



KERN HEALTH SYSTEMS

PUBLIC POLICY/COMMUNITY ADVISORY COMMITTEE

Wednesday, June 29, 2022

at

11:00 A.M.

At

**Kern Health Systems
2900 Buck Owens Boulevard
Bakersfield, CA 93308**

The public is invited.

For more information - please call (661) 664-5536

AGENDA

PUBLIC POLICY/COMMUNITY ADVISORY COMMITTEE

KERN HEALTH SYSTEMS
2900 Buck Owens Boulevard
Bakersfield, California 93308

Regular Meeting
Wednesday, June 29, 2022

11:00 A.M.

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, Mark McAlister, Cecilia Hernandez-Colin, Beatriz Basulto, Tammy Torres, Yadira Ramirez, Michelle Bravo, Alex Garcia, Quon Louey, Kaelsun Singh Tyiska, Rukiyah Polk

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 March 29, 2022
APPROVE
- CA-4) Report on June 2022 Medi-Cal Membership Enrollment
RECEIVE AND FILE
- CA-5) Report on KFHC Grievance Summary for first quarter ending March 31, 2022
RECEIVE AND FILE
- CA-6) Report on Population Health Management for first quarter ending March 31, 2022
RECEIVE AND FILE
- 7) Report on Member Services Grievance Operational Report for first quarter ending March 31, 2022
RECEIVE AND FILE
- 8) Marketing Department Report
PRESENTATION

- 9) Report on Health Education for first quarter ending March 31, 2022
RECEIVE AND FILE

School Partnership Efforts
PRESENTATION

ADJOURN TO TUESDAY, September 27, 2022 AT 11:00 A.M.

**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

PUBLIC POLICY/COMMUNITY ADVISORY COMMITTEE

KERN HEALTH SYSTEMS
2900 Buck Owens Boulevard
Bakersfield, California 93308

Regular Meeting
Tuesday, March 29, 2022

11:00 A.M.

COMMITTEE RECONVENED

Members: Janet Hefner, Jennifer Wood, Jasmine Ochoa, Mark McAlister, Cecilia Hernandez-Colin, Beatriz Basulto, Jose Sanchez, Tammy Torres, Yadira Ramirez, Caitlin Criswell, Michelle Bravo, Alex Garcia, Quon Louey

ROLL CALL: 11 Present; 2 Absent – Jennifer Wood, Jasmine Ochoa

Meeting called to order by Louie Iturriria, Director of Marketing and Public Relations, at 11:00 AM.

NOTE: The vote is displayed in bold below each item. For example, Hefner-Wood denotes Member Hefner made the motion and Member Wood seconds the motion.

CONSENT AGENDA/OPPORTUNITY FOR PUBLIC COMMENT: ALL ITEMS LISTED WITH A "CA" WERE CONSIDERED TO BE ROUTINE AND APPROVED BY ONE MOTION.

COMMITTEE ACTION SHOWN IN CAPS

PUBLIC PRESENTATIONS

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NO ONE HEARD

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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])
 - **Alan Avery, Chief Operating Officer of KHS, announced that our current CEO Douglas Hayward, will be retiring July 6, 2022, and the Board of Directors is very close to deciding on who our new CEO will be. More to come on this next meeting.**
- CA-3) Minutes for Public Policy/Community Advisory Committee meeting on December 14, 2021
APPROVED
Hefner-Sanchez: 11 Ayes; 2 Absent – Wood, Ochoa
- CA-4) Report on March 2022 Medi-Cal Membership Enrollment
RECEIVED AND FILED
Hefner-Sanchez: 11 Ayes; 2 Absent – Wood, Ochoa
- CA-5) Report on KFHC Grievance Summary for fourth quarter ending December 31, 2021
RECEIVED AND FILED
Hefner-Sanchez: 11 Ayes; 2 Absent – Wood, Ochoa
- CA-6) Report on Health Education for fourth quarter ending December 31, 2021
RECEIVED AND FILED
Hefner-Sanchez: 11 Ayes; 2 Absent – Wood, Ochoa
- CA-7) Report on Population Health Management for fourth quarter ending December 31, 2021
RECEIVED AND FILED
Hefner-Sanchez: 11 Ayes; 2 Absent – Wood, Ochoa

- 8) Proposed Appointments to the Kern Health Systems Public Policy/Community Advisory Committee
APPROVED
Hefner-Hernandez Colin: 11 Ayes; 2 Absent – Wood, Ochoa
- **Caitlin Criswell will be stepping down from the PP/CAC committee effective after today's meeting. She has been hired on at KHS as a Member Services Representative.**
 - **Rukiyah Polk was voted on as a new member of the PP/CAC committee effective today. She has been a KHS member for 1 ½ years.**
 - **Kaelsun Singh Tyiska was voted on as a new member of the PP/CAC committee effective today. He has been a KHS member for 7 ½ years.**
- 9) Report on KFHC Grievances for 4th Quarter ending December 31, 2021
RECEIVED AND FILED
Garcia-Louey: 11 Ayes; 2 Absent – Wood, Ochoa
- 10) Report on KFHC COVID-19 Vaccination Plan
RECEIVED AND FILED
Louey-Garcia: 11 Ayes; 2 Absent – Wood, Ochoa
- **Michelle Bravo asked the percentage of people who received a booster shot.**
 - **Quon Louey asked if we have improved our minority percentages.**
 - **Note: The requested information above was sent to all committee members on 04/07/22.**
- 11) Report on KFHC Fall 2022 Member Newsletter
RECEIVED AND FILED
Hefner-Hernandez Colin: 11 Ayes; 2 Absent – Wood, Ochoa
- **Alex Garcia suggested new idea to get member's feedback on the newsletters, such as adding a QR code on the newsletter itself.**
 - **Cecelia Hernandez-Colin suggested covering the topic of hemorrhoids in a future newsletter.**
 - **Beatriz Basulto suggested adding more information for the elderly population. For example, how to get the most out of their benefits, and articles of how to take care of themselves.**

**Meeting adjourned by Louie Iturriria, Director of Marketing and Public Relations,
at 11:58 AM to June 28, 2022 at 11:00 AM.**

KHS JUNE 2022 ENROLLMENT:

Medi-Cal Enrollment

As of June 1, 2022, Medi-Cal enrollment is 215,495 which represents an increase of 0.6% from May enrollment.

Seniors and Persons with Disabilities (SPDs)

As of June 1, 2022, SPD enrollment is 16,360, which represents an increase of 1.2% from May enrollment.

Expanded Eligible Enrollment

As of June 1, 2022, Expansion enrollment is 88,357, which represents an increase of 1.9% from May enrollment.

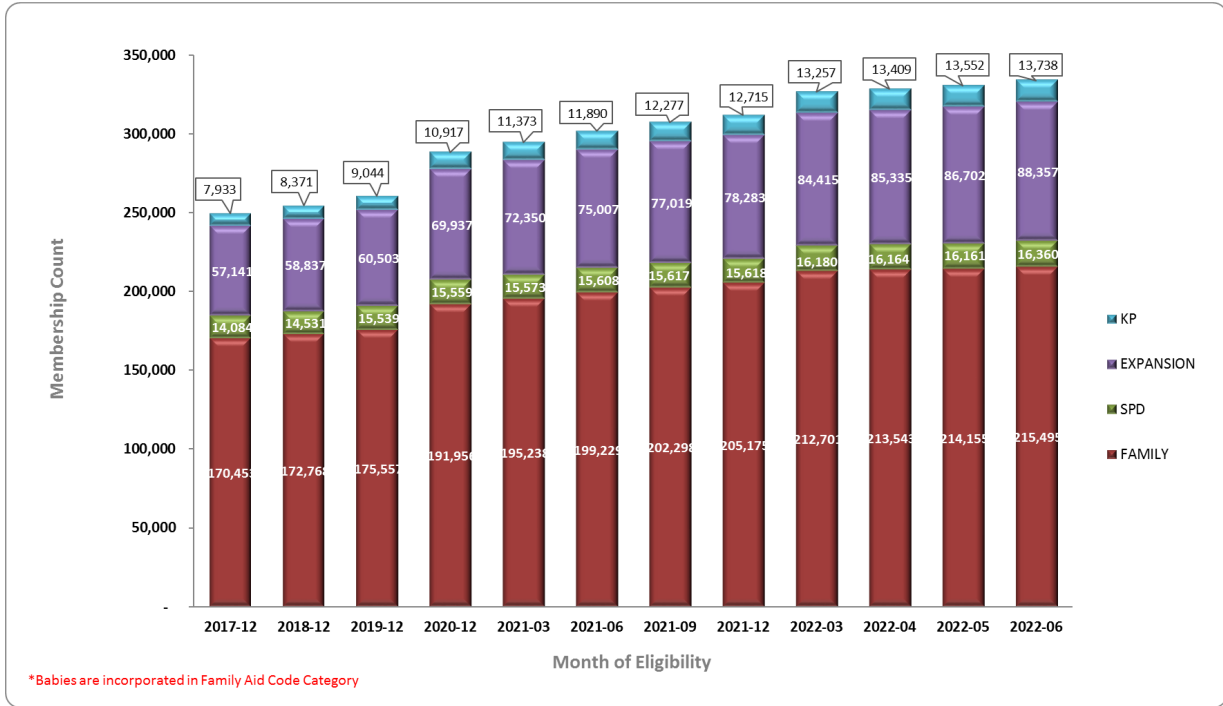
Kaiser Permanente (KP)

As of June 1, 2022, Kaiser enrollment is 13,738 which represents an increase of 1.4% from May enrollment.

Total KHS Medi-Cal Managed Care Enrollment

As of June 1, 2022, total Medi-Cal enrollment is 333,950 which represents an increase of 1.0% from May enrollment.

Membership as of Month of Eligibility	FAMILY	SPD	EXPANSION	KP	BABIES	Member Total
2017-12	170,006	14,084	57,141	7,933	447	249,611
2018-12	172,290	14,531	58,837	8,371	478	254,507
2019-12	175,128	15,539	60,503	9,044	429	260,643
2020-12	191,549	15,559	69,937	10,917	407	288,369
2021-03	194,852	15,573	72,350	11,373	386	294,534
2021-06	198,833	15,608	75,007	11,890	396	301,734
2021-09	201,782	15,617	77,019	12,277	516	307,211
2021-12	204,729	15,618	78,283	12,715	446	311,791
2022-03	212,278	16,180	84,415	13,257	423	326,553
2022-04	213,083	16,164	85,335	13,409	460	328,451
2022-05	213,706	16,161	86,702	13,552	449	330,570
2022-06	215,072	16,360	88,357	13,738	423	333,950



Enrollment Update:

The U.S. Department of Health & Human Services’ public health emergency order remains in place. As a result, the Department of Health Care Services continues to freeze Medi-Cal redeterminations. Thus, the Kern County Department of Human Services’ suspension of their “automated discontinuance process” for Medi-Cal Redeterminations continues. The automated discontinuance process was in place locally prior to the public health emergency order when Medi-Cal beneficiaries did not complete the Annual Eligibility Redetermination process. However, Kern DHS continues working new Medi-Cal applications, reenrollments, successful renewals, additions, etc. (anything with a positive outcome).



To: Public Policy/Community Advisory Committee Meeting

From: Nate Scott

Date: June 29, 2022

Re: Executive Summary for 1st Quarter 2022 Grievance Summary Report

Background

Executive Summary for the 1st Quarter Grievance Summary Report:

The Grievance Summary Report supports the high-level information provided on the Operational Report and provides more detail as to the type of grievances KHS receives on behalf of our members. You will notice that for 2022, we have added the new classification of Discrimination to our reporting. As part of the regulatory requirement for Discrimination grievances, all cases processed with this classification are forwarded to the Department of Health Care Services (DHCS) Office of Civil Rights within ten days of the grievance closure.

