

AGENDA

PUBLIC POLICY/COMMUNITY ADVISORY COMMITTEE

KERN HEALTH SYSTEMS
2900 Buck Owens Boulevard
Bakersfield, California 93308

GoToMeeting
Tuesday, June 23, 2020

12:00 P.M.

Please join the meeting from your computer, tablet or smartphone.
<https://www.gotomeet.me/Louislturriria/june-2020-public-policy-meeting>

You can also dial in using your phone.
United States: [+1 \(646\) 749-3122](tel:+16467493122)

Access Code: 868-506-565

All agenda item supporting documentation is available for public review on the Kern Health Systems website: <https://www.kernfamilyhealthcare.com/about-us/committees/> 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 on the KHS website.

PLEASE REMEMBER TO TURN OFF ALL CELL PHONES, PAGERS OR ELECTRONIC DEVICES DURING 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 COMMITTEE 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 COMMITTEE 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 February 25, 2020 (Attachment) – APPROVE
- CA-4) Membership Enrollment Report - Medi-Cal – (Attachment) – APPROVE
- CA-5) KFHC Advertising Campaign Update – Please click on the link below to see a presentation of our Provider Thank You campaign. – APPROVE
<https://my.visme.co/projects/010oq7jr-kfhc-thank-you-providers-2020-campaign>
- 6) Utilization Management – (Shannon Miller, RN – Director of Utilization Management)
 - a. Respite and Recuperative Care Program - Presentation
- 7) Member Services Report – (Nate Scott – Director of Member Services)
 - a. 2020 1st Quarter Grievance Summary Report
 - b. 2020 1st Quarter Grievance Report (Attachments) – APPROVE

- 8) Health Education Report – (Isabel Silva, MPH – Director of Health Education/
Cultural & Linguistics Services)
 - a. 2020 1st Quarter Health Education Activities Report
 - b. Fall/Winter 2020 KFHC Member Newsletter (Discussion)
(Attachment) – APPROVE

- 9) Case Management Overview – (Michael Pitts, RN – Director of Case
Management & Disease Management)
 - a. 2020 Case Management Report - Presentation

- 10) Disease Management Report – (Michael Pitts, RN – Director of Case
Management & Disease Management)
 - a. 2020 1st Quarter Disease Management Report
(Attachment) – APPROVE

ADJOURN TO TUESDAY, AUGUST 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 Committee meeting may request assistance at the Kern Health Systems office, 2900 Buck Owens Boulevard, Bakersfield, California 93308 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
2900 Buck Owens Boulevard
4th Floor - Kern River Room
Bakersfield, California 93308

Regular Meeting
Tuesday, February 25, 2020
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.

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COMMITTEE RECONVENED

Members Present: Jennifer Wood, Jasmine Ochoa, Beatriz Basulto, Valerie Rangel, Cecilia Hernandez-Colin

Members Absent: Janet Hefner, Jenny Albert

Meeting called to order at 12:16 P.M. by Louie Iturriria, Director of Marketing and Member Services

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 COMMITTEE 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 COMMITTEE CONCERNING THE ITEM BEFORE ACTION IS TAKEN.

STAFF RECOMMENDATION SHOWN IN CAPS

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- CA-3) Minutes for Public Policy/Community Advisory Committee meeting on November 26, 2019 (Attachment) – APPROVED
- CA-4) Membership Enrollment Report - Medi-Cal – (Attachment) – APPROVED
- CA-5) 2020 Health Education, Cultural and Linguistics Work Plan – APPROVED
- CA-6) 2019 Health Education, Cultural and Linguistic Work Plan Evaluation –
APPROVED

**All Consent Agenda Items Approved (CA-3 through CA-6)
Rangel-Wood: All Ayes**

- 7) Member Services Report – (Nate Scott – Director of Member Services)
 - a. 2019 4th Quarter Grievance Summary Report
 - b. 2019 4th Quarter Grievance Report
(Attachments) – APPROVED**Hernandez Colin-Wood: All Ayes**
- 8) Marketing Report – (Louis Iturriria – Director of Marketing)
 - a. KFHC Member Notice
(Attachment) – APPROVED**Hernandez Colin-Wood: All Ayes**

- 9) Health Education Report – (Isabel Silva, MPH – Director of Health Education/
Cultural & Linguistics Services)
- a. 2019 4th Quarter Health Education Activities Report
 - b. Spring 2020 Newsletter (Review) – **Jennifer Wood suggested to add
Asthma Inhaler Education to the next newsletter.**
(Attachment) – APPROVED
Rangel-Wood: All Ayes
- 10) Disease Management Reports – (Michael Pitts, RN – Deputy Director of Health
Services)
- a. Diabetes Prevention Program (Presentation)
 - b. 2019 4th Quarter Disease Management Report - **Alan made a suggestion
for all 4 quarters to be shown on the graph for next meeting.**
(Attachments) – APPROVED
Rangel-Wood: All Ayes

MEETING ADJOURNED BY LOUIE ITURRIRIA,
DIRECTOR OF MARKETING AND PUBLIC RELATIONS @ 12:59 P.M.
TO TUESDAY, JUNE 23, 2020 AT 12:00 P.M.

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

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KHS JUNE 2020 ENROLLMENT:**Medi-Cal Enrollment**

As of June 1, 2020, Medi-Cal enrollment is 179,480, which represents an increase of 1.0% from May enrollment.

Seniors and Persons with Disabilities (SPDs)

As of June 1, 2020, SPD enrollment is 14,189, which represents a decrease of 0.1% from May enrollment.

Expanded Eligible Enrollment

As of June 1, 2020, Expansion enrollment is 63,921, which represents an increase of 2.2% from May enrollment.

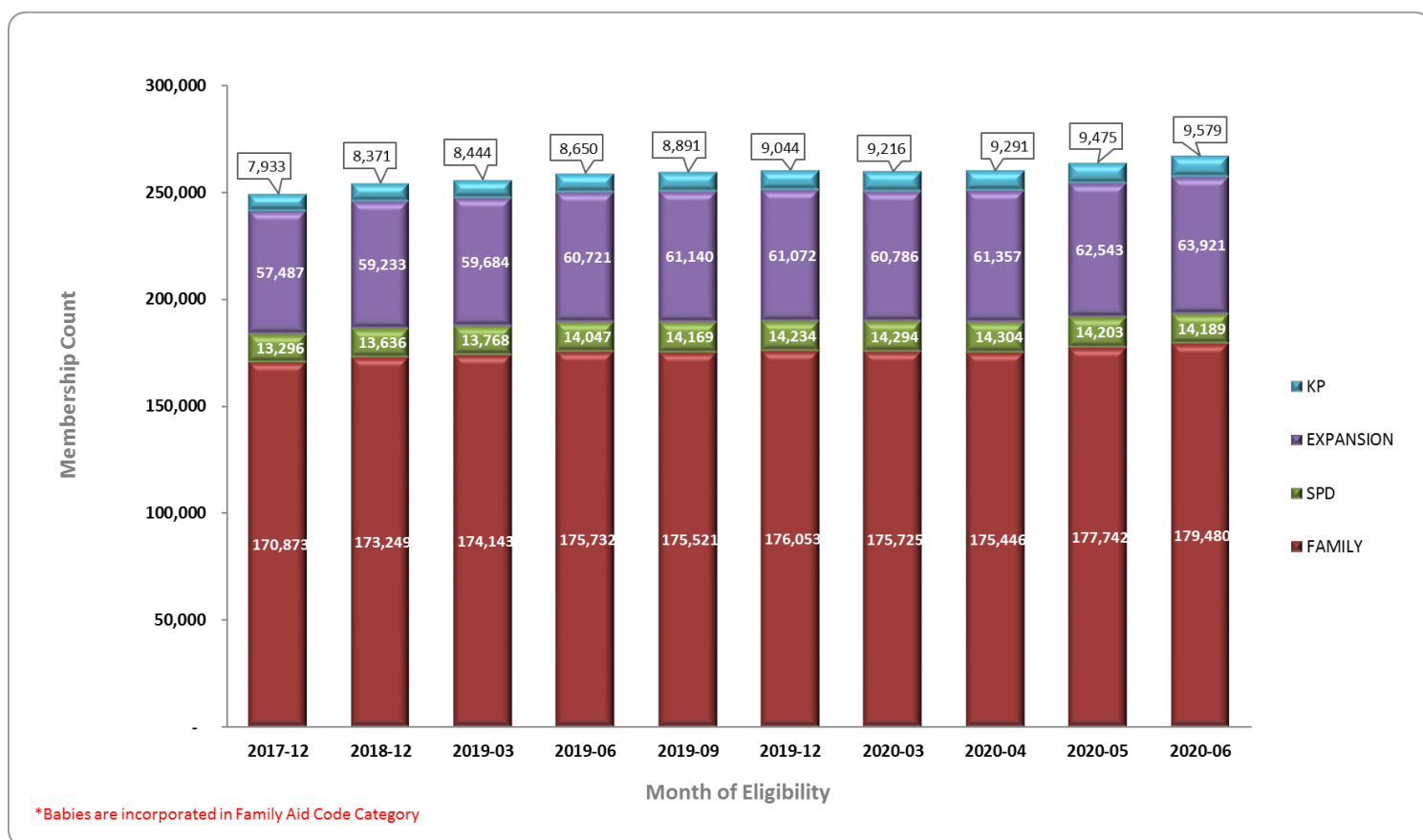
Kaiser Permanente (KP)

As of June 1, 2020, Kaiser enrollment is 9,579 which represents an increase of 1.1% from May enrollment.

Total KHS Medi-Cal Managed Care Enrollment

As of June 1, 2020, total Medi-Cal enrollment is 267,169, which represents an increase of 1.2% from May enrollment.

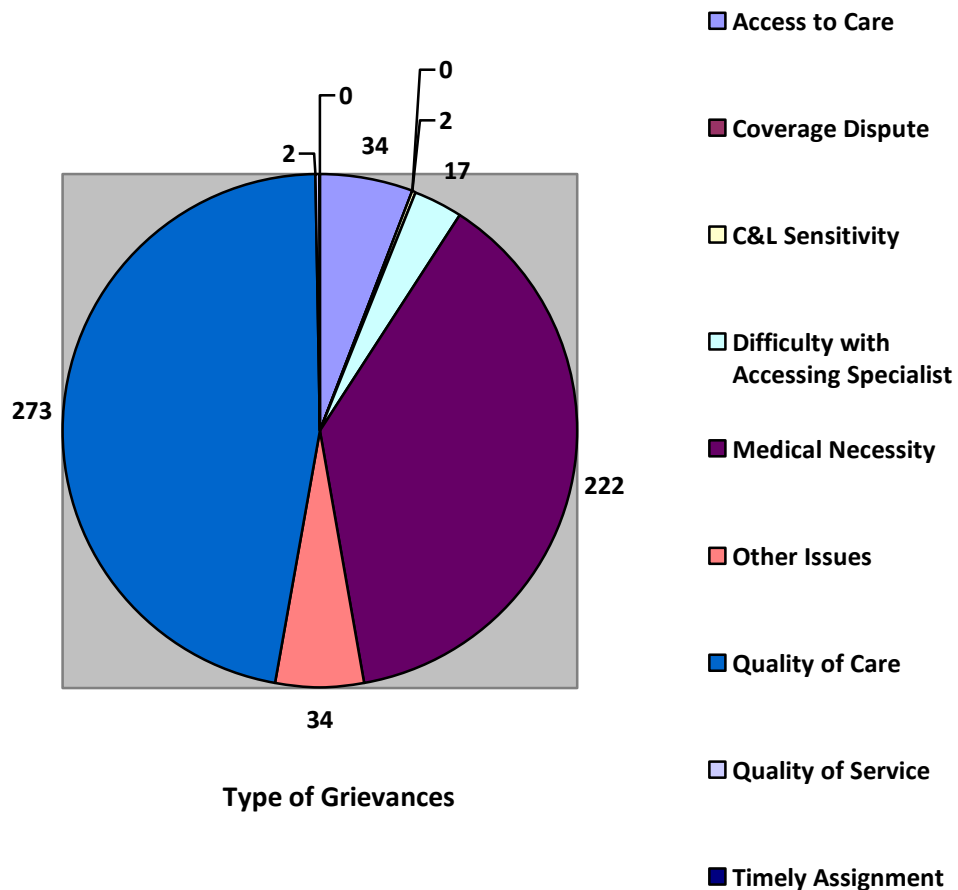
| Membership as of Month of Eligibility | FAMILY | SPD | EXPANSION | KP | BABIES | Monthly/Member Months Total |
|--|---------------|------------|------------------|-----------|---------------|------------------------------------|
| 2017-12 | 170,426 | 13,296 | 57,487 | 7,933 | 447 | 249,589 |
| 2018-12 | 172,772 | 13,636 | 59,233 | 8,371 | 477 | 254,489 |
| 2019-03 | 173,744 | 13,768 | 59,684 | 8,444 | 399 | 256,039 |
| 2019-06 | 175,315 | 14,047 | 60,721 | 8,650 | 417 | 259,150 |
| 2019-09 | 175,009 | 14,169 | 61,140 | 8,891 | 512 | 259,721 |
| 2019-12 | 175,626 | 14,234 | 61,072 | 9,044 | 427 | 260,403 |
| 2020-03 | 175,300 | 14,294 | 60,786 | 9,216 | 425 | 260,021 |
| 2020-04 | 175,049 | 14,304 | 61,357 | 9,291 | 397 | 260,398 |
| 2020-05 | 177,356 | 14,203 | 62,543 | 9,475 | 386 | 263,963 |
| 2020-06 | 179,112 | 14,189 | 63,921 | 9,579 | 368 | 267,169 |



