

# PUBLIC POLICY/COMMUNITY ADVISORY COMMITTEE

Tuesday, March 30, 2021 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 30, 2021

11:00 A.M.

All agenda item supporting documentation is available for public review on the Kern Health Systems website: <a href="https://www.kernfamilyhealthcare.com/about-us/committees/">https://www.kernfamilyhealthcare.com/about-us/committees/</a> Following the posting of the agenda, any supporting documentation that relates to an agenda item for an open session of any regular meeting that is distributed after the agenda is posted and prior to the meeting will also be available on the KHS website.

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

### COMMITTEE TO RECONVENE

Members: Janet Hefner, Jennifer Wood, Jasmine Ochoa, Valerie Rangel, Cecilia Hernandez-Colin, Beatriz Basulto, 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 Page 2 03/30/2021

### **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 15, 2020

  APPROVE
- CA-4) Report on March 2021 Medi-Cal Membership Enrollment RECEIVE AND FILE
- CA-5) Report on Health Education for fourth quarter ending December 31, 2020 RECEIVE AND FILE
- CA-6) Report on Disease Management for fourth quarter ending December 31, 2020 RECEIVE AND FILE
- CA-7) Report on KFHC Grievance Summary for fourth quarter ending December 31, 2020 RECEIVE AND FILE
  - 8) Report on KFHC Grievances for fourth quarter ending December 31, 2020 and 2020 Member Satisfaction Survey RECEIVE AND FILE
  - 9) Report on KFHC COVID-19 Vaccine Communication Plan RECEIVE AND FILE
  - 10) Report on KFHC Spring and Fall 2021 Member Newsletters RECEIVE AND FILE

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

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11) Report on Case Management for fourth quarter ending December 31, 2020 RECEIVE AND FILE

ADJOURN TO TUESDAY, June 29, 2021 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 OF PROCEEDINGS

### PUBLIC POLICY/COMMUNITY ADVISORY COMMITTEE

KERN HEALTH SYSTEMS 2900 Buck Owens Boulevard Bakersfield, California 93308

GoToMeeting Tuesday, December 15, 2020

11:00 A.M.

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

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### COMMITTEE RECONVENED

Members Present: Janet Hefner, Jennifer Wood, Cecilia Hernandez-Colin, Jasmine Ochoa, Valerie Rangel, Beatriz Basulto, Jose Sanchez, Tammy Torres, Caitlin Criswell, Michelle Bravo, Alex Garcia, Quon Louey

Members Absent: Yadira Ramirez

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

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

Summary of Proceedings – Public Policy/Community Advisory Committee Kern Health Systems Regular Meeting

### **PUBLIC PRESENTATIONS**

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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])
  - Jennifer Wood acknowledged Kern Family Health Care for participating in the Lamont Toy Drive.
- CA-3) Minutes for Public Policy/Community Advisory Committee meeting on September 29, 2020 APPROVED
- CA-4) Report on December Medi-Cal Membership Enrollments RECEIVED AND FILED
- CA-5) Report on Health Education Report for third quarter ending September 30, 2020 RECEIVED AND FILED
- CA-6) Report on Disease Management Report for third quarter ending September 30, 2020 RECEIVED AND FILED

All Consent Agenda Items Approved (CA-3 through CA-6) Garcia-Hefner: All Ayes

7) Report on Member Services Reports for third quarter ending September 30, 2020 and Kern Family Health Care Grievance & Appeals Overview – RECEIVED AND FILED

Hernandez Colin-Hefner: All Ayes

Report on Kern Family Health Care Back to Care Campaign –
 RECEIVED AND FILED
 Garcia-Hefner: All Ayes

Summary of Proceedings – Public Policy/Community Advisory Committee Kern Health Systems Regular Meeting Page 3 12/15/2020

- Louie Iturriria presented a Power Point Presentation and shared the TV and Radio commercials for the new program.
- 9) Report on Kern Family Health Care Member Rewards Program RECEIVED AND FILED
  - Isabel Silva reviewed new MCAS Member Rewards Program with committee to encourage members to access routine preventive care services.
- 10) Report on Case Management Report for third quarter ending September 30, 2020 RECEIVED AND FILED Hefner-Louey: All Ayes

MEETING ADJOURNED BY LOUIE ITURRIRIA,
DIRECTOR OF MARKETING AND PUBLIC RELATIONS @ 11:57 A.M.
TO TUESDAY, MARCH 30, 2021 AT 11:00 A.M

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### KHS MARCH 2021 ENROLLMENT:

#### **Medi-Cal Enrollment**

As of March 1, 2021, Medi-Cal enrollment is 194,826 which represents an increase of 0.2% from February enrollment.