Kaiser Permanente Grievances and Appeals

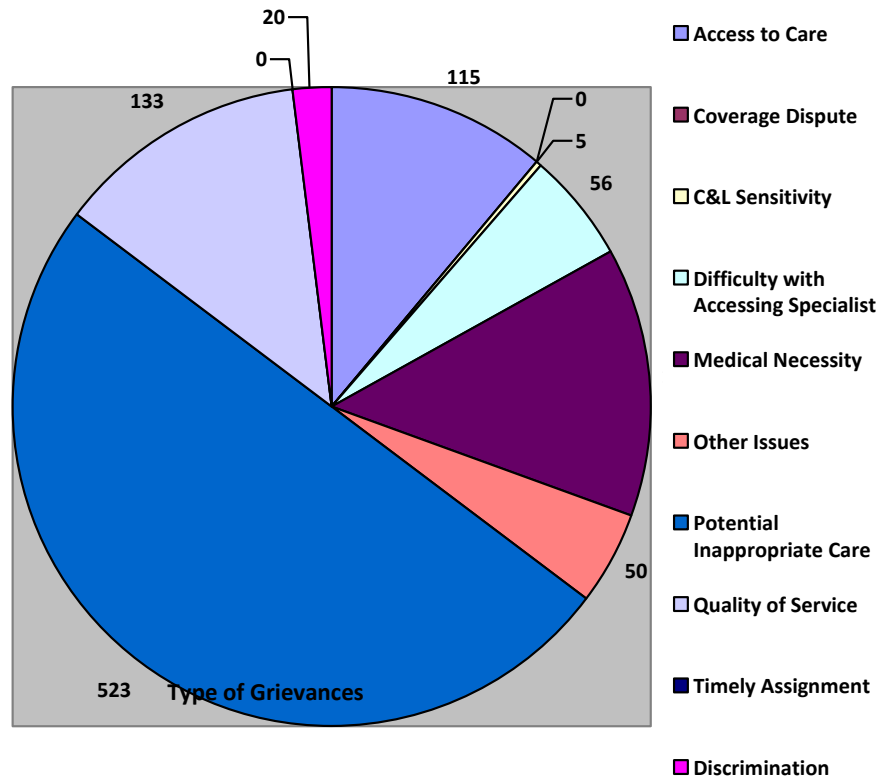
This report also provides insight into the type of grievance and appeals received on behalf of KHS members assigned to Kaiser Permanente. KHS receives Kaiser's aggregate reporting data, but currently does not have the specific breakdown of the data to report to the committee. We are currently working with our reporting team to retrieve the data from the DHCS report to provide more information on the type of grievances processed for our members assigned to Kaiser.

Requested Action

Receive and File

1st Quarter 2022 Grievance Summary

Issue	Number	In Favor of Health Plan	Under Review by Q.I	In favor of Enrollee	Still under review
Access to care	115	68	0	47	0
Coverage dispute	0	0	0	0	0
Cultural and Linguistic Sensitivity	5	2	0	3	0
Difficulty with accessing specialists	56	27	0	29	0
Medical necessity	142	98	0	44	0
Other issues	50	39	0	11	0
Potential Inappropriate care	523	157	358	8	0
Quality of service	133	98	0	35	0
Timely assignment to provider	0	0	0	0	0
Discrimination	20	19	0	1	0



KHS Grievances per 10,000 members = 9.615/month LHPC Averages 3.10-10.120

During the first quarter of 2022, there were one thousand forty-four standard grievances and appeals received. One hundred seventy-eight cases were closed in favor of the Enrollee. Five hundred and eight cases were closed in favor of the Plan. Three hundred fifty-eight cases have closed and are under review by the KHS Quality Improvement Department. Of the one thousand forty-four standard grievances and appeals received, nine hundred fifty-eight cases closed within thirty days; eighty-six cases were pending and closed after thirty days.

1st Quarter 2022 Grievance Summary

Access to Care

There were one hundred fifteen grievances pertaining to access to care. Sixty-eight closed in favor of the Plan. Forty-seven cases closed in favor of the Enrollee. The following is a summary of these issues:

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

Thirty-four members complained about the wait time to be seen for a Primary Care Provider (PCP) appointment. Twenty cases closed in favor of the Plan after the responses indicated the members were seen within the appropriate wait time for a scheduled appointment or the members were at the offices to be seen as a walk-in, which are not held to Access to Care standards. Fourteen cases closed in favor of the Enrollee after the responses indicated the members were not seen within the appropriate wait time for a scheduled appointment.

Thirty members complained about the telephone access availability with their Primary Care Provider (PCP). Nineteen cases closed in favor of the Plan after the responses indicated the members were provided with the appropriate telephone access availability. Eleven cases closed in favor of the Enrollee after the responses indicated the members may not have been provided with the appropriate telephone access availability.

Ten members complained about a provider not submitting a referral authorization request in a timely manner. Four cases closed in favor of the Plan after it was determined the referral authorization request had been submitted in a timely manner. Six cases closed in favor of the Enrollee after it was determined the referral authorization request may not have been submitted in a timely manner.

One member complained about physical access availability with their Primary Care Provider (PCP). This case closed in favor of the Plan after it was determined the provider's office does have wheelchair access.

Coverage Dispute

There were no grievances pertaining to a Coverage Dispute issue.

Cultural and Linguistic Sensitivity

Five members complained about the lack of available interpreting services to assist during their appointments. Three cases closed in favor of the Enrollee after the

1st Quarter 2022 Grievance Summary

responses from the providers indicated the members may not have been provided with the appropriate access to interpreting services. Two cases closed in favor of the Plan after the responses from the providers indicated the members were provided with the appropriate access to interpreting services.

Difficulty with Accessing a Specialist

There were fifty-six grievances pertaining to Difficulty Accessing a Specialist. Twenty-seven cases closed in favor of the Plan. Twenty-nine cases closed in favor of the Enrollee. The following is a summary of these issues:

Eighteen members complained about the lack of available appointments with a specialist. Nine cases closed in favor of the Plan after the responses indicated the members were provided the appropriate access to specialty care based on Access to Care Standards. Nine cases closed in favor of the Enrollee after the responses indicated the members may not have been provided with the appropriate access to care based on the Access to Care Standards for specialty appointments.

Six members complained about the wait time to be seen for a specialist appointment. Two cases closed in favor of the Plan after the responses indicated the offices provided appropriate wait time for an appointment based on Access to Care Standards. Four cases closed in favor of the Enrollee after the responses indicated the members may not have been provided with the appropriate wait time for a scheduled appointment based on Access to Care Standards.

Ten members complained about the telephone access availability with a specialist office. Five cases closed in favor of the Plan after the responses indicated the members were provided with the appropriate telephone access availability. Five cases closed in favor of the Enrollee after the responses indicated the members may not have been provided with the appropriate telephone access availability.

Fifteen members complained about a provider not submitting a referral authorization request in a timely manner. Seven cases closed in favor of the Plan after it was determined the referral authorization request had been submitted in a timely manner. Eight cases closed in favor of the Enrollee after it was determined the referral authorization request may not have been submitted in a timely manner.

Seven members complained about the availability with scheduling Non-Emergency Medical Transportation. Four of the cases closed in favor of the Plan after the responses determined the member received the appropriate scheduling from the transportation vendor. Three cases closed in favor of the Enrollee after the response indicated the member may not have been provided with the appropriate scheduling from the transportation vendor.

Medical Necessity

There were one hundred forty-two appeals pertaining to Medical Necessity. Ninety-eight cases were closed in favor of the Plan. Forty-four cases closed in favor of the Enrollee. The following is a summary of these issues:

1st Quarter 2022 Grievance Summary

One hundred forty-one members complained about the denial or modification of a referral authorization request. Ninety-six 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 for the requested specialist or DME item; therefore, the denials were upheld. One case closed in favor of the Plan and was modified. Forty-four were closed in favor of the Enrollee as it was determined medical necessity was met and the denials were overturned and approved.

One member complained about the denial or modification of a TAR. One case 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; therefore, the denial was upheld.

Other Issues

There were fifty grievances pertaining to Other Issues that are not otherwise classified in the other categories. Thirty-nine cases were closed in favor of the Plan after the responses indicated appropriate service was provided. Eleven cases closed in favor of the Enrollee after the responses indicated appropriate service may not have been provided.

Potential Inappropriate Care

There were five hundred twenty-three grievances involving Potential Inappropriate Care issues. These cases were forwarded to the Quality Improvement (QI) Department for their due process. Upon review, one hundred fifty-seven cases were closed in favor of the Plan, as it was determined a quality-of-care issue could not be identified. Eight cases were closed in favor of the Enrollee as a potential quality of care issue was identified and appropriate tracking or action was initiated by the QI team. Three hundred fifty-eight cases are still pending further review with QI.

Quality of Service

There were one hundred thirty-three grievances involving Quality of Service issues. Ninety-eight cases closed in favor of the Plan after the responses determined the members received the appropriate service from their providers. Thirty-five cases closed in favor of the enrollee after the responses determined the members may not have received the appropriate services.

Timely Assignment to Provider

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

Discrimination

There were twenty grievances pertaining to Discrimination. Nineteen cases closed in favor of the Plan as there was no discrimination found. One case closed in favor of the Enrollee after the response determined the member may not have received the appropriate service. All grievances related to Discrimination, are forwarded to the DHCS Office of Civil Rights upon closure.

1st Quarter 2022 Grievance Summary

Kaiser Permanente Grievances and Appeals

During the first quarter of 2022, there were ninety-nine grievances and appeals received by KFHC members assigned to Kaiser Permanente.

Access to Care

There were eleven grievances pertaining to Access to Care.

Coverage Dispute

There were thirteen appeals pertaining to Coverage Dispute.

Medical Necessity

There were nine appeals pertaining to Medical Necessity.

Quality of Care

There were four grievances pertaining to Quality of Care.

Quality of Service

There were sixty-two grievances pertaining to a Quality of Service.

**Kern Health Systems
Population Health Management Department
Executive Summary
1st Quarter 2022**

PHM Staffing Update

- Currently KHS is recruiting for a PHM Medical Director and Director of Population Health Management.

COVID-19 Update

- KHS staff are working remotely until potentially Q1 2022
- Plans are in place for many of our Employees to return to the office in mid-August tentatively.
- The office will be open to members on July 11, 2022.
- Company wide effort promoting COVID-related services

Population Health Management

- KHS continues to work on CalAIM initiatives. PHM is working with outside consultants, for Population Health program design and development, which aligns with regulatory mandates and evidence-based practice
- PHM programs that are currently being developed and revamped, includes Major Organ Transplant (MOT), Transition of Care (TOC), Potentially Preventable Admissions (PPA), Heart Failure Program, Diabetes Program, COPD Program, and Palliative Care Program.
- Focus is on risk stratifying the entire KHS population and ensuring members are receiving the right level of care
- Care coordination services will be provided through defined departments and special programs.
- Includes an emphasis on Social Determinants of Health (SDoH).

Please see the following report for statistical measures for the Case Management department during Q1 2022.

Thank you,

Diane Lay, PHM Manager of Case Management, RN, CCM

**KERN HEALTH SYSTEMS
CASE MANAGEMENT DEPARTMENT QUARTERLY REPORT**

Report Date: April 7th, 2022

Reporting Period: January 1st, 2022- March 31st, 2022

During the months of January thru March, a total of 2,069 members were managed by the Case Management Department.

