

PUBLIC POLICY/COMMUNITY ADVISORY COMMITTEE

Tuesday, March 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 Tuesday, March 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, Jose Sanchez, Tammy Torres, Yadira Ramirez, Caitlin Criswell, Michelle Bravo, Alex Garcia, Quon Louey

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

Agenda – Public Policy/Community Advisory Committee Kern Health Systems Regular Meeting

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PUBLIC PRESENTATIONS

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 December 14, 2021

 APPROVE
- CA-4) Report on March 2022 Medi-Cal Membership Enrollment RECEIVE AND FILE
- CA-5) Report on KFHC Grievance Summary for fourth quarter ending December 31, 2021 RECEIVE AND FILE
- CA-6) Report on Health Education for fourth quarter ending December 31, 2021 RECEIVE AND FILE
- CA-7) Report on Population Health Management for fourth quarter ending December 31, 2021 RECEIVE AND FILE
 - 8) Proposed appointments to the Kern Health Systems Public Policy/Community Advisory Committee
 MAKE APPOINTMENTS
 - 9) Report on KFHC Grievances for fourth quarter ending December 31, 2021 RECEIVE AND FILE

Agenda – Public Policy/Community Advisory Committee Kern Health Systems Regular Meeting

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- 10) Report on KFHC COVID-19 Vaccination Plan RECEIVE AND FILE
- Report on KFHC Fall 2022 Member Newsletter RECEIVE AND FILE

ADJOURN TO TUESDAY, June 28, 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, December 14, 2021

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 – Yadira Ramirez, Caitlin Criswell

Meeting called to order by Louie Iturriria, Director of Marketing and Public Relations, at 11:01 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

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!
NO ONE HEARD

SUMMARY – Public Policy/Community Advisory CommitteeKern Health Systems

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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])

NO ONE HEARD

CA-3) Minutes for Public Policy/Community Advisory Committee meeting on September 28, 2021

APPROVED

Garcia-Hefner: 11 Ayes; 2 Absent – Ramirez, Criswell

CA-4) Report on December 2021 Medi-Cal Membership Enrollment

RECEIVED AND FILED

Garcia-Hefner: 11 Ayes; 2 Absent – Ramirez, Criswell

CA-5) Report on KFHC Grievance Summary for third quarter ending September 30, 2021 RECEIVED AND FILED

RECEIVED AND FILED

Garcia-Hefner: 11 Ayes; 2 Absent – Ramirez, Criswell

CA-6) Report on Health Education for third quarter ending September 30, 2021

RECEIVED AND FILED

Garcia-Hefner: 11 Ayes; 2 Absent - Ramirez, Criswell

7) Report on KFHC Grievances for third quarter ending September 30, 2021

RECEIVED AND FILED

Hefner-Hernandez Colin: 11 Ayes; 2 Absent – Ramirez, Criswell

8) Report on KFHC COVID-19 Vaccination Efforts

RECEIVED AND FILED

Garcia-Hernandez Colin: 11 Ayes; 2 Absent – Ramirez, Criswell

9) Report on Enhanced Care Management and Community Support

RECEIVED AND FILED

Garcia-Louey: 11 Ayes; 2 Absent – Ramirez, Criswell

10) Report on Population Health Management for third quarter ending Sept. 30, 2021

RECEIVED AND FILED

Hernandez Colin-Basulto: 11 Ayes; 2 Absent – Ramirez, Criswell

Meeting adjourned by Louie Iturriria, Director of Marketing and Public Relations, at 11:59 AM to March 29, 2022 at 11:00 AM.

KHS March 2022 ENROLLMENT:

Medi-Cal Enrollment

As of March 1, 2022, Medi-Cal enrollment is 212,360 which represents an increase of 0.5% from February enrollment.

Seniors and Persons with Disabilities (SPDs)

As of March 1, 2022, SPD enrollment is 16,099, which represents an increase of 0.5% from February enrollment.

Expanded Eligible Enrollment

As of March 1, 2022, Expansion enrollment is 84,666, which represents an increase of 1.4% from February enrollment.

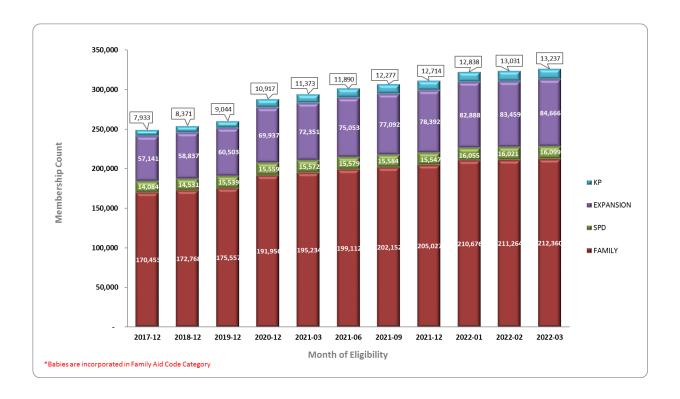
Kaiser Permanente (KP)

As of March 1, 2022, Kaiser enrollment is 13,237 which represents an increase of 1.6% from February enrollment.

Total KHS Medi-Cal Managed Care Enrollment

As of March 1, 2022, total Medi-Cal enrollment is 326,362 which represents an increase of 0.8% from February 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	194,848	15,572	72,351	11,373	386	294,530
2021-06	198,716	15,579	75,053	11,890	396	301,634
2021-09	201,638	15,584	77,092	12,277	514	307,105
2021-12	204,584	15,547	78,392	12,714	443	311,680
2022-01	210,168	16,055	82,888	12,838	508	322,457
2022-02	210,802	16,021	83,459	13,031	462	323,775
2022-03	211,952	16,099	84,666	13,237	408	326,362





To: Public Policy Committee Meeting

From: Nate Scott

Date: March 29, 2022

Re: Executive Summary for 4th Quarter 2021 Grievance Summary Report

Background

Executive Summary for the 4th Quarter 2021 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. It also provides insight into the grievance and appeals received on behalf of KHS members assigned to Kaiser Permanente.

Kaiser Permanente Grievances and Appeals

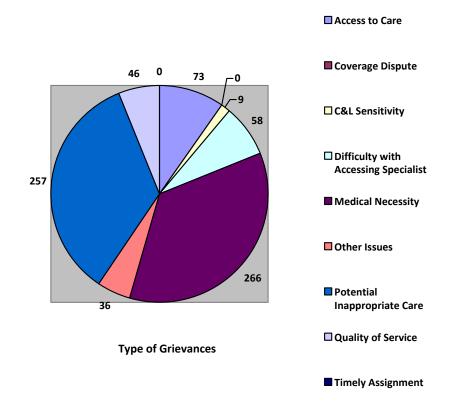
Due to recent changes to how Medi-Cal Managed Care Plans (MCPs) report their grievance and appeals data, KHS receives Kaiser's aggregate reporting data, but currently does not have the specific grievance and appeal data to report to the committee. KHS and Kaiser are working together to formalize a new process to report this data going forward.

