



November 20, 2019

Dear Public Policy/Community Advisory Committee Member,

The next Public Policy/Community Advisory Committee (PP/CAC) meeting will take place on Tuesday, November 26, 2019 at 12:00pm. The meeting will be held at Kern Family Health Care located at **2900 Buck Owens Blvd., Bakersfield, CA 93308** in the Kern River Room.

Included in this packet are:

1. Meeting agenda
2. Minutes from the last meeting
3. Membership Enrollment Report - Medi-Cal

Action Items:

- 2019 3rd Quarter Grievance Summary Report (Attachment)
- 2019 3rd Quarter Grievance Report (Attachment)
- 2019 3rd Quarter Health Education Activities Report (Attachment)
- 2019 3rd Quarter Disease Management Report (Attachment)

Please review these items before the meeting. A hardcopy will be provided for you at the meeting. Lastly, salad from Victor's Grill will be provided for lunch.

If you are not able to attend the meeting or if you have any questions, please call me at (661) 664-5536 or send me an e-mail maritzaj@khs-net.com. Thank you for your support. I look forward to seeing you at the meeting!

Sincerely,

Maritza Jimenez

Maritza Jimenez
Marketing & Public Affairs Representative
Kern Health Systems

AGENDA

PUBLIC POLICY/COMMUNITY ADVISORY COMMITTEE

KERN HEALTH SYSTEMS
2900 Buck Owens Boulevard
Kern River Room
Bakersfield, California 93308

Regular Meeting
Tuesday, November 26, 2019

12:00 P.M.

All agenda item supporting documentation is available for public review at Kern Health Systems in the Administration Department, 2900 Buck Owens Boulevard, Bakersfield, 93308 during regular business hours, 8:00 a.m. – 5:00 p.m., Monday through Friday, following the posting of the agenda. Any supporting documentation that relates to an agenda item for an open session of any regular meeting that is distributed after the agenda is posted and prior to the meeting will also be available for review at the same location.

PLEASE REMEMBER TO TURN OFF ALL CELL PHONES, PAGERS OR ELECTRONIC DEVICES DURING BOARD MEETINGS.

COMMITTEE TO RECONVENE

Members: Janet Hefner, Jennifer Wood, Jasmine Ochoa, Valerie Rangel, Cecilia Hernandez-Colin, Beatriz Basulto, Jenny Albert.

CONSENT AGENDA/OPPORTUNITY FOR PUBLIC COMMENT: ALL ITEMS LISTED WITH A "CA" ARE CONSIDERED TO BE ROUTINE AND NON-CONTROVERSIAL BY KERN HEALTH SYSTEMS STAFF. THE "CA" REPRESENTS THE CONSENT AGENDA. CONSENT ITEMS WILL BE CONSIDERED FIRST AND MAY BE APPROVED BY ONE MOTION IF NO MEMBER OF THE BOARD OR AUDIENCE WISHES TO COMMENT OR ASK QUESTIONS. IF COMMENT OR DISCUSSION IS DESIRED BY ANYONE, THE ITEM WILL BE REMOVED FROM THE CONSENT AGENDA AND WILL BE CONSIDERED IN LISTED SEQUENCE WITH AN OPPORTUNITY FOR ANY MEMBER OF THE PUBLIC TO ADDRESS THE BOARD CONCERNING THE ITEM BEFORE ACTION IS TAKEN.

STAFF RECOMMENDATION SHOWN IN CAPS

PUBLIC PRESENTATIONS

- 1) This portion of the meeting is reserved for persons to address the Committee on any matter not on this agenda but under the jurisdiction of the Committee. Committee members may respond briefly to statements made or questions posed. They may ask a question for clarification; make a referral to staff for factual information or request staff to report back to the Committee at a later meeting. Also, the Committee may take action to direct the staff to place a matter of business on a future agenda.
SPEAKERS ARE LIMITED TO TWO MINUTES. PLEASE STATE AND SPELL YOUR NAME BEFORE MAKING YOUR PRESENTATION. THANK YOU!

COMMITTEE MEMBER ANNOUNCEMENTS OR REPORTS

- 2) On their own initiative, Committee members may make an announcement or a report on their own activities. They may ask a question for clarification, make a referral to staff or take action to have staff place a matter of business on a future agenda (Gov. Code Sec. 54954.2[a])
- CA-3) Minutes for Public Policy/Community Advisory Committee meeting on August 13, 2019 (Attachment) – APPROVE
- CA-4) Membership Enrollment Report - Medi-Cal – (Attachment) – APPROVE
- 5) Member Services Report – (Nate Scott – Director of Member Services)
 - a. 2019 3rd Quarter Grievance Summary Report
 - b. 2019 3rd Quarter Grievance Report(Attachments) – APPROVE
- 6) Health Education Report – (Isabel Silva, MPH – Director of Health Education/ Cultural & Linguistics Services)
 - a. 2019 3rd Quarter Health Education Activities Report (Attachment) – APPROVE
 - b. Fall 2019 Member Newsletter (Discussion)
 - c. Spring 2020 Member Newsletter (Discussion)
- 7) Disease Management Reports – (Michael Pitts, RN – Deputy Director of Health Services)
 - a. 2019 3rd Quarter Disease Management Report (Attachment) – APPROVE

ADJOURN TO TUESDAY, February 25, 2020 (TBD) IF COMMITTEE,
APPROVES DATE LISTED.

**AMERICANS WITH DISABILITIES ACT
(Government Code Section 54953.2)**

The meeting facilities at Kern Health Systems are accessible to persons with disabilities. Disabled individuals who need special assistance to attend or participate in a meeting of the Board of Directors may request assistance at the Kern Health Systems office, 9700 Stockdale Highway, Bakersfield, California or by calling (661) 664-5000. Every effort will be made to reasonably accommodate individuals with disabilities by making meeting material available in alternative formats. Requests for assistance should be made five (5) working days in advance of a meeting whenever possible.

SUMMARY OF PROCEEDINGS

PUBLIC POLICY/COMMUNITY ADVISORY COMMITTEE

KERN HEALTH SYSTEMS
5701 Truxtun Avenue
Suite 201 - Board Room
Bakersfield, California 93309

Regular Meeting
Tuesday, August 13, 2019
12:00 P.M.

All agenda item supporting documentation is available for public review at Kern Health Systems in the Administration Department, 9700 Stockdale Highway, Bakersfield, 93311 during regular business hours, 8:00 a.m. – 5:00 p.m., Monday through Friday, following the posting of the agenda. Any supporting documentation that relates to an agenda item for an open session of any regular meeting that is distributed after the agenda is posted and prior to the meeting will also be available for review at the same location.

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DEVICES DURING BOARD MEETINGS.**

COMMITTEE RECONVENED

Members Present: Janet Hefner, Cecilia Hernandez-Colin, Beatriz Basulto, Jasmine Ochoa, Valerie Rangel

Members Absent: Jennifer Wood, Jenny Albert

Meeting called to order at 12:06 P.M. by Louie Iturriria, Director of Marketing and Member Services

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STAFF RECOMMENDATION SHOWN IN CAPS

PUBLIC PRESENTATIONS

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- CA-3) Minutes for Public Policy/Community Advisory Committee meeting on May 14, 2019 (Attachment) – APPROVED
- CA-4) Membership Enrollment Report - Medi-Cal – (Attachment) – APPROVED

All Consent Agenda Items Approved (CA-3 through CA-4) Hefner-Rangel: All Ayes

- 5) Member Services Report – (Nate Scott – Director of Member Services)
 - a. 2019 2nd Quarter Grievance Summary Report
 - b. 2019 2nd Quarter Grievance Report(Attachments) – APPROVED
Colin Hernandez-Hefner: All Ayes
 - 6) Health Education Report – (Isabel Silva, MPH – Director of Health Education/Cultural & Linguistics Services)
 - a. 2019 2nd Quarter Health Education Activities Report
 - b. School Wellness Awards(Attachment) – APPROVED
Colin Hernandez-Rangel: All Ayes
- **The Fall/Winter Member newsletter is in development and covers various topics including maternal mental health, opioid abuse, cancer, pain management and positive parenting.**

- **KHS has offered another cycle of school wellness grant funds to public schools in Kern County as well as an internship program for college students. 7 sites have been awarded and represent Bakersfield, Oildale, Delano and Lake Isabella.**
 - **KHS has engaged in an asthma pilot with the Central California Asthma Collaborative to provide asthma education through home visits, patient advocacy and care coordination to 40 members. Results of the pilot will be share towards the middle of 2020.**
 - **KHS initiated a Member Engagement Pregnancy Project to educate and inform members on the importance of regular and timely prenatal care in hopes of reducing the premature birth rate for the plan. Strategies include personalized pregnancy guides, provider education, and targeted outreach in select areas. A survey is scheduled to be completed in the Fall to evaluate the impact of these engagement strategies.**
- 7) Disease Management Reports – (Michael Pitts, RN – Deputy Director of Health Services)
- a. 2019 2nd Quarter Disease Management Report – (Attachment) – APPROVED
Colin Hernandez-Rangel: All Ayes

MEETING ADJOURNED BY LOUIE ITURRIRIA,
DIRECTOR OF MARKETING AND PUBLIC RELATIONS @ 1:10 P.M.
TO TUESDAY, NOVEMBER 26, 2019 AT 12:00 P.M.

**AMERICANS WITH DISABILITIES ACT
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KHS NOVEMBER 2019 ENROLLMENT:**Medi-Cal Enrollment**

As of November 1, 2019, Medi-Cal enrollment is 174,297 which represents a decrease of 0.2% from October enrollment.

Seniors and Persons with Disabilities (SPDs)

As of November 1, 2019, SPD enrollment is 13,871, which represents a decrease of 0.03% from October enrollment.

Expanded Eligible Enrollment

As of November 1, 2019, Expansion enrollment is 61,216, which represents a decrease of 0.8% from October enrollment.

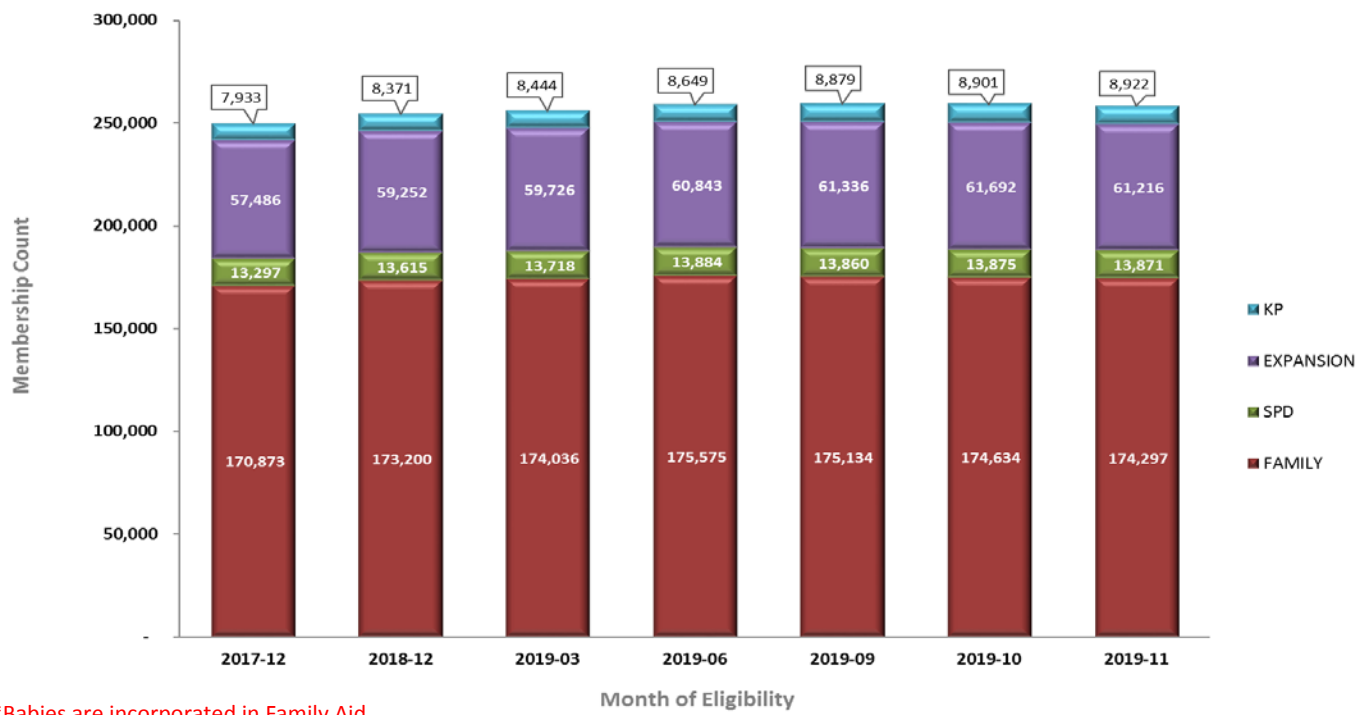
Kaiser Permanente (KP)

As of November 1, 2019, Kaiser enrollment is 8,922, which represents an increase of 0.2% from October enrollment.

Total KHS Medi-Cal Managed Care Enrollment

As of November 1, 2019, total Medi-Cal enrollment is 258,306, which represents a decrease of 0.3% from October enrollment.