Episode Total (including previous members)	Closed Episodes	Open Episodes	Referral Episodes	Total
Nurse Case Manager Episodes	1,090	479	22	1,591
Social Worker Case Manager Episodes	280	194	4	478

Total 2,069

New Episodes January thru March 2022	Closed Episodes	Open Episodes	Referral Episodes	Total
Nurse Case Manager Episodes Assigned	757	365	80	1,202
Social Worker Case Manager Episodes Assigned	189	83	189	326

Total 1,528

Severity Levels for Managed Episodes -939

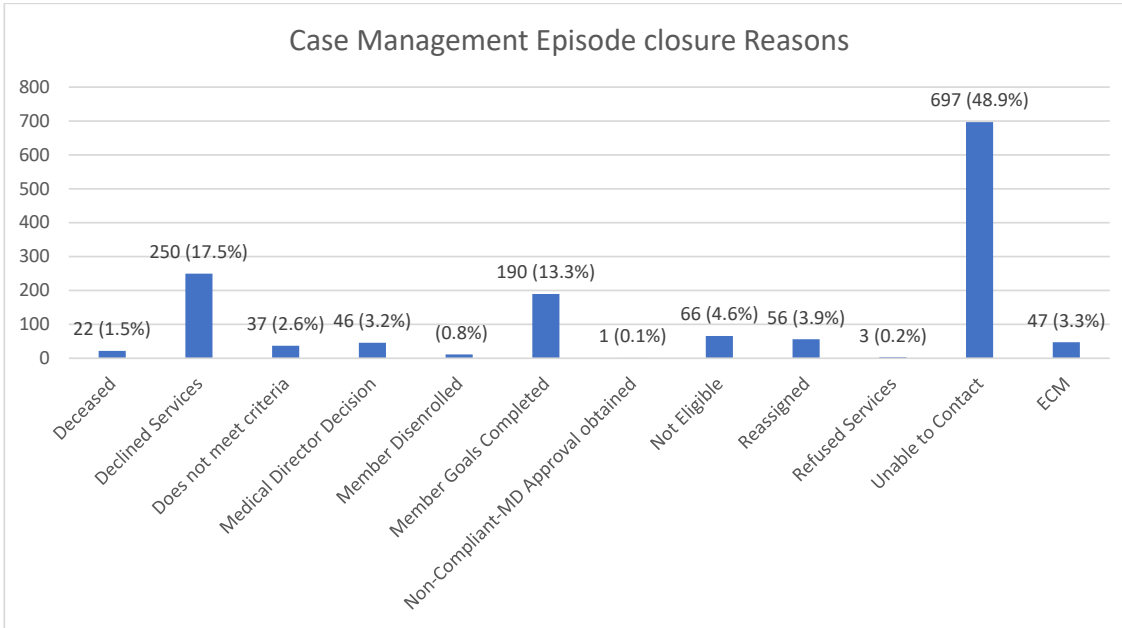
Episode Severity Level	Severity- Critical	Severity- High	Severity- Medium	Severity- Low
Case Management	1 (0.1%)	89 (13.1%)	507 (74.8%)	81 (11.9%)
Behavioral Health Case Management	0 (0%)	4 (1.5%)	247 (94.6%)	10 (3.8%)
Total Combined	1 (0.1%)	93 (9.9%)	754 (80.3%)	91 (9.7%)

MOT- CM Episode Total	Closed Episodes	Open Episodes	Referral Episodes	Total
MOT-CM Episodes	53	122	0	175

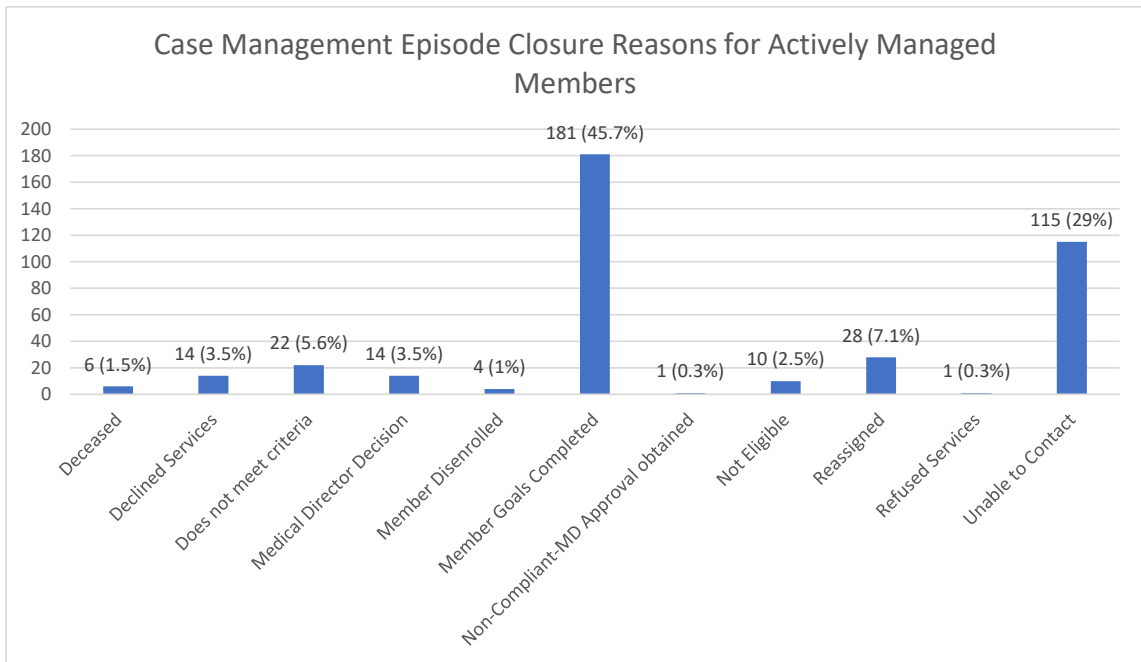
Episode Source	Social Worker Case Manager Episodes	Percentage	Nurse Case Manager Episodes	Percentage	Episodes Combined	Percentage Combined
ACG	92	19.2%	929	58.4%	1021	49.3%
All Internally Generated Internal KHS Referral	1	0.2%	0	0.0%	1	0.0%
All Internally Generated Complex Case Management	4	0.8%	177	11.1%	181	8.7%
All Internally Generated Disease Management	0	0.0%	2	0.1%	2	0.1%
All Internally Generated Grievance	2	0.4%	4	0.3%	6	0.3%
All Internally Generated Hospital Discharge	13	2.7%	112	7.0%	125	6.0%
All Internally Generated Medical Director	1	0.2%	42	2.6%	43	2.1%
All Internally Generated Member Request	16	3.3%	35	2.2%	51	2.5%
All Internally Generated UM Generated	0	0.0%	5	0.3%	5	0.2%
BH Mental Health	38	7.9%	0	0.0%	38	1.8%
CM DM HE Facility Based Social Worker	0	0.0%	1	0.1%	1	0.0%
CM DM HE Health Education	2	0.4%	0	0.0%	2	0.1%
CM DM HE Member Services	33	6.9%	4	0.3%	37	1.8%
CM DM HE Provider	2	0.4%	37	2.3%	39	1.9%
CM DM High ER Utilizer	1	0.2%	0	0.0%	1	0.0%
Critical High Risk SPD	4	0.8%	0	0.0%	4	0.2%
DM Facility Nurse	2	0.4%	0	0.0%	2	0.1%
DM HE Social Worker Case Management	2	0.4%	2	0.1%	4	0.2%
HE Member Portal	0	0.0%	1	0.1%	1	0.0%
HE Postpartum Claim	15	3.1%	0	0.0%	15	0.7%
HE Prenatal Claim	39	8.2%	0	0.0%	39	1.9%
HHP Distributive Model	0	0.0%	1	0.1%	1	0.0%
High Risk SPD	211	44.1%	81	5.1%	292	14.1%
Non-Contract Physician/Provider	0	0.0%	1	0.1%	1	0.0%

UM Authorization	0	0.0%	157	9.9%	157	7.6%
Totals	478	100.0%	1591	100.0%	2069	100.0%

A total of 1,426 Episodes were closed during the Months of January thru March 2022



A total of 396 Episodes were closed during the Months of January thru March 2022 that were Actively Managed

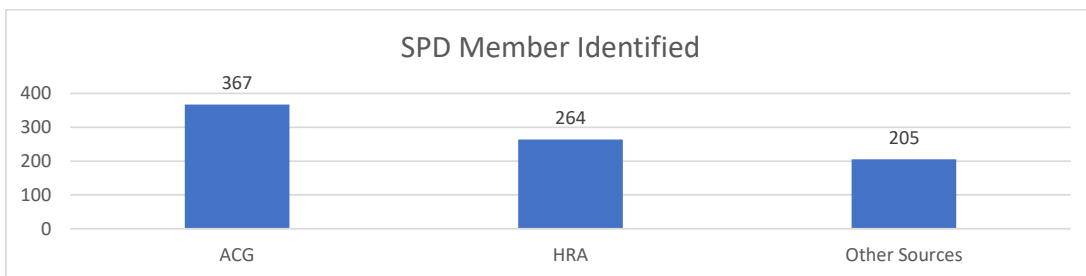


Seniors and Persons with Disabilities (SPDs):

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 40 percent (836) of the Complex Group in January thru March 2022.

The John Hopkins Predictive Modeler identified SPD's represent 43.9% percent of the SPD's identified in the Complex Group in January thru March 2022. HRA identified SPD members represent 31.6% and other sources of SPD members represent 24.5%.



SPD Health Risk Assessment Information:

KHS Public Policy - Community Advisory Committee Meeting June 29, 2022

During January thru March, a total of 3,186 members were identified for an outside vendor to contact for completion of a Health Risk Assessment.

HRA Summary	Metric	Count	Percentage	Per Day
	Completed (or 2 calls attempted)	3,186	100%	51
	Partial HRA	210	7%	3
	Full HRA	345	11%	6
	Opted out	78	2%	1
	High Risk members	190	6%	3
	Critical Members	27	1%	0
	Members Contacted	3,127	98%	50
	Call Attempts	7,314		
	Total Surveys Attempted	555		
	Avg # of Calls Per Member	2		
	Avg # Calls per Day	118		
	Avg # of Questions Answered	23		
Sent: 3197; Received: 3186				

Members Closed and Referred to ECM	Behavioral Health Case Management Episodes	Case Management Episodes
ECM	8	4

Managed Episodes with Hospital Admits within 30 days after Episode Closure	Total
Social Worker Case Management Episodes	2
Nurse Case Management Episodes	20
Percentage of Closed cases Admitted	.007%

Assessments/Plan of Care	Behavioral Health Case Management Episodes	Case Management Episodes	Total
Assessments	134	358	492

Plan of Care	127	351	478
--------------	-----	-----	-----

Notes Completed

Note Source	Behavioral Case Management Episodes	Case Management Episodes
Activity Note	2465	4574
Add Episode Note	266	619
Care Plan Problem Note	425	935
Change Status Note	889	3114
Edit Episode Note	0	287
Episode Note	97	451
Goals	403	1139
Interventions	706	883

Letters

Letter Template	Behavioral Health Case Management Episodes	Case Management Episodes
Appointment Letter English	130	138
Appointment Letter Spanish	20	51
Consent Form English	4	46
Consent Form Spanish	3	37
Discharge English	57	132
Discharge Spanish	10	48
Educational Material	117	348
Mental Health Alert to PCP	1	0
Unable to Contact	284	982
Welcome Letter Bilingual	118	337

Activities Completed

Activities Completed	Total
CMA's	5,539
Nurses	3,051
Social Workers	738

Activity Type

Activity Type	Behavioral Health Case Management Episodes	Case Management Episodes
Clinical Engagement	0	57
Education	1	100
Fax	161	263
Golden TOC Program	0	1
Letter Contact	573	1223
Member Services	46	97
New BH-CM Referral	0	1
Notification	0	71
Outreach	0	166
Phone Call	1716	4846
Program Disenrollment Status	0	4
Program Referral	0	1

Activity Name

Activity Name	Behavioral Health Case Management Episodes	Case Management Episodes
Appointment Reminder Calls	171	253
Close Episode for CEG	0	30
Close Episode for UTC	34	97
Community Resources	10	63
Contact Member	438	657
Contact Pharmacy	6	19
Contact Provider	180	633
COVID-19 Education	2	58
COVID-19 Vaccine Education	79	153
Create Work Item	53	113
HHP	0	2
Homeless	0	3
ICT	26	59
Incoming Call	1	24
Inpatient Discharge Follow Up	34	261
Language Line	94	542
Mail Appointment Letter	151	154
Mail Authorization	0	2
Mail Consent Letter	8	76
Mail Discharge Letter	68	174