Requested Action

Receive and File

4th Quarter 2021 Grievance Summary

Issue	Number	In Favor of Health Plan	Under Review by Q.I	In favor of Enrollee	Still under review
Access to care	73	50	0	23	0
Coverage dispute	0	0	0	0	0
Cultural and Linguistic Sensitivity	9	3	0	6	0
Difficulty with accessing specialists	58	29	0	29	0
Medical necessity	266	199	0	67	0
Other issues	36	24	0	12	0
Potential Inappropriate care	257	144	104	9	0
Quality of service	46	37	0	9	0
Timely assignment to provider	0	0	0	0	0



Standard Grievances and Appeals per 1,000 Members = 2.50

During the fourth quarter of 2021, there were seven hundred and forty-five standard grievances and appeals received. One hundred and fifty-five cases were closed in favor of the Enrollee. Four hundred and eighty-six cases were closed in favor of the Plan. One hundred and four cases have closed and are under review by the KHS Quality Improvement Department. Of the seven hundred and forty-five grievances and appeals received, six hundred and ninety-eight cases closed within thirty days; forty-seven cases were pended and closed after thirty days.

Access to Care

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

Fourteen members complained about the lack of available appointments with their Primary Care Provider (PCP). Ten cases closed in favor of the Plan after the responses indicated the offices provided appropriate access to care based on Access to Care standards. Four 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.

Twenty-seven members complained about the wait time to be seen for a Primary Care Provider (PCP) appointment. Nineteen 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. Eight 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.

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

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

Coverage Dispute

There were no grievances pertaining to a Coverage Dispute issue.

Cultural and Linguistic Sensitivity

Nine members complained about the lack of available interpreting services to assist during their appointments. Six cases closed in favor of the Enrollee after the responses from the providers indicated the members may not have been provided with the appropriate access to interpreting services. Three 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-eight grievances pertaining to Difficulty Accessing a Specialist. Twenty-nine cases closed in favor of the Plan. Twenty-nine cases closed in favor of the Enrollee. The following is a summary of these issues:

Seventeen members complained about the lack of available appointments with a specialist. Eleven 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. Six 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.

Seventeen members complained about the wait time to be seen for a specialist appointment. Seven 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. Ten 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.

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

Eleven 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. Seven cases closed in favor of the Enrollee after it was determined the referral authorization request may not have been submitted in a timely manner.

Medical Necessity

There were two hundred sixty-six appeals pertaining to Medical Necessity. One hundred ninety-nine cases were closed in favor of the Plan. Sixty-seven cases closed in favor of the Enrollee. The following is a summary of these issues:

Two hundred and thirteen members complained about the denial or modification of a referral authorization request. One hundred and fifty-two 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. Sixty cases were closed in favor of the Enrollee as it was determined medical necessity was met and the denials were overturned and approved.

Fifty-three members complained about the denial or modification of a TAR. Forty-six 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; therefore, the denials were upheld. Seven cases were closed in favor of the Enrollee as it was determined medical necessity was met and the denials were overturned and approved.

Other Issues

There were thirty-six grievances pertaining to Other Issues that are not otherwise classified in the other categories. Twenty-four cases were closed in favor of the Plan after the responses indicated appropriate service was provided. Twelve cases closed in favor of the Enrollee after the responses indicated appropriate service may not have been provided.

Potential Inappropriate Care

There were two hundred and fifty-seven grievances involving Potential Inappropriate Care issues. These cases were forwarded to the Quality Improvement (QI) Department for their due process. Upon review, one hundred and forty-four cases were closed in favor of the Plan, as it was determined a quality-of-care issue could not be identified. Nine 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. One hundred and four cases are still pending further review with QI.

Quality of Service

There were forty-six grievances involving Quality of Service issues. Thirty-seven cases were closed in favor of the Plan. Nine cases closed in favor of the Enrollee. The following is a summary of these issues:

Forty-five members complained about the service they received from their providers. Thirty-six cases closed in favor of the Plan after the responses determined the members received the appropriate service from their providers. Nine cases closed in favor of the enrollee after the responses determined the members may not have received the appropriate services.

One member complained about the services they received from a KFHC Case Manager (CM). The case closed in favor of the Plan after the response determined the member received the appropriate service from the CM.

Timely Assignment to Provider

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

Kaiser Permanente Grievances and Appeals

During the fourth quarter of 2021, there were forty-five grievances and appeals received by KFHC members assigned to Kaiser Permanente.

Access to Care

There were five grievances pertaining to Access to Care.

Coverage Dispute

There were six appeals pertaining to Coverage Dispute.

Medical Necessity

There were three cases pertaining to Medical Necessity.

Quality of Care

There were two grievances pertaining to Quality of Care.

Quality of Service

There were twenty-nine grievances pertaining to a Quality of Service.

Report Date: January 6, 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 Q4 2021.

- 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 half of the targeted enrollment
 goal of 230 members has been achieved.
- **Population Needs Assessment** Data collection efforts and updates are currently underway. Final report and action plan 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 member feedback, and facilitating staff in-services. Activities planned for 2022 will include changes to the member portal, identifying new targeted populations, collecting provider feedback, and continuation of staff in-services.
- **Diabetes Prevention Program** The Health & Wellness Department launched their 2nd DPP cohort on February 2nd, 2021. This year-long program consists of 26 classes held remotely until such time that we are able to 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
- 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 KFHC Member Handbook (EOC). 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 The California Smoker's Helpline changed its name to Kick It California. Discussions are currently underway on partnering with Kick It California to perform outreach to members identified as users of tobacco and nicotine. An annual educational mailing promoting KHS' Fresh Start Classes is planned for the 1st quarter.