Enrollment Update:

The Kern County Department of Human Services confirmed they are not continuing their “automated discontinuance process” for Medi-Cal Redeterminations through at least the end of August due to the pandemic. As you recall, in January Kern DHS began a new automated discontinuance process when Medi-Cal beneficiaries do not complete the Annual Eligibility Redetermination process. The Department of Health Care Services (DHCS) said the State is still working on a plan to reprocess these cases no sooner than September 2020 via a phased in approach rather than all at once. Kern DHS continues working new Medi-Cal applications, reenrollments, successful renewals, additions, etc. (anything with a positive outcome). DHCS said they expect to see a gradual increase in Medi-Cal applications statewide beginning in July. Locally, Kern DHS said the county has seen a 10% decrease in Medi-Cal applications in 2020.

| Issue | Number | In Favor of Health Plan | In favor of Enrollee | Still under review |
|---------------------------------------|--------|-------------------------|----------------------|--------------------|
| Access to care | 34 | 27 | 7 | 0 |
| Coverage dispute | 0 | 0 | 0 | 0 |
| Cultural and Linguistic Sensitivity | 2 | 2 | 0 | 0 |
| Difficulty with accessing specialists | 17 | 6 | 11 | 0 |
| Medical necessity | 222 | 153 | 69 | 0 |
| Other issues | 34 | 27 | 7 | 0 |
| Quality of care | 273 | 160 | 113 | 0 |
| Quality of service | 2 | 2 | 0 | 0 |
| Timely assignment to provider | 0 | 0 | 0 | 0 |



Grievances per 1,000 Members = 2.24

During the first quarter of 2020, there were five hundred and eighty four formal grievances and appeals received. Two hundred and seven cases were closed in favor of the Enrollee; three hundred and seventy seven were closed in favor of the Plan. Five hundred and eighty two cases closed within thirty days; two cases closed past thirty days. One hundred and sixty two cases were received from SPD (Seniors and Persons with Disabilities) members. Seventy one cases were received from Medi-Cal Expansion members.

Access to Care

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

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

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

Four members complained about the telephone access with their Primary Care Provider (PCP). All four cases closed in favor of the Plan after the responses indicated the members were provided with the appropriate telephone access.

Two members complained about the physical access with their Primary Care Provider (PCP). Both cases closed in favor of the Plan after the responses indicated the members were provided with the appropriate physical access.

Coverage Dispute

There were no grievances pertaining to a Coverage Dispute issue.

Cultural and Linguistic Sensitivity

There were two grievances pertaining to Cultural and Linguistic Sensitivity. Both cases closed in favor of the Plan. The following is a summary of these issues:

Two members complained about the lack of interpreting service to assist during their appointments. Both cases closed in favor of the Plan after the responses indicated the members were provided with the appropriate access to interpreting services.

Difficulty with Accessing a Specialist

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

Eight members complained about the lack of available appointments with a specialist. Two cases closed in favor of the Plan after the responses indicated the offices provided appropriate access to care based on the Access to Care Standards for specialty

appointments. Six cases closed in favor of the Enrollee after the responses indicated the members may not have been provided appropriate access to care based on the Access to Care Standards for specialty appointments.

Five members complained about the wait time to be seen for a specialist appointment. All five cases closed in favor of the Enrollee after the responses indicated the members may not have been seen within the appropriate wait time for an appointment based on the Access to Care Standards.

One member complained about the access to an out of network specialist. The case closed in favor of the Plan after an investigation indicated there were contracted specialists available to meet the member's needs.

Three members complained about the wait time for Non-Emergency Medical Transportation (NEMT) to pick them up for an appointment. All three cases closed in favor of the Plan after it was determined the members received the appropriate access to transportation services.

Medical Necessity

There were two hundred and twenty two appeals pertaining to Medical Necessity. One hundred and fifty three of the cases were closed in favor of the Plan. Sixty-nine of the cases closed in favor of the Enrollee. The following is a summary of these issues:

One hundred and sixty seven members complained about the denial or modification of a referral authorization request. One hundred 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. One case was closed in favor of the Plan and modified. Sixty six cases were closed in favor of the Enrollee as it was determined medical necessity was met and the denials were overturned.

Fifty five members complained about the denial or modification of a TAR. Fifty two 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 denials were 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 thirty two grievances pertaining to Other Issues. Twenty seven of the cases were closed in favor of the Plan. Seven cases closed in favor of the Enrollee.

Quality of Care

There were two hundred and seventy three grievances involving Quality of Care issues. These cases were forwarded to Quality Improvement (QI) for their due process. One hundred and thirteen cases were closed in favor of the Enrollee as a potential quality of care issue was

identified. One hundred and sixty cases closed in favor of the Plan as no quality of care issue was identified.

The following is a summary of these issues:

One hundred and seventy eight members complained about the quality of care received from a Primary Care Provider (PCP). All records and/or responses were sent to QI for further review and investigation. One hundred and three cases closed in favor of the Plan as no quality of care issue was identified. Seventy five cases closed in favor of the enrollee as a potential quality of care concern was identified.

Seventy one members complained about the quality of care received from a specialty provider. All records and/or responses were sent to QI for further review and investigation. Forty three cases closed in favor of the Plan as no quality of care issue was identified. Twenty eight cases closed in favor of the Enrollee as a potential quality of care concern was identified.

Seventeen members complained about the quality of care received from providers staffed by an urgent care, hospital, or a non-hospital affiliated clinic. All records and/or responses were sent to QI for further review and investigation. Twelve cases closed in favor of the Plan as no quality of care issue was identified. Seven cases closed in favor of the Enrollee as a potential quality of care issue was identified.

Five members complained about the quality of care received from a pharmacy. All records and/or responses were sent to QI for further review and investigation. Two cases closed in favor of the Plan as no quality of care issue was identified. Three cases closed in favor of the Enrollee as a potential quality of care concern was identified.

Two members complained about the quality of care received from a Non-Emergency Medical Transportation (NEMT) provider. All records and/or responses were sent to QI for further review and investigation.

Quality of Service

There were two grievances involving Quality of Service issues. Both of the cases were closed in favor of the Enrollee. The following is a summary of these issues:

Two members complained about the service they received from their providers or non-clinical staff. Both cases were closed in favor of the Plan.

Timely Assignment to Provider

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

Kaiser Permanente Grievances

During the first quarter of 2020, there were 51 grievances and appeals received by KFHC members assigned to Kaiser Permanente. Five cases closed in favor of the Plan. Twenty two cases were closed in favor of the Enrollee. Twenty four cases are still open and pending closure.

Access to Care

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

Three members complained about the excessive wait time to be seen for an appointment. Two cases closed in favor of the Enrollee. One case is open pending closure.

Coverage Dispute

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

Twelve members complained about a service they requested; however, the requests were not covered. Four cases closed in favor of the Plan and the services were not covered. Seven of the cases closed in favor of the Enrollee and the services were provided. One case is still open pending closure

Medical Necessity

There were no cases pertaining to Medical Necessity. The following is a summary of these issues:

Quality of Care

There were twelve grievances pertaining to quality of care. The following is a summary of these issues:

Two members complained about the quality of care they received from a hospital. One case closed in favor of the Enrollee. One case is open pending review for closure

Five members complained about the quality of care they received from a provider. All five cases are open pending review for closure.

Four members complained about a provider denying treatment. All four cases are open pending review for closure.

One member complained about the Plan denying treatment. This case is open pending review for closure.

Quality of Service

There were twenty four grievances pertaining to a Quality of Service. The following is a summary of these issues.

Seventeen members complained about the services being inadequate at a facility. One case closed in favor of the Plan. Seven cases closed in favor of the Enrollee. Nine cases are open pending review for closure.

Seven members complained about the poor attitude they received from a provider and/or staff. One case closed in favor of the Enrollee. Six cases are open pending review for closure.

Grievance Report

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

| Category | Q1 2020 | Status | Issue | Q4 2019 | Q3 2019 | Q2 2019 | Q1 2019 |
|---|-------------|--------|--|---------|---------|---------|---------|
| Access to Care | 53 | | Appointment Availability | 56 | 34 | 32 | 41 |
| Coverage Dispute | 0 | | Authorizations and Pharmacy | 0 | 3 | 9 | 14 |
| Medical Necessity | 225 | | Questioning denial of service | 187 | 214 | 244 | 228 |
| Other Issues | 36 | | Miscellaneous | 14 | 16 | 13 | 9 |
| Quality of Care | 273 | | Questioning services provided. All cases forwarded to Quality Dept. | 323 | 65 | 26 | 29 |
| Quality of Service | 2 | | Questioning the professionalism, courtesy and attitude of the office staff. All cases forwarded to PR Department | 0 | 0 | 1 | 6 |
| Exempt | 1620 | | Member Grievances that are calls of dissatisfaction, that are not regarding a coverage or medical necessity issue, resolved within one business day. | 1140 | 1515 | 1321 | 1216 |
| Total Grievances, Appeals and Exempt Cases | 2209 | | | 1720 | 1847 | 1646 | 1543 |



Additional Insights-Grievance & Appeal Detail

| Issue | 1st Quarter Grievances | Upheld Plan Decision | Overtured Ruled for Member | Still Under Review |
|--------------------|------------------------|----------------------|----------------------------|--------------------|
| Access to Care | 37 | 27 | 7 | 3 |
| Coverage Dispute | 0 | 0 | 0 | 0 |
| Specialist Access | 16 | 4 | 8 | 4 |
| Medical Necessity | 225 | 141 | 58 | 26 |
| Other Issues | 36 | 20 | 8 | 8 |
| Quality of Care | 273 | 0 | 273 | 0 |
| Quality of Service | 2 | 2 | 0 | 0 |
| Total | 589 | 194 | 354 | 41 |



KERN HEALTH SYSTEMS
HEALTH EDUCATION, CULTURAL AND LINGUISTIC ACTIVITIES REPORT
First Quarter 2020

Report Date: April 8, 2020

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.

- Population Needs Assessment
- Virtual Health Education Classes
- Video Remote Interpreting Services
- Fall 2020 Member Newsletter

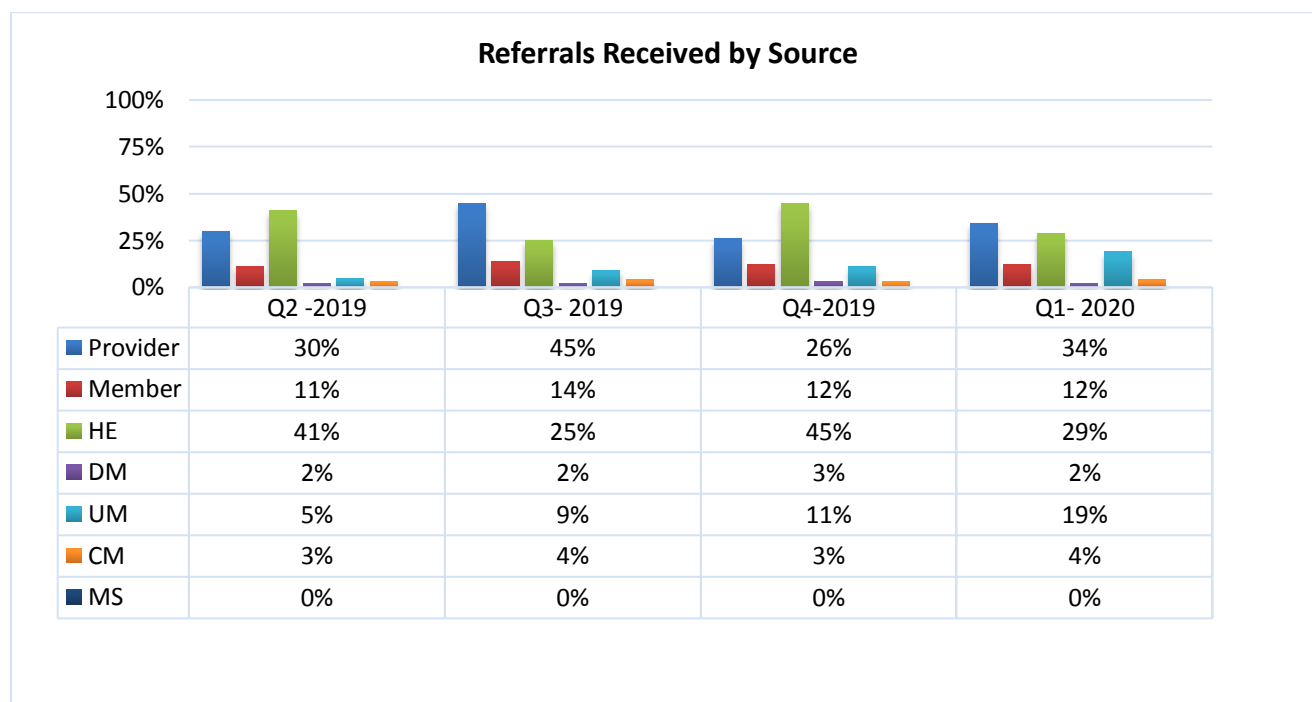
The following pages reflect statistical measurements for the Health Education department detailing the ongoing activity for the 1st quarter 2020.