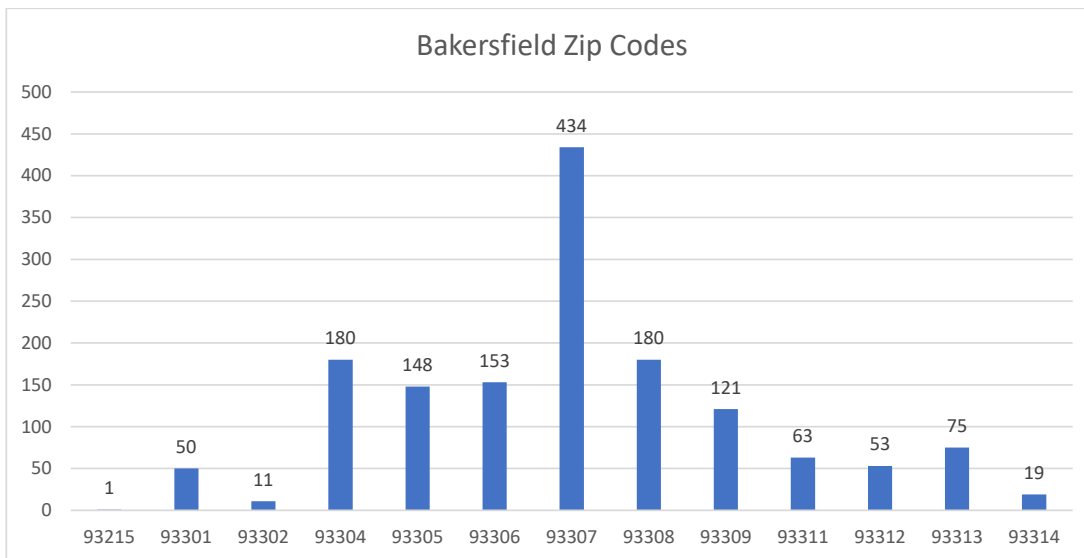
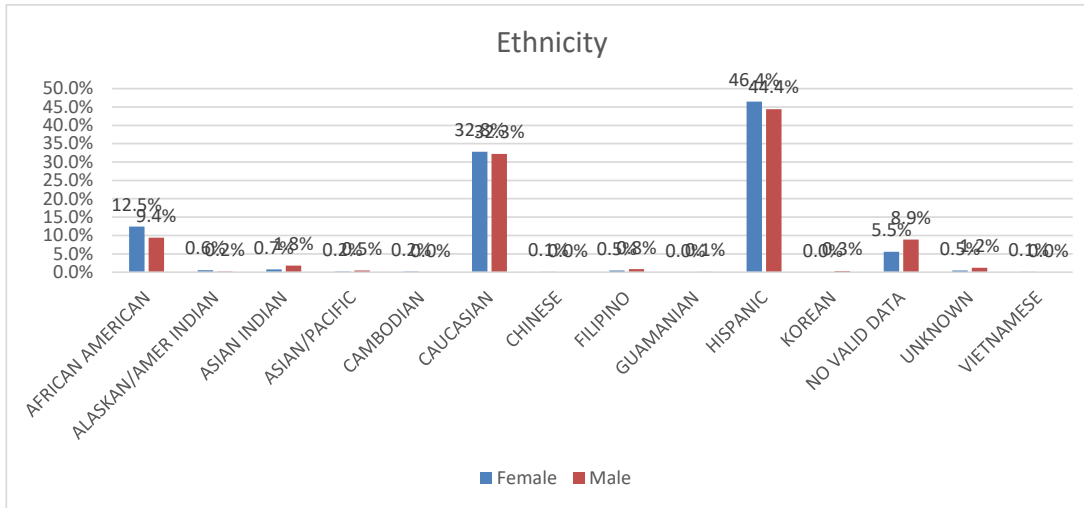
Mail Educational Material	112	334
Mail Pill Box	23	60
Mail Provider Directory	5	3
Mail Unable to contact letter	87	285
Mail Urgent Care Pamphlet	2	0
Mail Welcome Letter	62	99
Medication Review	0	48
Mental Health Alert to PCP	1	0
MOT Eval Phase - CMA Outreach	0	160
MOT Evaluation Phase	0	15
MOT Listed Phase	0	6
MOT Listed Phase - CM Outreach	0	30
MOT Listed Phase - CMA Outreach	0	62
MOT Post Transplant Phase - CM Outreach	0	26
MOT Post-Transplant Phase	0	10
MOT Transplant Phase	0	1
Plan of care	127	173
Referral for BH Case Management	0	1
Request Medical Records	50	183
Return Mail	8	11
Schedule Physician Appointment	176	203
Send educational material related to the member's self-management treatment plan.	1	0
Transportation	38	140
Verbal consent to be received	451	1607

During the months of January thru March, 94% of the members managed were 65 years of age or younger.

Age	<18	18-40	41-65	>65	Total
Nurse Case Manager Episodes	88	351	1,065	87	1,591
Social Worker Episodes	44	162	244	28	478

Of the 2,069 members managed during the months of January thru March, most members were female at 52%.

The majority of members' ethnicity was Hispanic at 46%.



Outlying Areas

City	Total
ARVIN	39
BODFISH	5
BORON	4
BUTTONWILLOW	3
CALIF CITY	38
DELANO	77
EDISON	1
FELLOWS	1
FRAZIER PARK	8

INYOKERN	4
KEENE	1
KERVILLE	1
LAKE ISABELLA	18
LAMONT	35
LANCASTER	1
LEBEC	2
LEMON GROVE	1
LOS ANGELES	1
LOST HILLS	7
MARICOPA	5
MC FARLAND	28
MC KITTRICK	2
MOJAVE	9
N LAS VEGAS	1
N/A	8
NORTH EDWARDS	1
ONYX	1
PORTERVILLE	1
RIDGECREST	37
ROSAMOND	17
SACRAMENTO	1
SANTA CLARITA	1
SHAFTER	56
SN BERNRDNO	1
STALLION SPGS	1
TAFT	48
TEHACHAPI	53
VISALIA	1
WASCO	43
WELDON	8
WOFFORD HEIGHTS	1
WOFFORD HTS	8
Unknown	2



To: Public Policy/Community Advisory Committee Meeting

From: Nate Scott

Date: June 29, 2022

Re: Executive Summary for 1st Quarter 2022 Operational Board Update - Grievance Report

Background

Executive Summary for 1st Quarter 2022 Operational Board Update - Grievance Report:

When compared to the previous four quarters, we have identified the following significant trends as they relate to the Grievances and Appeals received during the 1st Quarter, 2022.

- The reduction in appeals can be attributed to the implementation of Medi-Cal Rx, effective January 1, 2022.
- KHS membership grew substantially in January. The Plan received approximately 12,000 new and re-enrolled members. With the increase in membership, it is expected that grievances, such as Quality of Care and Service complaints, will increase.

As a reminder, all dissatisfactions as it pertains to Plan benefits or services must be captured as a grievance.

Requested Action

Receive and File

1st Quarter 2022 Grievance Report

Category	1 st Quarter 2022	Status	Issue	Q4 2021	Q3 2021	Q2 2021	Q1 2021
Access to Care	169	Green	Appointment Availability	131	148	90	77
Coverage Dispute	0	Green	Authorizations and Pharmacy	0	0	0	0
Medical Necessity	138	Yellow	Questioning denial of service	266	329	308	308
Other Issues	41	Green	Miscellaneous	36	18	20	11
Potential Inappropriate Care	479	Yellow	Questioning services provided. All cases forwarded to Quality Dept.	256	164	183	156
Quality of Service	125	Yellow	Questioning the professionalism, courtesy and attitude of the office staff. All cases forwarded to PR Department	55	53	31	8
Discrimination (New Category)	15	Blue	Alleging discrimination based on the protected characteristics				
Total Formal Grievances	967	Green		744	712	632	560
Exempt	1404	Green	Exempt Grievances-	1431	1520	1570	1179
Total Grievances (Formal & Exempt)	2371	Green		2175	2232	2202	1739



KHS Grievances per 10,000 members = 8.826/month LHPC Averages 3.10-10.120

Additional Insights-Formal Grievance Detail

Issue	2022 1 st Quarter Grievances	Upheld Plan Decision	Further Review by Quality	Overturned Ruled for Member	Still Under Review
Access to Care	105	42	0	36	27
Coverage Dispute	0	0	0	0	0
Specialist Access	64	21	0	23	20
Medical Necessity	138	67	0	31	40
Other Issues	41	23	0	7	11
Potential Inappropriate Care	479	133	338	8	0
Quality of Service	125	60	0	19	46
Discrimination	15	9	0	1	5
Total	967	355	338	125	149



To: PP/CA Committee

From: Louis Iturriria

Date: June 29, 2022

Re: Marketing Department Report

Background

Current Kern Health Systems Chief Executive Officer Doug Hayward will retire effective July 6, 2022. The KHS Governing Board appointed Emily Duran as Chief Executive Officer of Kern Health Systems.

In recognition of the essential role that community organizations have in our health care delivery system, the Kern Family Health Care Community Grant Program financially aids and encourages innovative efforts to bring beneficial services to our community. Community organizations that serve Medi-Cal beneficiaries and low-income populations are eligible to apply for funding, grant awards range from \$1,000 – \$2,000. This is the 7th year of our Community Grant Program, and we received a total of 76 applications. This year we approved 72 of the grant applications totaling \$141,815.00.

Requested Action

Receive and File

Marketing Department Report



KHS Chief Executive Officer Transition

Current Chief Executive Officer (CEO)

- Doug Hayward, current Kern Health Systems CEO, announced his retirement effective July 6th, 2022.
- Mr. Hayward has served as CEO since January 2012.
- During his leadership:
 - Kern Health Systems through Kern Family Health Care, grew approximately 200% to where today we serve over 330,000 Kern residents
 - Successfully guided KHS through many changes Medi-Cal health plans had to adopt
 - Positioned us to take on the many new challenges facing us in providing expanded care to our community



KHS Chief Executive Officer Transition

New Chief Executive Officer (CEO)

- Emily Duran received unanimous support from the KHS Board of Directors.
- Mrs. Duran has worked for Kern Health Systems in various executive roles since 2013.
- Previously, Emily worked for Clinica Sierra Vista, another local Kern County institution. She is a proud alumni of Cal State University Bakersfield.
- She's the daughter of immigrant farmworkers, raised in rural Delano, who has experienced the struggles of our hard-working families.
- She has a deep-rooted commitment to the mission of improving the health status of our most vulnerable community residents and a vision to bring Kern Health Systems to the next level of quality health care.



2022 KFHC Community Grant Program

- In recognition of the essential role that community organizations have in our health care delivery system, our Community Grant Program financially aids and encourages innovative efforts to bring beneficial services to our community.
- Community organizations that serve Medi-Cal beneficiaries and low-income populations are eligible to apply for funding, grant awards range from \$1,000 – \$2,000.
 - We accept grant applications from February 1st to mid-March of each year
- This year marks the 7th Year of our Community Grant Program.
 - We received a total of 76 applications - 26 were new organizations that haven't applied in the past.
 - We approved 72 of the grant applications totaling \$141,815.00.
 - Funded programs serve the Bakersfield area as well as outlying Kern communities (1/3 of the programs serve rural Kern communities outside of Bakersfield).

2022 KFHC Community Grant Program

Some of the programs we are proudly supporting:

- **Alzheimer's Disease Association of Kern County** – *ADAKC Managed Transportation Program* – This project reduces transportation barriers for a minimum of 20 program participants by providing door to door access to the adult day program.
- **Bakersfield Senior Center** – *Diabetes Empowerment and Education Program* – The quarterly project is a 6-week 12 hour education course facilitated by a certified Peer Instructor, providing access to Wellness and Health education to diabetic seniors or borderline diabetics. The project ends with a health clinic, guided grocery store tour by a registered dietitian and education with a local pharmacist. The training provides empowerment of self-care, to decrease related complications.
- **Bartz-Altadonna Community Health Center** – *Hypertension Management* – This provider has identified 42 patients to date, with a Hypertension diagnosis not managed in their California City clinic. This project would purchase 58 blood pressure cuffs for patients to keep to monitor their blood pressure. They will also provide classes to help control hypertension.



2022 KFHC Community Grant Program

Some of the programs we are proudly supporting:

- **CAPK - Oasis Family Resource Center** – *Essentials for the Oasis Family Resource Center* – Provide essential/emergency items to low-income families in the city of Ridgecrest, as well as homeless individuals. Items include gas cards and bus passes for clients to access medical appointments and job interviews; hygiene products; diapers; baby food; and other common household items.
- **No Sister Left Behind- 5k/10k Walk/Run and Health Fair Event** - Project focused on physical and mental health well-being aspects by providing an event focused on education and information of the importance of achieving good physical and mental health targeting the African American community.
- **Riverstone Wellness** – *Community Yoga for Expectant & New Parents* – Offer in-person and virtual access to an 8-week Community Yoga Program for 16 or more expectant and new parents to gain strength, calm and resiliency during a life-changing time; get relief from the physical discomforts of pregnancy and postpartum body changes; and build confidence and connection with others moving through childbirth and early parenting.