HECL Activities Report Q4 2021

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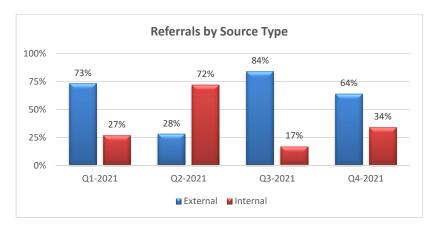
- School Wellness Grant Program KHS will be launching a new cycle of this grant program by the 2nd quarter. This grant program funds schools to implement school wellness programs that aim to improve the physical, social, emotional and behavioral health and wellbeing of students.
- Student Behavioral Health Incentive Program DHCS launched this incentive program in January to expand student access to behavioral health services among Medi-Cal beneficiaries. KHS has had several discussions with Kern County Superintendent of Schools, Kern Behavioral Health and Recovery Services, Health Net and Kaiser with an intent to collaborate and apply for this funding for the county

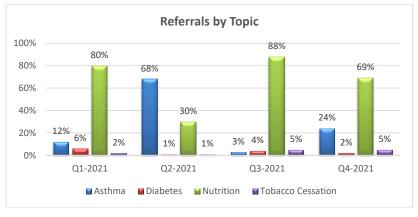
Respectfully submitted,

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

Referrals for Health Education Services:

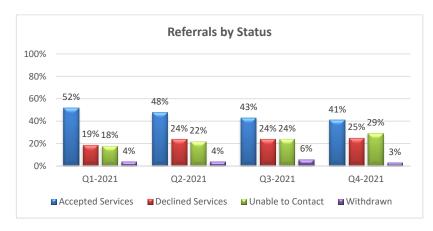
Kern Health Systems (KHS) Health Education Department (HE) receives referrals from both internal and external sources. Internal referrals are received from KHS' member facing departments such as Utilization Management, Member Services and Case Management. Externally, KHS providers, members and community partners can request health education services by calling KHS or submitting requests through the member or provider portals. During Q4 2021, there were 835 referrals for health education services which is a 12% 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 43% in Q3 2021 to 41% in Q4 2021.





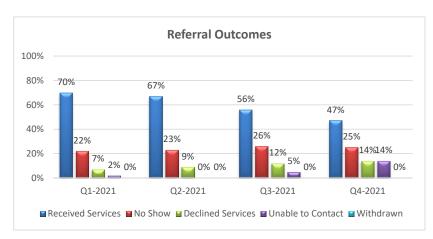
HECL Activities Report Q4 2021 Page **3** of **14**

KERN HEALTH SYSTEMS HEALTH EDUCATION, CULTURAL AND LINGUISTIC ACTIVITIES REPORT 4th Quarter 2021



Health Education Referral Outcomes

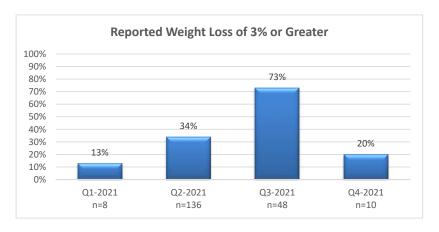
KHS offers various types of services directly through the KHS HE department or through community partnerships. Services through KFHC continues to be the largest share of referral outcomes at 99% for Q4 2021. The rate of members who received health education services decreased from 56% in Q3 2021 to 47% in Q4 2021. The rate of members who do not show for services continues to average at about a quarter of registrants.

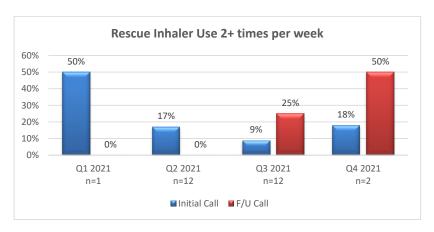


HECL Activities Report Q4 2021 Page **4** of **14**

Effectiveness of Health Education Services

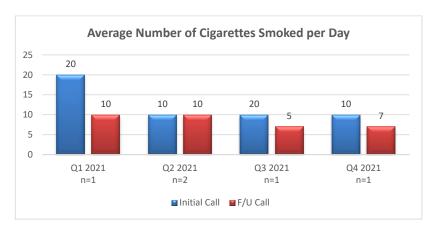
To evaluate the effectiveness of the health education services provided to members, a 3-month follow up call is conducted on members who received services during the prior quarter. Of the 12 members who participated in the 3-month follow up call, 10 received Nutrition Education, 1 received Tobacco Cessation and 2 received Asthma Education All findings are based on self-reported data from the member.





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KERN HEALTH SYSTEMS HEALTH EDUCATION, CULTURAL AND LINGUISTIC ACTIVITIES REPORT 4th Quarter 2021



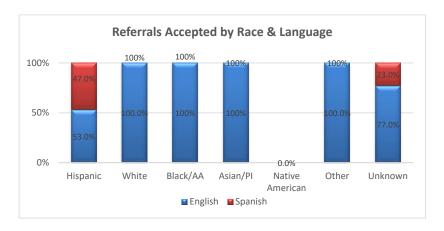
Demographics of Members

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 13-19 years. A breakdown of member classifications by race and language preferences revealed that the majority of members who accepted services are Hispanic and preferred to receive services in Spanish. During this quarter, 73% of the members who accepted services reside in Bakersfield with the highest concentration in the 93307 area. Additionally, 27% of the members who accepted services reside in the outlying areas of Kern County with the highest concentration in Lamont.



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KERN HEALTH SYSTEMS
HEALTH EDUCATION, CULTURAL AND LINGUISTIC ACTIVITIES REPORT
4th Quarter 2021



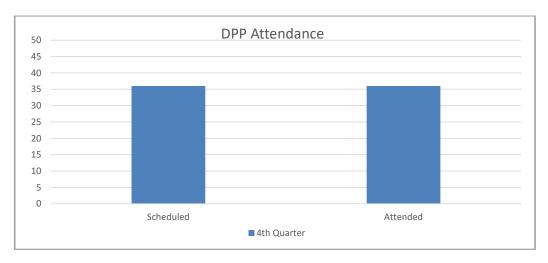
Referrals Accepted by Top Bakersfield Zip Codes						
Q1-2021	Q2-2021	Q3-2021	Q4-2021			
93307	93307	93307	93307			
93306	93306	93306	93304			
93305	93304	93304	93305			
Arvin	Lamont	Lamont	Lamont			
Lamont	Delano	Arvin	Arvin			
Delano	Arvin	Delano	Delano			

Diabetes Prevention Program: The Health & Wellness Department launched their 2nd DPP cohort on February 2nd, 2021. This year-long program consists of 26 classes held remotely until such time that we are able to 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.