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

KERN HEALTH SYSTEMS
HEALTH EDUCATION, CULTURAL AND LINGUISTIC ACTIVITIES REPORT
First Quarter 2020

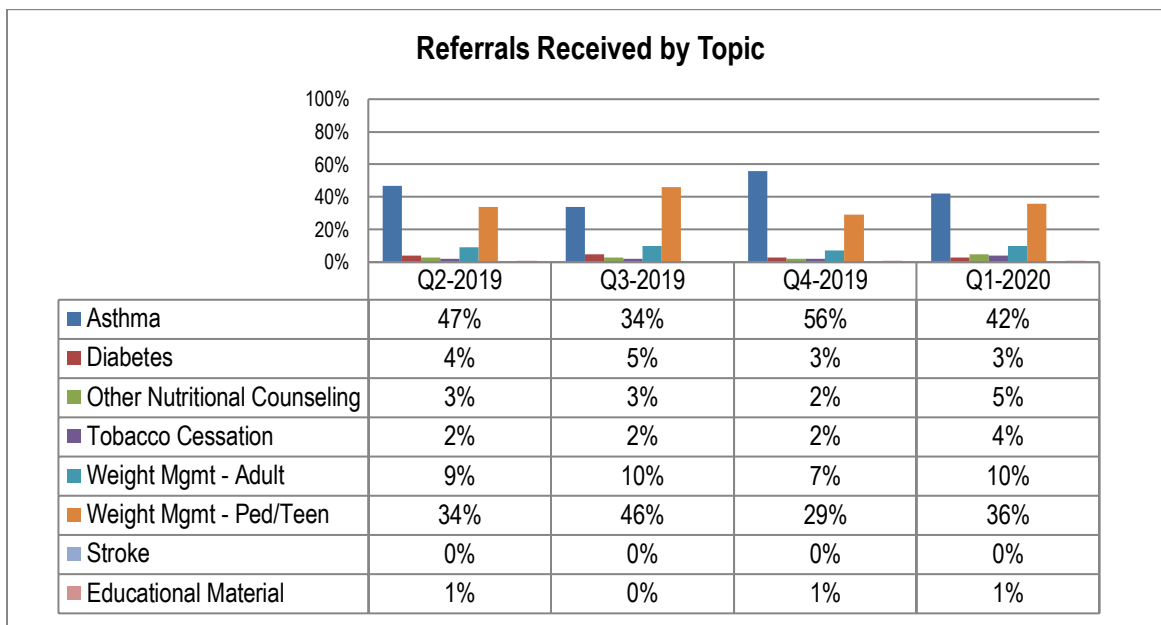
REFERRALS FOR HEALTH EDUCATION SERVICES

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.

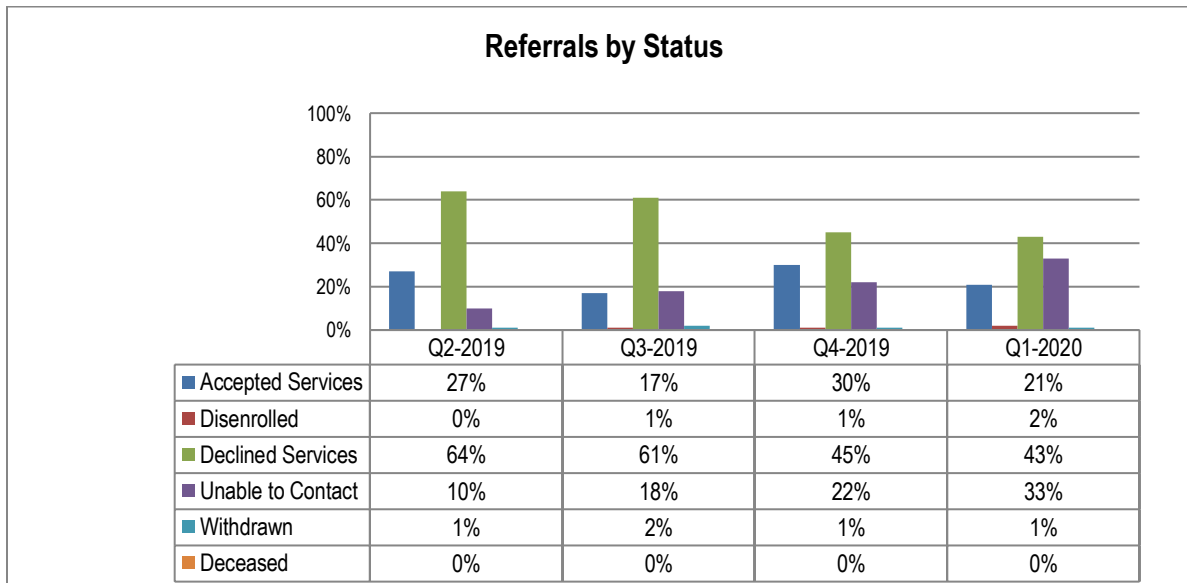


During this quarter, 737 referrals were received which is an 11% decrease in comparison to the previous quarter.

KERN HEALTH SYSTEMS HEALTH EDUCATION, CULTURAL AND LINGUISTIC ACTIVITIES REPORT First Quarter 2020



The HE department receives referrals for various health conditions. This quarter, referrals for asthma education were decreased from 56% to 42% due to decreased targeted outreach calls performed by the HE department.



The rate of members who accepted to receive health education services decreased from 30% in the 4th quarter to 21% in the 1st quarter of 2020

KERN HEALTH SYSTEMS
HEALTH EDUCATION, CULTURAL AND LINGUISTIC ACTIVITIES REPORT
First Quarter 2020

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 and Spanish)
- Heart Healthy Classes
- Individual Nutrition Counseling
- Small Steps to a Healthy Weight Classes (English and Spanish)

Clinica Sierra Vista (CSV) WIC:

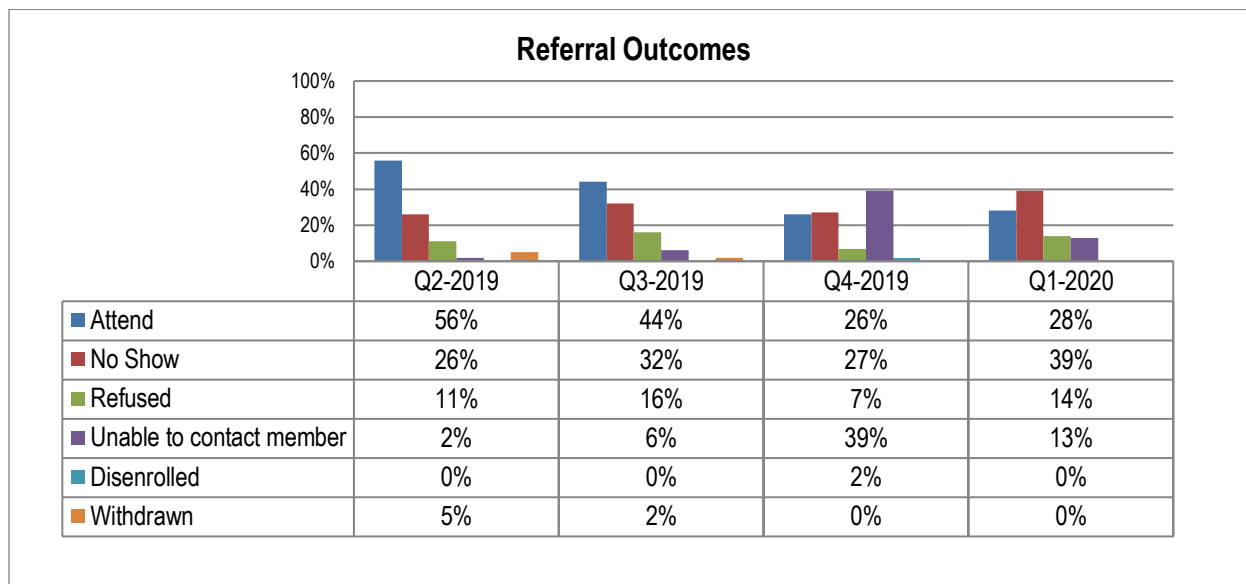
- Diabetes Management Classes
- Heart Healthy Classes

California Smokers' Helpline (CSH):

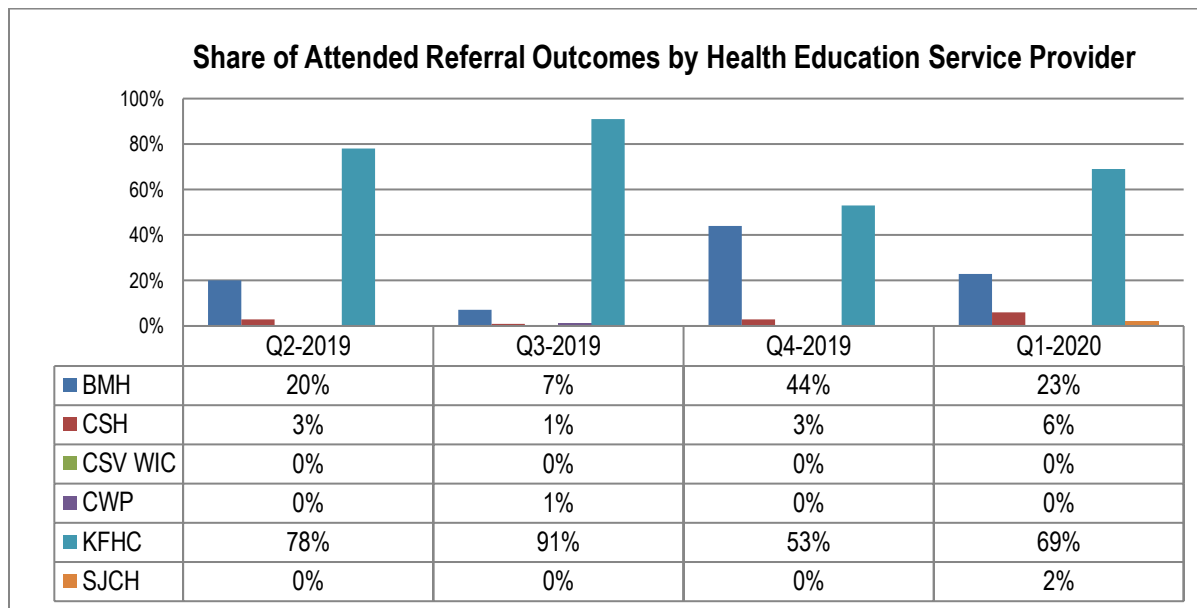
- Telephone Smoking Cessation Counseling

KERN HEALTH SYSTEMS
HEALTH EDUCATION, CULTURAL AND LINGUISTIC ACTIVITIES REPORT
First Quarter 2020

REFERRAL OUTCOMES



During this quarter, the rate of members who received health education services out of all members who accepted services increased from 26% to 28%.

