- Complex and Catastrophic Conditions
- Social Determinants of Health
- Transplants
- High Risk OB
- Disease Management
- SPD (Seniors and Persons with Disabilities)
Community Partners

California Children’s Services (CCS)

Tri-Counties Regional Center (TCRC)

Whole Person Care (WPC)
Measurement of Effectiveness

• Member satisfaction surveys
• Quality: providing access to quality health care to the Plan’s members and delivering it in a cost-effective manner.
• Member-centric goals achieved; direct interaction with member
  • meeting the member “where they are”
  • setting goals collaboratively
• Improved health outcomes; fewer hospitalizations, ED visits, & complications of disease
Ventura Transit System

Call Ventura Transit System (VTS) at
1-855-628-7433
1-800-855-7100 California Relay Services

**Call VTS at least 48 hours in advance of your request**
Thank you!
AGENDA ITEM 6

To: Gold Coast Health Plan Community Advisory Committee (CAC)

From: Lupe Gonzalez, Director Health Education, Cultural and Linguistics

Date: April 24, 2019

Re: Health Navigator Presentation

PowerPoint Presentation attached
Health Navigator Program
Postpartum Care

Lupe González, PhD, MPH
Director of Health Education, Cultural and Linguistic Services
April 24, 2019
Agenda

• Hospital Discharge Program Overview

• Postpartum Collaborative Efforts

• Health Navigator Program to Improve Member Engagement

• Member Stories
Overview

• Quality Improvement Department

• Postpartum care is an important quality health care outcome

• Medical complications can occur after giving birth

• Postpartum visit can address any adverse physical effects

• Postpartum depression can address emotional issues
Health Navigator Program

Hospital Census
- Daily Census Report
- Check Eligibility
- Admission & Discharge

Hospital Visit
- Health Navigator Visit
- Welcome Packet
- Stress Importance of PPV
- Review Member Incentive Form

Member
- Follow-up Call
- Reminder Calls
- Member Incentive Form
- Provider Follow-up
Health Navigator: Working to Reduce Barriers

Hospital Visit

Follow-up with Provider

Member Engagement

5 Attempts to reach member

3 Week post visit – follow-up call
Health Outcomes

• Quality Improvement of Postpartum Visits (PPV)

• Goal to increase the PPV by 3%

• Results – rate increased by 12.09% points from 63.69% to 75.78%

• Administrated rate increased 12.09%

• Member incentive participation rate increased by 63%
## Health Outcomes

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<th>Study Period January - December</th>
<th>Member Participation</th>
<th>QI Mailed Form to Members</th>
<th>Participation Rate</th>
<th>Total Hospital Visits</th>
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Source: Quality Improvement Quarterly Report 2019
Next Steps

• Continue with Program at VCMC

• Expand to other Hospitals

• Establish Quarterly Updates with Hospital Staff

• Expand Collaborative Efforts

• Review Member Incentive & Member Stories