Sessions Scheduled to Attend	Remaining Participants (End
	December)
36	36

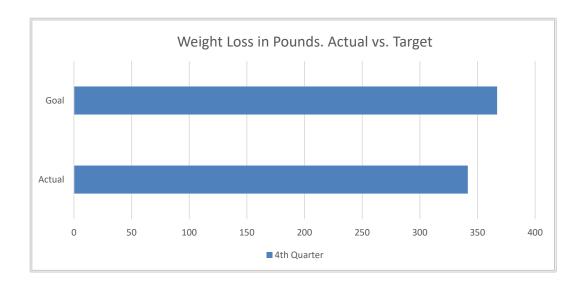
HECL Activities Report Q4 2021 Page **7** of **14**

KERN HEALTH SYSTEMS HEALTH EDUCATION, CULTURAL AND LINGUISTIC ACTIVITIES REPORT $4^{\rm th}$ Quarter 2021



Total Weight Loss: With 92% of the year-long program completed, the class has reached 93% of the required total weight-loss of 5%, or 367lb. 15 members have lost at least 5% of their starting weight.

KHS DPP Weight Loss	CDC Recognition Requirement
341.6lb	367lb



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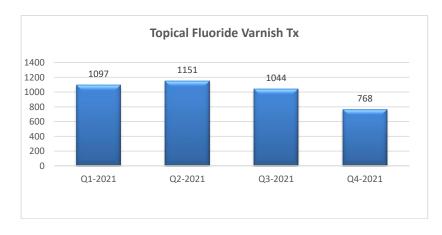
Health Education Mailings

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 continued to place the majority of educational mailings on hold due to COVID-19 limitations with the exception of the prenatal and postpartum health guides which are outsourced to a contracted vendor. Members were directed to access digital information available on the Kern Family Health Care website.

Educational Mailings						
	Q1-2021	Q2-2021	Q3-2021	Q4-2021		
Activity and Eating:	0	1	2	3		
Small Steps to a						
Healthier You						
Control High	0	2	8	0		
Cholesterol						
Diabetes	0	3	7	2		
Management						
Eat Healthy	0	3	11	3		
Exercise	0	2	11	4		
Prenatal Health	2,650	968	639	540		
Guide						
Postpartum Health	971	1,017	1151	1162		
Guide						
Total	3,621	1,996	1,829	1714		

Topical Fluoride Varnish Treatments

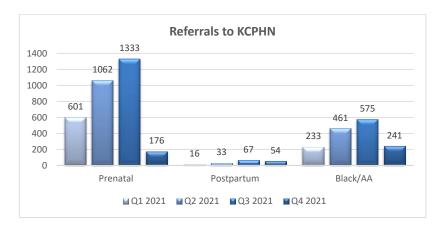
Fluoride varnish treatments are effective in preventing tooth decay and more practical and safer to use with young children. KHS covers up to three topical fluoride varnish treatments in a 12-month period for all members younger than 6 years.

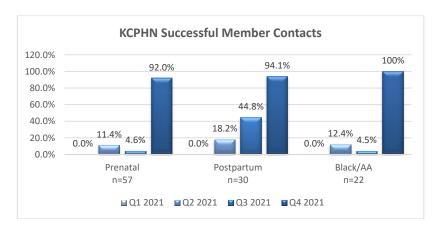


HECL Activities Report Q4 2021 Page **9** of **14**

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 Q4 2021, KHS referred 471 pregnant and postpartum members to KCPHN. Although KCPHN had limited resources to perform outreach due to COVID-19, they referred 2 members to the Nurse Family Partnership Program (NFP), 12 members to the Pregnancy Outreach Program (POP), 9 members to Black Infant Health (BIH) and 1 to the Unplanned Pregnancy Prevention Program (UPPP).

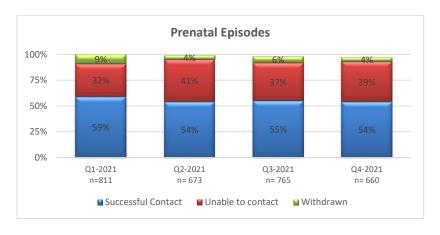


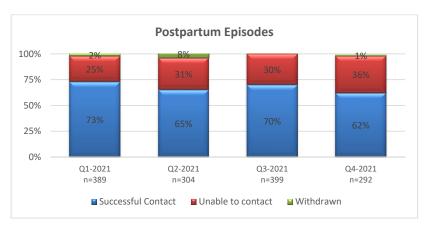


The HE department performs outreach education calls to members with a positive pregnancy test claim, pregnant teens (under age 18), and postpartum members with a Cesarean delivery or teen pregnancy delivery. During the Q4 2021, 660 episodes for pregnant members were completed and the rate of successful contacts

HECL Activities Report Q4 2021 Page **10** of **14**

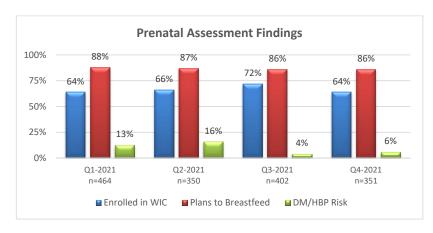
decreased from 55% to 54%. For postpartum members, 292 episodes were completed, and the rate of successful contacts decreased from 70% to 62%. Prenatal assessment findings revealed a 7% decrease in members identified with diabetes or high blood pressure or were at-risk for diabetes or high blood pressure during pregnancy. Postpartum assessment findings revealed a 45% decrease in members reporting that they had already discussed their family planning and birth control options with their provider.

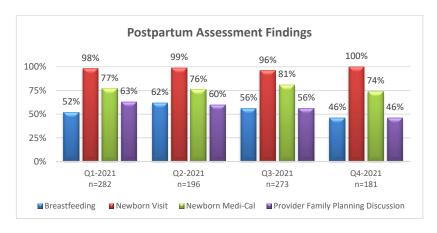




HECL Activities Report Q4 2021 Page **11** of **14**

KERN HEALTH SYSTEMS HEALTH EDUCATION, CULTURAL AND LINGUISTIC ACTIVITIES REPORT 4th Quarter 2021





Interpreter Requests

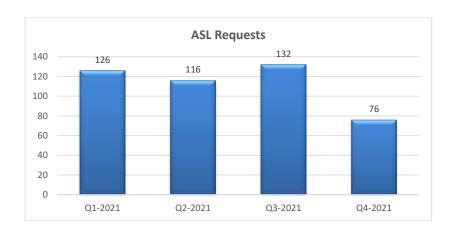
During this quarter, there were 114 requests for Face-to-Face Interpreting, 810 requests for Telephonic Interpreting, 0 for Video Remote Interpreting (VRI) and 76 requests for an American Sign Language (ASL) interpreter.