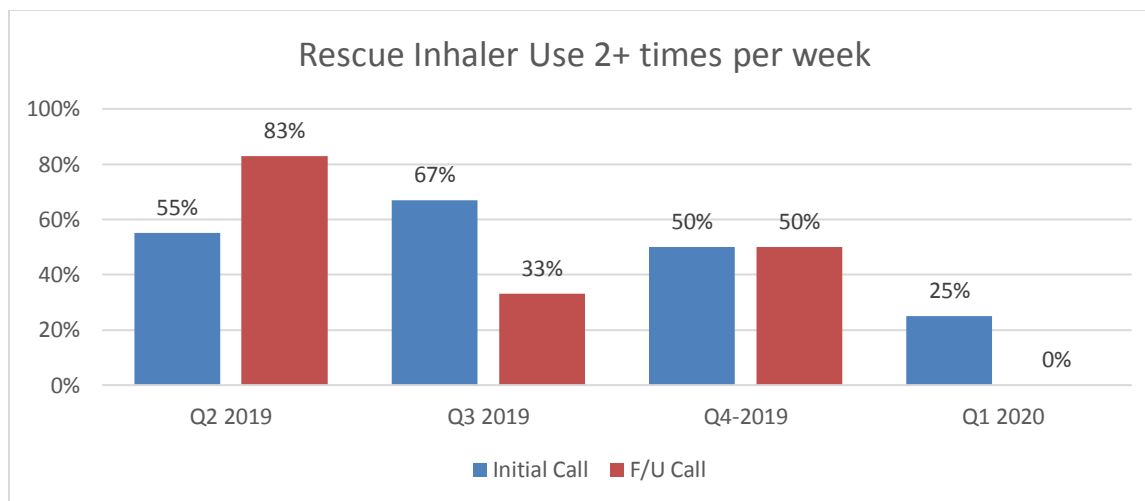
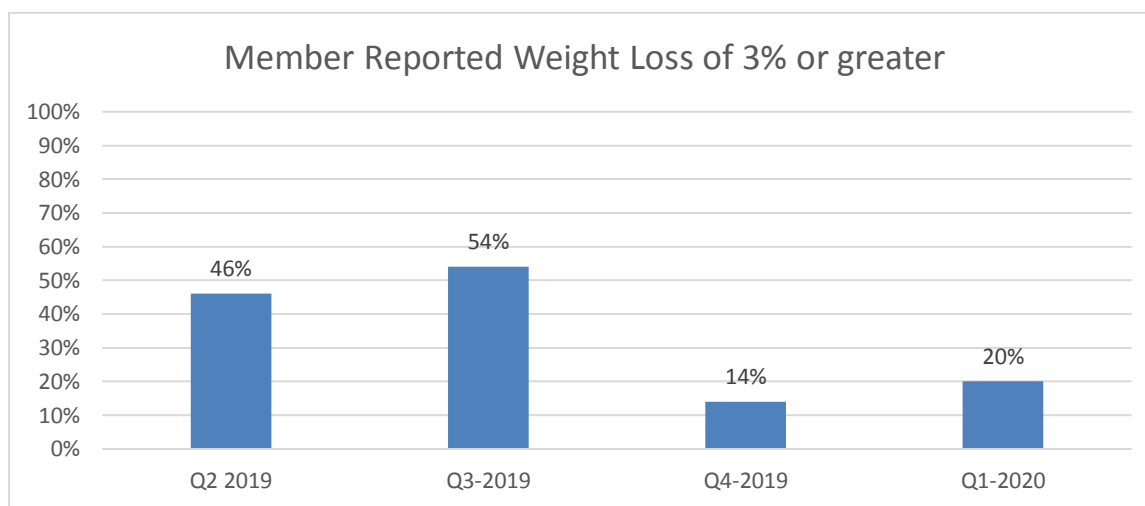


KERN HEALTH SYSTEMS HEALTH EDUCATION, CULTURAL AND LINGUISTIC ACTIVITIES REPORT First Quarter 2020

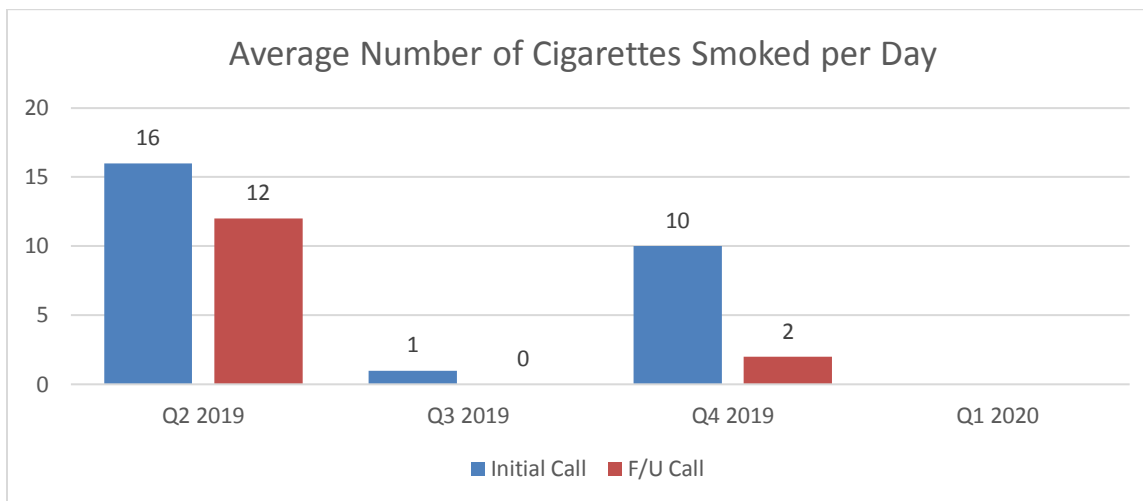
Services through KFHC demonstrates to be the largest share of referral outcomes. This quarter KFHC showed an increase from 53% in the 4th quarter to 69% in the 1st quarter of 2020.

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 the 25 members who participated in the 3 month follow up call, 15 received weight management education and 10 received asthma management education. No members who received smoking cessation services participated in the 3 month follow up call. All findings are based on self-reported data from the member.

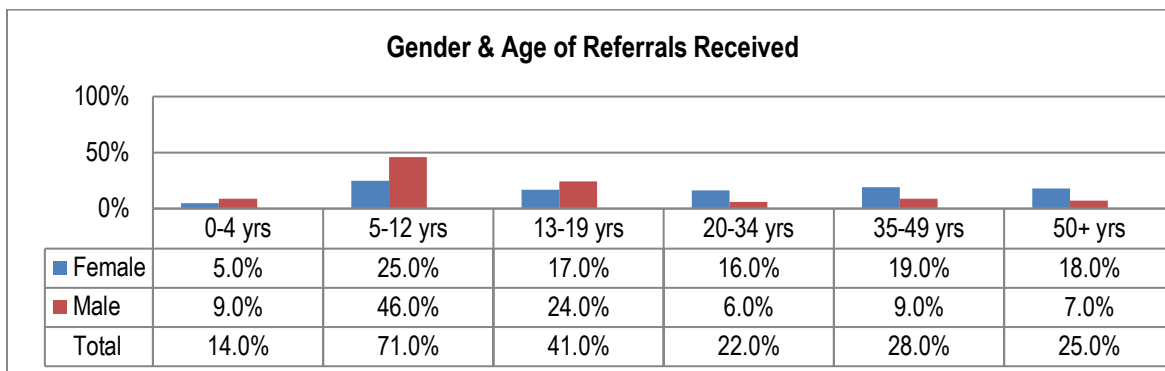


KERN HEALTH SYSTEMS
HEALTH EDUCATION, CULTURAL AND LINGUISTIC ACTIVITIES REPORT
First Quarter 2020



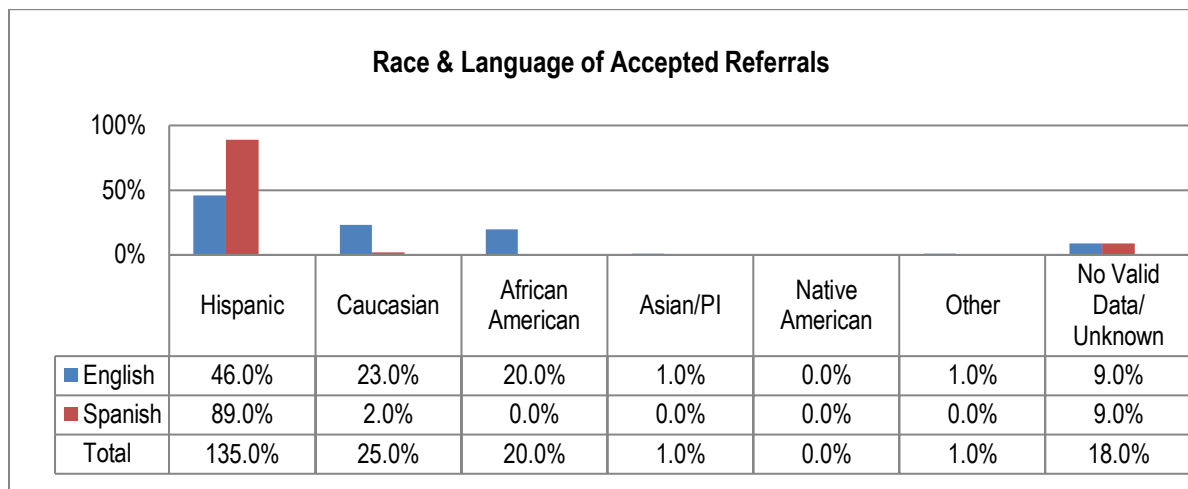
Demographics of Members

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 ages 5-12 years and female ages 5-12 years.

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A breakdown of member classifications by race and language preferences revealed that 89% of members who accepted services are Hispanic and the majority preferred to speak Spanish.

| Referrals Accepted by Top Bakersfield Zip Codes | | | |
|--|----------------|----------------|----------------|
| Q2-2019 | Q3-2019 | Q4-2019 | Q1-2020 |
| 93307 | 93307 | 93307 | 93307 |
| 93306 | 93304 | 93306 | 93306 |
| 93305 | 93306 | 93304 | 93304 |
| 93304 | 93305 | 93305 | 93309 |
| 93308 | 93309 | 93308 | 93305 |

KHS serves members in the Kern County area. During this quarter, 78% 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 | | | |
|---|----------------|----------------|----------------|
| Q2-2019 | Q3-2019 | Q4-2019 | Q1-2020 |
| Delano | Arvin | Arvin | Delano |
| Wasco | Delano | Delano | McFarland |
| Lamont | Shafter | Shafter | Tehachapi |
| McFarland | Wasco | Lamont | Lamont |
| Shafter | Lamont | Wasco | Arvin |
| Arvin | | | |

Additionally, 22% of the members who accepted services reside in the outlying areas of Kern County and the highest concentration of members reside in Delano.

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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 1,646 educational packets to members on the following health topics:

| Educational Mailings | | | | |
|-----------------------------|----------------|----------------|----------------|----------------|
| | Q2-2019 | Q3-2019 | Q4-2019 | Q1-2020 |
| Anemia | 1 | 2 | 0 | 0 |
| Asthma | 427 | 648 | 459 | 305 |
| High Cholesterol | 11 | 11 | 4 | 6 |
| Diabetes | 53 | 45 | 30 | 20 |
| Gestational Diabetes | 5 | 1 | 1 | 2 |
| High Blood Pressure | 4 | 4 | 4 | 13 |
| COPD | 0 | 0 | 1 | 2 |
| Postpartum Care | 4716 | 602 | 263 | 564 |
| Prenatal Care | 145 | 283 | 23 | 120 |
| Smoking Cessation | 13 | 12 | 15 | 12 |
| Weight Management | 173 | 370 | 223 | 357 |
| WIC | 64 | 157 | 41 | 245 |
| Total | 1,367 | 2,137 | 1,064 | 1,646 |

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INTERPRETER REQUESTS

Face-to-Face Interpreter Requests

During this quarter, there were 305 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 | | | |
|-------------------------|-----------|------------|-----------|
| Q2-2019 | Q3-2019 | Q4-2019 | Q1-2020 |
| Spanish | Spanish | Spanish | Spanish |
| Cantonese | Punjabi | Punjabi | Punjabi |
| Punjabi | Arabic | Mandarin | Mandarin |
| English | Cantonese | Arabic | Arabic |
| Arabic | Mandarin | Cantonese | Cantonese |
| | | Vietnamese | Persian |

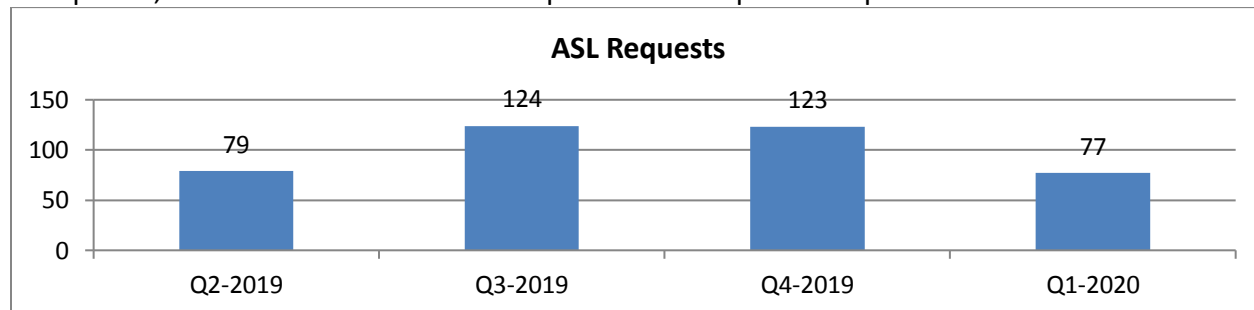
Telephonic Interpreter Requests

During this quarter, there were 752 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 | | | |
|-------------------------|----------|------------|----------|
| Q2-2019 | Q3-2019 | Q4-2019 | Q1-2020 |
| Spanish | Spanish | Spanish | Spanish |
| Punjabi | Punjabi | Punjabi | Punjabi |
| Arabic | Arabic | Arabic | Arabic |
| Tagalog | Mandarin | Tagalog | Mandarin |
| Mandarin | Tagalog | Vietnamese | Tagalog |