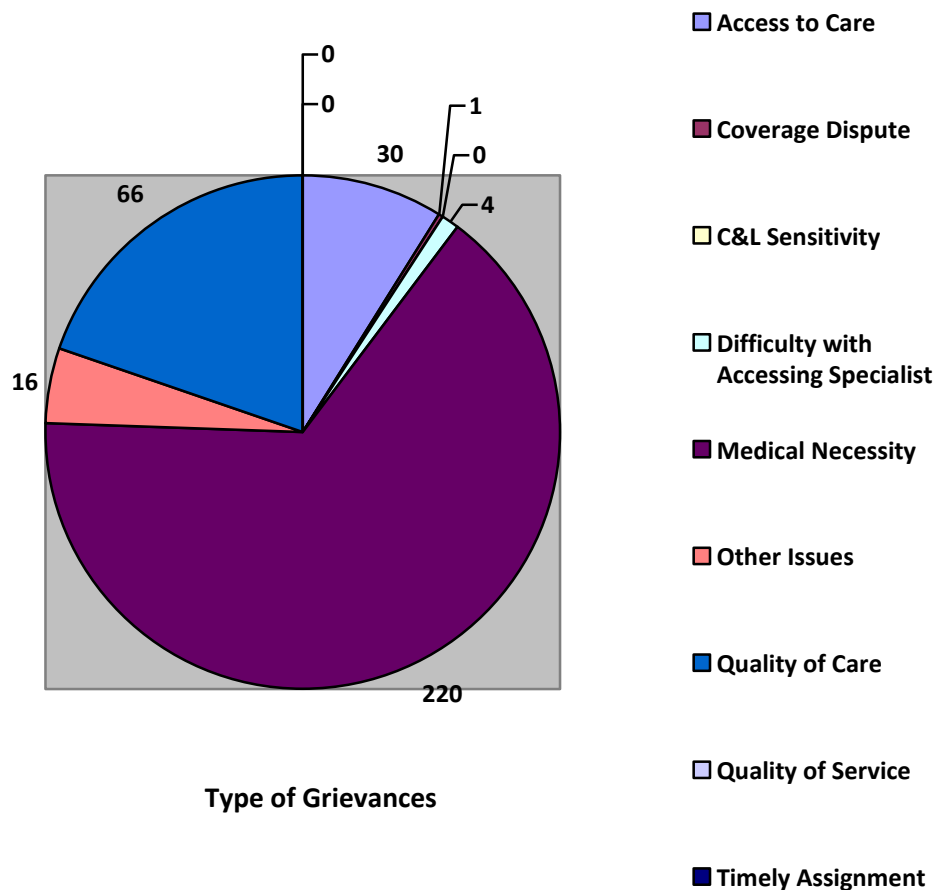
Membership as of Month of Eligibility	FAMILY	SPD	EXPANSION	KP	BABIES	Monthly/ Member Months Total
2017-12	170,426	13,297	57,486	7,933	447	249,589
2018-12	172,724	13,615	59,252	8,371	476	254,438
2019-03	173,638	13,718	59,726	8,444	398	255,924
2019-06	175,159	13,884	60,843	8,649	416	258,951
2019-09	174,633	13,860	61,336	8,879	501	259,209
2019-10	174,162	13,875	61,692	8,901	472	259,102
2019-11	173,855	13,871	61,216	8,922	442	258,306



*Babies are incorporated in Family Aid

3rd Quarter 2019 Grievance Summary

Issue	Number	In Favor of Health Plan	In favor of Enrollee	Still under review
Access to care	30	23	7	0
Coverage dispute	1	1	0	0
Cultural and Linguistic Sensitivity	0	0	0	0
Difficulty with accessing specialists	4	2	2	0
Medical necessity	220	164	56	0
Other issues	16	12	4	0
Quality of care	66	35	31	0
Quality of service	0	0	0	0
Timely assignment to provider	0	0	0	0



Grievances per 1,000 Members = 1.29

During the third quarter of 2019, there were three hundred and thirty seven formal grievances and appeals received. One hundred cases were closed in favor of the Enrollee; two hundred and thirty seven cases were closed in favor of the Plan. All of these cases closed within thirty days. One hundred and one cases were received from SPD (Seniors and Persons with Disabilities) members. One hundred and thirteen cases were received from Medi-Cal Expansion members.

3rd Quarter 2019 Grievance Summary

Access to Care

There were thirty grievances pertaining to access to care. Twenty three cases closed in favor of the Plan. Seven cases closed in favor of the Enrollee. The following is a summary of these issues:

Ten members complained about the lack of available appointments with their Primary Care Provider (PCP). Eight of the cases closed in favor of the Plan after the responses indicated the office provided appropriate access to care based on the Access to Care Standards for PCP appointments. Two of the cases closed in favor of the Enrollee after the response indicated the office may not have provided appropriate access to care.

Eighteen members complained about the wait time to be seen for a Primary Care Provider (PCP) appointment. Thirteen cases closed in favor of the Plan after the responses indicated the member was seen within the appropriate wait time for an appointment or the member was there as a walk-in, which are not held to Access to Care standards. Five cases closed in favor of the Enrollee after the response indicated the member was not seen within the appropriate wait time for an appointment.

One member complained about the telephone access with their Primary Care Provider (PCP) appointment. This case closed in favor of the Plan after the response indicated the member was provided with the appropriate telephone access.

One member complained about the wheelchair access with their Primary Care Provider (PCP) appointment. This case closed in favor of the Plan after the response indicated the member was provided with the appropriate access.

Coverage Dispute

There was one grievance pertaining to a Coverage Dispute issue. The case closed in favor of the Plan. The following is a summary of this issue:

One member complained about the denial of a referral authorization request. The case closed in favor of the Plan and the decision was upheld after it was determined that the request was appropriately denied as the requested services are not a covered benefit.

Cultural and Linguistic Sensitivity

There were no grievances pertaining to Cultural and Linguistic Sensitivity.

Difficulty with Accessing a Specialist

There were four grievances pertaining to Difficulty Accessing a Specialist. Two cases closed in favor of the Plan. Two cases closed in favor of the Enrollee. The following is a summary of these issues:

One member complained about the lack of available appointments with a specialist. The case closed in favor of the Plan after the response indicated the offices provided appropriate access to care based on the Access to Care Standards for specialty appointments.

3rd Quarter 2019 Grievance Summary

Three members complained about the wait time to be seen for a specialist appointment. One case closed in favor of the Plan after the response indicated the member was seen within the appropriate wait time for an appointment. Three cases closed in favor of the Enrollee after the responses indicated the member may not have been seen within the appropriate wait time for an appointment.

Medical Necessity

There were two hundred and twenty grievances pertaining to Medical Necessity. One hundred and sixty four of the cases were closed in favor of the Plan. Fifty six of the cases closed in favor of the Enrollee. The following is a summary of these issues:

One hundred and sixty six members complained about the denial or modification of a referral authorization request. One hundred and ten of the cases were closed in favor of the Plan as it was determined that there was no supporting documentation submitted with the referral authorization requests to support the criteria for medical necessity of the requested specialist or DME item and the denials were upheld. Three cases were closed in favor of the Plan and modified. Fifty three cases were closed in favor of the Enrollee as it was determined medical necessity was met and the denials were overturned.

Fifty four members complained about the denial or modification of a TAR. Fifty one of the cases were closed in favor of the Plan as it was determined there was no supporting documentation submitted with the TAR to support the criteria for medical necessity of the requested medication and the denial was upheld. Three cases were closed in favor of the Enrollee as it was determined medical necessity was met and the denials were overturned.

Other Issues

There were sixteen grievances pertaining to Other Issues. Twelve of the cases were closed in favor of the Plan. Four of the cases closed in favor of the Enrollee. The following is a summary of these issues:

Two members complained they felt discriminated against due to the color of their skin as they were the last patients to be seen during the day. These cases closed in favor of the Plan after the response from the providers indicated the members received the appropriate services and were not discriminated against.

One member complained she felt that she was being taken advantage of for not speaking English due to not being seen as scheduled and asked to return later that afternoon. This case closed in favor of the Plan after the response from the provider indicated they were running behind scheduled and it was not their intent to make member feel that way.

One member complained they felt discriminated against by staff due to using foul language and ignored by provider. This case closed in favor of the Enrollee as response from provider to get an interpretation of the event was not received.

One member complained they felt targeted by KHS staff for being rude and hateful. This case closed in favor of the Plan after the recorded calls were reviewed and no issue was identified.

3rd Quarter 2019 Grievance Summary

One member complained that they felt provider was behaving inappropriately. This case closed in favor of the Plan after the response indicated member's allegations were unfounded.

One member complained that they felt discriminated against for being homeless due to feeling threatened by office staff. This case closed in favor of the Plan after the response stated member was asked to leave the clinic due to being belligerent towards staff.

One member complained that staff were discussing patient medical history in the lobby where others could hear the conversation. This case closed in favor of the Enrollee as response from provider to get an interpretation of the event was not received. This case was sent to Compliance for further review.

Two members were involved in a car accident while being transported to a medical appointment or service by an Uber driver. KHS Transportation coordinated the Uber trips. These cases closed in favor of the Enrollee, as they were involved in a car accident. Incidents reported by transportation vendor.

One member complained they felt discriminated against for the medication they were taking due to a provider refusing to see them. This case closed in favor of the Plan after the response from the provider stated he did not accept to see the member as a new patient after reviewing the CURES report indicating member attempted to obtain narcotics from multiple physicians.

One member complained they felt discriminated against for their race and appearance due to being intimidated to leave the clinic. This case closed in favor of the Plan after the provider indicated the member was not discriminated against and was asked to leave due to being aggressive towards staff.

One member complained provider refused to treat them as a walk-in patient after being placed in exam room due to missing appointments. This case closed in favor of the Plan after the response from the provider indicated the member was non-compliant with treatment and not following up with specialist.

One member complained they wanted reimbursement for medications paid out of pocket a year prior. This case closed in favor of the Plan as a TAR for medication was not submitted to KFHC at that time and there was no denial at pharmacy level.

One member complained they felt discriminated against for filing a complaint against her previous PCP as her new PCP refused to prescribe pain medication. This case closed in favor of the Plan after the response from provider indicated member refused to do any lab work and did not agree with the recommended treatment plan.

One member complained they felt a staff was inappropriately contacting member through social media. This case closed in favor of the Plan after response denied all allegations. This case was sent to Compliance for further review.

3rd Quarter 2019 Grievance Summary

Quality of Care

There were sixty six grievances involving Quality of Care issues. Thirty five cases were closed in favor of the Plan. Thirty one cases were closed in favor of the Enrollee. The following is a summary of these issues:

Thirty three members complained about the quality of care received from a Primary Care Provider (PCP). Seventeen cases were closed in favor of the Plan. Sixteen cases closed in favor of the Enrollee. All records/responses were sent to QI for further review and investigation.

Twenty one members complained about the quality of care received from a specialty provider. Eleven cases were closed in favor of the Plan. Ten cases closed in favor of the Enrollee. All records/responses were sent to QI for further review and investigation.

Eleven members complained about the quality of care received from providers staffed by an urgent care, hospital, or non-hospital affiliated clinic. Seven of these cases closed in favor of the Plan. Four of the cases closed in favor of the Enrollee. All records/responses were sent to QI for further review and investigation.

One member complained about the quality of care received from a driver staffed by Non-Emergency Medical Transport (NEMT). The case closed in favor of the Enrollee and all records/responses were sent to QI for further review and investigation.

Quality of Service

There were no grievances pertaining to Quality of Service.

Timely Assignment to Provider

There were no grievances pertaining to Timely Assignment to Provider received this quarter.

Kaiser Permanente Grievances

During the third quarter of 2019, there were fifty seven grievances and appeals received by KFHC members assigned to Kaiser Permanente. One case closed in favor of the Plan. Fifty one cases were closed in favor of the Enrollee. Five cases are still pending closure at the time of this report.

Access to Care

There were five grievances pertaining to Access to Care. The following is a summary of these issues:

Two members complained about the excessive wait time to be seen for an appointment. Both cases closed in favor of the Enrollee.

One member complained about the lack of appointment availability for a Primary Care Provider. This case closed in favor of the Enrollee.

3rd Quarter 2019 Grievance Summary

One member complained about the lack of appointment availability for a Specialist. This case closed in favor of the Enrollee.

One member complained about the lack of language accessibility. This case closed in favor of the Enrollee.

Coverage Dispute

There were five appeals pertaining to Coverage Dispute. The following is a summary of these issues:

Five members complained about a non-covered or out-of-network service they requested; however, were not covered. One case closed in favor of the Plan and service was not covered. Four of the cases closed in favor of the Enrollee and services were provided.

Medical Necessity

There were four appeals pertaining to Medical Necessity. The following is a summary of these issues:

Four members complained about a service they requested; however, were not approved. All four cases closed in favor of the Enrollee and services were provided.

Quality of Care

There was one grievance pertaining to quality of care. The following is a summary of this issue:

One member complained about the quality of care they received. This case closed in favor of the Enrollee.

Quality of Service

There were forty two grievances pertaining to Quality of Service. The following is a summary of these issue.

Forty two cases complained about the services being inadequate at a facility. Thirty seven cases were closed in favor of the Enrollee. Five cases are still open and pending review.