#### Seniors and Persons with Disabilities (SPDs)

As of March 1, 2021, SPD enrollment is 14,065, which represents a decrease of 0.02% from February enrollment.

### **Expanded Eligible Enrollment**

As of March 1, 2021, Expansion enrollment is 73,835, which represents an increase of 1.4% from February enrollment.

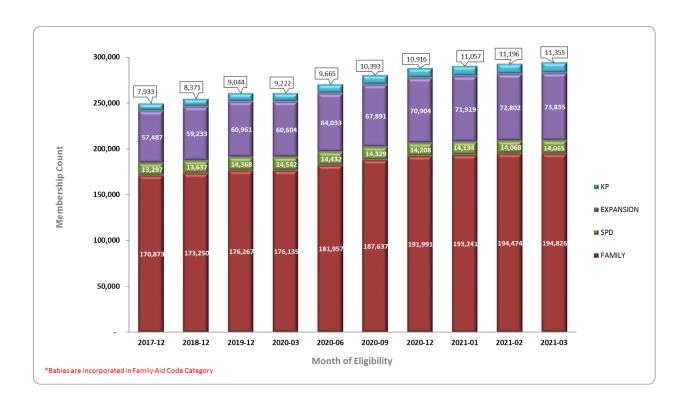
### Kaiser Permanente (KP)

As of March 1, 2021, Kaiser enrollment is 11,355 which represents an increase of 1.4% from February enrollment.

#### **Total KHS Medi-Cal Managed Care Enrollment**

As of March 1, 2021, total Medi-Cal enrollment is 294,081, which represents an increase of 0.5% from February enrollment.

Membership as of						
Month of Eligibility	FAMILY	SPD	EXPANSION	KP	BABIES	Member Total
2017-12	170,426	13,297	57,487	7,933	447	249,590
2018-12	172,772	13,637	59,233	8,371	478	254,491
2019-12	175,838	14,368	60,961	9,044	429	260,640
2020-03	175,706	14,542	60,604	9,222	429	260,503
2020-06	181,536	14,432	64,033	9,665	421	270,087
2020-09	187,174	14,329	67,891	10,393	463	280,250
2020-12	191,589	14,208	70,904	10,916	402	288,019
2021-01	192,762	14,134	71,919	11,057	479	290,351
2021-02	194,043	14,068	72,802	11,196	431	292,540
2021-03	194.465	14.065	73.835	11.355	361	294.081



Report Date: January 12, 2021

### **OVERVIEW**

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

The following pages reflect statistical measurements for the Health Education department detailing the ongoing activity for the 4<sup>th</sup> quarter 2020.

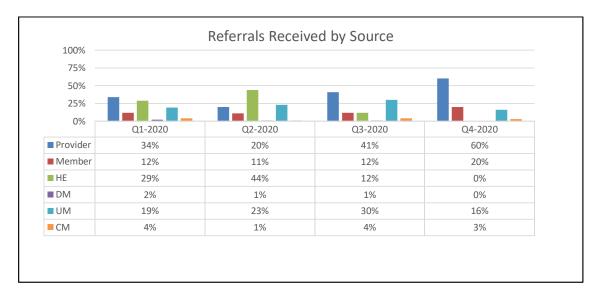
- Asthma Mitigation Project
- Prenatal and Postpartum Care Baby Steps Program
- Virtual Health Education Classes

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

> Health Education Activities Report 4<sup>th</sup> Quarter 2020 Page **1** of **15**

### **REFERRALS FOR HEALTH EDUCATION SERVICES**

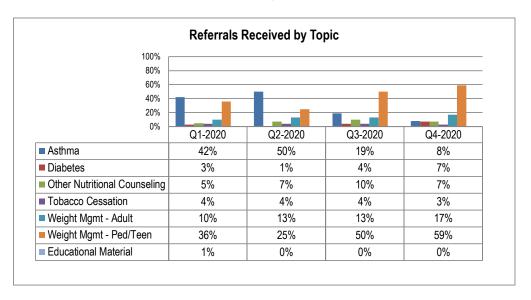
The Health Education Department (HE) receives referrals from various sources. Internal referrals are received from the Kern Health Systems (KHS) Utilization Management (UM), Disease Management (DM), Case Management (CM), Member Services (MS), and Member Portal. Externally, KHS providers submit referrals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



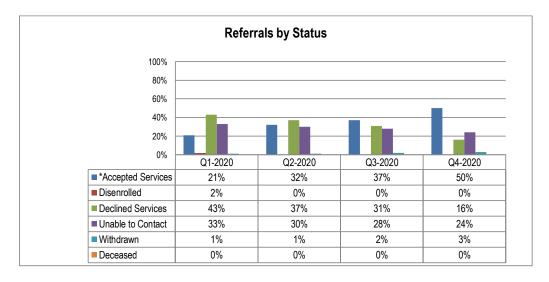
During this quarter, 707 referrals were received which is a 0.4% decrease in comparison to the previous quarter.