American Sign Language (ASL) Requests

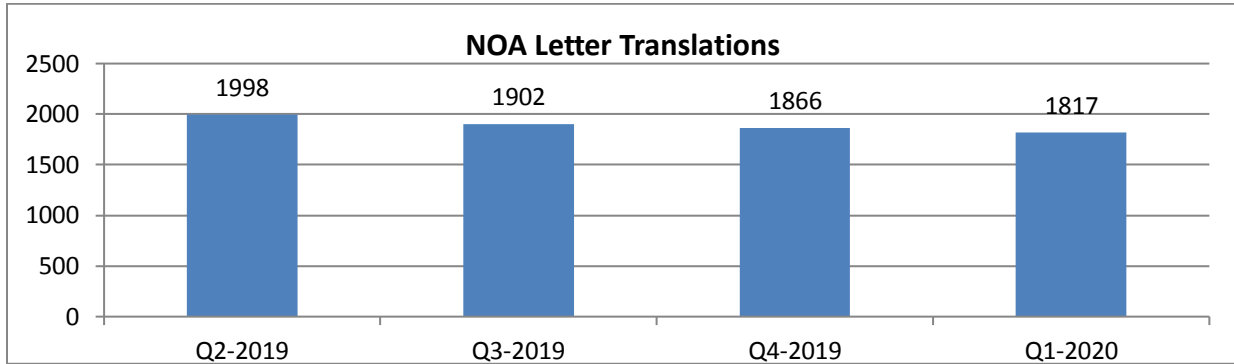
During this quarter, there were a total of 77 requests received for an American Sign Language interpreter, which was a decrease in comparison to the previous quarter.



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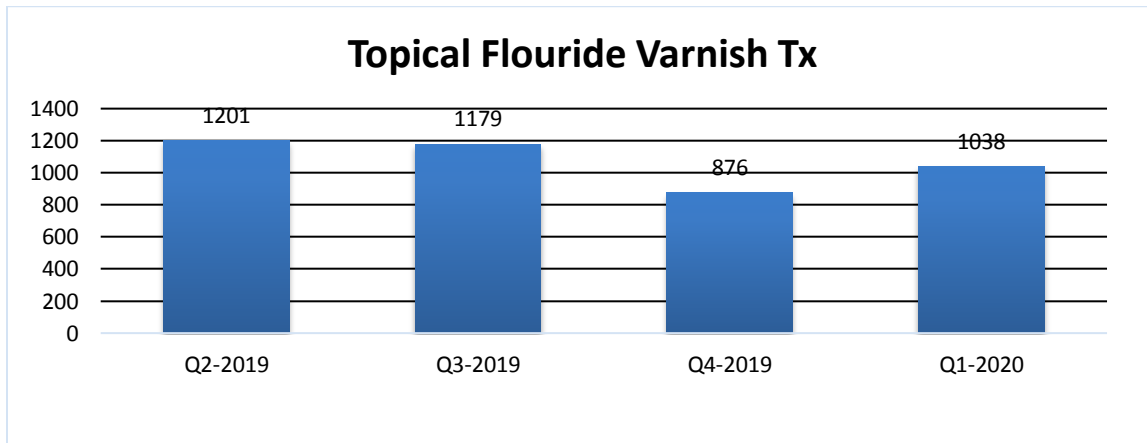
DOCUMENT TRANSLATIONS

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, 1,817 Notice of Action letters were translated into Spanish for the UM and Pharmacy departments.



TOPICAL FLUORIDE VARNISH TREATMENTS

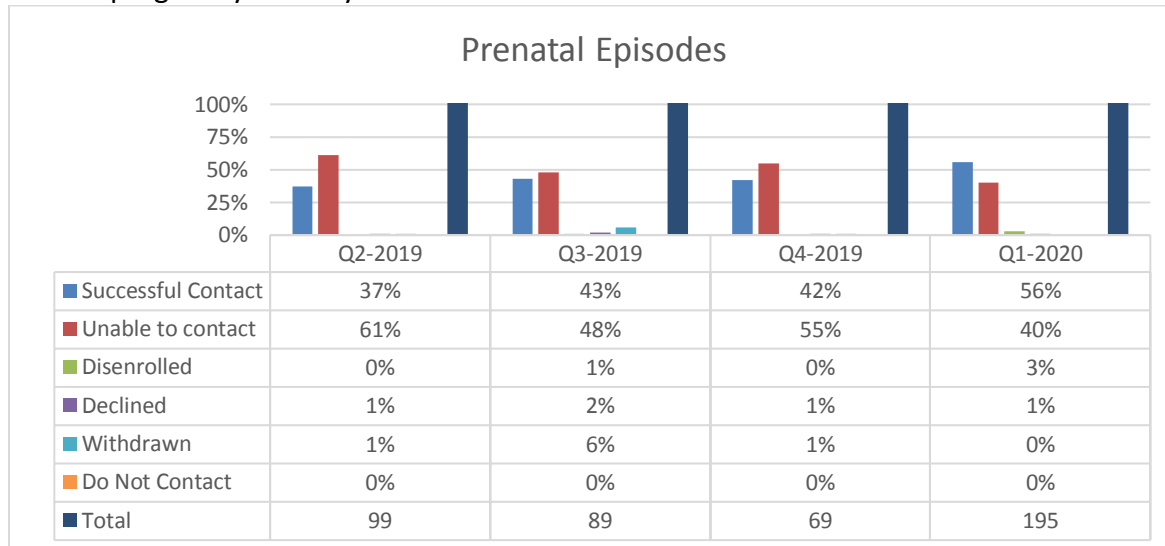
Fluoride varnish treatments are effective in preventing tooth decay and more practical and safer to use with young children. KHS covers up to three topical fluoride varnish treatments in a 12-month period for all members younger than 6 years.



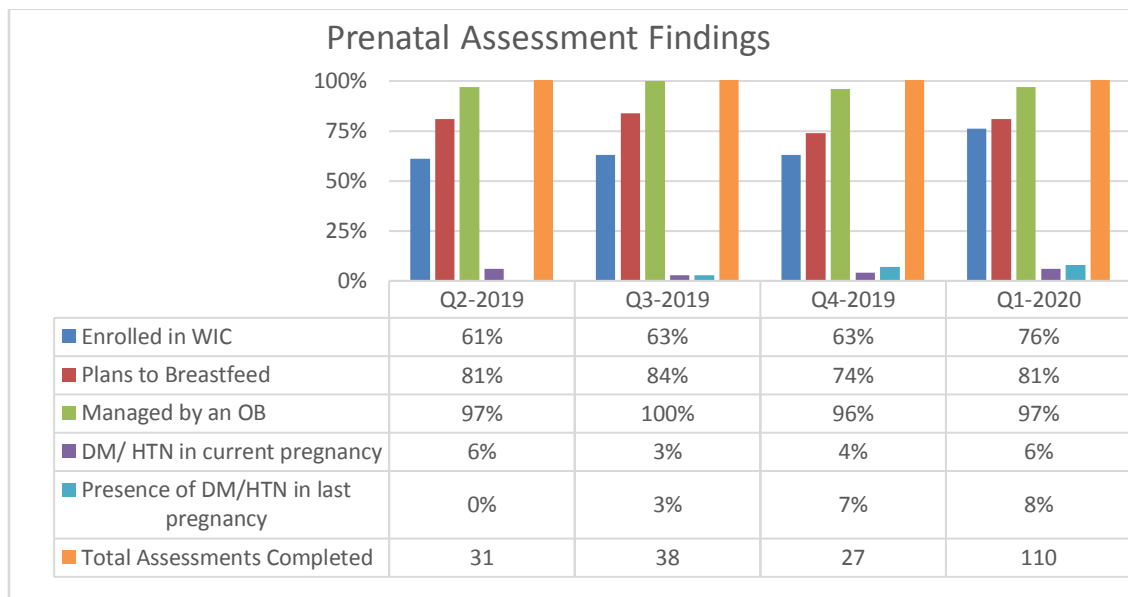
KERN HEALTH SYSTEMS HEALTH EDUCATION, CULTURAL AND LINGUISTIC ACTIVITIES REPORT First Quarter 2020

PERINATAL OUTREACH AND EDUCATION

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.

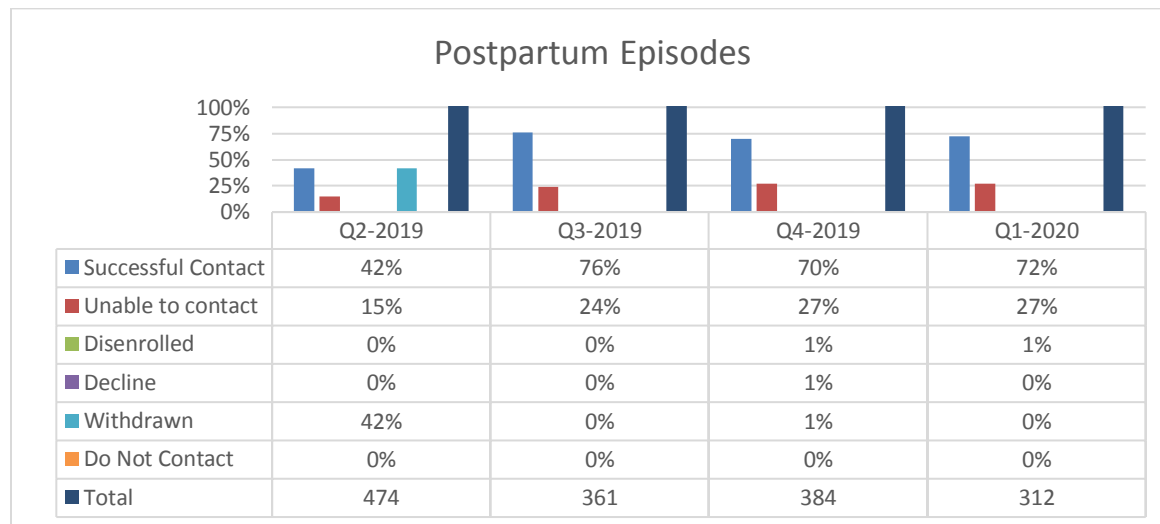


During the 1st quarter of 2020, 294 episodes for pregnant members were created and 56% were successfully contacted.

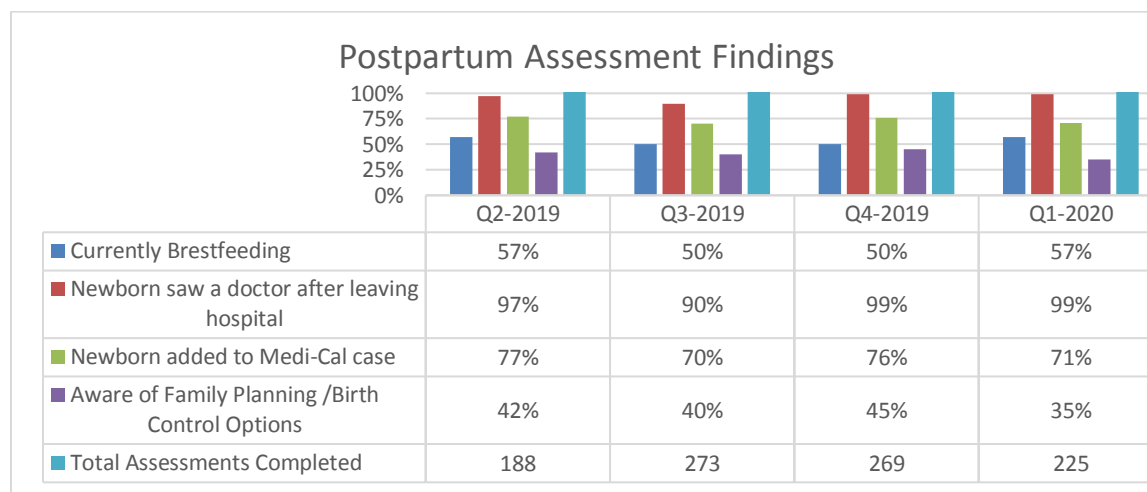


KERN HEALTH SYSTEMS
HEALTH EDUCATION, CULTURAL AND LINGUISTIC ACTIVITIES REPORT
First Quarter 2020

The total prenatal assessments completed increased from 27% in the 4th quarter of 2019 to 100% in the 1st quarter of 2020.