Grievance Report

- The DMHC requires KHS Management report/review/discuss quarterly grievances with the KHS Board of Directors.

Category	Q3 2019	Status	Issue	Q2 2019	Q1 2019	Q4 2018	Q3 2018
Access to Care	34		Appointment Availability	32	41	32	59
Coverage Dispute	3		Authorizations and Pharmacy	9	14	12	21
Medical Necessity	214		Questioning denial of service	244	228	240	267
Other Issues	16		Miscellaneous	13	9	10	7
Quality of Care	65		Questioning services provided. All cases forwarded to Quality Dept.	26	29	22	30
Quality of Service	0		Questioning the professionalism, courtesy and attitude of the office staff. All cases forwarded to PR Department	1	6	3	2
Exempt	1515		Member dissatisfaction calls, that are not regarding a coverage or medical necessity issue, resolved within one business day.	1321	1216	1082	1212
Total Grievances, Appeals and Exempt Cases	1847			1646	1543	1401	1598



Additional Insights-Grievance & Appeal Detail

Issue	3rd Quarter Grievances	Upheld Plan Decision	Overtured Ruled for Member	Still Under Review
Access to Care	30	17	5	8
Coverage Dispute	3	0	0	3
Specialist Access	4	2	2	0
Medical Necessity	214	125	48	41
Other Issues	16	11	3	2
Quality of Care	65	22	18	25
Quality of Service	0	0	0	0
Total	332	177	76	79



KERN HEALTH SYSTEMS
HEALTH EDUCATION, CULTURAL AND LINGUISTIC ACTIVITIES REPORT
Third Quarter 2019

Report Date: October 1, 2019

OVERVIEW

Kern Health Systems' Health Education department provides comprehensive, culturally and linguistically competent services to plan members with the intent of promoting healthy behaviors, improving health outcomes, reducing risk for disease and empowering plan members to be active participants in their health care.

- 2020 Health Education, Cultural and Linguistics Work Plan
- 2019 Health Education, Cultural and Linguistics Program Evaluation
- Population Needs Assessment
- Pregnancy Engagement Survey

The following pages reflect statistical measurements for the Health Education department detailing the ongoing activity for the 3rd quarter 2019.

Respectfully submitted,
Isabel Silva, MPH, CHES
Director of Health Education, Cultural and Linguistic Services

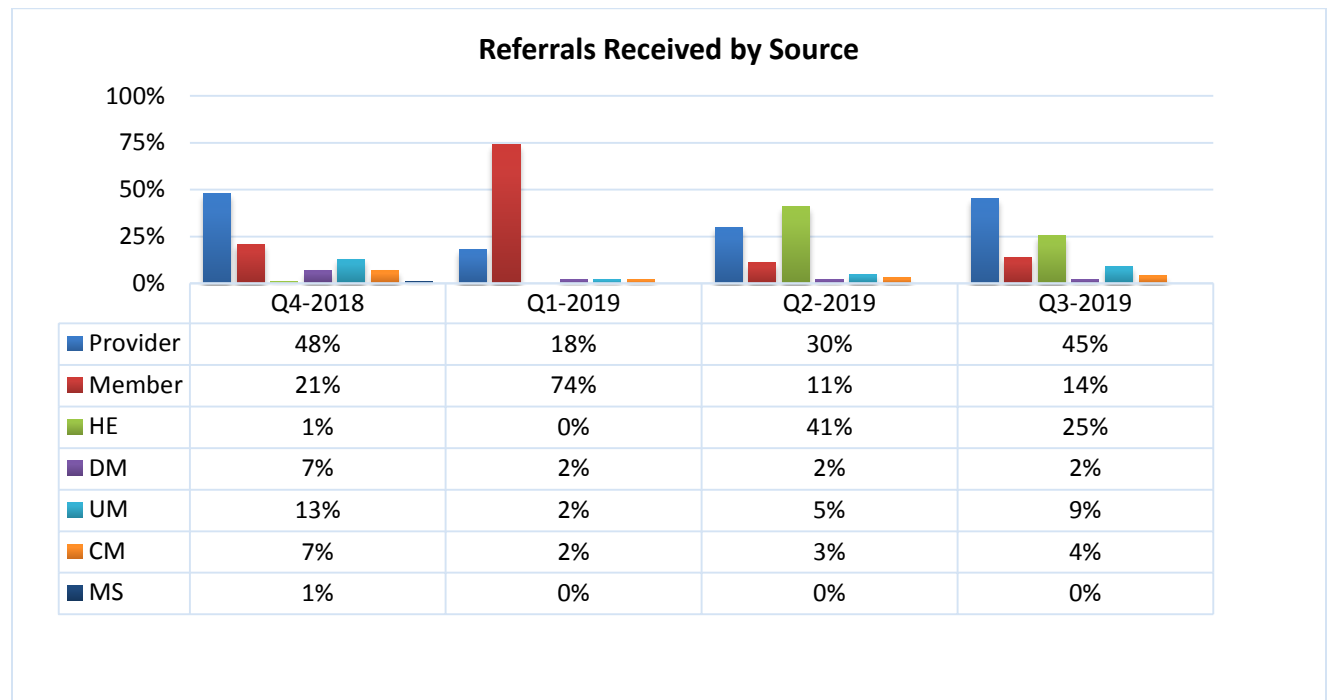
KERN HEALTH SYSTEMS

HEALTH EDUCATION, CULTURAL AND LINGUISTIC ACTIVITIES REPORT

Third Quarter 2019

REFERRALS FOR HEALTH EDUCATION SERVICES

The Health Education Department (HE) receives referrals from various sources. Internal referrals are received from the Kern Health Systems (KHS) Utilization Management (UM), Disease Management (DM), Case Management (CM), Member Services (MS), and Member Portal. Externally, KHS providers submit referrals for health education services according to the member's diagnosis and members can also self-refer for health education services through the Member Portal or by calling Member Services.

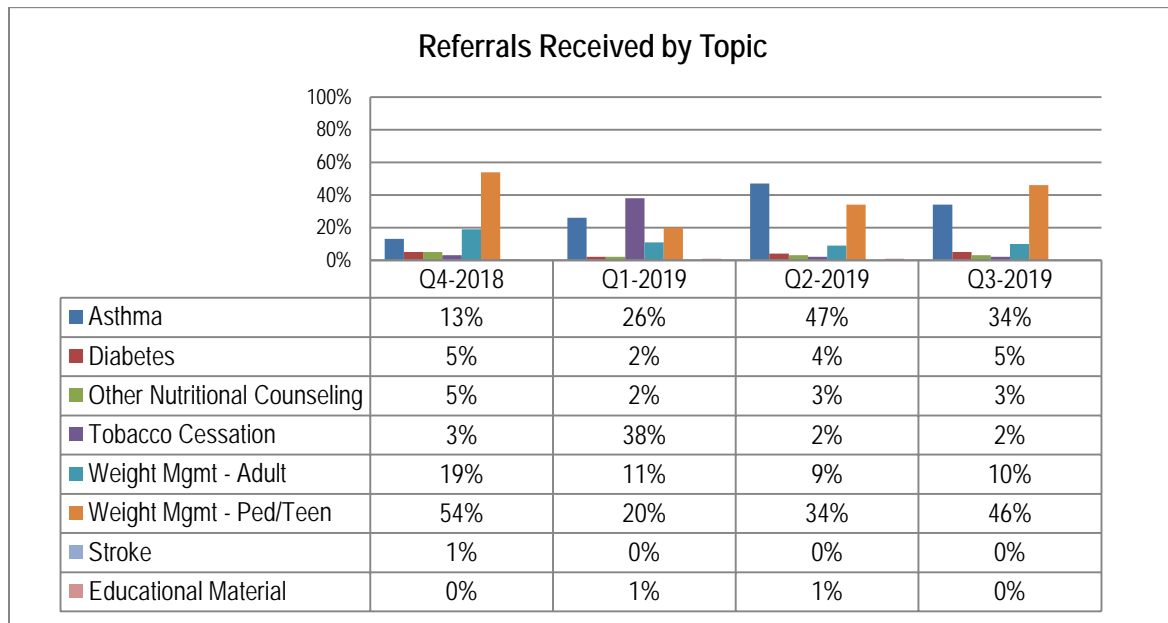


During this quarter, 852 referrals were received which is a 12% decrease in comparison to the previous quarter.

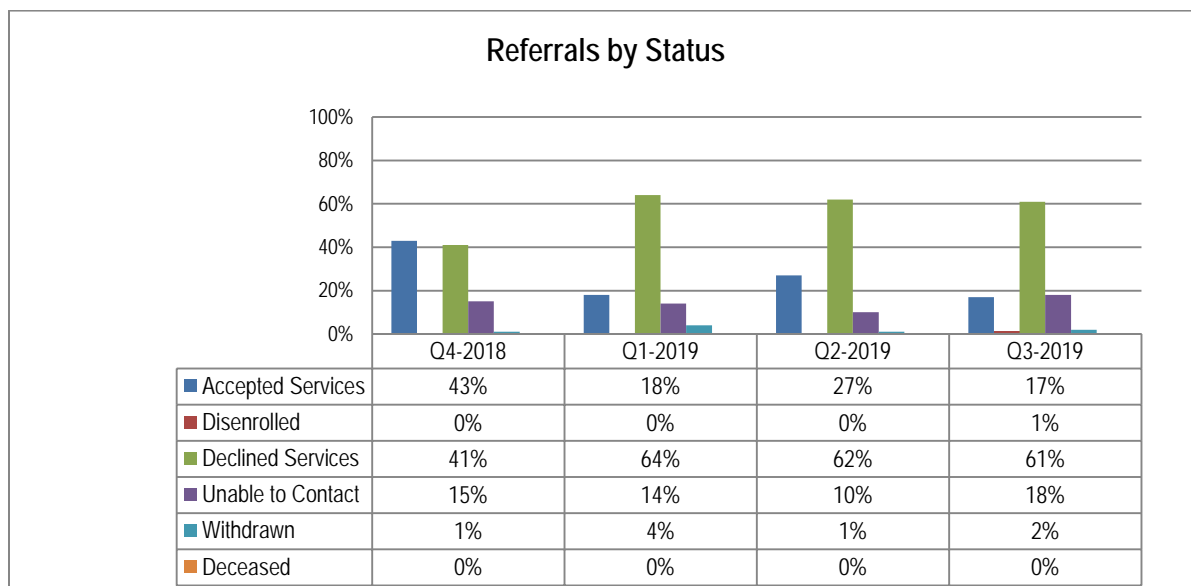
KERN HEALTH SYSTEMS

HEALTH EDUCATION, CULTURAL AND LINGUISTIC ACTIVITIES REPORT

Third Quarter 2019



The HE department receives referrals for various health conditions. This quarter, referrals for asthma education were still significantly higher than the 1st quarter due to targeted outreach calls performed by the HE department. Weight management referrals also increased to 56% during the 3rd Quarter of 2019.



The rate of members who accepted to receive health education services decreased from 27% in the 2nd quarter to 17% in the 3rd quarter of 2019.

KERN HEALTH SYSTEMS
HEALTH EDUCATION, CULTURAL AND LINGUISTIC ACTIVITIES REPORT
Third Quarter 2019

HEALTH EDUCATION SERVICE PROVIDERS

The HE department offers various types of services through KHS or through community partnerships.