Health Education Activities Report 4<sup>th</sup> Quarter 2020 Page **2** of **15** 

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HEALTH EDUCATION, CULTURAL AND LINGUISTIC ACTIVITIES REPORT
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The HE department receives referrals for various health conditions. This quarter, referrals for Ped/Teen weight management education increased from 50% to 59% due to an increase in provider referrals.



The rate of members who accepted to receive health education services increased from 37% in the  $3^{rd}$  quarter to 50% in the 4th quarter of 2020.

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#### **HEALTH EDUCATION SERVICE PROVIDERS**

The HE department offers various types of services through KHS or through community partnerships. These services are currently being provided in a virtual setting or have been placed on hold due to COVID-19.

### **Kern Family Health Care (KFHC):**

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

### **Bakersfield Memorial Hospital (BMH):**

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

### Clinica Sierra Vista (CSV) WIC:

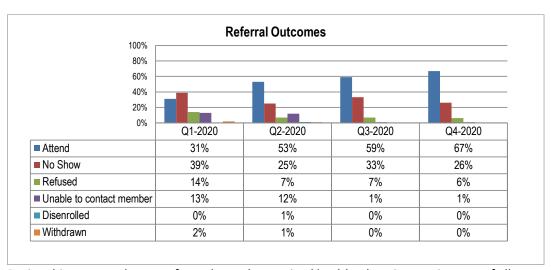
- Diabetes Management Classes
- ➤ Heart Healthy Classes

### California Smokers' Helpline (CSH):

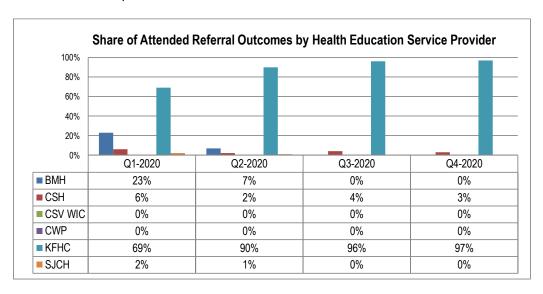
> Telephone Smoking Cessation Counseling

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### **REFERRAL OUTCOMES**



During this quarter, the rate of members who received health education services out of all members who accepted services increased from 59% to 67%.

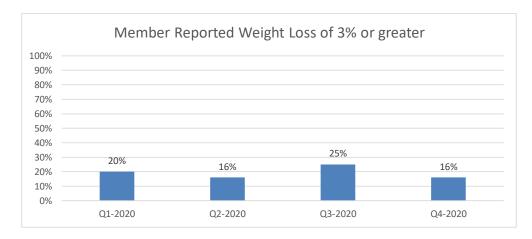


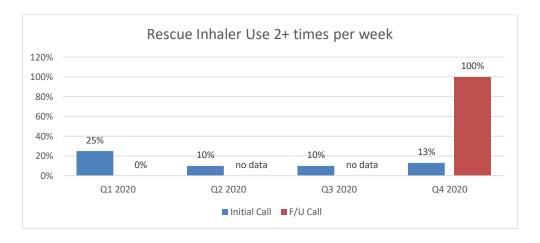
Services through KFHC demonstrates to be the largest share of referral outcomes. This quarter KFHC showed an increase from 96% in the 3<sup>rd</sup> quarter to 97% in the 4<sup>th</sup> quarter of 2020.

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#### **Effectiveness of Health Education Services**

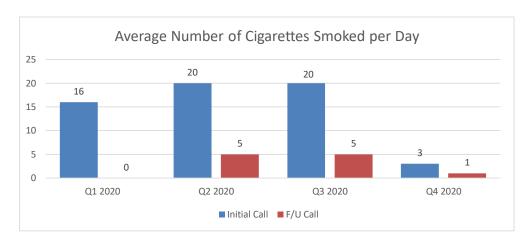
To evaluate the effectiveness of the health education services provided to members, a 3-month follow up call was conducted on members who received services during the prior quarter. Of the 16 members who participated in the 3 month follow up call, 14 received weight management education 1 received smoking cessation education and 1 received asthma management education. All findings are based on self-reported data from the member.