Top Face-to-Face Interpreting Languages Requested					
Q1-2021	Q2-2021	Q3-2021	Q4-2021		
Spanish	Spanish	Spanish	Spanish		
Punjabi	Vietnamese	Mandarin	Punjabi		
Mandarin	Cantonese	Panjabi	Cantonese		

HECL Activities Report Q4 2021 Page **12** of **14**

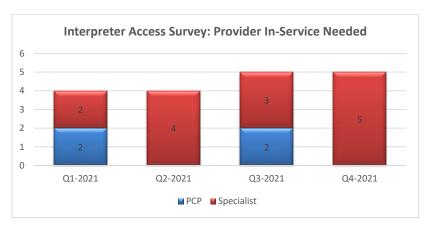
KERN HEALTH SYSTEMS
HEALTH EDUCATION, CULTURAL AND LINGUISTIC ACTIVITIES REPORT
4th Quarter 2021

Top Telephonic Interpreting Languages Requested					
Q1-2021	Q2-2021	Q3-2021	Q4-2021		
Spanish	Spanish	Spanish	Spanish		
Punjabi	Punjabi	Punjabi	Punjabi		
Arabic	Arabic	Arabic	Arabic		



Interpreter Access Survey Calls

KHS conducts a quarterly Interpreter Access Survey with PCPs and Specialists. A total of 30 providers are contacted of which 15 are PCPs and 15 are Specialists. Of the 30 provider calls conducted in Q4 2021, 5 Specialists will need an in-service on accessing appropriate interpreting services for members.



HECL Activities Report Q4 2021 Page **13** of **14**

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, 1,749 requests for written translations were received of which 98% were Notice of Action letters translated in-house into Spanish for the UM and Pharmacy departments.





TO: Public Policy & Community Advisory Committee

FROM: Abigail Romo, Director of Population Health Management

DATE: March 29, 2022

RE: Population Health Management (PHM) Public Policy Report

Background

- Major Organ Transplant (MOT) program launched on January 1, 2022. There are 108 members currently case managed under the MOT program, of which over 60% are kidney-related; 75 members are under the evaluation phase, 21 under the waitlisted phase, 2 are post-transplant for 2022, and 10 are post-transplant for 2021.
- PHM is revamping KHS' Transition of Care (TOC) program and have added an internal case management
 program for TOC, where RN and Social Worker case managers will case manage members who are highrisk for readmission after their hospital stay. This effort will help reduce preventable admissions and
 readmissions.
- PHM is also working on developing the Potentially Preventable Admissions (PPA) program, and refining KHS' Chronic Obstructive Pulmonary Disease (COPD) program. PHM will also develop a Basic Case Management program and update the Complex Case Management program to be in compliant with NCQA requirements.
- Case Management 2021 4th Report is attached and includes the following highlights:
 - 1,731 members were referred to the Case Management team of which 501 cases remained open, and 1,220 were closed.
 - Over 42% of case closures were due to the unsuccessful attempts to contact members.
 - \circ $\,$ Only less than 1% of case managed members are admitted within 30 days post-discharge.
 - Seniors and Persons with Disabilities (SPD) population represents a total of 45% (774) of the Complex Group in October thru December 2021.

Requested Action

Receive and File.

KERN HEALTH SYSTEMS CASE MANAGEMENT DEPARTMENT QUARTERLY REPORT

Report Date: January 6th, 2022

Reporting Period: October 1st, 2021 thru December 31st, 2021

During the months of October thru December 2021, a total of 1,731 members were managed by the Case Management Department.

Episode Total (including previous members)	Closed Episodes	Open Episodes	Referral Episodes	Total
Nurse Case Manager Episodes	846	338	9	1,193
Social Worker Case Manager Episodes	374	163	1	538

Total 1,731

New Episodes October thru December 2021	Closed Episodes	Open Episodes	Referral Episodes	Total
Nurse Case Manager Episodes Assigned	519	226	161	906
Social Worker Case Manager Episodes Assigned	170	92	34	296

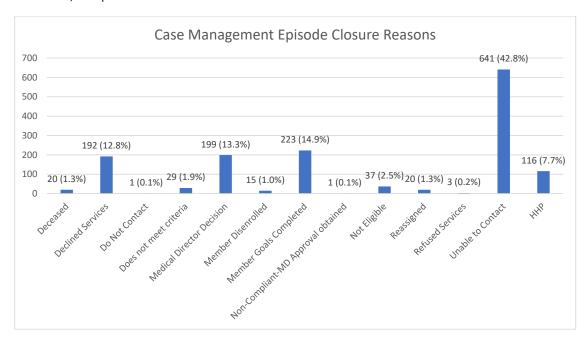
Total 1,202

Severity Levels for Managed Episodes -780

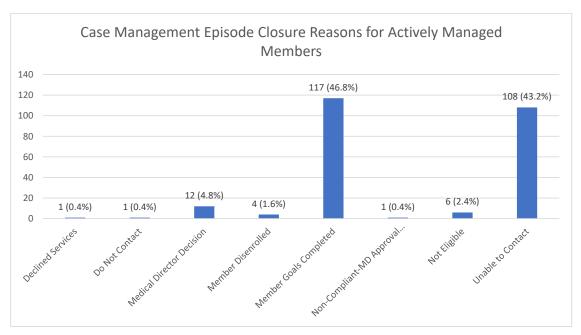
Episode Severity Level	Severity-	Severity-	Severity-	Severity-
	Critical	High	Medium	Low
Case Management	2 (0.4%)	75 (13.9%)	359 (66.6%)	103 (19.1%)
Behavioral Health Case Management	0 (0%)	2 (0.8%)	203 (84.2%)	36 (14.9%)
Total Combined	2 (0.3%)	77 (9.9%)	562 (72.1%)	139 (17.8%)

Episode Source	Social Worker Case Manager	Percentage	Nurse Case Manager	Percentage	Episodes Combined	Percentage Combined
	Episodes		Episodes		Combined	Combined
ACG Modeler	89	16.5%	719	60.3%	808	46.7%
All Internally Generated	8	1.5%	116	9.7%	124	7.2%
Complex Case	0	1.570	110	3.770	124	7.270
Management						
All Internally Generated	0	0.0%	16	1.3%	16	0.9%
Disease Management						
All Internally Generated	1	0.2%	2	0.2%	3	0.2%
Grievance						
All Internally Generated	13	2.4%	113	9.5%	126	7.3%
Hospital Discharge						
All Internally Generated	1	0.2%	58	4.9%	59	3.4%
Medical Director						
All Internally Generated	19	3.5%	28	2.3%	47	2.7%
Member Request						
All Internally Generated	4	0.7%	6	0.5%	10	0.6%
UM Generated						
CM DM HE Facility Based	0	0.0%	1	0.1%	1	0.1%
Social Worker						
BH Mental Health	8	1.5%	0	0.0%	8	0.5%
CM DM HE Health	2	0.4%	3	0.3%	5	0.3%
Education						
CM DM HE Member	36	6.7%	6	0.5%	42	2.4%
Services						
CM DM HE Provider	3	0.6%	16	1.3%	19	1.1%
CM DM High ER Utilizer	53	9.9%	0	0.0%	53	3.1%
Critical High Risk SPD	4	0.7%	2	0.2%	6	0.3%
DM Facility Nurse	2	0.4%	0	0.0%	2	0.1%
DM HE Social Worker Case	3	0.6%	3	0.3%	6	0.3%
Management		0.075		0.075		0.070
HE Postpartum Claim	16	3.0%	0	0.0%	16	0.9%
HE Prenatal Claim	32	5.9%	0	0.0%	32	1.8%
HE Member Portal	0	0.0%	1	0.1%	1	0.1%
HHP Distributive Model	0	0.0%	2	0.2%	2	0.1%
High Risk SPD	244	45.4%	98	8.2%	342	19.8%
Non-Contract	0	0.0%	2	0.2%	2	0.1%
Physician/Provider	O	0.0%	2	0.276	2	0.1%
QR Site Review Master	0	0.0%	1	0.1%	1	0.1%
Trainer	F30	100.00/	1102	100.00/	1721	100.00/
Totals	538	100.0%	1193	100.0%	1731	100.0%