Kern Family Health Care (KFHC):

- Healthy Eating and Active Lifestyle Workshop
 - Intro to Gardening
 - Rethink Your Drink
 - Funxercise
 - Healthy Cooking
- Breathe Well Asthma Workshop

Bakersfield Memorial Hospital (BMH):

- Diabetes Management Classes (English only)
- Heart Healthy Classes
- Individual Nutrition Counseling

Clinica Sierra Vista (CSV) WIC:

- Diabetes Management Classes
- Heart Healthy Classes

California Smokers' Helpline (CSH):

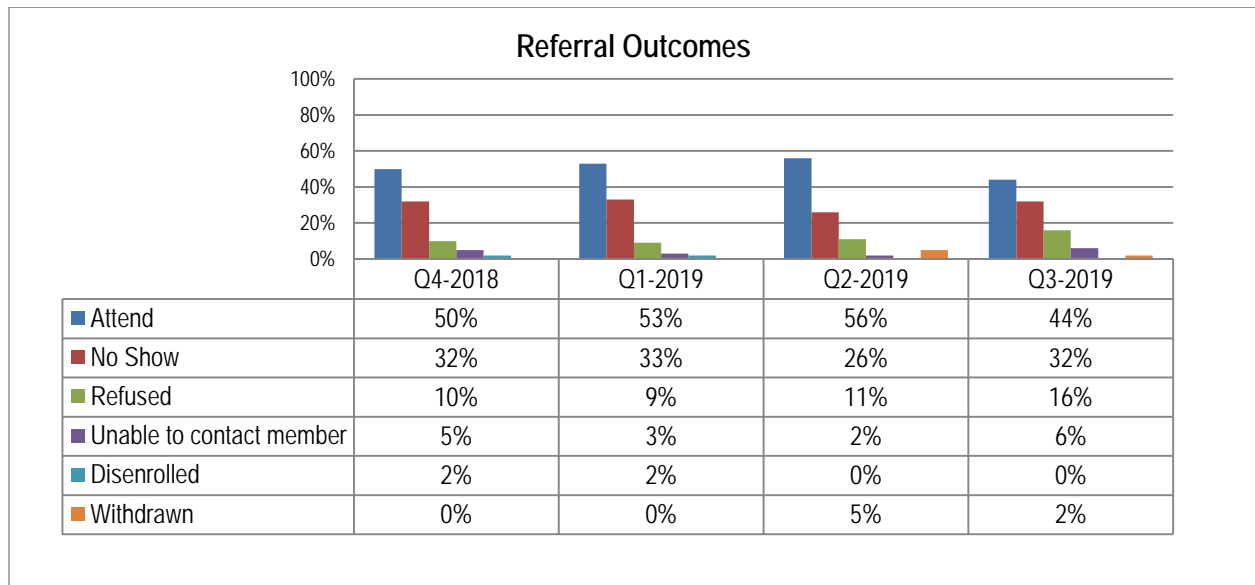
- Telephone Smoking Cessation Counseling

REFERRAL OUTCOMES

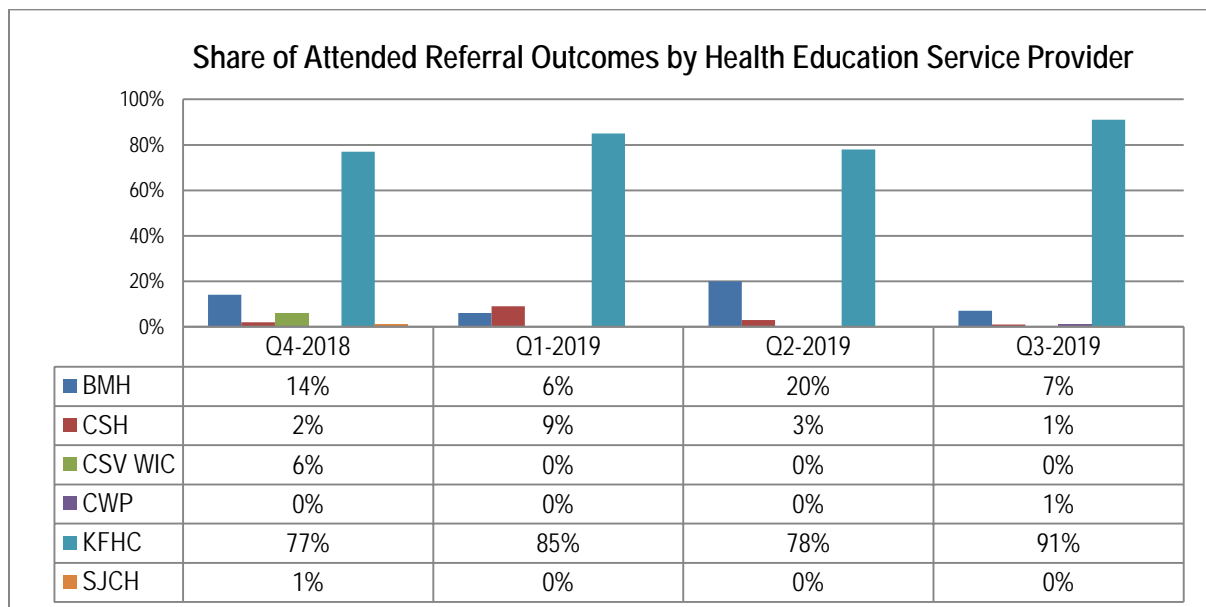
KERN HEALTH SYSTEMS

HEALTH EDUCATION, CULTURAL AND LINGUISTIC ACTIVITIES REPORT

Third Quarter 2019



During this quarter, the rate of members who received health education services out of all members who accepted services decreased from 56% to 44%.



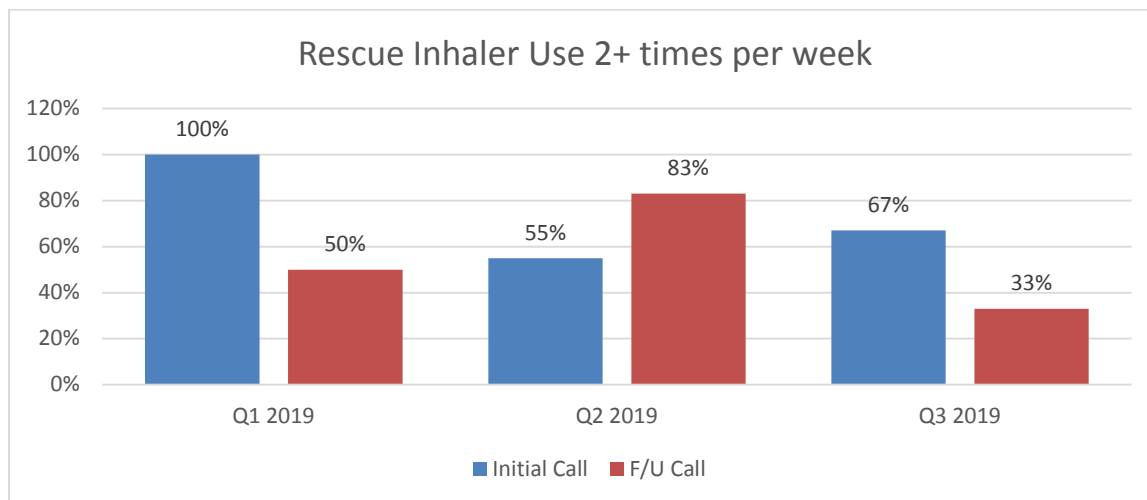
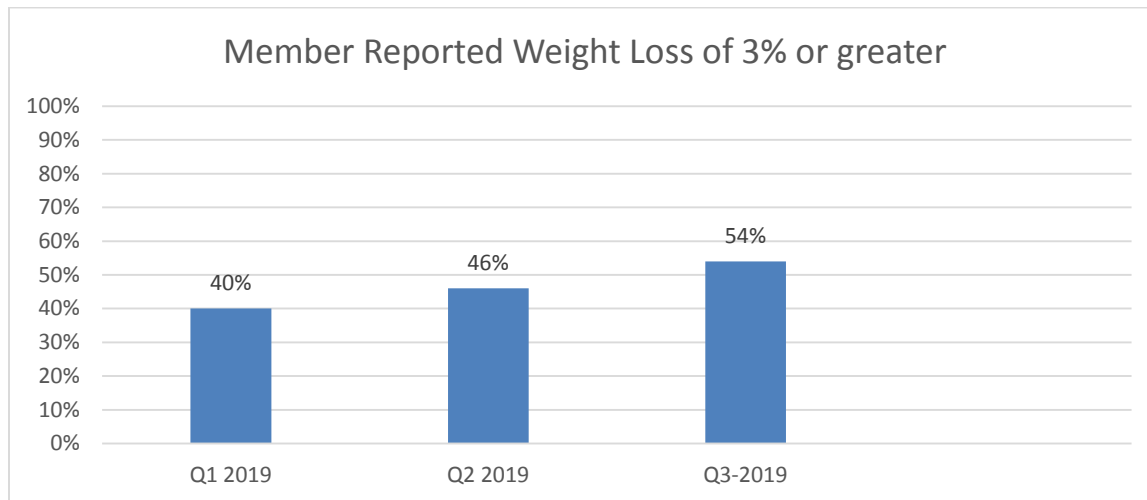
Services through KFHC demonstrates to be the largest share of referral outcomes. This quarter KFHC showed an increase from 78% in the 2nd quarter to 91% in the 3rd quarter of 2019.

Effectiveness of Health Education Services

To evaluate the effectiveness of the health education services provided to members, a 3-month follow up call was conducted on members who received services during the prior quarter. Of

KERN HEALTH SYSTEMS
HEALTH EDUCATION, CULTURAL AND LINGUISTIC ACTIVITIES REPORT
Third Quarter 2019

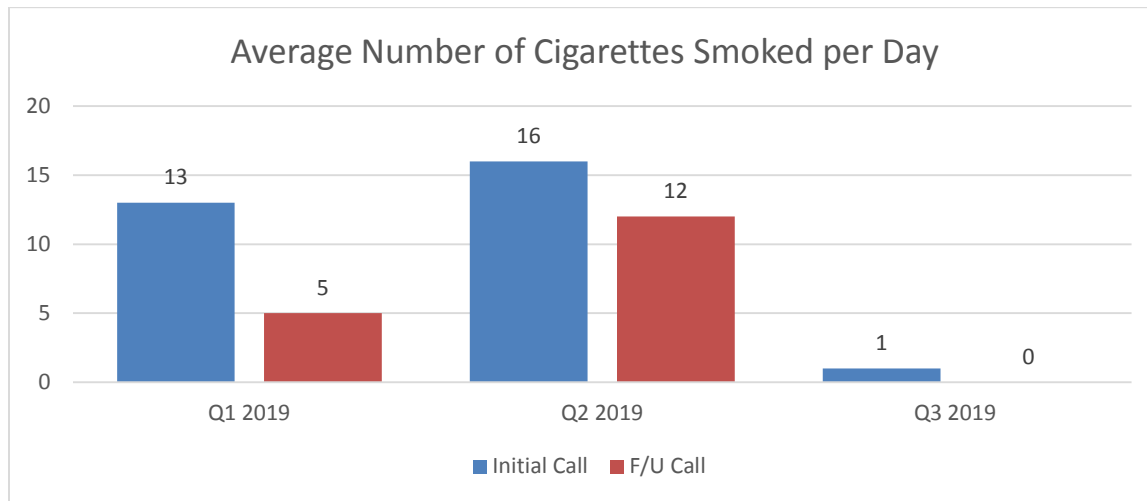
the 21 members who participated in the 3 month follow up call, 17 received weight management education, 1 received tobacco cessation education and 3 received asthma management education. All findings are based on self-reported data from the member.



KERN HEALTH SYSTEMS

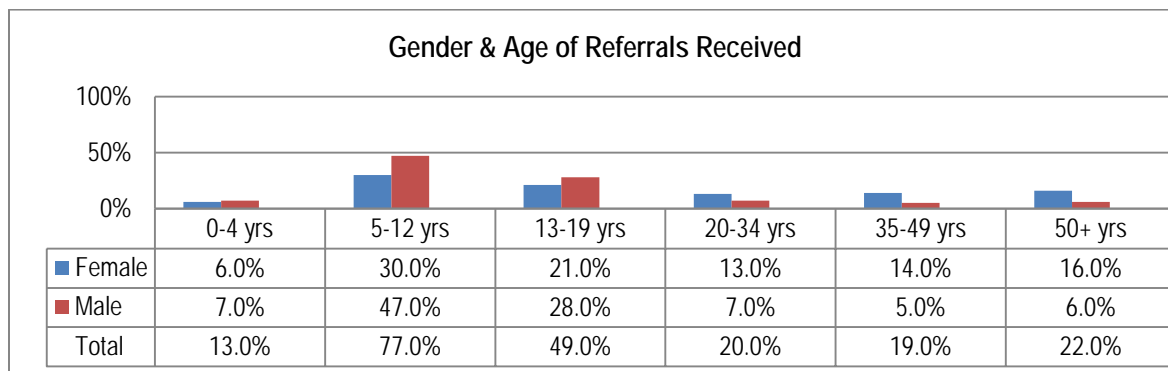
HEALTH EDUCATION, CULTURAL AND LINGUISTIC ACTIVITIES REPORT

Third Quarter 2019



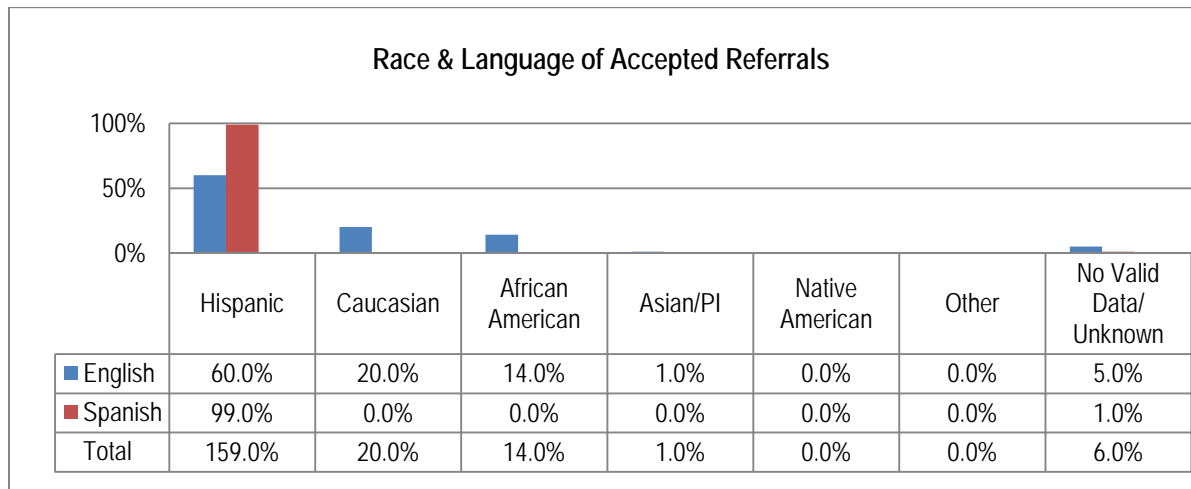
Demographics of Members

KHS' provides services to a culturally and linguistically diverse member population. KHS' language threshold is English and Spanish and all services and materials are available in these languages.