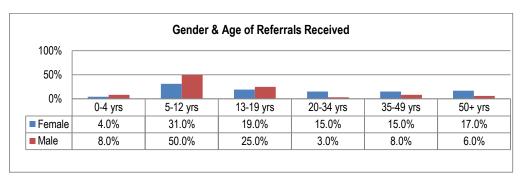
Health Education Activities Report 4<sup>th</sup> Quarter 2020 Page **6** of **15** 

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Fourth Quarter 2020



### **Demographics of Members**

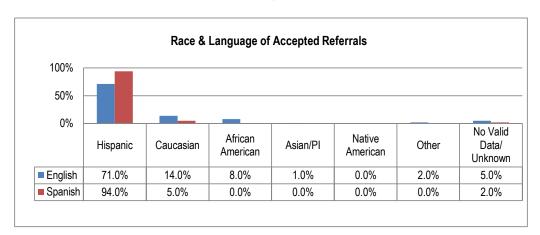
KHS' provides services to a culturally and linguistically diverse member population. KHS' language threshold is English and Spanish, and all services and materials are available in these languages.



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

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

ı	Referrals Accepted by Top Bakersfield Zip Codes				
Q1-2020	Q2-2020	Q3-2020	Q4-2020		
93307	93307	93307	93307		
93306	93306	93306	93304		
93304	93304	93305	93306		
93309	93308	93313	93313		
93305	93309	93309	93309		

KHS serves members in the Kern County area. During this quarter, 79% of the members who accepted services reside in Bakersfield and the highest concentration of members were in the 93307 area.

Referrals Accepted by Top Outlying Areas			
Q1-2020	Q2-2020	Q3-2020	Q4-2020
Delano	Delano	Delano	Arvin
McFarland	Lamont	Wasco	Delano
Tehachapi	Arvin	Arvin	Lamont
Lamont	Shafter	Shafter	McFarland
Arvin	Tehachapi	Lamont	Taft

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Additionally, 21% of the members who accepted services reside in the outlying areas of Kern County and the highest concentration of members reside in Arvin.

### **Health Education Mailings**

In addition to referrals, the HE department mails out a variety of educational material in an effort to assist members with gaining knowledge on their specific diagnosis or health concern. During this quarter, the HE department was not able to provide material by mail due to COVID-19 limitations. Members were directed to access digital information available on the Kern Family Health Care website.

	E	ducational Mailing	S	
	Q1-2020	Q2-2020	Q3-2020	Q4-2020
Anemia	0	0	0	0
Asthma	305	0	0	0
High Cholesterol	6	0	0	0
Diabetes	20	0	0	0
<b>Gestational Diabetes</b>	2	0	0	0
High Blood Pressure	13	0	0	0
COPD	2	0	0	0
Postpartum Care	564	0	0	0
Prenatal Care	120	0	0	0
Smoking Cessation	12	0	0	0
Weight Management	357	0	0	0
WIC	245	0	0	0
Total	1,646	0	0	0

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### **INTERPRETER REQUESTS**

#### **Face-to-Face Interpreter Requests**

During this quarter, there were 130 requests for face-to-face interpreting services received, which was a decrease in comparison to the previous quarter. KHS employs qualified staff interpreters in Spanish and contracts with the interpreting vendor, CommGap. During this quarter, the majority of these requests were for a Spanish interpreter.

Top Languages Requested			
Q4-2019	Q1-2020	Q2-2020	Q3-2020
Spanish	Spanish	Spanish	Spanish
Punjabi	Punjabi	Punjabi	Punjabi
Mandarin	Mandarin	Arabic	Cantonese
Arabic	Arabic	Cantonese	Arabic
Cantonese	Cantonese	Vietnamese	Thai
Vietnamese	Persian		

### **Telephonic Interpreter Requests**

During this quarter, there were 595 requests for telephonic interpreting services through KHS' interpreting vendor, Language Line Solutions, which was a decrease in comparison to the previous quarter. During this quarter, the majority of these requests were for a Spanish interpreter.

Top Languages Requested			
Q1-2020	Q2-2020	Q3-2020	Q4-2020
Spanish	Spanish	Spanish	Spanish
Punjabi	Punjabi	Punjabi	Punjabi
Arabic	Arabic	Arabic	Arabic
Mandarin	Tagalog	Vietnamese	Vietnamese
Tagalog	Vietnamese	Cantonese	Mandarin
			Thai

### American Sign Language (ASL) Requests

During this quarter, there were a total of 93 requests received for an American Sign Language interpreter, which was a decrease in comparison to the previous quarter.