A total of 1,497 Episodes were closed in the Months of October thru December 2021



A total of 250 Episodes were closed in the Months of October thru December 2021 that were Actively Managed

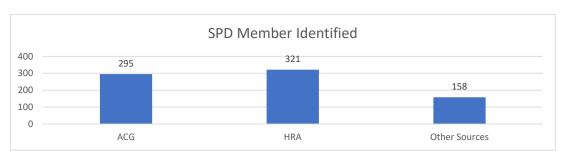


Seniors and Persons with Disabilities (SPDs):

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 45 percent (774) of the Complex Group in October thru December 2021.

The John Hopkins Predictive Modeler identified SPD's represent 38.1% percent of the SPD's identified in the Complex Group in October thru December 2021. HRA identified SPD members represent 41.5% and other sources of SPD members represent 20.4%.



SPD Health Risk Assessment Information:

In the months of October thru December, a total of 2,346 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)	2,340	100%	39
	Partial HRA	156	7%	3
	Full HRA	244	10%	4
	Opted out	50	2%	1
	High Risk members	117	5%	2
	Critical Members	24	1%	0
	Members Contacted	2,287	97%	38
	Call Attempts	5,757		
	Total Surveys Attempted	400		
	Avg # of Calls Per Member	2		
	Avg # Calls per Day	96		
	Avg # of Questions Answered	23		
Sent: 2346; Received: 2340				

Members Closed and Referred to HHP	Behavioral Health Case Management Episodes	Case Management Episodes
ННР	10	10

This depicts November's Data.

Managed Episodes with Hospital Admits within 30 days after Episode Closure	Total
Social Worker Case Management Episodes	2
Nurse Case Management Episodes	7
Percentage of Closed cases Admitted	.009%

Assessments/Plan of Care	Behavioral Health Case Management Episodes	Case Management Episodes	Total
Assessments	148	252	400
Plan of Care	138	242	380

Notes Completed

Note Source	Behavioral Case Management Episodes	Case Management Episodes
Activity Note	1862	2600
Add Episode Note	200	151
Care Plan Problem Note	370	763
Change Status Note	1144	2871
Edit Episode Note	17	204
Episode Note	55	215
Goals	265	666
Interventions	650	814

Letters

Letter Template	Behavioral Health Case Management Episodes	Case Management Episodes
Appointment Letter English	28	36
Appointment Letter Spanish	3	14
Consent Form English	1	6
Consent Form Spanish	1	2
Discharge English	19	40
Discharge Spanish	5	19
Educational Material	48	71
Unable to Contact	82	260
Welcome Letter Bilingual	47	73

Activities Completed

Activities Completed	Total
CMA's	3,246
Nurses	1,885
Social Workers	770

Activity Type

Activity Type	Behavioral Health Case Management Episodes	Case Management Episodes
Clinical Engagement	0	163
COPD Program Referral	0	1
Education	5	117
Fax	149	212
Letter Contact	474	877
Member Services	52	59
New HHP Referral	1	4
Notification	0	4
Outreach	0	6
Phone Call	1447	3004
Program Referral	2	0

Activity Name

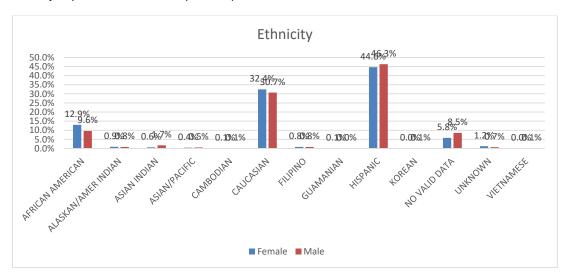
Activity Name	Behavioral Health Case Management Episodes	Case Management Episodes
Appointment Reminder Calls	81	144
Basic Needs	2	0
CEG SW Referral	0	5
Close Episode for CEG		62
Close Episode for UTC	32	39
Community Resources	22	29
Contact Member	379	502
Contact Pharmacy	4	36
Contact Provider	94	459
COVID-19 Education	1	47
COVID-19 Vaccine Education	104	217
Create Work Item	58	78
ННР	0	4
Homeless	1	5
ICT	16	36
Incoming Call	0	18
Inpatient Discharge Follow Up	41	205
Language Line	94	298
Mail Appointment Letter	74	77
Mail Authorization	0	9
Mail Consent Letter	12	33
Mail Discharge Letter	72	179
Mail Educational Material	124	241
Mail Pill Box	37	45
Mail Provider Directory	4	2
Mail Unable to contact letter	86	245
Mail Urgent Care Pamphlet	1	0
Mail Welcome Letter	14	19
Medication Review	4	61
Mental Health Alert to PCP	2	0
Plan of care	138	105
Request Medical Records	19	179
Return Mail	3	15
Schedule Physician Appointment	92	115
Transportation	3	54
Verbal consent to be received	516	861

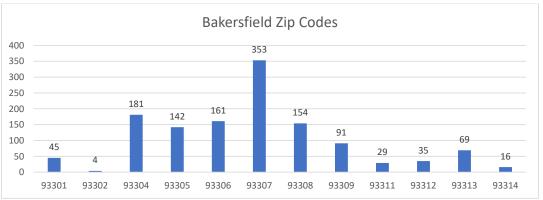
During the months of October thru December, 95% of the members managed were 65 years of age or younger.

Age	<18	18-40	41-65	>65	Total
Nurse Case Manager Episodes	85	269	774	65	1,193
Social Worker Episodes	46	178	288	26	538

Of the 1,731 members managed during the months of October thru December, most members were female at 57%.