Out of the members who were referred for health education services, the largest gender-age groups were male and female ages 5-12 years.

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A breakdown of member classifications by race and language preferences revealed that 99% of members who accepted services are Hispanic and the majority preferred to speak Spanish.

Referrals Accepted by Top Bakersfield Zip Codes			
Q4-2018	Q1-2019	Q2-2019	Q3-2019
93307	93307	93307	93307
93306	93306	93306	93304
93304	93304	93305	93306
93305	93308	93304	93305
93313	93305	93308	93309

KHS serves members in the Kern County area. During this quarter, 86% of the members who accepted services reside in Bakersfield and the highest concentration of members were in the 93307 area.

Referrals Accepted by Top Outlying Areas			
Q4-2018	Q1-2019	Q2-2019	Q3-2019
Arvin	Delano	Delano	Arvin
Lamont	Arvin	Wasco	Delano
Shafter	Lamont	Lamont	Shafter
Delano	Wasco	McFarland	Wasco
Wasco	Shafter	Shafter	Lamont
Arvin			

Additionally, 14% of the members who accepted services reside in the outlying areas of Kern County and the highest concentration of members reside in Arvin.

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Health Education Mailings

In addition to referrals, the HE department mails out a variety of educational material in an effort to assist members with gaining knowledge on their specific diagnosis or health concern. During this quarter, the HE department mailed 2,137 educational packets to members on the following health topics:

Educational Mailings				
	Q4-2018	Q1-2019	Q2-2019	Q3-2019
Anemia	0	1	1	2
Asthma	97	453	427	648
High Cholesterol	21	23	11	11
Diabetes	75	56	53	45
Gestational Diabetes	1	0	5	1
High Blood Pressure	41	29	4	4
COPD	0	0	0	0
Postpartum Care	80	46	4716	602
Prenatal Care	18	56	145	283
Smoking Cessation	17,500	252	13	12
Weight Management	675	713	173	370
WIC	1270	821	64	157
Total	19,778	2,450	1,367	2,137

INTERPRETER REQUESTS

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Face-to-Face Interpreter Requests

During this quarter, there were 238 requests for face-to-face interpreting services received. KHS employs qualified staff interpreters in Spanish and contracts with the interpreting vendor, CommGap. The majority of these requests were for a Spanish interpreter.

Top Languages Requested			
Q4-2018	Q1-2019	Q2-2019	Q3-2019
Spanish	Spanish	Spanish	Spanish
Punjabi	Vietnamese	Cantonese	Punjabi
Cantonese	Arabic	Punjabi	Arabic
Vietnamese	Cantonese	English	Cantonese
Arabic	Punjabi	Arabic	Mandarin
	Mandarin		

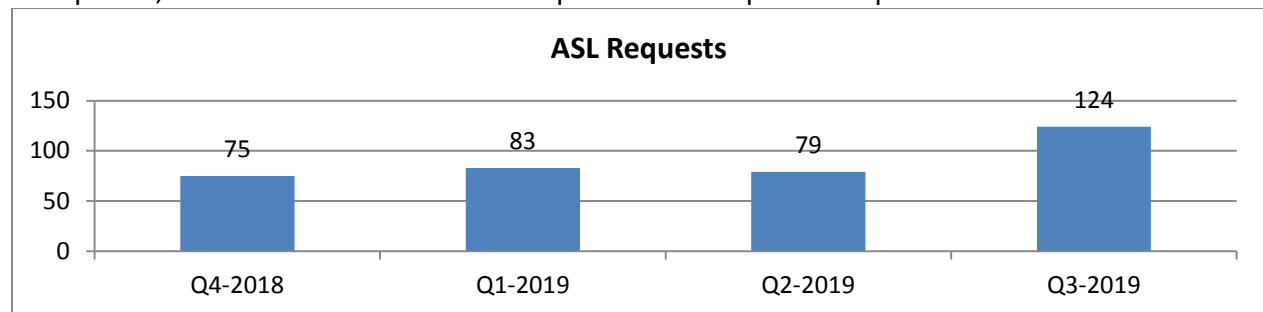
Telephonic Interpreter Requests

During this quarter, there were 1,004 requests for telephonic interpreting services through KHS' interpreting vendor, Language Line Solutions. The majority of these requests were for a Spanish interpreter.

Top Languages Requested			
Q4-2018	Q1-2019	Q2-2019	Q3-2019
Spanish	Spanish	Spanish	Spanish
Punjabi	Punjabi	Punjabi	Punjabi
Arabic	Arabic	Arabic	Arabic
Tagalog	Tagalog	Tagalog	Mandarin
Vietnamese	Vietnamese	Mandarin	Tagalog

American Sign Language (ASL) Requests

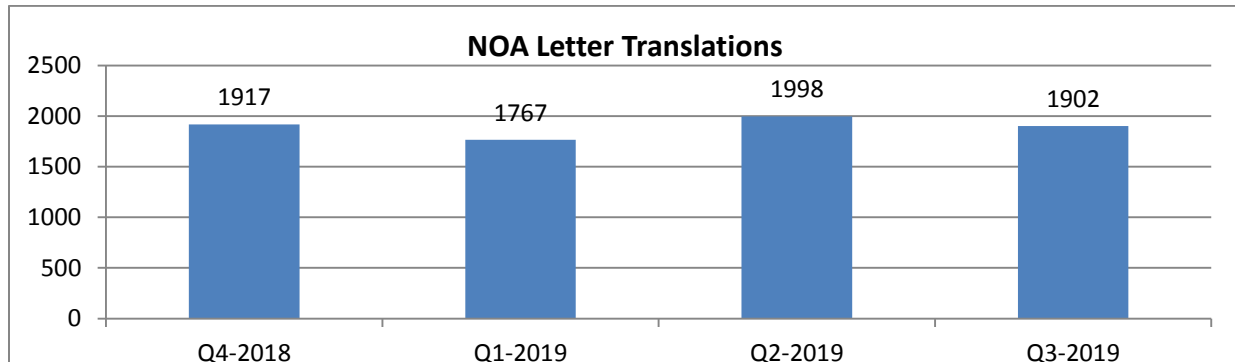
During this quarter, there were a total of 124 requests received for an American Sign Language interpreter, which was an increase in comparison to the previous quarter.



DOCUMENT TRANSLATIONS

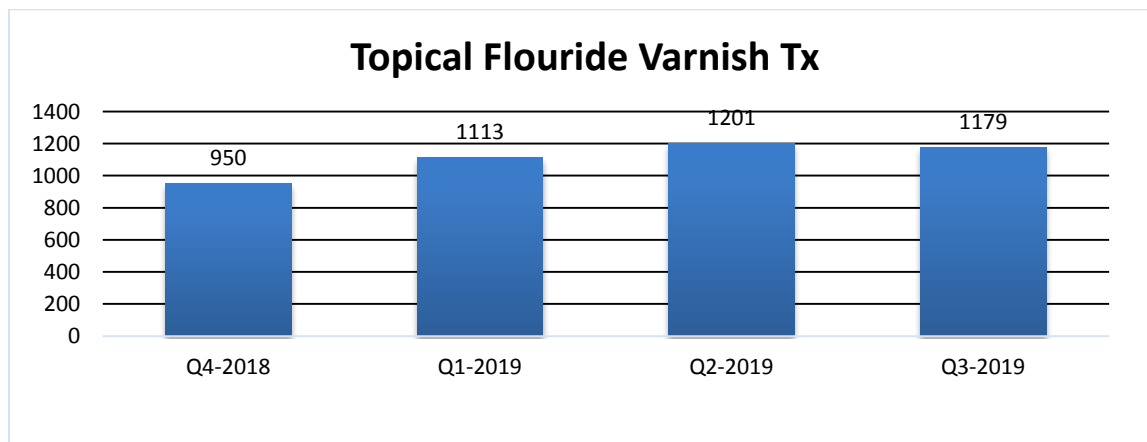
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The Health Education department coordinates the translation of written documents for members. Translations are performed in-house by qualified translators or outsourced through a contracted translation vendor. During this quarter, 1,902 Notice of Action letters were translated into Spanish for the UM and Pharmacy departments.



TOPICAL FLUORIDE VARNISH TREATMENTS

Fluoride varnish treatments are effective in preventing tooth decay and more practical and safer to use with young children. KHS covers up to three topical fluoride varnish treatments in a 12-month period for all members younger than 6 years.



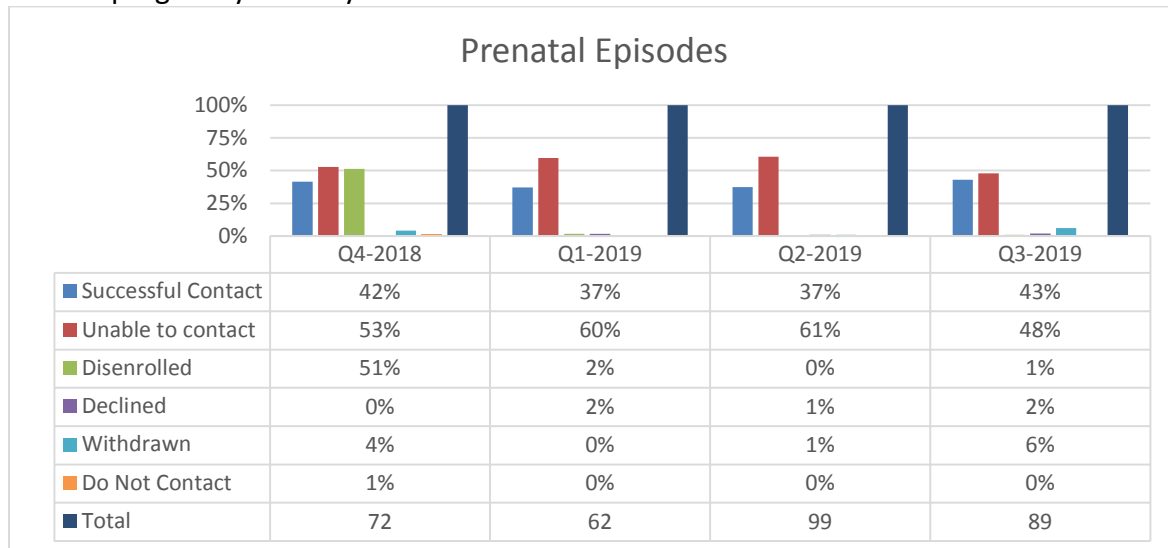
PERINATAL OUTREACH AND EDUCATION

KERN HEALTH SYSTEMS

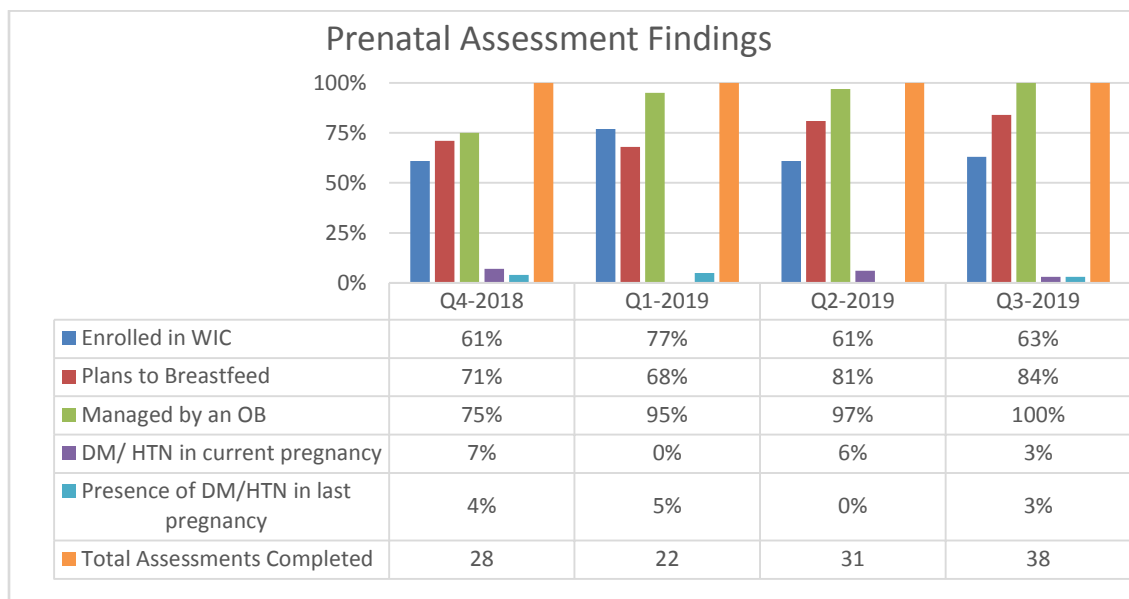
HEALTH EDUCATION, CULTURAL AND LINGUISTIC ACTIVITIES REPORT

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The HE department performs outreach education calls to all members identified as being pregnant in the 1st trimester, a pregnant teen (under age 18), or postpartum due to a C-section or teen pregnancy delivery.



During the 3rd quarter, 107 episodes for pregnant members were created and 43% were successfully contacted.