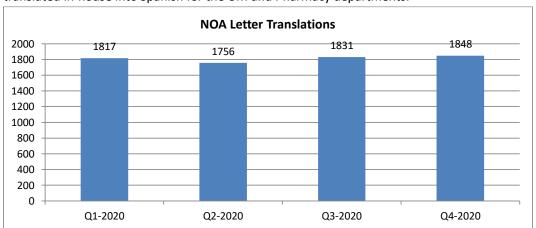
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### **DOCUMENT TRANSLATIONS**

The Health Education department coordinates the translation of written documents for members. Translations are performed in-house by qualified translators or outsourced through a contracted translation vendor. During this quarter, 1,848 Notice of Action letters were translated in-house into Spanish for the UM and Pharmacy departments.

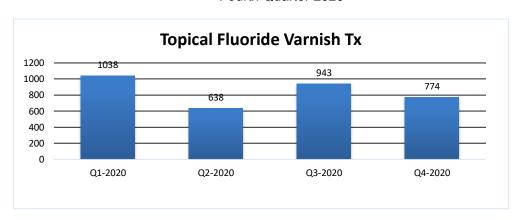


### **TOPICAL FLUORIDE VARNISH TREATMENTS**

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

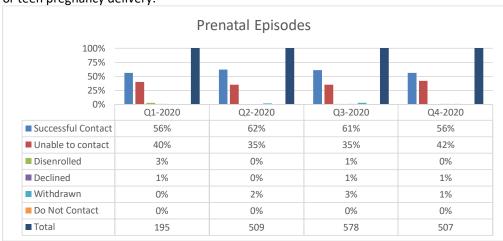
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Fourth Quarter 2020



### PERINATAL OUTREACH AND EDUCATION

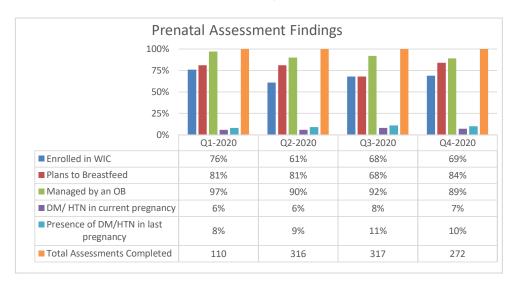
The HE department performs outreach education calls to all members identified as being pregnant in the 1<sup>st</sup> trimester, a pregnant teen (under age 18), or postpartum due to a C-section or teen pregnancy delivery.



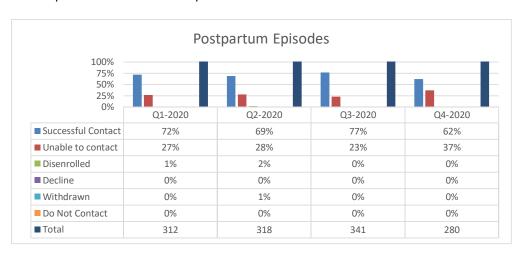
During the 4<sup>th</sup> quarter of 2020, 507 episodes for pregnant members were completed and the rate of successful contacts decreased from 61% to 56%.

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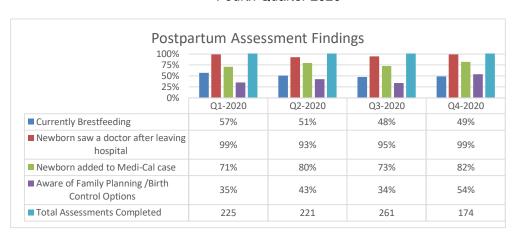


The total prenatal assessments completed decreased from  $3^{rd}$  quarter to the  $4^{th}$  quarter. Although there was a slight increase in the percentage of members reporting that they were enrolled in WIC, the percentage of members who planned to breastfeed increased from 68% in the  $3^{rd}$  quarter to 84% in the  $4^{th}$  quarter.



During the 4<sup>th</sup> quarter 2020, 280 postpartum episodes were closed and the rate of successfully contacts decreased from 77% to 62%.

Health Education Activities Report 4<sup>th</sup> Quarter 2020 Page **13** of **15** 



Postpartum assessments completed decreased from 261 assessments in the 3<sup>rd</sup> quarter to 174 assessments completed in the 4<sup>th</sup> quarter of 2020. The percentage of members who reported adding their newborn to their Medi-Cal case increased by 9 percentage points and the percentage of members who reported that they were aware of their family planning options increased by about 20 percentage points.