During the 1st quarter, 336 postpartum members were created and 72% were successfully contacted.



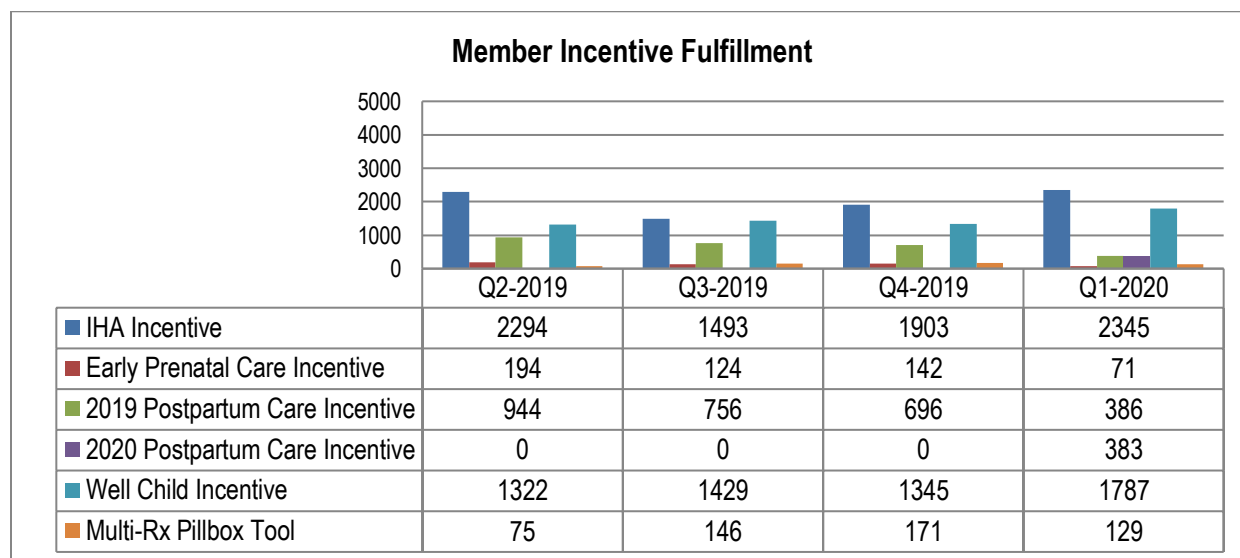
Postpartum assessments completed decreased from 269 assessments in the 4th quarter of 2019 to 225 assessment completed in the 1st quarter of 2020.

KERN HEALTH SYSTEMS
HEALTH EDUCATION, CULTURAL AND LINGUISTIC ACTIVITIES REPORT
First Quarter 2020

MEMBER WELLNESS BASED INCENTIVES AND CHRONIC CONDITION TOOLS

During the 1st quarter of 2020, KHS continued to offer wellness based incentives and one chronic condition tool for members. In January 2020, the postpartum care incentive was modified to align with the new MCAS measure where the time frame to complete this visit is now 1-12 weeks following delivery.

- **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.
- **2019 Postpartum Care** – members who delivered in 2019 and complete the postpartum visit within 21-56 days following delivery will receive an additional \$30 gift card.
- **2020 Postpartum Care** – members who delivered in 2020 and complete the postpartum visit within 1-12 weeks 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.



KERN HEALTH SYSTEMS
CASE MANAGEMENT DEPARTMENT MONTHLY REPORT

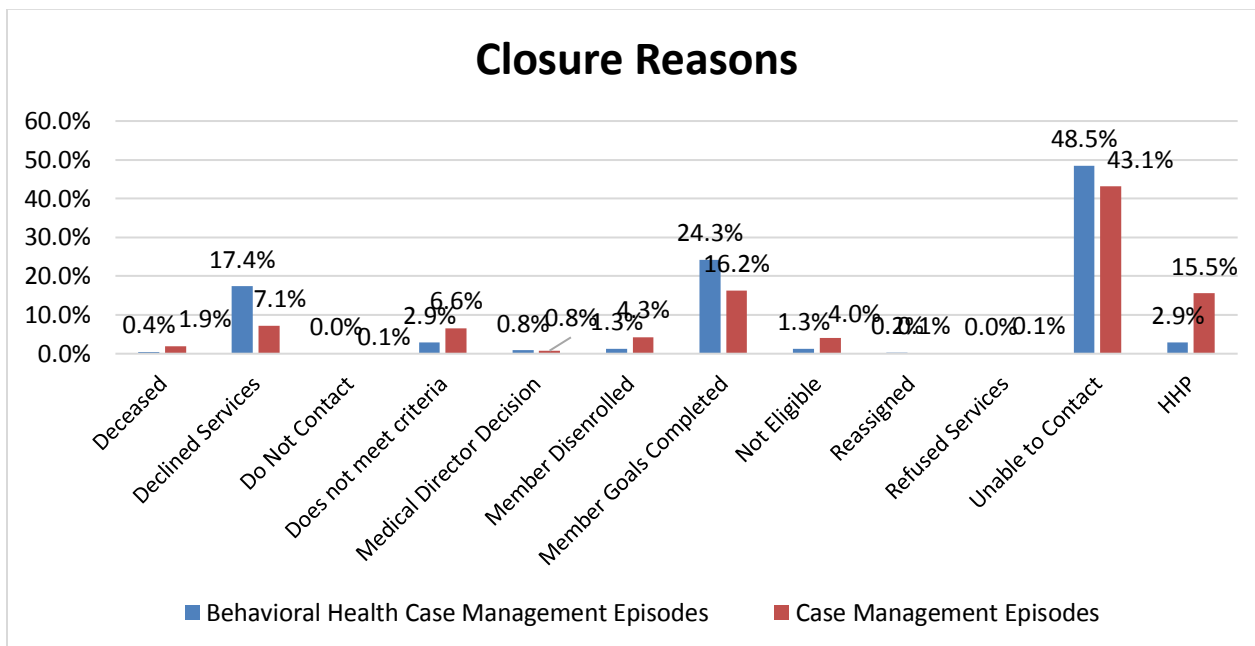
Report Date: April 3rd, 2020

Reporting Period: January 1st, 2019- March 31st, 2019

During the months of January thru March, a total of 1,547 members were managed by the Case Management Department.

| Episode Type | Closed Episodes | Open Episodes | Referral Episodes | Total |
|-----------------------------------|-----------------|---------------|-------------------|-------|
| Case Management | 611 | 243 | 68 | 922 |
| Behavioral Health Case Management | 467 | 142 | 16 | 625 |

| Episode Source other than ACG Modeler | Behavioral Health Management Episodes | Percentage | Case Management Episodes | Percentage |
|--|---------------------------------------|------------|--------------------------|------------|
| All Internally Generated Complex Case Management | 37 | 6.9% | 157 | 33.2% |
| All Internally Generated Disease Management | 2 | 0.4% | 1 | 0.2% |
| All Internally Generated Grievance | 2 | 0.4% | 8 | 1.7% |
| All Internally Generated Hospital Discharge | 0 | 0.0% | 8 | 1.7% |
| All Internally Generated Medical Director | 0 | 0.0% | 8 | 1.7% |
| All Internally Generated Member Request | 5 | 0.9% | 15 | 3.2% |
| All Internally Generated UM Generated | 15 | 2.8% | 5 | 1.1% |
| BH Mental Health | 37 | 6.9% | 0 | 0.0% |
| CM DM HE Facility Based Social Worker | 2 | 0.4% | 0 | 0.0% |
| CM DM HE Health Education | 5 | 0.9% | 0 | 0.0% |
| CM DM HE Member Services | 23 | 4.3% | 1 | 0.2% |
| CM DM HE Provider | 2 | 0.4% | 3 | 0.6% |
| CM DM High ER Utilizer | 153 | 28.7% | 0 | 0.0% |
| Critical High Risk SPD | 8 | 1.5% | 0 | 0.0% |
| DM HE Social Worker Case Management | 3 | 0.6% | 3 | 0.6% |
| High Risk SPD | 240 | 44.9% | 264 | 55.8% |



| Members Closed and Referred to HHP | Behavioral Health Case Management Episodes | Case Management Episodes |
|------------------------------------|--|--------------------------|
| HHP | 14 | 120 |

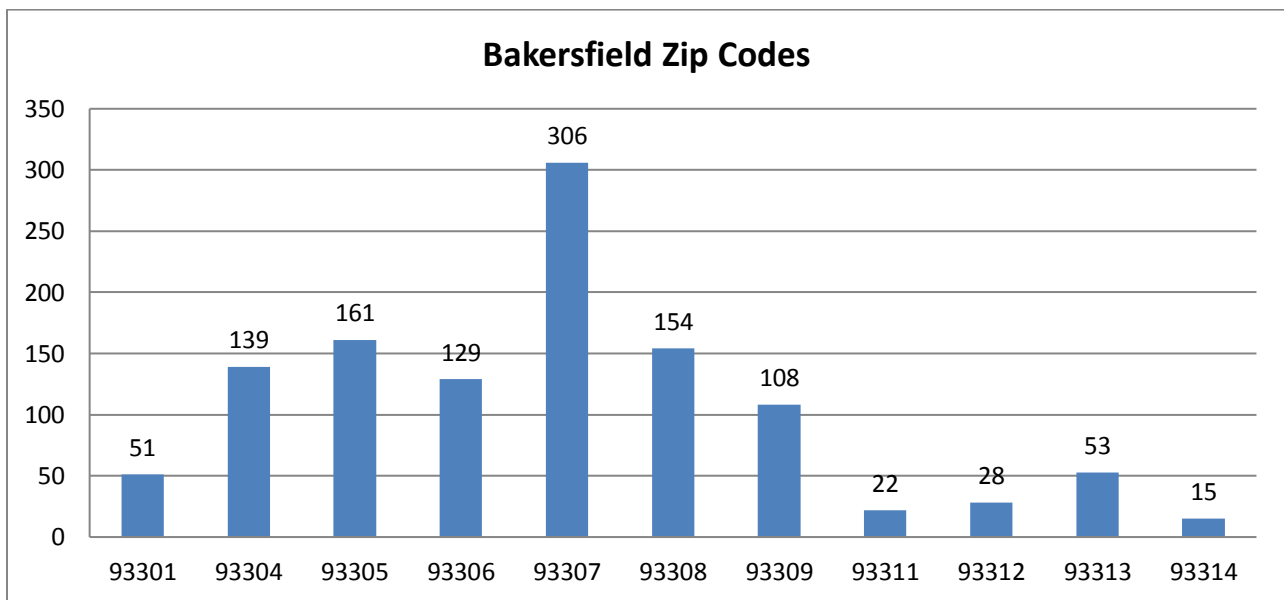
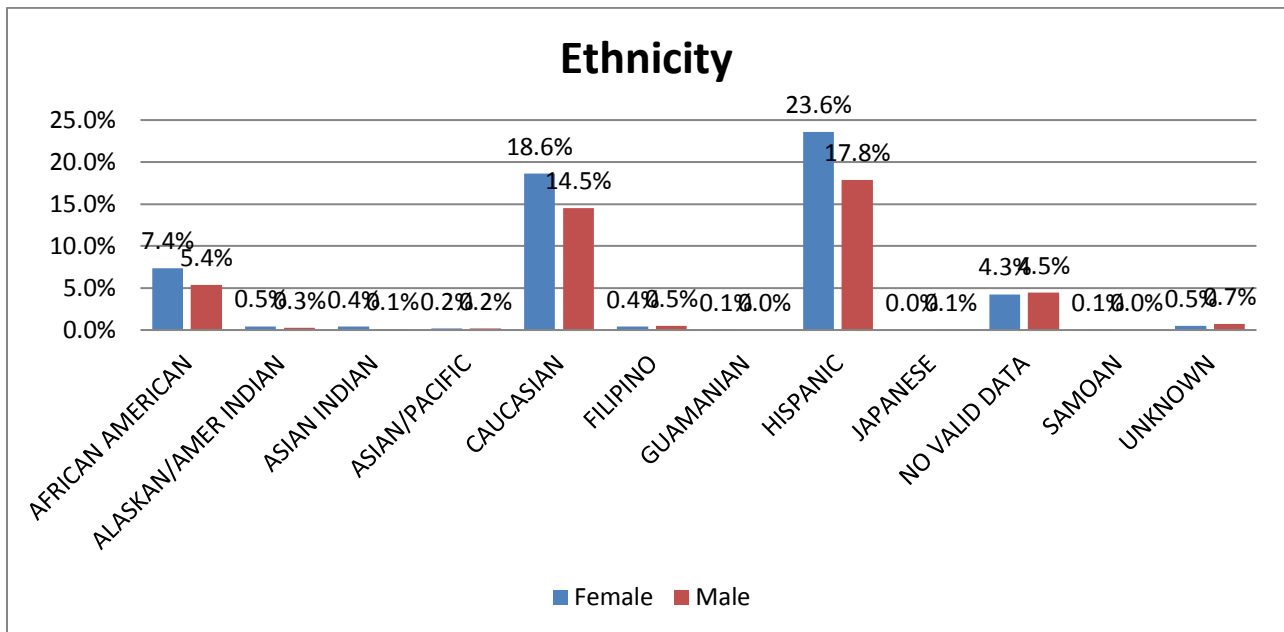
| Closed Episodes with Admits within 30 days after Closure | Total |
|--|-------|
| Behavioral Health Case Management | 31 |
| Case Management | 57 |
| Percentage of closed cases Readmitted | 4% |

| Assessments/Plan of Care | Behavioral Health Case Management Episodes | Case Management Episodes | Total |
|--------------------------|--|--------------------------|-------|
| Assessments | 136 | 235 | 371 |
| Plan of Care | 123 | 241 | 364 |