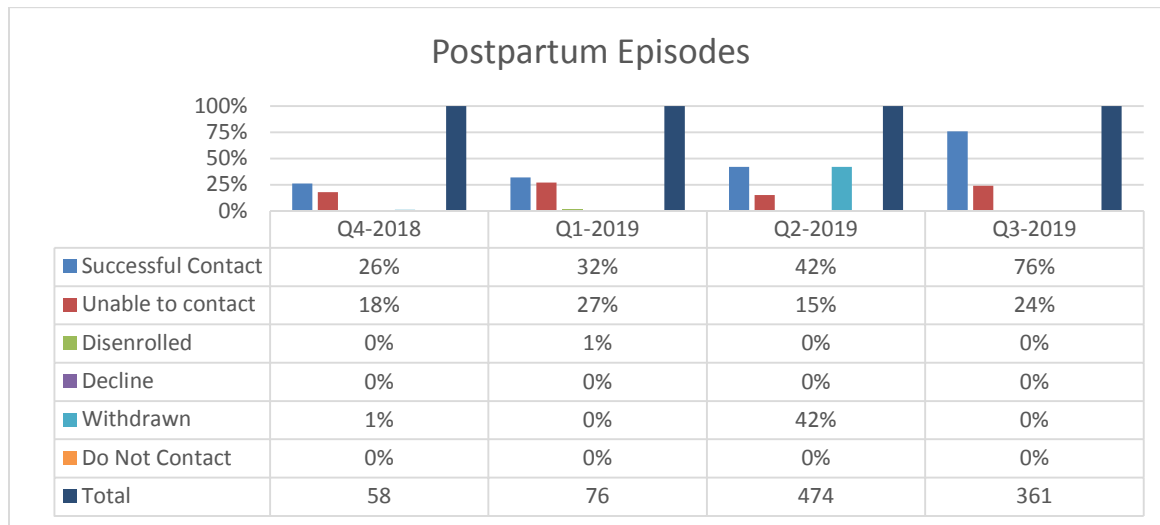


The total prenatal assessments completed increased from 31 in the 2nd quarter of 2019 to 38 in the 3rd quarter of 2019.

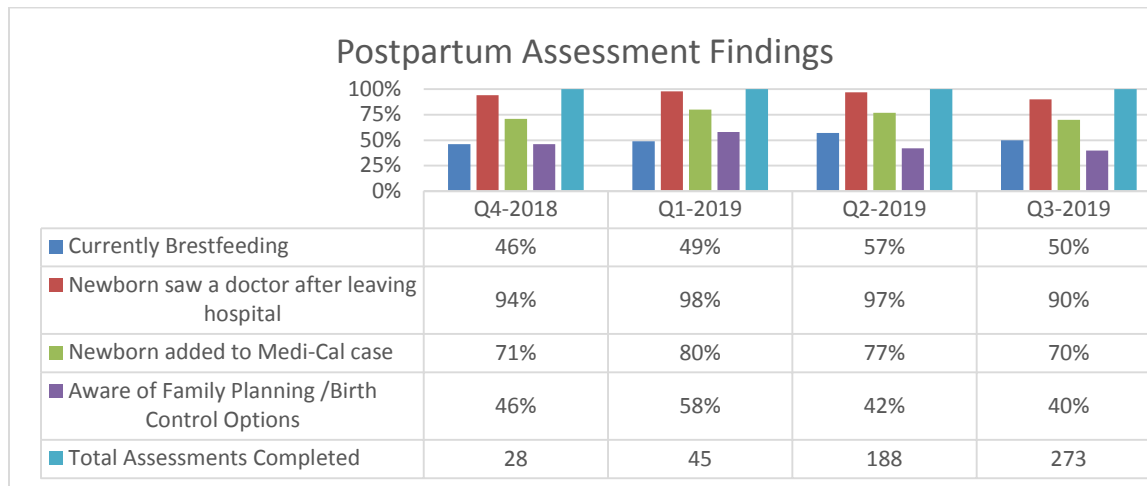
KERN HEALTH SYSTEMS

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During the 3rd quarter, 387 postpartum members were created and 76% were successfully contacted.



Postpartum assessments completed increased from 188 assessments in the 2nd quarter of 2019 to 273 assessment completed in the 3rd quarter of 2019.

MEMBER WELLNESS BASED INCENTIVES AND CHRONIC CONDITION TOOLS

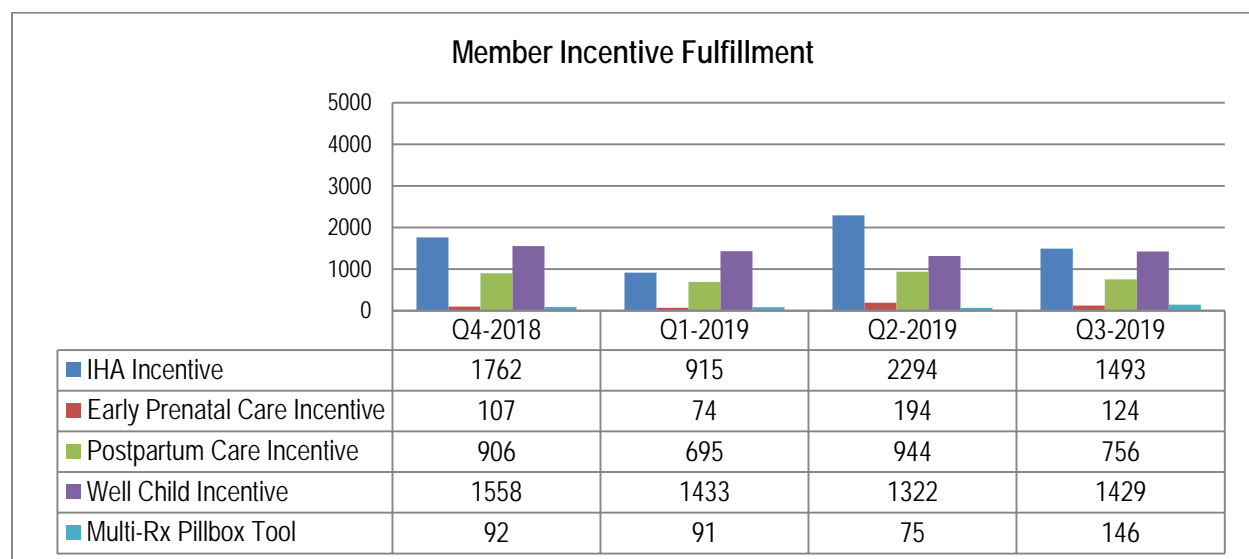
KERN HEALTH SYSTEMS

HEALTH EDUCATION, CULTURAL AND LINGUISTIC ACTIVITIES REPORT

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During the 3rd quarter of 2019, KHS continued to offer wellness based incentives and one chronic condition tools for members. In January 2019, the IHA incentive was changed to a gift card instead of a first aid kit based on member feedback regarding the incentive. This incentive program was also expanded to provide one incentive per eligible member instead of per household.

- **Initial Health Assessment (IHA)** – newly enrolled members who complete the IHA visit within 120 days of enrollment are mailed a \$10 gift card.
- **Early Prenatal Care** – pregnant members who complete prenatal care during the 1st trimester will receive a \$30 gift card.
- **Postpartum Care** – members who complete the postpartum visit within 21-56 days following delivery will receive an additional \$30 gift card.
- **Well Child** – members ages 12 -23 months who complete a well child visit are mailed a \$25 gift card.
- **Multi-Medication** – members on multiple medications and would benefit from a pill box. KHS disease and case management departments identify and mail this tool to members.



Have a healthy pregnancy

Are you thinking of starting or growing your family? Take good care of your health as soon as you think about getting pregnant. Mom's health is vital to a growing baby.

As soon as you know or think you're pregnant, schedule a visit with your primary care provider (PCP). Your PCP will confirm the pregnancy. The PCP may also find your due date!

Once you have a confirmed pregnancy, choose an obstetrician (OB). OBs are doctors trained to care for women during pregnancy.

During your pregnancy visits, expect full examinations to make sure you and the baby are healthy. You will also need lab tests, and your OB will answer questions about your health.

Keep all your prenatal visits to ensure a safe and healthy pregnancy. And start a list of things to ask your doctor during your prenatal visits.

To qualify for our KFHC Member Pregnancy Incentive, do the following:



WE HAVE MOVED
to serve you better!

*Our new physical address is
2900 Buck Owens Blvd.
Bakersfield, CA 93308*

- Make an appointment for your first prenatal visit within the first 3 months of pregnancy.
- Schedule transportation for your appointment, if needed.
- Download the Prenatal Care Incentive Form from the KFHC website or call KFHC's Member

Services to receive the form in the mail.

- At your appointment, have your provider fill out the form.
- Fax or mail the form to KFHC to receive a \$30 gift card by mail.

Links for Life—know your body

Part of Links for Life's mission is to challenge each woman in Kern County to be aware of her breast health. Many know the common breast cancer symptoms: lump or pain in breast, change in breast size or shape, or nipple discharge/inversion. But there are several lesser-known symptoms: changes in skin texture, lumps, thickening, pain or swelling in your armpit and around your collar



bone, or a rash/crusting of the nipple area. It is not uncommon for someone without a family history of breast cancer to develop the illness. Know your body. Conduct a monthly self-breast exam. For more information, visit linksforlife.org.

Keeping an eye on prostate cancer

Prostate cancer is a common cancer among men in the United States. It is most common in older men. When the disease is **caught early**, the patient can choose:

- **Option 1:** Treat the disease right away. Or,
- **Option 2:** Monitor it and treat it if the cancer starts to grow (active surveillance).

Talk to your doctor about these options. Both have pros and cons. In some cases, treatment is the only option. If prostate cancer is caught late, ask your doctor about treatment options.

Sources: American Society for Clinical Oncology; American Urological Association; National Cancer Institute

Preventing cancer in women

Cervical cancer

Safe sex can reduce your chances of getting some types of cancer. In addition, cervical cancer screenings and the HPV (human papillomavirus) vaccine are the two best ways to prevent cervical cancer.

Stopping cervical cancer with screening. Doctors use the Pap test and the HPV test to screen for changes in cells of the cervix before it becomes cancer. Both tests are simple and fast.

Talk to your doctor about how often you should get screened.

Taking a shot at cervical cancer. Some HPV can cause

cervical cancers. HPV is spread through sexual contact. The HPV vaccine can prevent some cancers.

The vaccine should be given at age 11 or 12 for both boys and girls. But men and women 26 and younger can still get the vaccine.

The vaccine can also protect against other cancers, like anal, throat and penile cancer.

Endometrial cancer

Endometrial cancer is cancer of the lining of the uterus.

Ways to reduce risk:

- Get to and stay at a healthy weight.

- Be physically active.
- Discuss hormone therapy with your doctor.
- Treat endometrial problems (think unusual bleeding).
- Talk to your doctor about Lynch syndrome.

Diagnosing endometrial cancer. There are currently no screening tests when women have no symptoms.

- Talk to your doctor about any unusual bleeding. Based on a few factors, your doctor may suggest further testing to detect this cancer.

Sources: American Cancer Society; American College of Obstetricians and Gynecologists; Centers for Disease Control and Prevention; National Cancer Institute; U.S. Preventive Services Task Force

Know the signs of ADHD

Kids have a lot of energy and act up at times.

It's not easy to tell when a kid is being a kid or when it might be attention-deficit/hyperactivity disorder (ADHD).

Behavior signs can be clues to parents and teachers that a child might have ADHD. They happen frequently and for at least six months in at least two different settings:

Inattention

Children with ADHD may:

- Seem like they don't listen.



- Get distracted easily.
- Have trouble focusing on things.
- Find it hard to stick to a task.
- Have trouble organizing schoolwork or other things.
- Lose and forget things.

Hyperactive/impulsive behaviors

- Often fidget or squirm.
- Butt in when others are talking.
- Talk all the time or blurt out answers.
- Run or climb on furniture.
- Find it hard to play quietly.
- Have trouble waiting their turn.
- Seem like they're just always moving.

How to help

A doctor can diagnose ADHD. If there's a problem, tell your child's doctor.

Sources: American Academy of Pediatrics; Centers for Disease Control and Prevention

California Children's Services (CCS)

CCS is a state program for children with certain diseases or health problems. Through this program, children up to 21 years old can get the special health care and services they need.

CCS connects you with doctors and trained health care professionals who know how to care for your child with special health care needs.

If your child is approved for CCS, he or she will still be a Kern Family Health Care member while in this program.

Some of the health problems

covered by CCS are:

- Cancer.
- Congenital heart disease.
- Sickle cell anemia.
- HIV infection.
- Cleft lip or palate.
- Other severe health problems.

CCS-approved doctors treat these kinds of problems. Your child's primary care provider (PCP) takes care of your child's other health needs.

To learn more about CCS, talk to your child's PCP or call us at **800-391-2000**.

Sources: CCS; Health Plan of San Joaquin

Special services from Kern Regional Center

Kern Regional Center is a social service agency. It provides support and services to people with special needs. Some of the services offered are:

- Counseling.
- Help with family support.
- Autism screening.

The Kern Early Start program is also offered through this agency. It serves children from birth until age 3. This program provides services for children who have special needs.