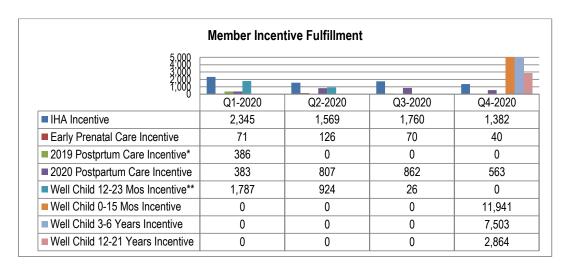
#### MEMBER WELLNESS BASED INCENTIVES AND CHRONIC CONDITION TOOLS

During the 4th quarter of 2020, KHS continued to offer wellness based incentives for members. In January 2020, the postpartum care incentive was modified to align with the new MCAS measure where the time frame to complete this visit is now 1-12 weeks following delivery. Additionally, the well child 12-23 months incentive program was discontinued in April and will be replaced with another incentive program that better aligns with the new MCAS measures.

- Initial Health Assessment (IHA) newly enrolled members who complete the IHA visit within 120 days of enrollment are mailed a \$10 gift card.
- **Early Prenatal Care** pregnant members who complete prenatal care during the 1<sup>st</sup> trimester will receive a \$30 gift card.
- **2019 Postpartum Care** members who delivered in 2019 and complete the postpartum visit within 21-56 days following delivery will receive a \$30 gift card.

Health Education Activities Report 4<sup>th</sup> Quarter 2020 Page **14** of **15** 

- **2020 Postpartum Care** members who delivered in 2020 and complete the postpartum visit within 1-12 weeks following delivery will receive a \$30 gift card.
- Well Child 0-15 Months members between 0-15 months of age who complete a series of well baby visits will receive a \$10 gift card for each visit up to 6 visits.
- **Well Child Care 3-6 Years** members between the ages of 3-6 years old who complete a well child visit will receive a \$15 gift card.
- Well Child Care 12-21 Years members between 12-21 years of age who complete a well child visit will receive a \$20 gift card.



<sup>\*</sup>Discontinued as of 1/1/2019. Incentive fulfilled due to claims lag.

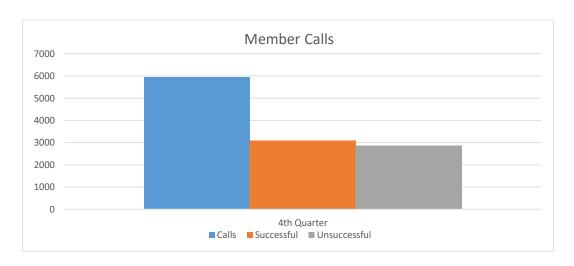
<sup>\*\*</sup>Discontinued as of 4/1/2020. Incentives fulfilled due to claims lag.

### **Disease Management Quarterly Report**

### 4th Quarter, 2020

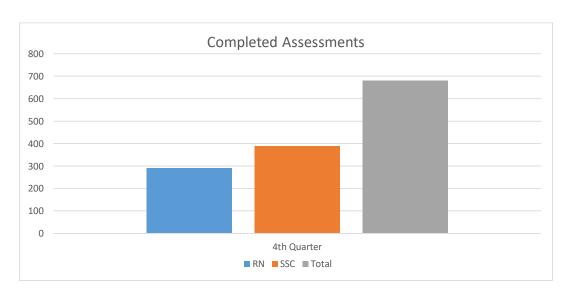
**Telephone Calls:** A total of 5,955 calls were made by the DM staff during the 4th Quarter, 2020.

Member Calls Attempted	Successful Calls	Unsuccessful Calls	Total Member Calls	% Contacted
RN	1,395	1,326	2,721	51%
SSC	1,703	1,531	3,234	53%
Total	3.098	2,857	5,955	52%



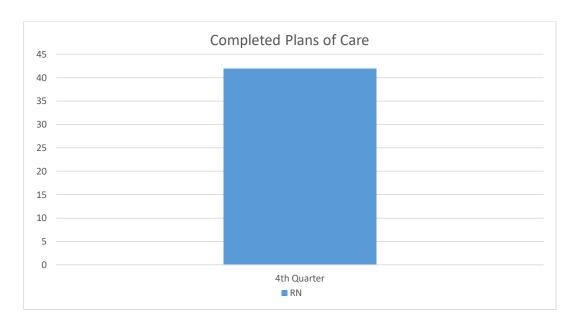
### New Assessments Completed.