2022 KFHC Community Grant Program

65 Community Organizations We Are Proud To Support

Adventist Health, Alliance Against Family Violence & Sexual Assault, Alzheimer's Disease Association of Kern County, Applecore, Arts Council of Kern, Bakersfield Angels, Bakersfield College, Bakersfield Museum of Art, Bakersfield Pregnancy Center, Bakersfield Senior Center, BARC, Bartz-Altadonna Community Health Center, Be Finally Free, Bakersfield Homeless Center, Bike Bakersfield, Blessing Corner, Buttonwillow Family Resource Center, Community Action Partnership of Kern, CASA of Kern County, Children First, Church without Walls, Comunidades Aliadas Tomando Accion, Creative Crossing, Clinica Sierra Vista, Delta Zeta Tau Alumni Foundation, Kern County Department of Human Services, Dignity Health (Community Health Initiative), Exceptional Family Center, Flood , Girl Scouts of Central California South, Greenfield Family Resource Center, Heather Berry Counseling, Independent Living Center, JJ's Legacy, Kern County Network for Children, Kern Autism Network, Kern County Cancer Foundation, Kern Dance Alliance, Kern River Valley Family Resource Center, Kern Valley Aquatics Program, Kern Valley Hospital Foundation, Links for Life, Lamont/Weedpatch Family Resource Center, Make A Wish Foundation, Mansion of Life, Mission of Kern, Mountain Community Family Resource Center, NAACP, NAMI, No Sister Left Behind, Oildale Community Action Team, OMNI Family Health, Orlie's Shoes Drive, Riverstone Wellness, Salvation Army – Tehachapi, Self Help Enterprises, Shafter Family Resource Center, Stay Focused Ministries Inc., Stewards, The League of Dreams, Transitional Youth Mobilizing for Change, United Way, Upside Academy Inc., Women's Center High Desert, Youth 2 Leaders Educations Foundation



Thank You





To: Public Policy/Community Advisory Committee

From: Isabel Silva, MPH

Date: June 29, 2022

Re: 2022 1st Quarter Health Education, Cultural & Linguistics Activities Report & 2022 School Partnership Efforts

Background

KFHC' contract with the Department of Health Care Services (DHCS) requires that it implements and maintains a health education system that includes programs, services, functions, and resources necessary to provide health education, health promotion and patient education for all members. The contract also requires that KHS have a Cultural and Linguistic Services Program and that KHS monitors, evaluates and takes effective action to address any needed improvement in the delivery of culturally and linguistically appropriate services.

Since 2015, KFHC has been working with public schools in Kern County to implement wellness programs in an effort to engage students and stakeholders in activities that promote and support health. In February 2022, KFHC opened its 4th cycle of grant funding to schools to continue implementing wellness programs. Additionally in January 2022, the DHCS launched the Student Behavioral Health Incentive Program to increase access behavioral health services for children in Tk-12th grade.

Enclosed is the quarterly health education report summarizing all health education, cultural and linguistic activities performed during the 1st quarter of 2022 and the presentation on KFHC's school partnership efforts.

Requested Action

Receive and File.



KERN HEALTH SYSTEMS

HEALTH EDUCATION, CULTURAL &
LINGUISTIC SERVICES DEPARTMENT

QUARTERLY REPORT

Q1 2022

KERN HEALTH SYSTEMS
HEALTH EDUCATION, CULTURAL AND LINGUISTIC ACTIVITIES REPORT
1st Quarter 2022

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The purpose of this report is to provide a summary of the quarterly activities and outcomes of this department.

KERN HEALTH SYSTEMS
HEALTH EDUCATION, CULTURAL AND LINGUISTIC ACTIVITIES REPORT
1st Quarter 2022

Executive Summary

Report Date: April 5, 2022

OVERVIEW

Kern Health Systems' Health Education (HE) 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.

The Executive Summary below highlights the larger efforts currently being implemented by the HE department. Following this summary reflects the statistical measurements for the Health Education department detailing the ongoing activity for Q1 2022.

- **Asthma Mitigation Project** – Outreach efforts continue to take place to enroll members into the program in collaboration with the Central California Asthma Collaborative. More than three-quarters of the targeted member enrollment goal has been achieved.
- **Population Needs Assessment** – Data collection efforts and updates have been completed. Final report and action plan are under final review and are due to DHCS by June 30, 2022.
- **Baby Steps Program** The steering committee met in January on the progress of the 2021 activities and activities planned for 2022. Accomplishments in 2021 include adding information on the Baby Steps Program on the KHS website, adding information on the COVID-19 vaccine in the monthly health guide mailings, obtaining provider feedback, and facilitating staff in-services. Data showed women in the Taft, 93308, and American Indian women were least likely to be vaccinated against COVID-19. The COVID-19 Q&A flyer was sent to provider offices, school resource centers, and the Bakersfield American Indian Health Project to help inform this subgroup. Activities planned for 2022 will include changes to the member portal, identifying new targeted populations, implementing the action plan to inform providers about this program, collecting member feedback, and continuation of staff in-services.
- **Diabetes Prevention Program** – The Health & Wellness Team launched their 2nd cohort on February 2nd, 2021. This year-long program consists of 26 classes held remotely until such time that we can resume face-to-face meetings. A total of 90 members accepted the invitation to participate and 51 members attended the first session. Of the 36 members that were still enrolled at the beginning of the quarter and with 25 sessions now completed, 36 remained enrolled in the program at the end of December.

KERN HEALTH SYSTEMS
HEALTH EDUCATION, CULTURAL AND LINGUISTIC ACTIVITIES REPORT
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- **Cultural and Linguistics Program** – The C&L Bilingual Glossary is in the process of being updated to ensure consistency and to prevent repetitive translation efforts. Translation audits are currently being conducted to verify medical terms that have been added to the Notice of Actions (NOA) letters, grievance letters, and to the Member Handbook. There are currently 162 new medical terms that require a translation and definition. Once completed, this glossary will be disseminated amongst KHS departments who conduct in-house translations.
- **Tobacco & Nicotine Cessation Classes** – Efforts are underway on establishing a partnership agreement with Kick It California to perform outreach and counseling to members identified as users of tobacco and nicotine.
- **School Wellness Grant Program** – KHS launched a new cycle of this grant program in February and is currently reviewing applications. This grant program funds schools to implement school wellness programs that aim to improve the physical, social, emotional, and behavioral health and wellbeing of students.
- **Student Behavioral Health Incentive Program** – DHCS launched this incentive program in January to expand student access to behavioral health services among Medi-Cal beneficiaries. KHS has partnered with Kern County Superintendent of Schools, Kern Behavioral Health and Recovery Services, Health Net and Kaiser to apply for this funding to implement programs within 9 school districts in the county. Partnering school districts represent all regions of the county including special education and alternative education.

Respectfully submitted,

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

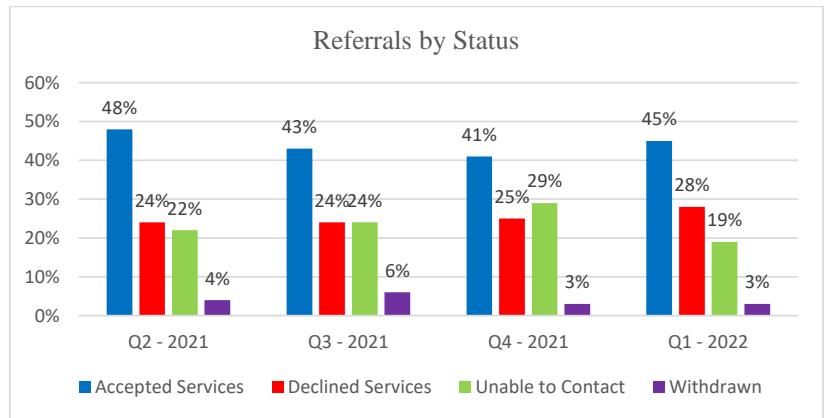
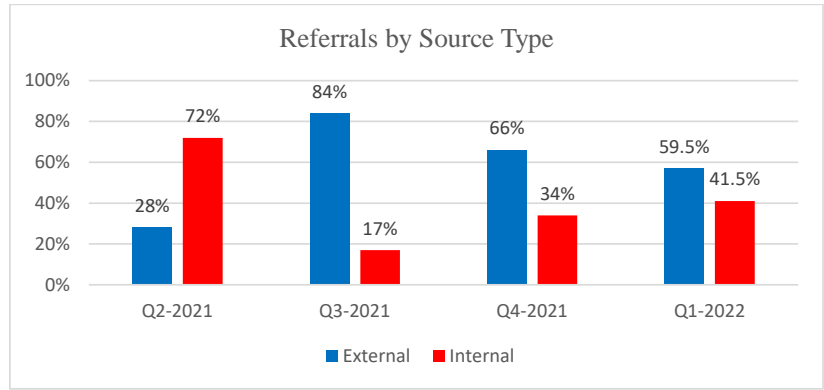
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Health Education Services

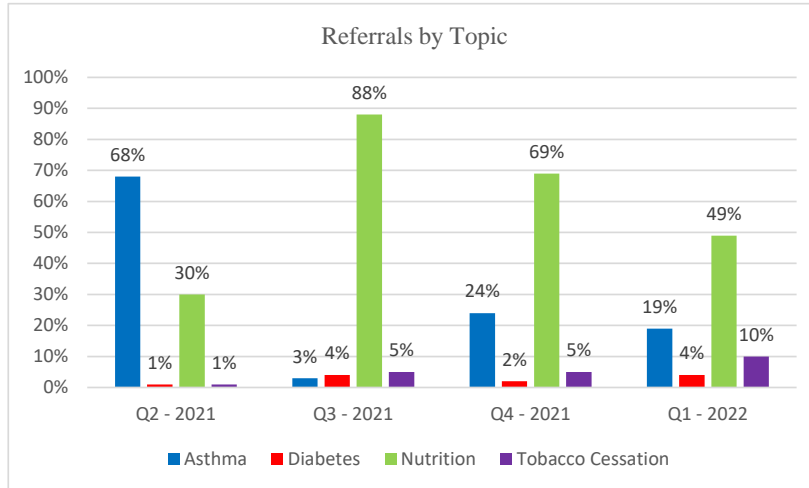
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1st Quarter 2022

Referrals for Health Education Services

Kern Health Systems (KHS) Health Education Department (HE) receives referrals from both internal and external sources. Internal referrals are received from KHS’ member facing departments such as Utilization Management, Member Services and Case Management. Externally, KHS providers, members and community partners can request health education services by calling KHS or submitting requests through the member or provider portals. During Q1 2022, there were 1213 referrals for health education services which is a 45% increase in comparison to the previous quarter. Requests for Nutrition Education continues to be the primary reason for health education services. Additionally, the rate of members who accepted to receive health education services decreased from 41% in Q4 2021 to 39% in Q1 2022.