These include:

- Problems due to premature birth.
- Major learning or muscle tone problems.
- Down syndrome.
- Cerebral palsy.

Kern Early Start also helps children who:

- Have been seriously ill.
- Have a developmental delay in areas such as walking or talking.
- Have parents needing help due to their own special needs.

Kern Early Start will work with you and your child. The goal is to increase the child's skills and development. There is no cost to take part.

TO LEARN MORE about these special services, please call **800-479-9899**.

Are you planning for a family?

Family planning allows members to achieve healthy birth spacing and family size.

Family Planning

If you or your partner are thinking of getting pregnant, talk to your doctor. They can share info about family planning, such as:

- Getting ready for pregnancy.
 - Pregnancy testing and counseling.
 - Exams and screenings.
 - How to prevent sexually transmitted infections (STIs).
- Learning about these topics can help you make better choices.



...I think I am pregnant!

If you are sexually active, there's always a chance of getting pregnant! Get tested! Home pregnancy tests are a good way to find out.

If you are pregnant:

- Write down the date of your last period.
- Schedule a visit with your PCP or OB-GYN.

- Schedule transportation, if needed.
- Get some rest, eat a healthy diet and be active. Avoid drinking alcohol, smoking, or being around smokers.

If you are not pregnant, think about your choices and talk to your doctor. He/she can help you figure out which family planning option is best for you.

Source: Healthy People 2020

GET A \$30 GIFT CARD. HOW?

1. Complete a prenatal visit in the first trimester (the first 3 months of pregnancy).
2. Fill out the "first trimester form" with your doctor.
3. Fax the form to KFHC.
4. Receive gift card in the mail.
5. Call **800-391-2000** to get your form today!

Mental health and pregnancy

Becoming pregnant changes a lot of things. Some changes happen within your body. Some changes happen within your mind.

The most common mental health conditions during and after pregnancy are depression and anxiety. It's OK to feel sad every now and then when you

are pregnant. You may feel stressed or overwhelmed. But if your symptoms last more than two weeks, talk to your doctor. These feelings can also happen after your baby is born.

Your doctor and nurse can help you manage these conditions. Some talk therapy can help

relieve some symptoms. In some cases you may have to stop, start or change medications.

If you're planning to get pregnant, talk to your doctor or nurse about these mental health conditions before getting pregnant.

Source: Office on Women's Health



Health educator corner

Is it okay to take medicine prescribed for someone else?

No. That is not a good idea. Taking medicine prescribed for someone else is a form of **prescription drug abuse**. Abusing some prescription drugs can lead to addiction. These include opioids, sedatives, tranquilizers and stimulants. Every medicine has some risk of side effects. Doctors take this into account when prescribing medicines. People who abuse these drugs may not know the risks. The medicines may not be safe for them. They are especially risky at higher doses or when taken with other medicines.

Flor Del Hoyo, MPH,
member health educator

Source: medlineplus.gov

Should I always use antibiotics when I get sick?

No. Antibiotics are drugs used to treat bacterial infections. They do not work on viral infections like the flu. Overuse of antibiotics can lead to antibiotic resistance. This is a condition in which germs, such as bacteria and fungi, start to resist or counter the actions of the antibiotics. This means antibiotics will no longer work. Many infections around this time are viral. Antibiotics will not work on viruses. The cough and flu season in the Kern County area typically starts in late October and lasts through February or March. Always check with your doctor to see if you need antibiotics.

Bernardo Ochoa, MPH,
member health educator

Are natural medicines safe?

Many natural medicines or supplements are known to be safe. But that is not always true. Here are some risks:

- Some may affect how well your prescribed medicines work in your body.
- Herbal supplements may be harmful when taken alone. They may also be risky with other substances or in large doses.
- Vitamins can also have harmful effects in your body. Too much of any vitamin is not safe, even for a healthy person.

Tell your doctor if you're taking any natural medicines or supplements. They may have health claims. But they do not prove that these products are safe or effective.

Supplements do not have to be approved by the federal government before being sold. Also, a prescription is not needed to buy them. That's why consumers should be careful about using them.

Carlos Bello, MPH, CHES,
senior member health educator

Source: cancer.gov

Kern Family Health Care complies with applicable federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex.

ATTENTION: If you speak a language other than English, language assistance services, free of charge, are available to you. Call **800-391-2000 (TTY: 711)**.

ATENCIÓN: Si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al **800-391-2000 (TTY: 711)**.

注意：如果您使用繁體中文，您可以免費獲得語言援助服務。請致電 **800-391-2000 (TTY: 711)**。



Opioids: A serious risk

Opioid painkillers are strong medicines that help ease certain kinds of pain. But using them carries big risks, such as:

Tolerance. This means you need to take more of the drug to get the same pain relief.

Addiction. It happens to up to 1 in 4 people who take opioids for chronic pain.

Overdose. Many people die after overdosing on prescription opioids.

Ask your doctor

He/she may suggest opioids for chronic pain. Ask if there are other options, such as:

- Other types of pain drugs.
- Physical therapy.

- Exercise.
- Behavioral therapy.
- Injections.

If you are prescribed an opioid:

- Go to all your doctor visits. Your doctor can check for side effects.
- Take it as directed. Never take a larger dose.
- Avoid alcohol. Ask your doctor before taking any other medicines.
- Store your medication in a safe place.
- Watch for signs of addiction. One warning sign is having withdrawal symptoms when you stop taking the drug.

Sources: Centers for Disease Control and Prevention; JAMA

How to talk about pain

It's not easy to describe pain. But your doctor needs to know about it to treat it. When talking about your pain, be sure to discuss:

Where it hurts. Be as specific as possible. Point out the specific part of your body that hurts.

How it feels. Is the area tender? Is it a dull ache? A burning pain? Here are other words to describe your pain:

- Cramping.
- Sharp.
- Shooting.
- Stabbing.
- Pinching.
- Throbbing.
- Splitting.
- Tingling.

How often it hurts.

Does it hurt all the time or come and go? How long does it last?

What makes it better or worse. Does anything you do make it hurt more or less?

How it affects your daily life. Is it hard to work, sleep or enjoy activities because of your pain?

Write about it

Ask your doctor if you should keep a pain diary. Taking notes about your pain can help your doctor treat it.

Sources: Arthritis Foundation; National Institutes of Health



Blood pressure: How to bring it down

High blood pressure is a serious health threat. If yours is too high, your doctor may suggest medication. But there are changes you can make right now to help bring it down:

- **Cut down on salt.** Aim for less than 1,500 mg a day—about a teaspoon.
 - **Be active.** Exercise for 90 to 150 minutes a week. Walking can help lower blood pressure.
 - **Limit alcohol.** Health experts suggest no more than one drink a day for women and two for men.
 - **Don't smoke.** Smoking raises blood pressure.
- Here's what else you can do to take control of your blood pressure:
- **Know your numbers.** For most people, normal blood pressure is 120/80. Older

adults may have a higher risk for high blood pressure. Ask your doctor about what your numbers should be.

- **Check it often.** Get a blood pressure monitor so you can check it at home. If it's higher than normal, talk to your doctor.
 - **Keep a record.** Write your blood pressure readings in a journal or keep track with your phone. Review patterns at your next doctor visit.
- When you manage your blood pressure, you also lower your risk of heart attack, stroke and other serious health problems.

Sources: American Heart Association; National Heart, Lung, and Blood Institute

CHECK OUT walking safety tips below.

Be active, be safe

As the days grow shorter, use these safety tips to stay safe when you go for a walk.

Prepare for your walk

1. Be seen.
 - Wear bright and colorful clothes during the day.
 - Wear reflective clothing at night.
2. If it's dark, use a flashlight to see and be seen.
3. Wear sturdy shoes that support you.
4. Plan your route.
5. Use traffic signs and signals.
6. Always check for distracted drivers.
7. Walk with friends and watch out for each other.

Use sidewalks

1. Walk on the sidewalk when possible.
2. If there is no sidewalk, walk facing traffic.

Cross the street safely

1. Stop at the curb or at the edge of the road.
2. Look left, right, left for moving cars before stepping into the street.
3. If you see a car, wait until it goes by. Repeat step 2.

4. When you are sure no cars are coming, begin crossing. Do not run! Keep looking left, right, left while you cross.

No matter the time of day, always be aware of your surroundings. Distractions, like smartphones and loud headphones, can put you in danger.

Source: National Highway Traffic Safety Administration



Positive parenting: Teen tips

- Be honest and direct with your teen when talking about sensitive subjects such as: drugs, drinking, smoking, vaping and sex.
- Meet and get to know your teen's friends and activities.
- Show an interest in your teen's school life. Attend events.
- Help your teen make healthy choices while encouraging them to make their own decisions.
- Respect your teen's opinions and take into account their thoughts and feelings. It is important that they know you are listening to them.
- When there is a conflict, be clear about goals and expectations, like getting good grades, keeping things clean and showing respect. Allow your teen to give input on how to reach those goals—like when and how to study or clean the house.

Help stop fraud!

Help us stop health care fraud. Here are some kinds of fraud:

- Someone who uses a KFHC Member ID Card that does not belong to him or her.
- Someone who gives the wrong information on forms on purpose.
- Someone who visits many doctors and/or pharmacies for the same drug.
- Someone who tries to get medicines that a doctor didn't order.

Do you know someone doing these things? If so, call KFHC's Member Services Department at **661-632-1590** or toll-free at **800-391-2000**. Ask for the Compliance Department.



FAMILY

HEALTH

FAMILY HEALTH is published as a community service for the friends and patrons of Kern Family Health Care, 2900 Buck Owens Blvd., Bakersfield, CA 93308, telephone 800-391-2000.

Information in FAMILY HEALTH comes from a wide range of medical experts. If you have any concerns or questions about specific content that may affect your health, please contact your health care provider. Models may be used in photos and illustrations.

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We post current health care news and tips to help you and your family stay healthy. You can also get important member updates and see what Kern Family Health Care is doing in your community.

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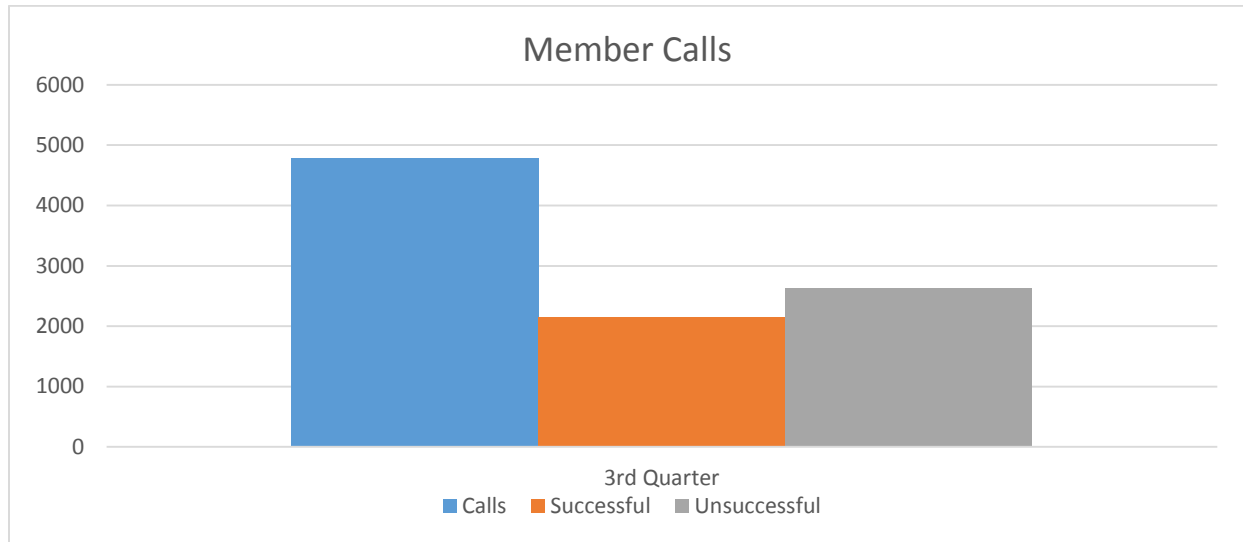
 Watch the Kern Family Health Care channel on YouTube

Disease Management Quarterly Report

3rd Quarter, 2019

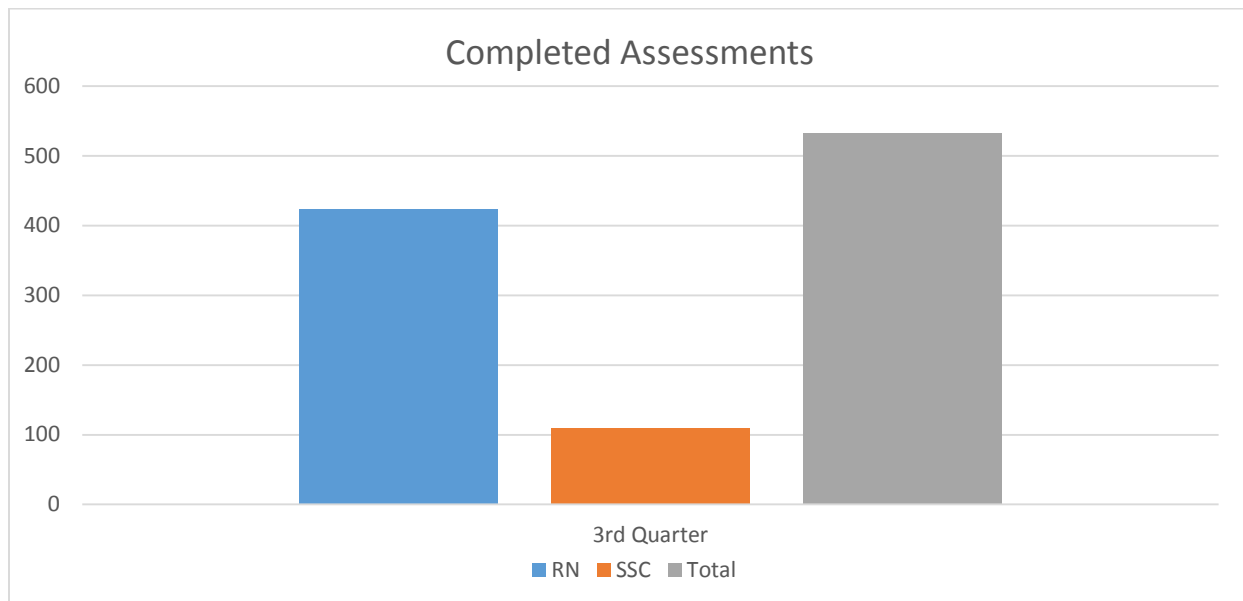
Telephone Calls: A total of 4,781 calls were made by the DM staff during the 3rd Quarter, 2019.