RN	SSC	Total
290	390	680



### Plans of Care Completed & Closed.

RN	
42	

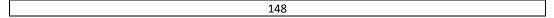


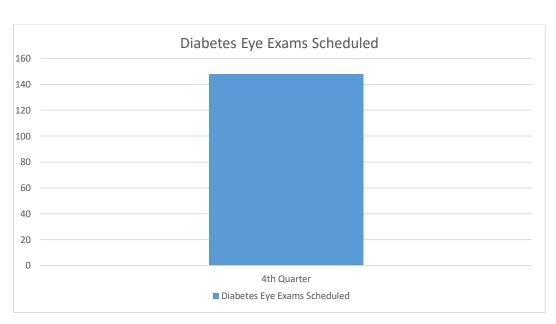
### Educational Material Mailed. No educational material being mailed at this time

0

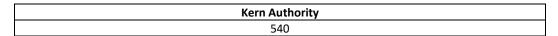


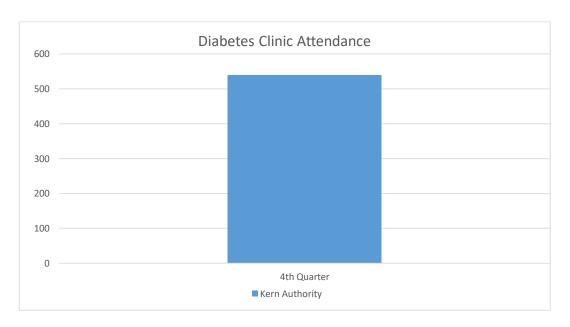
### Diabetes Eye Exams Scheduled.





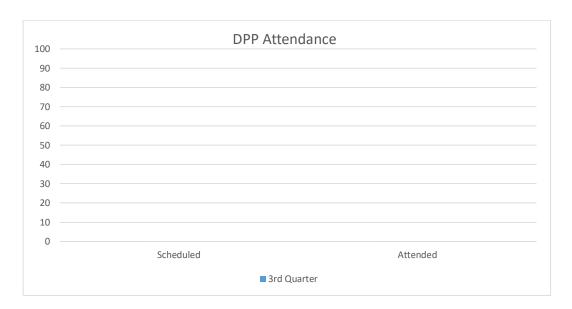
#### **Diabetes Clinic Attendance.**



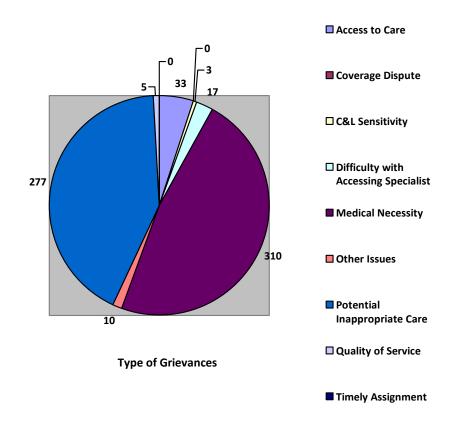


**Diabetes Prevention Program:** The first DPP program was completed at the end of February, 2020. Of the 48 members who attended the first session on March,  $4^{th}$ , 2019, 22 members completed the 26 sessions. The  $2^{nd}$  cohort has been delayed as a result of COVID19.

Sessions Scheduled to Attend (Jan & Feb)	Actual Sessions Attended (Jan & Feb)		
0	0		



Issue	Number	In Favor of Health Plan	Under Review by Q.I	In favor of Enrollee	Still under review
Access to care	50	31	0	19	0
Coverage dispute	0	0	0	0	0
Cultural and Linguistic Sensitivity	2	2	0	0	0
Difficulty with accessing specialists	22	15	0	7	0
Medical necessity	317	184	0	133	0
Other issues	14	9	0	5	0
Potential Inappropriate care	200	97	93	10	0
Quality of service	5	5	0	0	0
Timely assignment to provider	0	0	0	0	0



### Grievances per 1,000 Members =2.20

During the fourth quarter of 2020, there were six hundred and ten formal grievances and appeals received. One hundred seventy-four cases were closed in favor of the Enrollee; three hundred and forty four cases were closed in favor of the Plan. Ninety-two cases have closed and are under review by Quality Improvement. Six hundred and seven cases closed within thirty days. Three cases were pended and closed after thirty days.

### **Access to Care**

There were fifty grievances pertaining to access to care. Thirty-one cases closed in favor of the Plan. Nineteen cases closed in favor of the Enrollee. The following is a summary of these issues:

Twenty-five members complained about the lack of available appointments with their Primary Care Provider (PCP). Fifteen cases closed in favor of the Plan after the response indicated the office provided appropriate access to care based on Access to Care standards. Ten 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.

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

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

One member complained about a provider not submitting a referral authorization request in a timely manner. This case closed in favor of the Plan after it was determined the referral authorization request had been submitted timely.

### **Coverage Dispute**

There were no grievances pertaining to a Coverage Dispute issue.