During the months of January thru March, 96% of the members managed were 65 years of age or younger.

| Age | <18 | 18-40 | 41-65 | >65 | Total |
|----------------------------|-----|-------|-------|-----|-------|
| Case Management | 54 | 168 | 650 | 50 | 922 |
| Behavioral Case Management | 78 | 238 | 289 | 20 | 625 |

Of the 1,547 members managed during the months of January thru March, the majority of members 27 were female at 56%. The majority of members' ethnicity was Hispanic at 41%.



| City | Total |
|---------------|-------|
| ARVIN | 22 |
| BODFISH | 4 |
| BORON | 3 |
| BUTTONWILLOW | 3 |
| CALIF CITY | 23 |
| CLARKSVILLE | 1 |
| DELANO | 65 |
| EDISON | 1 |
| FRAZIER PARK | 8 |
| INYOKERN | 4 |
| LAGUNA HILLS | 1 |
| LAKE ISABELLA | 16 |
| LAKESIDE | 1 |
| LAMONT | 27 |
| LOS ANGELES | 2 |
| LOST HILLS | 1 |
| MARICOPA | 4 |
| MC FARLAND | 16 |
| MC KITTRICK | 1 |
| MOJAVE | 11 |
| N/A | 13 |
| NORTH EDWARDS | 3 |
| ONYX | 1 |
| ROSAMOND | 7 |
| SHAFTER | 31 |
| SUN VALLEY | 2 |
| TAFT | 29 |
| TEHACHAPI | 44 |
| VICTORVILLE | 1 |
| WASCO | 25 |
| WELDON | 7 |
| WOFFORD HTS | 4 |

| Note Source | Behavioral Case Management Episodes | Case Management Episodes |
|------------------------|-------------------------------------|--------------------------|
| Activity Note | 1626 | 1822 |
| Add Episode Note | 214 | 99 |
| Care Plan Problem Note | 271 | 386 |
| Change Status Note | 1696 | 2111 |
| Edit Episode Note | 34 | 248 |
| Episode Note | 77 | 270 |
| Goals | 298 | 371 |
| Interventions | 440 | 469 |

Letters

| Letter Template | Behavioral Health Case Management Episodes | Case Management Episodes |
|----------------------------|--|--------------------------|
| Appointment Letter English | 46 | 64 |
| Appointment Letter Spanish | 6 | 13 |
| Consent Form English | 13 | 19 |
| Consent Form Spanish | 4 | 18 |
| Discharge English | 84 | 126 |
| Discharge Spanish | 11 | 30 |
| Educational Material | 231 | 268 |
| Mental Health Alert to PCP | 4 | |
| Unable to Contact | 435 | 662 |
| Welcome Letter Bilingual | 139 | 278 |

Activities Completed

| Activities Completed | Total |
|----------------------|-------|
| CMA's | 3,825 |
| Nurses | 1,135 |
| Social Workers | 607 |

| Activity Type | Behavioral Health Case Management Episodes | Case Management Episodes |
|-----------------|--|--------------------------|
| Fax | 145 | 240 |
| Letter Contact | 705 | 1,071 |
| Member Services | 51 | 49 |
| Phone Call | 1,294 | 2,012 |

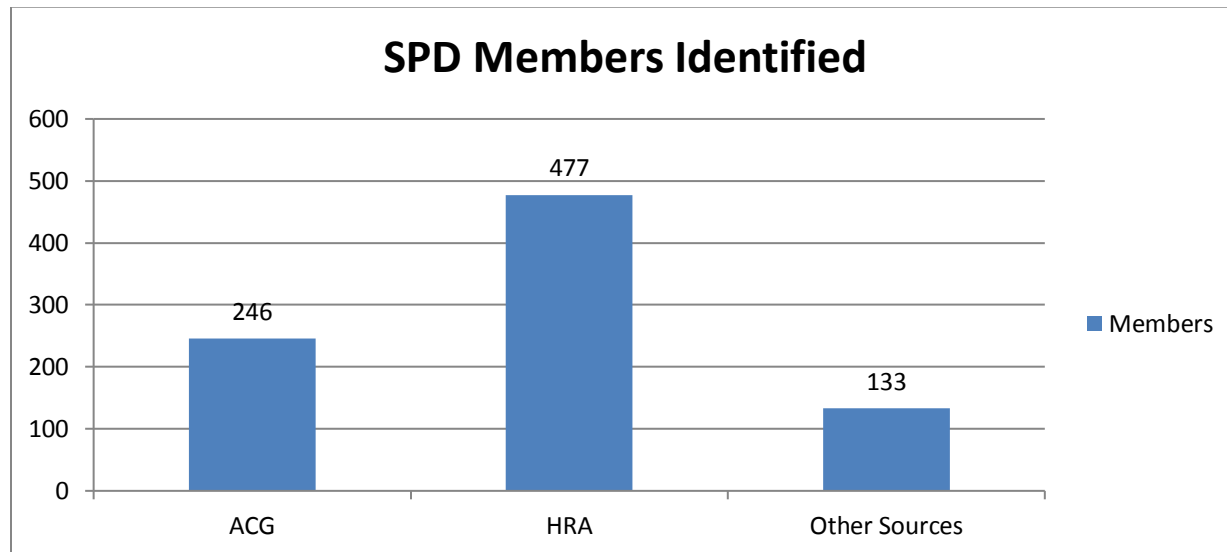
Activity Name

| Activity Name | Behavioral Health Case Management Episodes | Case Management Episodes |
|--------------------------------|--|--------------------------|
| Appointment Reminder Calls | 45 | 73 |
| Centric Appointment | 5 | 18 |
| Close Episode for UTC | 16 | 18 |
| Community Resources | 53 | 21 |
| Contact Member | 285 | 337 |
| Contact Pharmacy | 4 | 6 |
| Contact Provider | 161 | 365 |
| Create Work Item | 61 | 53 |
| Homeless | 6 | 1 |
| ICT | 28 | 42 |
| Incoming Call | 1 | 11 |
| Inpatient Discharge Follow Up | 35 | 158 |
| Language Line | 75 | 140 |
| Mail Appointment Letter | 58 | 37 |
| Mail Authorization | 0 | 6 |
| Mail Consent Letter | 16 | 36 |
| Mail Discharge Letter | 94 | 155 |
| Mail Educational Material | 163 | 270 |
| Mail Pill Box | 48 | 80 |
| Mail Pocket Calendars | 94 | 142 |
| Mail Provider Directory | 10 | 13 |
| Mail Unable to contact letter | 106 | 218 |
| Mail Urgent Care Pamphlet | 27 | 9 |
| Mail Welcome Letter | 4 | 33 |
| Mental Health Alert to PCP | 4 | 0 |
| Palliative Care | 4 | 0 |
| Plan of care | 123 | 204 |
| Provided Information | 0 | 51 |
| Public Health Nurse | 0 | 1 |
| Request Medical Records | 66 | 143 |
| Return Mail | 22 | 1 |
| Schedule Physician Appointment | 62 | 43 |
| Transportation | 16 | 37 |
| Verbal consent to be received | 503 | 651 |

Seniors and Persons with Disabilities (SPDs):

SPD Members are identified for Complex Case Management through use of the John Hopkins Predictive Modeler, through Health Risk Assessments and other sources including member requests and outside and internal requests. The SPD population represents a total of 55 percent of the Complex Group from January thru March 2020.

The John Hopkins Predictive Modeler identified SPD's represent 29% percent of the Complex Group from January thru March 2019. HRA identified SPD members represent 56% and other sources of SPD members represent 15%.

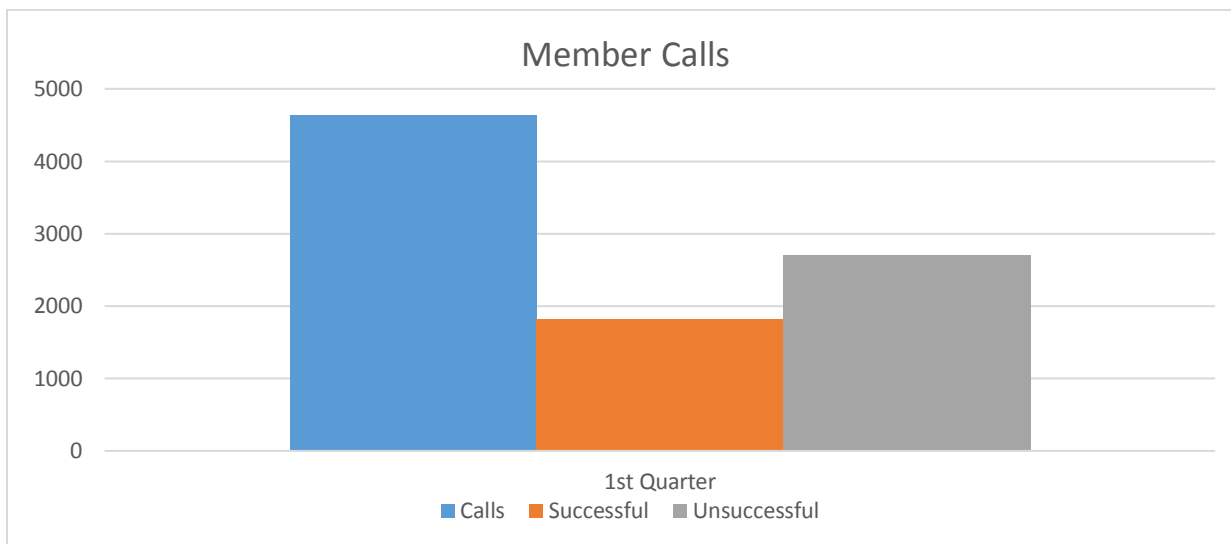


Disease Management Quarterly Report

1st Quarter, 2020

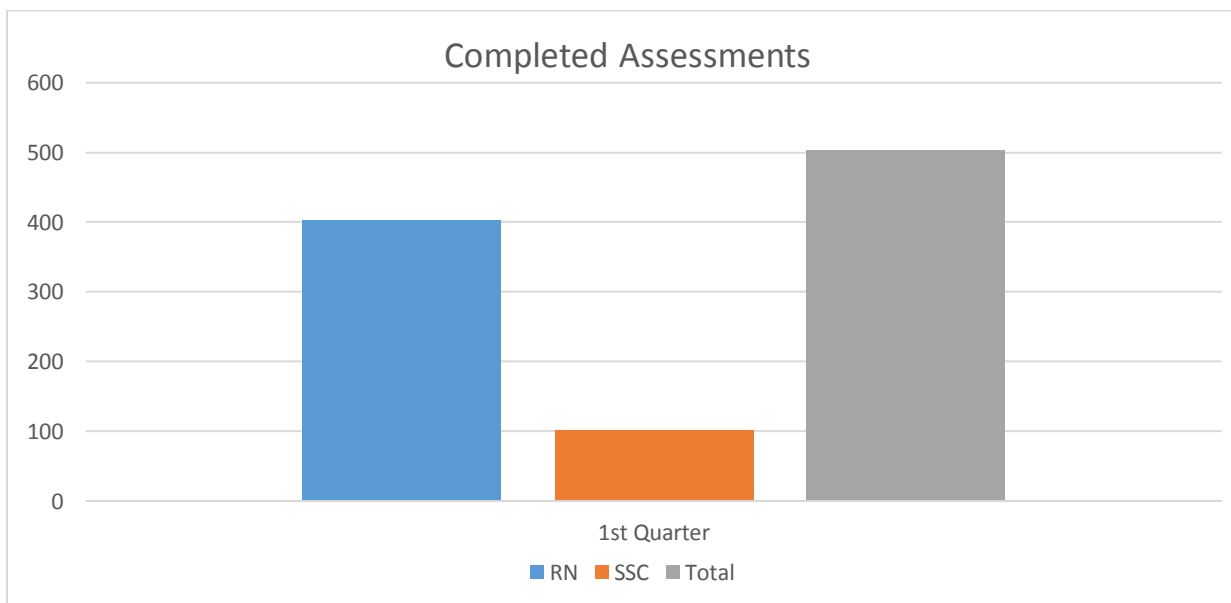
Telephone Calls: A total of 4,629 calls were made by the DM staff during the 1st Quarter, 2020.