The majority of members' ethnicity was Hispanic at 45%.





Outlying Areas

City	Total
ARVIN	36
ATASCADERO	1
BODFISH	4

BORON	4
BUTTONWILLOW	2
CALIENTE	1
CALIF CITY	33
DELANO	71
EDISON	1
FELLOWS	2
FRAZIER PARK	11
HAVILAH	1
INYOKERN	2
KEENE	1
KERNVILLE	3
LAKE ISABELLA	17
LAMONT	33
LANCASTER	1
LEBEC	2
LOS ANGELES	1
LOST HILLS	2
MARICOPA	5
MC FARLAND	19
MODESTO	1
MOJAVE	16
N/A	10
NORTH EDWARDS	1
ONYX	1
PIXLEY	1
RIVERSIDE	1
ROSAMOND	9
SHAFTER	36
STALLION SPGS	1
TAFT	34
TEHACHAPI	41
WASCO	41
WELDON	3
WOFFORD HTS	2



To: Public Policy/Community Advisory Committee Members

From: Maritza Jimenez, Marketing & Public Relations Representative

Date: March 29, 2022

Re: Appointments to the KHS Public Policy/Community Advisory Committee

The following applicants are being submitted for appointment to the KHS Public Policy/Community Advisory Committee (PP/CAC).

Background

The Public Policy/Community Advisory Committee (PP/CAC) provides a mechanism for structured input from KFHC members regarding how KHS operations impact the delivery of their care. The role of the PP/CAC is to implement and maintain community linkages. The PP/CAC is delegated by the KHS Board of Directors to provide input in the development of public policy activities for KHS. The committee makes recommendations and reports findings to the KHS Quality Improvement/Utilization Management Committee, which reports to the KHS Board of Directors. The PP/CAC meets quarterly.

Enclosed is an overview of the KHS Public Policy/Community Advisory Committee: committee structure, outgoing committee member and new committee member recommendations.

Requested Action

Approval of Management's recommendation to appoint two new KFHC members (Rukiyah Polk & Kaelsun Singh Tyiska) to the Kern Health Systems Public Policy/Community Advisory Committee.

Participating KFHC Member Appointments to the Public Policy/Community Advisory Committee



Public Policy/Community Advisory Committee Structure

- 7 KFHC Members (51% or more of committee members must be plan enrollees)
- 1 Member of the KHS Board of Directors
- 1 Participating Health Care Provider
- 1 Kern County Department of Human Services Representative
- 1 Kern County Department of Public Health Representative
- 2 Community Representatives
- 13 Total Committee Members



Public Policy/Community Advisory Committee Changes

- 8 KFHC Members (51% or more of committee members must be plan enrollees)
 - Replace one outgoing KFHC member
 - Adding one more KFHC member to ensure this requirement if KFHC members are not able to attend a meeting.
- 1 Member of the KHS Board of Directors
- 1 Participating Health Care Provider
- 1 Kern County Department of Human Services Representative
- 1 Kern County Department of Public Health Representative
- 2 Community Representatives
- 14 Total Committee Members



Thank Outgoing KFHC Member Representative

- KFHC member Caitlin Criswell is stepping down from PP/CAC.
- Caitlin was appointed to PP/CAC in August 2020.
- We are excited to share that Caitlin is now an employee of KHS serving as a Member Services Representative.
- We would like to thank Caitlin for her service on the committee.



New KFHC Member Representative Appointment

KFHC member Rukiyah Polk is interested in joining PP/CAC to provide her feedback on the plan.

Rukiyah feels she would be a good member of the Committee because she would like to learn about what policies affect the black community and be a voice for the black community when needed.

We feel the member's 1 ½ years with KFHC brings valuable experience to PP/CAC and that she will be a great addition to our group.



New KFHC Member Representative Appointment

KFHC member Kaelsun Singh Tyiska is interested in joining PP/CAC to provide his feedback on the plan.

Kaelsun feels that being Punjabi, he's always served a role by advocating for his Punjabi patients' needs and he would like to take that one step further by joining the Committee. He has great insights on the needs and wants of his community from working in healthcare and feels he can be an excellent addition to the team.

We feel the member's 7 ½ years with KFHC brings valuable experience to PP/CAC and that he will be a great addition to our group.

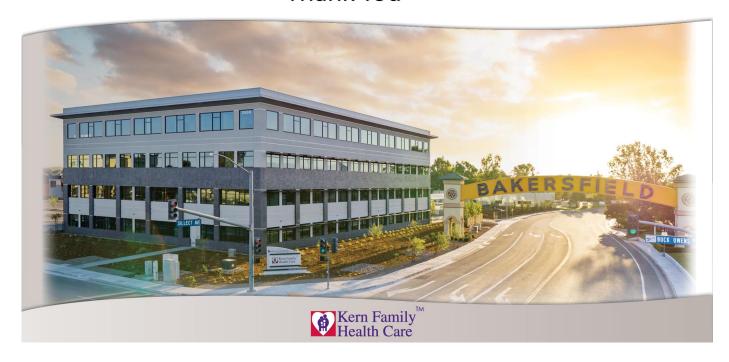


Requested PP/CAC Action

Approve appointments of two new KFHC Member Representatives to the KHS Public Policy/Community Advisory Committee



Thank You





To: Public Policy Committee Meeting

From: Nate Scott

Date: March 29, 2022

Re: Executive Summary for 4th Quarter 2021 Operational Board Update - Grievance

Report

Background

Executive Summary for 4th Quarter 2021 Operational Board Update - Grievance Report: When compared to the previous four quarters, there were no significant trends identified as they relate to the Grievances and Appeals received during the 4th Quarter, 2021.

We cannot predict how many Grievances we will receive on any given day. However, we can assess if a certain event may have led to an increase or decrease in the receipt of grievances. The slight increase in Potential Inappropriate Care grievances from 3rd quarter, 2021, to the 4th quarter, 2021, can be attributed to process modifications implemented after feedback received during our DHCS Member Rights Audit interview, completed in the 3rd Quarter, 2021.