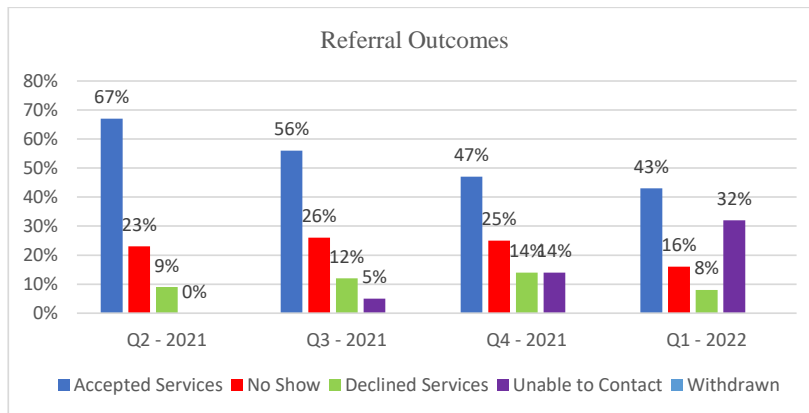


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HEALTH EDUCATION, CULTURAL AND LINGUISTIC ACTIVITIES REPORT
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Health Education Referral Outcomes

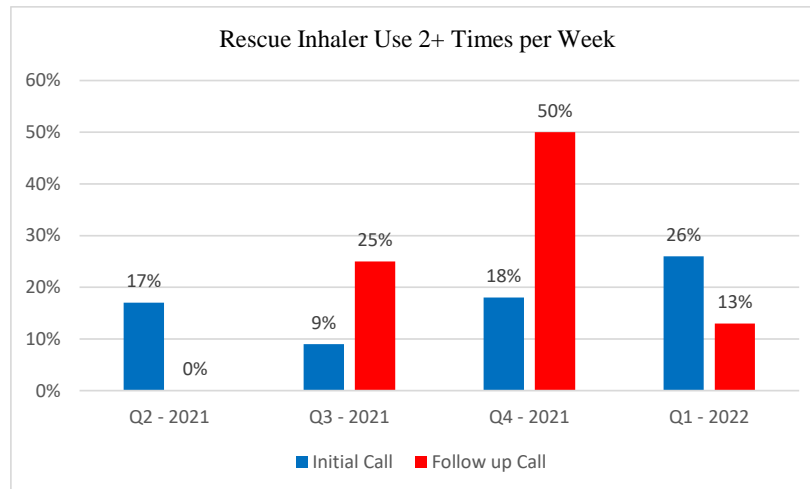
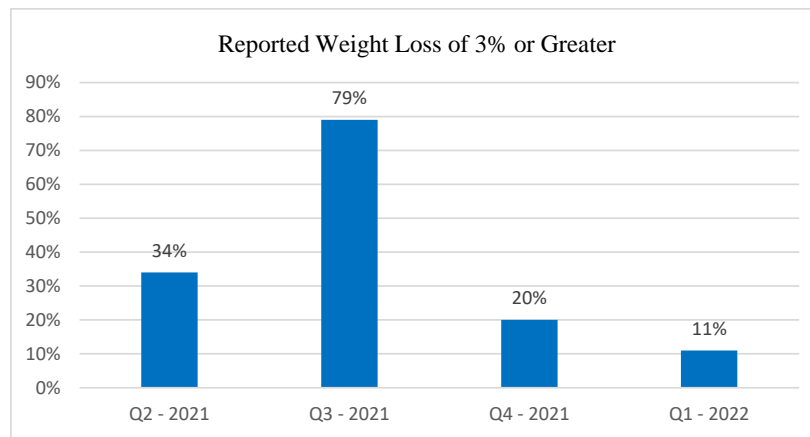
KHS offers various types of services directly through the KHS HE department or through community partnerships. Services through KHS continues to be the largest share of referral outcomes at 97% for Q1 2022. The rate of members who received health education services decreased from 47% in Q4 2021 to 43% in Q1 2022. The rate of members who do not show for services average less than a quarter of registrants.



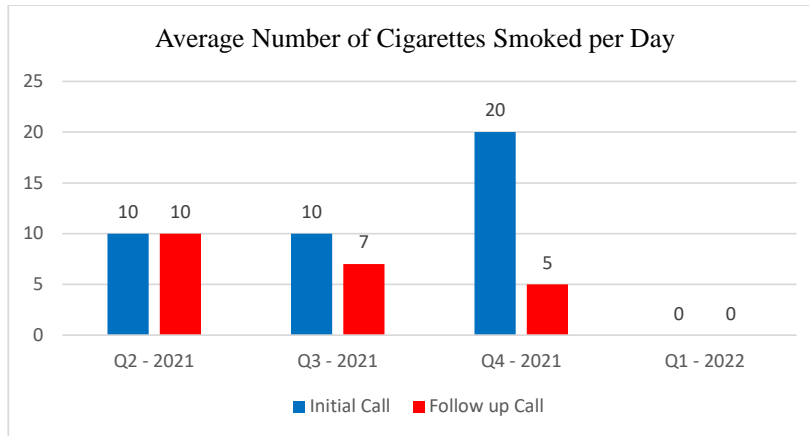
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Effectiveness of Health Education Services

To evaluate the effectiveness of the health education services provided to members, a 3-month follow up call is conducted on members who received services during the prior quarter. Of the members who participated in the 3-month follow up call, 45 received Nutrition Education, 0 received Tobacco Cessation and 2 received Asthma Education. All findings are based on self-reported data from the members.

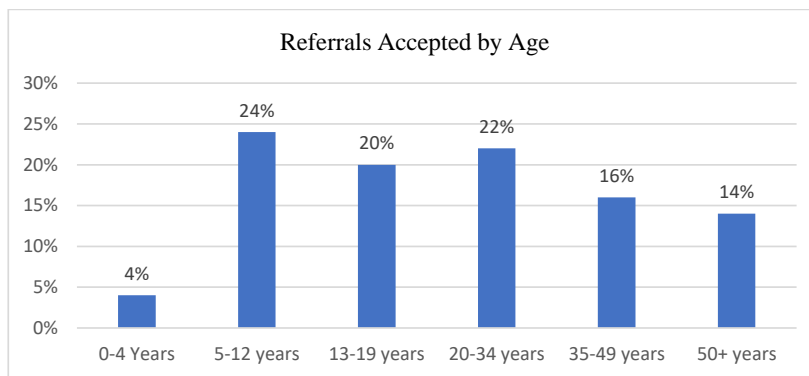


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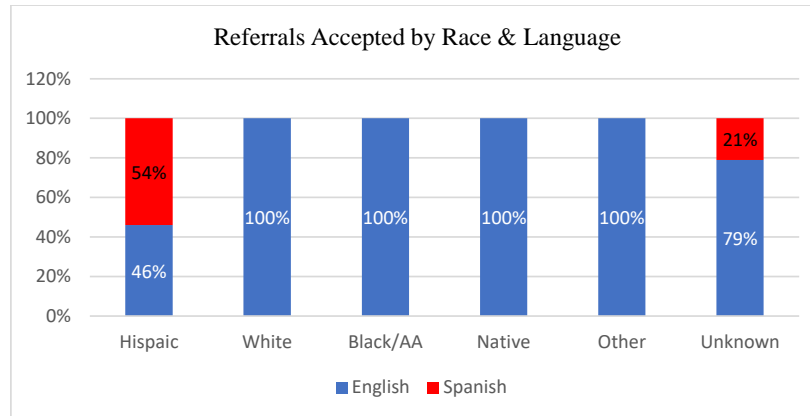


Demographics of Members

KHS provides services to a culturally and linguistically diverse member population in Kern County. KHS’ language threshold is English and Spanish, and all services and materials are available in these languages. When non-threshold language requests are received, KHS utilizes professional interpreters to reduce language communication barriers among members. Out of the members who accepted health education services, the largest age groups were 5-12 years followed by 20-34 years. A breakdown of member classifications by race and language preferences revealed that many members who accepted services are Hispanic and preferred to receive services in Spanish. During this quarter, 76% of the members who accepted services reside in Bakersfield with the highest concentration in the 93306 area. Additionally, 24% of the members who accepted services reside in the outlying areas of Kern County with the highest concentration in Lamont.



KERN HEALTH SYSTEMS
HEALTH EDUCATION, CULTURAL AND LINGUISTIC ACTIVITIES REPORT
1st Quarter 2022



Referrals Accepted by Top Bakersfield Zip Codes

Q2-2021	Q3-2021	Q4-2021	Q1-2022
93307	93307	93307	93306
93306	93306	93304	93307
93304	93304	93305	93304
Lamont	Lamont	Lamont	Lamont
Delano	Arvin	Arvin	Arvin
Arvin	Delano	Delano	Wasco

Health Education Mailings

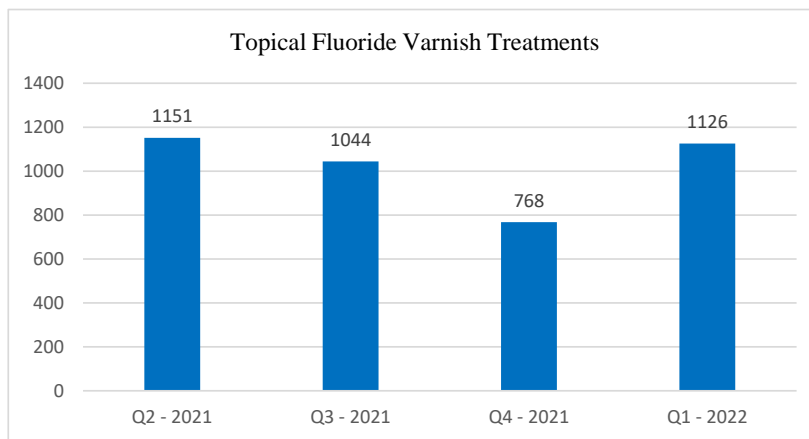
The HE department mails out a variety of educational material to assist members with gaining knowledge on their specific diagnosis or health concern. During this quarter, the HE department continued to place most educational mailings on hold due to COVID-19 limitations except for the prenatal and postpartum health guides and the annual tobacco education mailer which are outsourced to a contracted vendor. Members were directed to access digital information available on the Kern Family Health Care website.

KERN HEALTH SYSTEMS
HEALTH EDUCATION, CULTURAL AND LINGUISTIC ACTIVITIES REPORT
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Educational Mailings				
	Q2-2021	Q3-2021	Q4-2021	Q1-2022
Activity and Eating: Small Steps to a Healthier You	1	2	3	1
Control High Cholesterol	2	8	0	0
Diabetes Management	3	7	2	1
Eat Healthy	3	11	3	3
Exercise	2	11	4	3
Prenatal Health Guide	968	639	540	575
Postpartum Health Guide	1017	1151	1162	1083
Tobacco	0	0	0	9493
Total	1996	1829	1714	11,159

Topical Fluoride Varnish Treatments

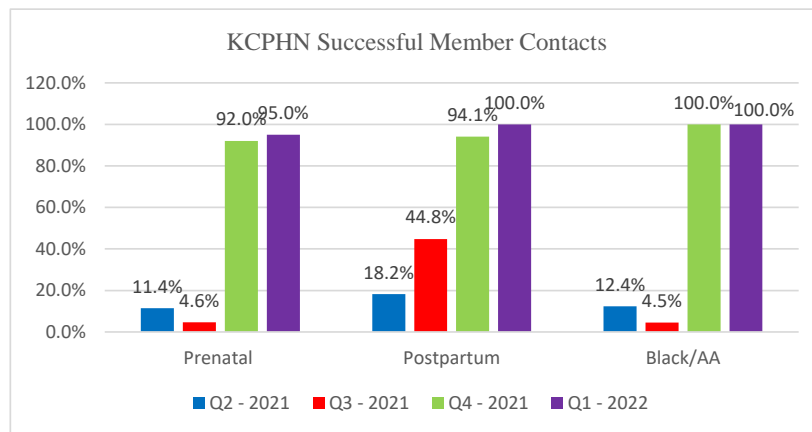
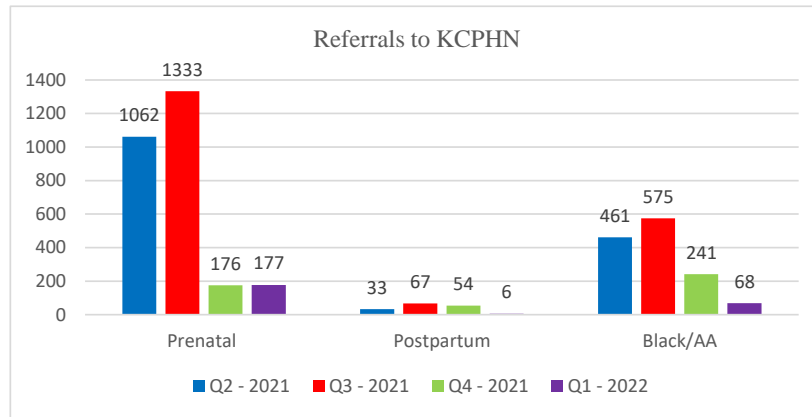
Fluoride varnish treatments are effective in preventing tooth decay and more practical and safer to use with young children. KHS covers up to three topical fluoride varnish treatments in a 12-month period for all members younger than 6 years.