Member Calls Attempted	Successful Calls	Unsuccessful Calls	Total Member Calls	% Contacted
RN	1,253	1,892	3,145	40%
SSC	898	738	1,636	55%
Total	2,151	2,630	4,781	45%



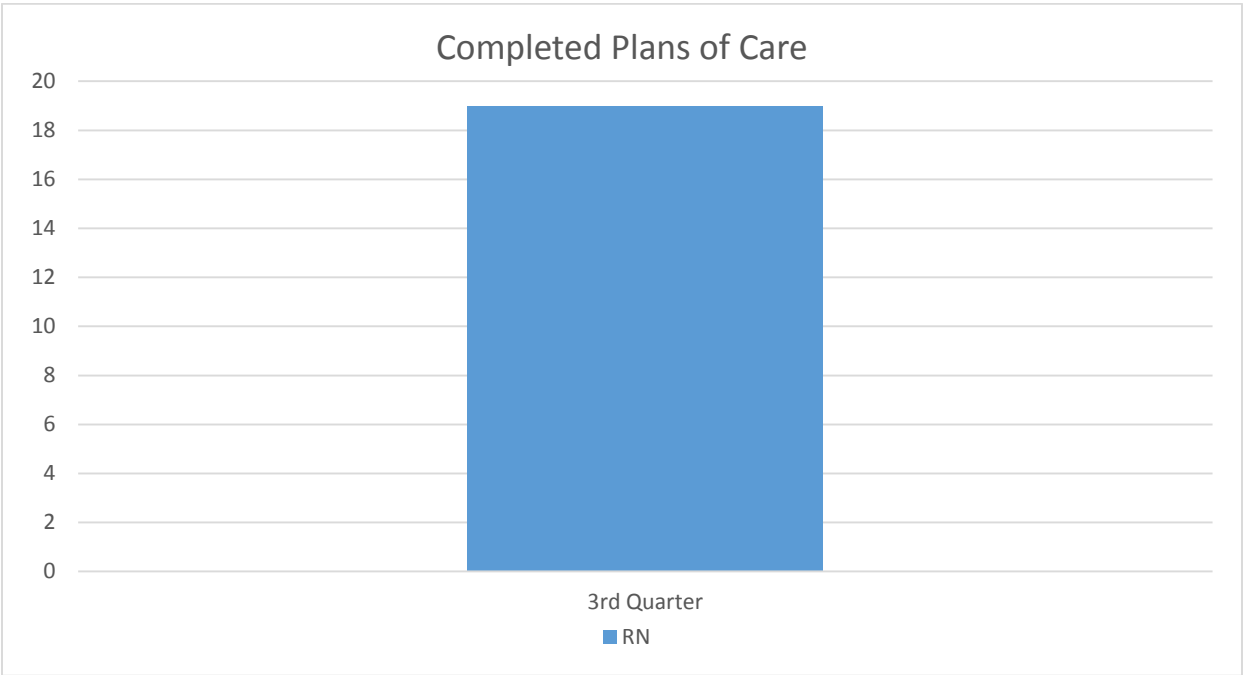
New Assessments Completed.

RN	SSC	Total
423	110	533



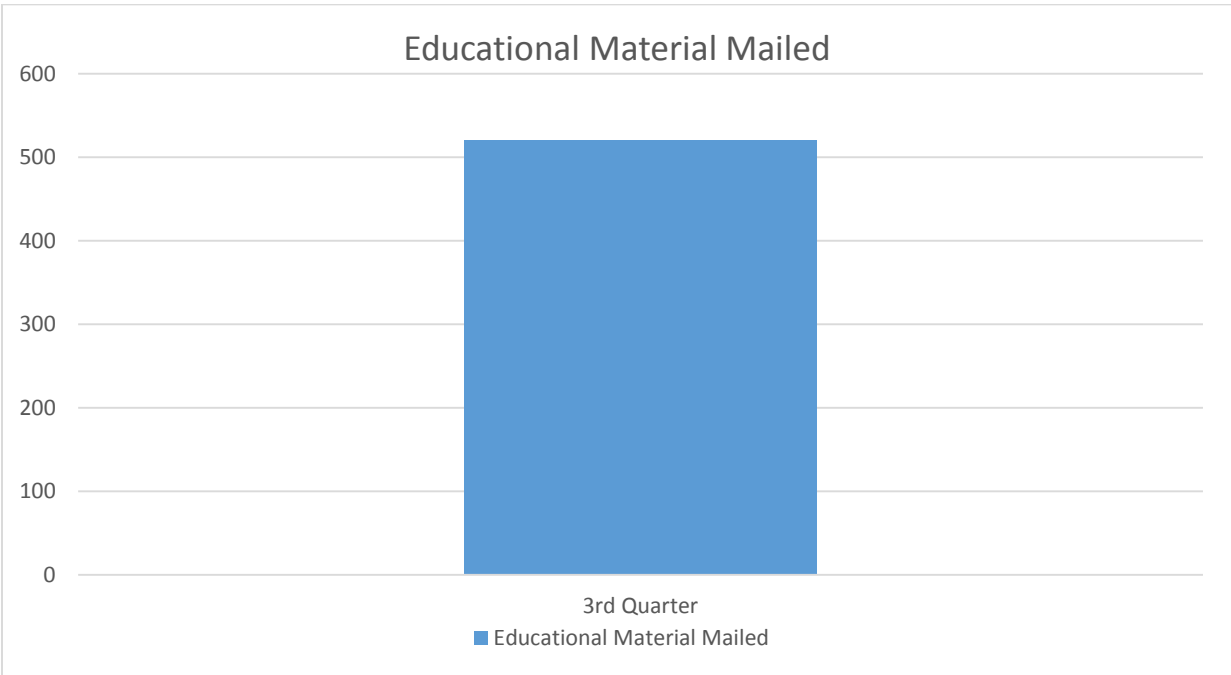
Plans of Care Completed & Closed.

RN
19



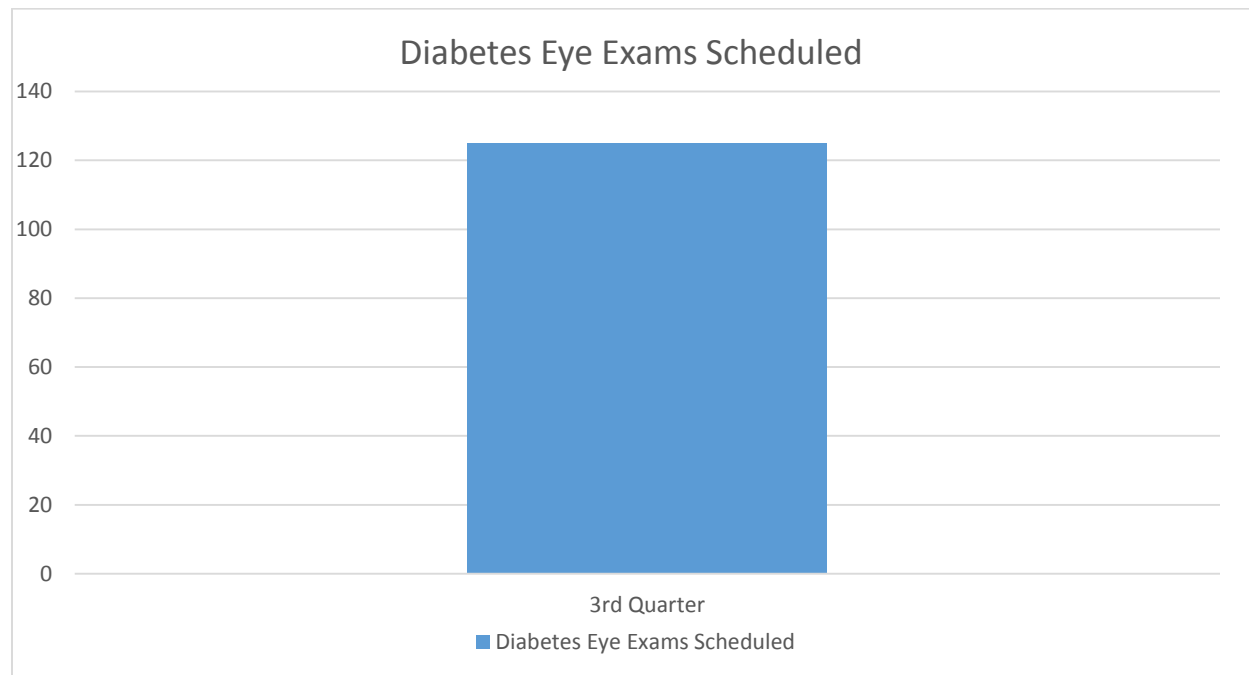
Educational Material Mailed.

520



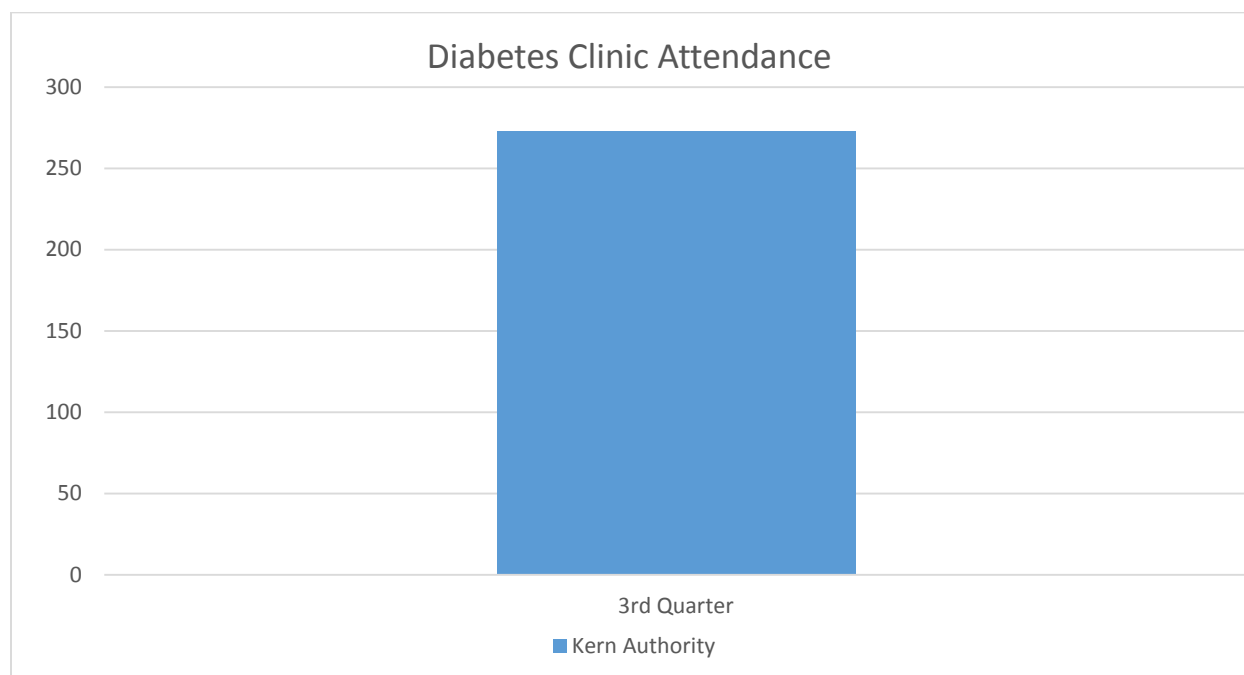
Diabetes Eye Exams Scheduled.

125



Diabetes Clinic Attendance.

Kern Authority
273



Diabetes Prevention Program: At the end of the 3rd Quarter, 26 members remain enrolled in the program. Classes were held bi-monthly during this reporting period

Sessions Scheduled to Attend	Actual Sessions Attended
132	131