| Member Calls Attempted | Successful Calls | Unsuccessful Calls | Total Member Calls | % Contacted |
|------------------------|------------------|--------------------|--------------------|-------------|
| RN | 1,267 | 1,894 | 3,161 | 40% |
| SSC | 654 | 814 | 1,468 | 45% |
| Total | 1,911 | 2,708 | 4,629 | 41% |



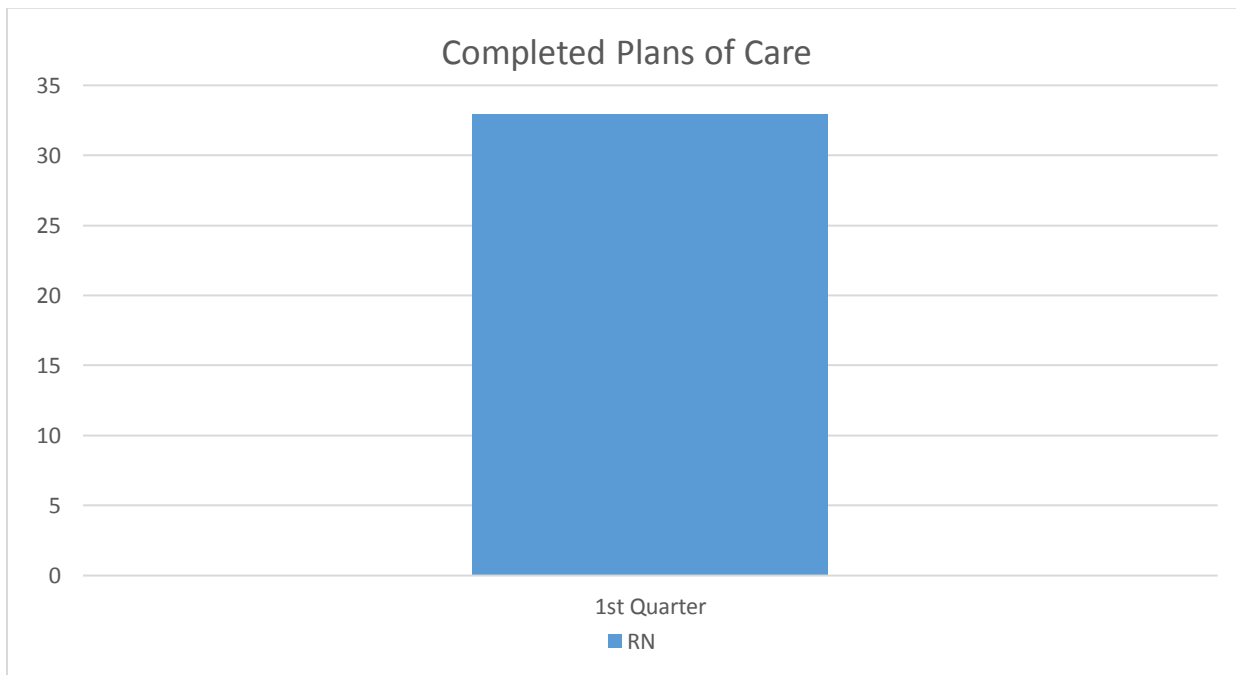
New Assessments Completed.

| RN | SSC | Total |
|-----|-----|-------|
| 402 | 101 | 503 |



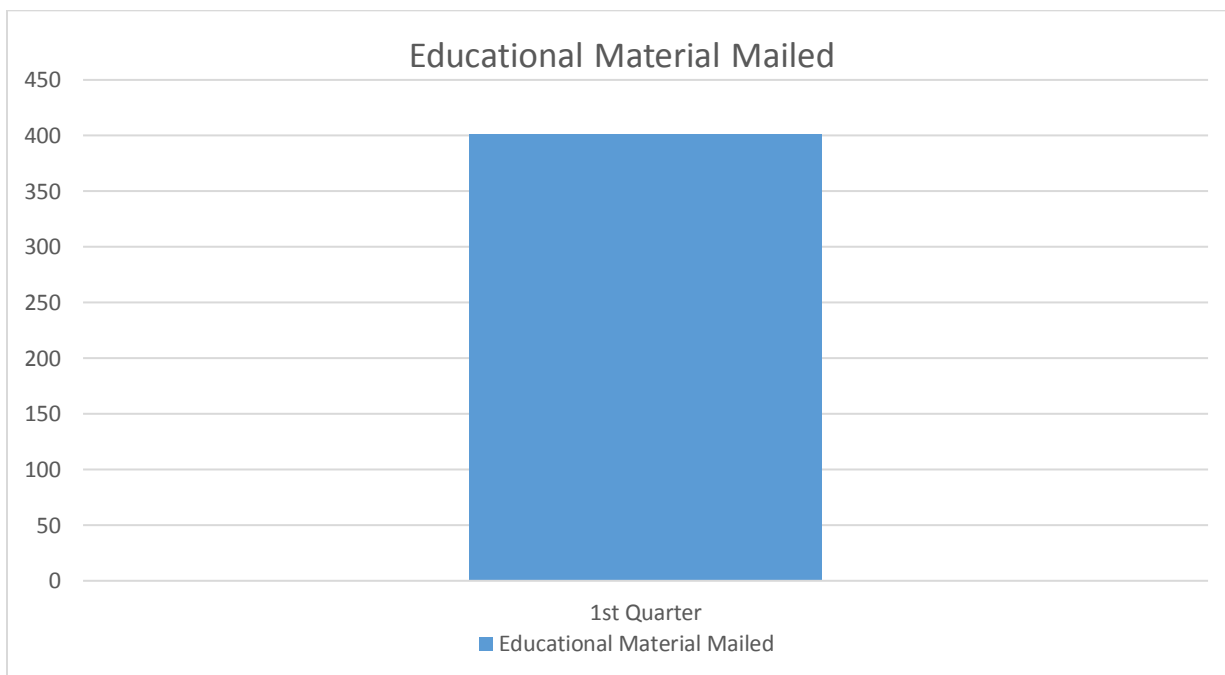
Plans of Care Completed & Closed.

| |
|-----------|
| RN |
| 33 |



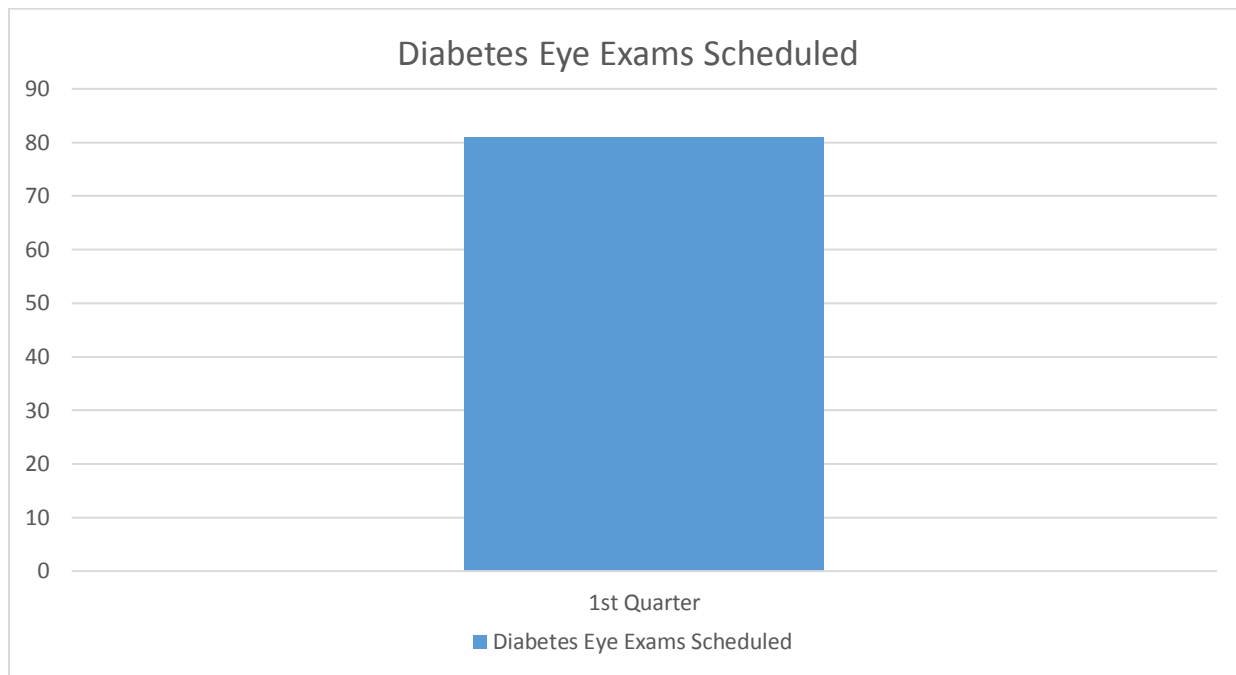
Educational Material Mailed.

| |
|------------|
| 401 |
|------------|



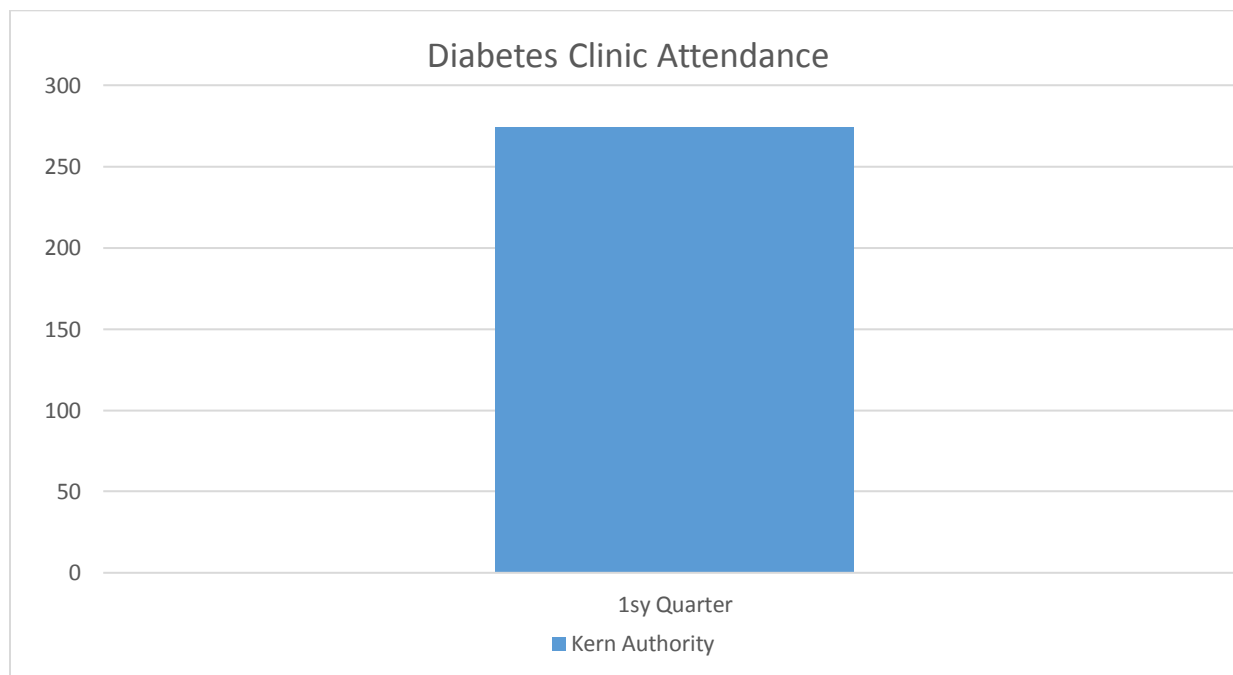
Diabetes Eye Exams Scheduled.

| |
|----|
| 81 |
|----|



Diabetes Clinic Attendance.

| |
|-----------------------|
| Kern Authority |
| 274 |



Diabetes Prevention Program: The first DPP program was completed at the end of February, 2020. Of the 48 members who attended the first session on March, 4th, 2019, 22 members completed the 26 sessions.

| Sessions Scheduled to Attend (Jan & Feb) | Actual Sessions Attended (Jan & Feb) |
|--|--------------------------------------|
| 46 | 45 |