KERN HEALTH SYSTEMS
HEALTH EDUCATION, CULTURAL AND LINGUISTIC ACTIVITIES REPORT
1st Quarter 2022

Perinatal Outreach and Education

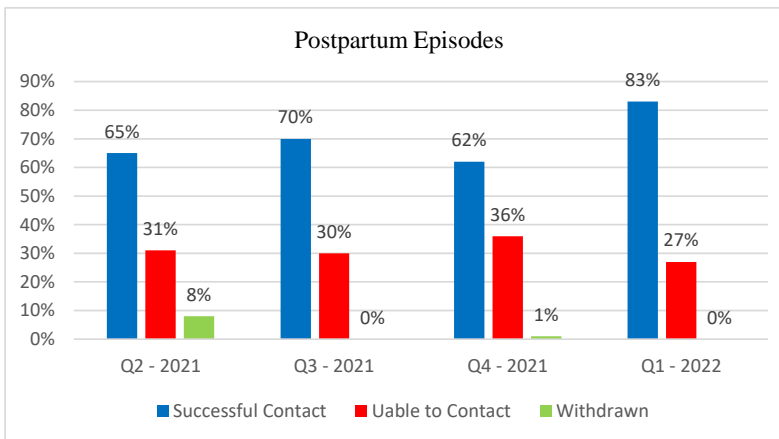
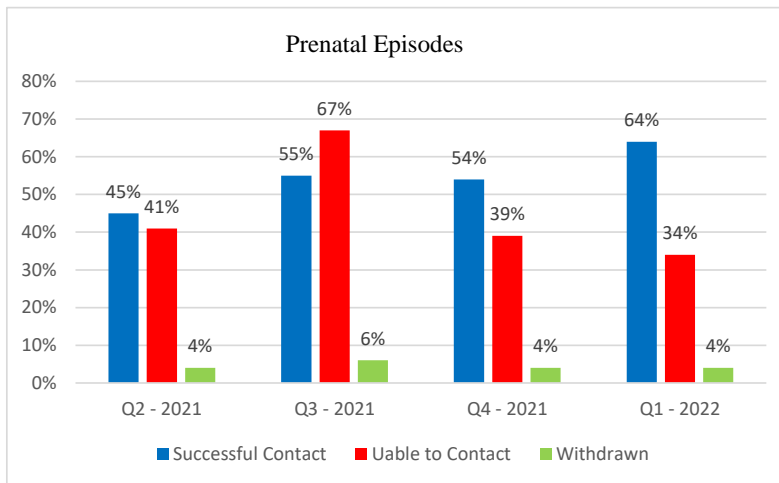
KHS partners with the Kern County Public Health Nursing (KCPHN) division to perform outreach to members residing in the 93308 and 93305 zip codes along with pregnant Black/African American members to encourage timely prenatal and postpartum care. Members who are successfully reached are educated on the importance of timely care and offered enrollment into the KCPHN pregnancy programs such as Black Infant Health. During Q1 2022, KHS referred 251 pregnant and postpartum members to KCPHN. Although KCPHN had limited resources to perform outreach due to COVID-19, they referred 3 members to the Nurse Family Partnership Program (NFP), 1 member to the Pregnancy Outreach Program (POP), 11 members to Black Infant Health (BIH) and 0 to the Unplanned Pregnancy Prevention Program (UPPP).



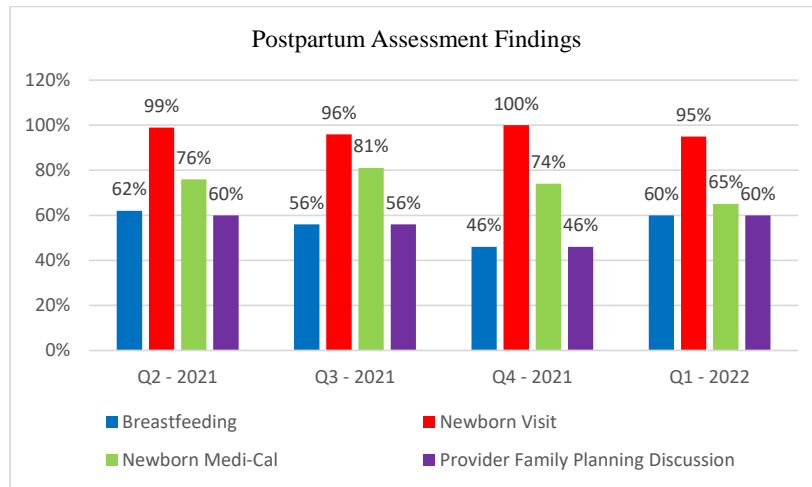
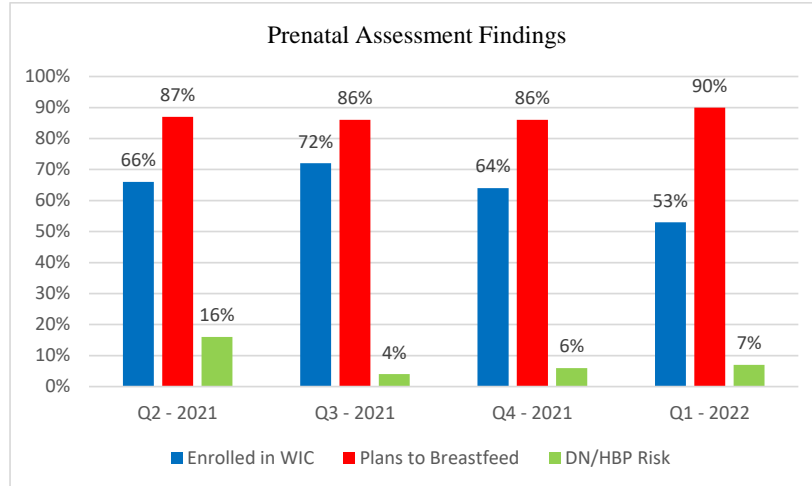
The HE department performs outreach education calls to members with a positive pregnancy test claim, pregnant teens (under age 18), and postpartum members with a Cesarean delivery or

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teen pregnancy delivery. During the Q1 2022, 612 episodes for pregnant members were completed and the rate of successful contacts increased from 54% to 64%. For postpartum members, 442 episodes were completed, and the rate of successful contacts increased from 62% to 73%. Prenatal assessment findings revealed a 29% increase in members identified with diabetes or high blood pressure or were at-risk for diabetes or high blood pressure during pregnancy. Postpartum assessment findings revealed a 128.6% increase in members reporting that they had already discussed their family planning and birth control options with their provider.



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Health & Wellness Programs

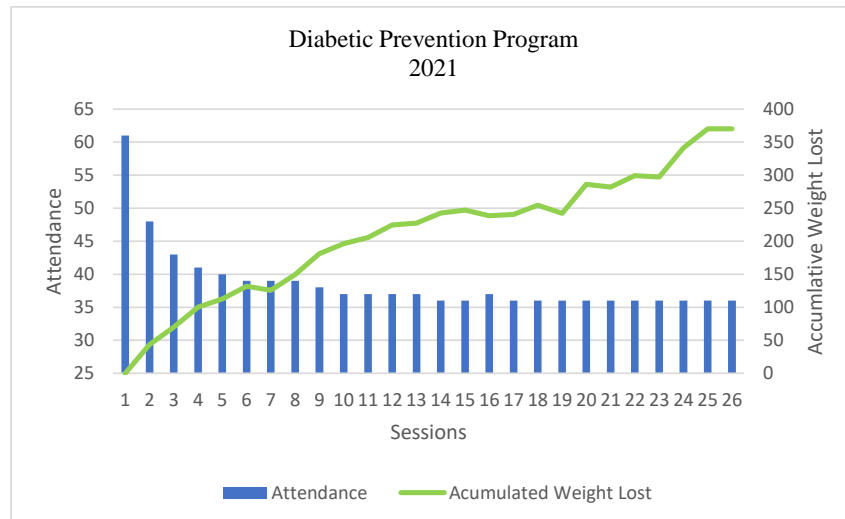
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Diabetic Prevention Program

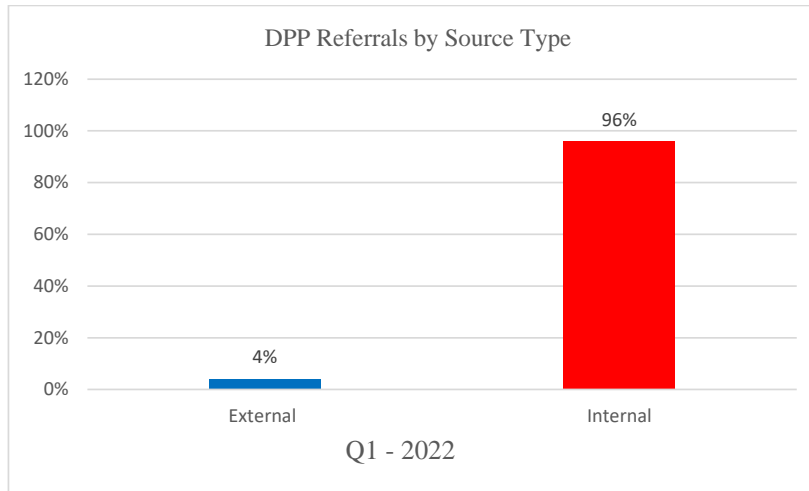
The Diabetic Prevention Program (DPP) is an evidence-based lifestyle change program, taught by peer coaches, designed to prevent or delay the onset of type 2 diabetes among individuals diagnosed with pre-diabetes who meet the requirements for age, BMI, and prediabetes/risk determination. The participant cannot be pregnant or diagnosed with type 1 or type 2 diabetes at the time of enrollment.

The translated adaptation of the DPP lifestyle intervention is a yearlong structured program consisting of an initial 6-month phase. Within those six months there are 16 weekly classes for the first four months and two classes a week for the next eight weeks. For the last six months one class is offered each month with one additional session offered for support, if individually necessary, for each of the last six months. Each session is facilitated by a trained Lifestyle Coach and offers a CDC-approved curriculum. There are regular opportunities for participants to interact with the Lifestyle Coaches. Each session focuses on behavior modification, managing stress and social support.

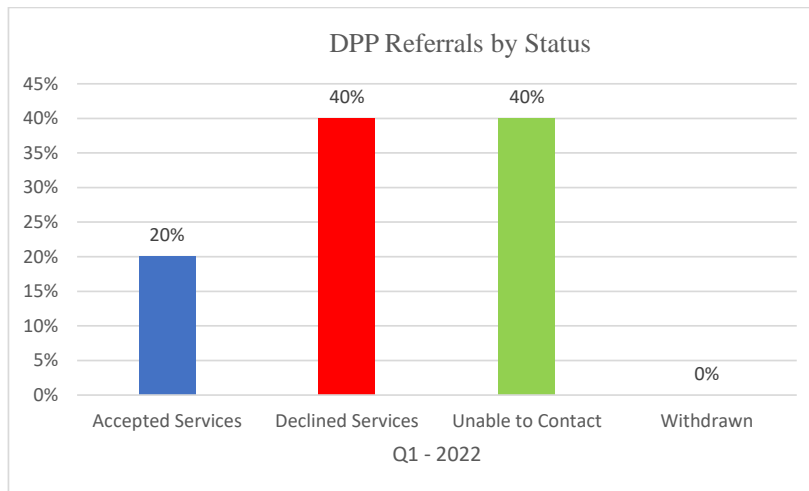
January was the conclusion of the 2021 class. There was a graduating class of 36 members. A goal of 5% of weight loss is established at the beginning of the sessions. This year long class had lost a total of 4.79% of total body weight.



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Below is a graph of DPP referrals by Status. During the first quarter, the episodes in JIVA were closed for those members who declined services or whom we were unable to contact. There are episodes open for members who have accepted services and are still in the process of receiving these services.