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

Requested Action

Receive and File

4th Quarter 2021 Grievance Report

Total Grievance and Appeals per 1,000 Members = 7.29

	1014	ii Gricvani	Le and Appeals per 1,000 Members - 7.23				
Category	4 th Quarter 2021	Status	Issue	Q3 2021	Q2 2021	Q1 2021	Q4 2020
Access to Care	131		Appointment Availability	148	90	77	72
Coverage Dispute	0		Authorizations and Pharmacy	0	0	0	0
Medical Necessity	266		Questioning denial of service	329	308	308	317
Other Issues	36		Miscellaneous	18	20	11	14
Potential Inappropriate Care	256		Questioning services provided. All cases forwarded to Quality Dept.	164	183	156	200
Quality of Service	55		Questioning the professionalism, courtesy and attitude of the office staff. All cases forwarded to PR Department	53	31	8	7
Total Formal Grievances	744			712	632	560	610
Exempt**	1431		Exempt Grievances-	1520	1570	1179	1050
Total Grievances (Formal & Exempt)	2175			2232	2202	1739	1660



2

Additional Insights-Formal Grievance Detail

Issue	4 th Quarter Grievances	Upheld Plan Decision	Further Review by Quality	Overturned Ruled for Member	Still Under Review
Access to Care	73	47	0	21	5
Coverage Dispute	0	0	0	0	0
Specialist Access	58	27	0	22	9
Medical Necessity	266	199	0	67	0
Other Issues	36	20	0	8	8
Potential Inappropriate Care	256	144	103	9	0
Quality of Service	55	32	0	12	11
Total	744	469	103	139	33



3



To: PP/CAC Committee

From: Louis Iturriria Date: March 29, 2022

Re: KFHC COVID-19 Vaccination Efforts

Background

Kern Family Health Care (KFHC) is committed to increasing COVID-19 Vaccination rates among our members and the Kern County community. We are focused on identifying unvaccinated members, educating them as to the vaccine's importance, increasing access to COVID-19 vaccination sites and providing incentives to encourage becoming vaccinated. Starting September 1, 2021 through March 31, 2022, KFHC is offering an incentive to members who get fully vaccinated (\$50 in gift cards to members receiving full vaccinations). A team of KFHC staff are performing outreach calls to inform our members of vaccination sites and pop-up clinic events. Other education efforts include media campaigns and supporting community vaccination efforts.

Requested Action

Receive and File

KFHC COVID-19 Vaccination Efforts



COVID-19 Vaccination Rates

- As of August 29th, 46% of Kern County's eligible population were fully vaccinated against COVID-19. 27% of eligible KFHC members were fully vaccinated.
- As of March 8th, 55% of Kern County's eligible population are fully vaccinated against COVID-19. 41% of eligible KFHC members are fully vaccinated. 48% of KFHC members ages 12 and older are fully vaccinated.
 - While the Kern County vaccination rate grew **9%** over the last 6-month period, the KFHC rate grew **14%** and by **21%** in the ages 12 and older group (these ages were eligible in September 2021).



Media/Outreach Campaign Update

- Television campaign partnered with No Sister Left Behind to produce and purchase ads for a TV campaign targeting the African American community.
 - English advertisements aired on KBAK, KBFX and KGET (Super Bowl Sunday) in February and March 2022.
 - English TV Ad: https://vimeo.com/673799185
- Collaborated with Bernita Jenkins to design/print posters to display in home churches and small businesses that serve our local African American community.
 - Testimonials from Black youth, doctor and nurse.



C-19 Vaccination Community Efforts Being Supported

- Cal State University Bakersfield Vaccination Clinic KFHC and Kern Medical continue providing on-campus vaccinations once a week (Wednesday's from 10am-2pm) through March 2022. Clinic is for students and open to the public.
- **Kern County Latino COVID-19 Task Force** continue to provide vaccination events throughout the county along with education and a Mental Health/Help Line through June 2022. In 2021, they provided over 18,000 vaccinations throughout the county.
- No Sister Left Behind provided vaccination clinics at MLK Park Gym in January/March 2022 and education to our African American community.
- California Farmworker Foundation provided 22 vaccination clinics at worksites/communities in northern and southern Kern County and direct education to farmworkers and agricultural employers through early March 2022. They averaged over 130 vaccinations at each clinic.
- **Delano Union School District** are seeing success vaccinating 400-500 individuals at their vaccine events. They have one per month this school year and offer vaccinations at their school sites and vision clinic.
- Other Vaccination Clinics KHS providers held COVID-19 vaccination Pop-Up clinics: Premier Urgent Care in SW Bakersfield, Komoto Pharmacy in Delano, Clinica Sierra Vista Central Bakersfield, Kern Medical and Adventist Health Immunization Program.



KFHC COVID-19 Vaccination Initiatives

- **Direct Member Incentives** offering a \$25 gift card for each COVID-19 vaccination for both the Moderna and Pfizer vaccine, or \$50 for the Johnson & Johnson vaccine. This was extended through March 2022 and all eligible members 5 and older qualify.
- · Outreach calls KHS staff are making outreach calls to encourage members to get the COVID-19 vaccine.
 - COVID-19 Vaccine Reservation Specialists in Member Services are dedicated phone staff who support our outreach call efforts. Their efforts continue through March 2022.
- Member outreach/education efforts also include mail, robocalls, website and social media.
 - Additional mailings in January and March 2022 promoting our C-19 Vaccine Member Rewards Program.
 - Robocalls to over 56,000 phone numbers in February 2022 promoting our C-19 Vaccine Member Rewards Program.



Thank You





To: Public Policy/Community Advisory Committee

From: Isabel Silva, MPH

Date: March 29, 2022

Re: 2021 4th Quarter Health Education Activities Report & 2022 Member Newsletters

Background

KHS' contract with 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.

Enclosed are the quarterly health education report summarizing all health education, cultural and linguistic activities performed during the 4th quarter of 2021 and a presentation on the articles planned for the 2022 members newsletters.

Requested Action

Receive and File.



Health Education Department 2022 Member Newsletters



Spring 2022 Newsletter

Delivered to member homes in early May 2022

Topics covered

- Family planning and Birth control
- Black Infant Health (BIH)
- **Translation services**
- Well Child Visits
- Member reward
- Cholesterol
- Infant Feeding and milestones
 STD- Chlamydia
- Covid 19- Boosters
- Diabetic- A1C

- mRNA Vaccines
- When to get the Covid shot.
- Covid 19 and infertility
- Smoking cessation classes
- Asthma classes
- New member benefits (Community Support Services)
- New Medi-cal Rx.





Fall 2022 Newsletter

Delivered to member homes in October 2022

Topics to be covered

- Lead Awareness
- Alternative health
- Nurse Advice line
- Abdominal pain
- Mental health
- Patient and doctor communication
- Menopause

- Fraud waste and abuse
- Timely access
- Breast cancer Screenings
- Mammograms and safety
- Timely access
- Nurse advice line





Questions? Bernardo Ochoa, MPH

Member Health Educator

Bernardo.Ochoa@khs-net.com

2900 Buck Owens Blvd Bakersfield, CA 93308 661-617-2669