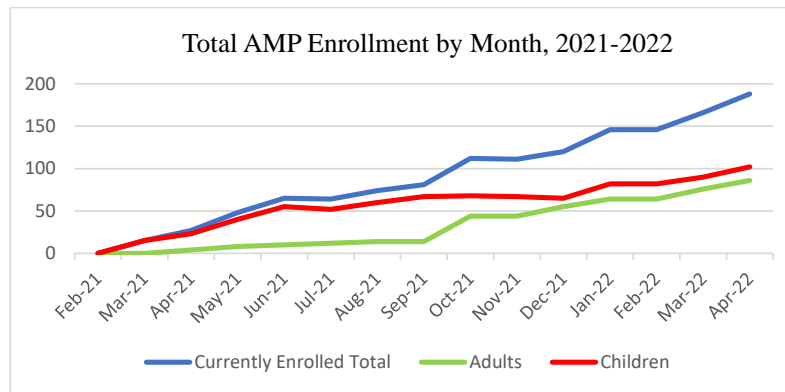


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Asthma Mitigation Project

The HE Department has partnered with Central California Asthma Collaborative (CCAC) to offer an asthma home visiting program to members with recent signs of high risk asthma, such as hospital visits due to asthma emergencies, frequent rescue inhaler use, or frequent asthma symptoms. This program is funded by the Asthma Mitigation Project (AMP), a statewide grant program. The goals of this program are to improve member asthma management and control, decrease exposure to common household asthma triggers, improve asthma outcomes and quality of life, and decrease asthma related costs (especially due to asthma emergencies). Enrollment for each member lasts for at least 12 months.

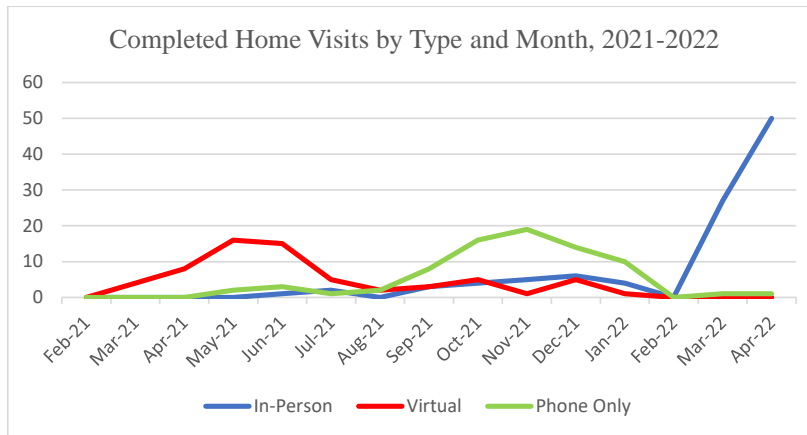
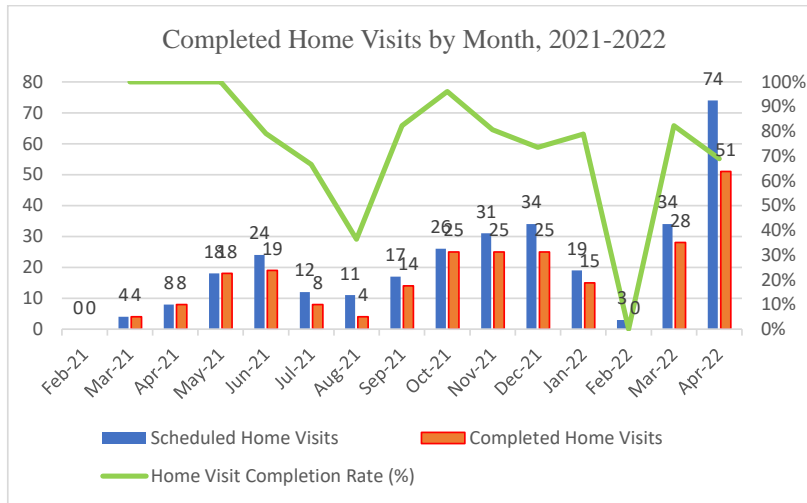
Member outreach for AMP began in February 2021. Program enrollment began in March 2021. The program enrollment goal is 200 by the end of May 2022. This goal is expected to be met at the current pace of enrollment. Enrollment has gradually increased. It is now at 188. So far, 11 members have completed the program.



AMP includes 3 home visits that occur during the initial, 6th, and 12th months of program enrollment. Home visits include a home environmental assessment of asthma triggers and education on asthma and trigger management. Health workers also work with members to develop and implement asthma remediation plans, which may include low-cost products and supplies that reduce exposure to triggers in the home.

Follow up calls occur at the 1st, 2nd, 3rd, and 9th months of the program. They include asthma control assessments and referrals to any needed asthma or community resources. CCAC refers members to Kern County 211 or Community Action Partnership of Kern programs for community resources.

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Cultural & Linguistic Services

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Interpreter Requests

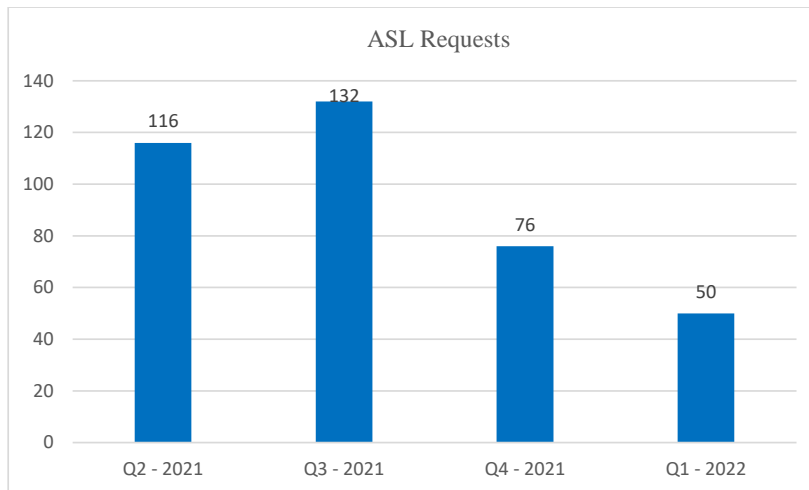
During this quarter, there were 114 requests for Face-to-Face Interpreting, 810 requests for Telephonic Interpreting, 0 for Video Remote Interpreting (VRI) and 76 requests for an American Sign Language (ASL) interpreter.

Top Face-to-Face Interpreting Languages Requested

Q2-2021	Q3-2021	Q4-2021	Q1-2022
Spanish	Spanish	Spanish	Spanish
Vietnamese	Mandarin	Punjabi	Punjabi
Cantonese	Panjabi	Cantonese	Farsi

Top Telephonic Interpreting Languages Requested

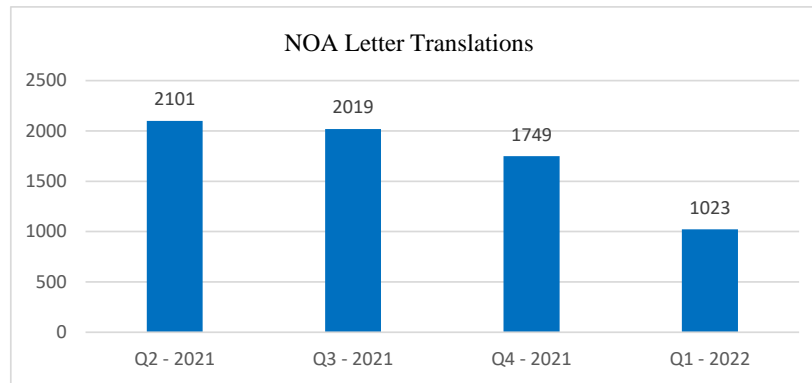
Q2-2021	Q3-2021	Q4-2021	Q1-2022
Spanish	Spanish	Spanish	Spanish
Punjabi	Punjabi	Punjabi	Punjabi
Arabic	Arabic	Arabic	Arabic



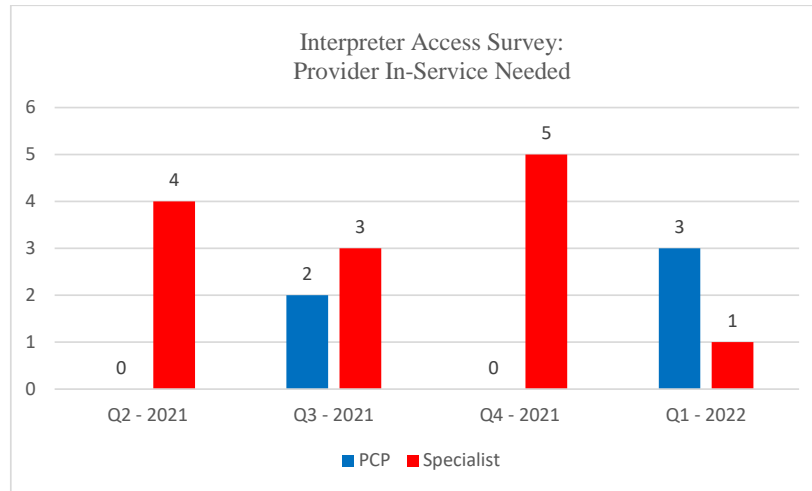
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Written Translations

The HE 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, 1023 requests for written translations were received of which 94% were Notice of Action letters translated in- house into Spanish for the UM and Pharmacy departments.



Interpreter Access Survey Calls



Kern Family Health Care's School Partnership Efforts

Isabel Silva, MPH, CHES, NDCCDP

Director of Health Education, Cultural and Linguistic Services

June 29, 2022



Student Behavioral Health Incentive Program (SBHIP)

- Purpose:
 - Increase access to preventive, early intervention and behavioral health services by school-affiliated behavioral health providers for TK-12 children in schools (Assembly Bill 133: WIC § 5961.3)
- 3-year state funded effort from January 2022 – December 2024
 - Kern County eligible for \$13.2 million
- Timeline:
 - 2022 – Needs Assessment and Project Plans
 - 2023 & 2024 – Implement Project Plans and progress reports to the Dept of Health Care Services
- Stakeholder Partners:



Targeted Interventions



1. Behavioral Health and Wellness Programs
2. Telehealth Services and Access to Technological Equipment
3. Behavioral Health Screenings
4. Suicide Prevention Strategies
5. Substance Use Disorder
6. Building Strong Partnership To Increase Medi-Cal reimbursable services
7. Culturally Appropriate and Targeted Populations
8. Behavioral Health Public Dashboards and Reporting
9. Technical Assistance Support for Contracts
10. Expand Behavioral Health Workforce
11. Care Teams
12. IT Systems to Support Behavioral Health Services
13. Pregnant Students and Teen Parents
14. Parent and Family Services



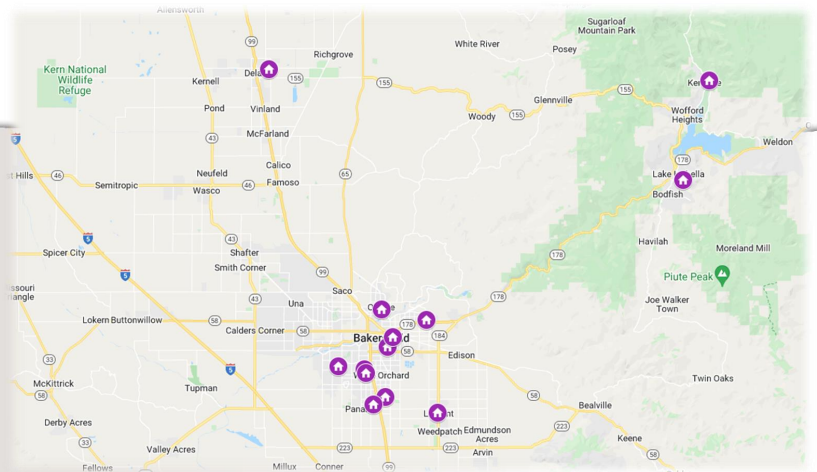


School District Partners

- Arvin Union
- Bakersfield City
- Edison Elementary
- KCSOS – Special Education & Alternative Education Program
- Kern High
- Kernville Union
- Lost Hills Union Elementary
- McFarland Union
- Pond Union



2022-2024
School
Wellness
Grant
Program



- 13 applications received
- \$317,000 awarded across 7 schools
- Programs will address physical activity, healthy eating, social emotional learning, vaping prevention, and more!
- Internship opening in Fall 2022



School Wellness Grant Highlights



Thank you! Questions?