### **Cultural and Linguistic Sensitivity**

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

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

### **Difficulty with Accessing a Specialist**

There were twenty-two grievances pertaining to Difficulty Accessing a Specialist. Fifteen cases closed in favor of the Plan. Seven cases closed in favor of the Enrollee. The following is a summary of these issues:

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

Five members complained about the wait time to be seen for a specialist appointment. Four 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. One case closed in favor of the Enrollee after the response indicated the member may not have been provided with the appropriate wait time for an appointment based on Access to Care Standards.

Seven members complained about the telephone access with a specialist office. Six cases closed in favor of the Plan after the responses indicated the member was provided with the appropriate telephone access. One case closed in favor of the Enrollee after the response indicated the member may not have been provided with the appropriate telephone access.

### **Medical Necessity**

There were three hundred and seventeen appeals pertaining to Medical Necessity. One hundred eighty-four cases were closed in favor of the Plan. One hundred and thirty-three of the cases closed in favor of the Enrollee. The following is a summary of these issues:

Two hundred and eighty-three members complained about the denial or modification of a referral authorization request. One hundred and fifty-one 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. Three cases were closed in favor of the Plan and modified. One hundred and twenty-nine cases were closed in favor of the Enrollee as it was determined medical necessity was met and the denials were overturned.

Thirty-four members complained about the denial or modification of a TAR. Thirty 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. Four cases were closed in favor of the Enrollee as it was determined medical necessity was met and the denials were overturned.

### **Other Issues**

There were fourteen grievances pertaining to Other Issues. Nine cases were closed in favor of the Plan after the responses indicated appropriate service was provided. Five 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 grievances involving Potential Inappropriate Care issues. These cases were forwarded to the Quality Improvement (QI) Department for their due process. Upon review, ninety-seven cases were closed in favor of the Plan, as it was determined a quality of care issue could not be identified. Ten cases were closed in favor of the Enrollee as a potential quality of care issue was identified and appropriate tracking or action was initiated. Ninety-three cases are still pending further review with QI. The following is a summary of these issues:

One hundred and twenty-eight members complained about the potential inappropriate care received from a Primary Care Provider (PCP). All records and/or responses were sent to QI for further review and investigation. Sixty-eight cases closed in favor of the Plan as no inappropriate care issue was identified. Nine cases closed in favor of the enrollee as a potential inappropriate care concern was identified and is still under further review with QI. Fifty-one cases are still under further review with QI.

Fifty-four members complained about the potential inappropriate care received from a specialty provider. All records and/or responses were sent to QI for further review and investigation. Twenty-five cases closed in favor of the Plan as no potential inappropriate care issue was identified. One case closed in favor of the Enrollee as a potential inappropriate care concern was identified and is still under further review with QI. Twenty-eight cases are still under further review with QI.

Sixteen members complained about the potential inappropriate care received from providers staffed by an urgent care, hospital, or a non-hospital affiliated clinic. All records and/or responses were sent to QI for further review and investigation. Three cases closed in favor of the Plan as no potential inappropriate care issue was identified. Thirteen cases are still under further review with QI.

Two members complained about the potential inappropriate care received from a pharmacy. All records and/or responses were sent to QI for further review and investigation. One case closed in favor of the Plan as no potential inappropriate care issue was identified. One case is still under further review with QI.

### **Quality of Service**

There were five grievances involving Quality of Service issues. All cases were closed in favor of the Plan. The following is a summary of these issues:

Four members complained about the service they received from their providers. All cases closed in favor of the Plan after the responses determined the member received appropriate service.

One member complained about the services they received from a provider and staff with a hospital. This case closed in favor of the Plan after the response determined the member received the appropriate service.

#### 4th Quarter 2020 Grievance Summary

#### **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 2020, there were seventy grievances and appeals received by KFHC members assigned to Kaiser Permanente. Seven cases closed in favor of the Plan. Sixtytwo cases were closed in favor of the Enrollee. One case is still open and pending closure.

#### **Access to Care**

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

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

Three members complained about the lack of primary care provider availability. All cases closed in favor of the Enrollee.

Two members complained about the lack of facility physical access. One case closed in favor of the Enrollee. One case is open pending closure.

#### **Coverage Dispute**

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

Nineteen members complained about a service they requested; however, the requests were not covered. Six cases closed in favor of the Plan and the services were not covered. Thirteen of the cases closed in favor of the Enrollee and the services were provided.

#### **Medical Necessity**

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

Two members complained about a provider's refusal to refer. Both cases closed in favor of the Enrollee.

#### **Quality of Care**

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

Three members complained about the quality of care they received from a hospital. All cases closed in favor of the Enrollee.

## 4th Quarter 2020 Grievance Summary

Fifteen members complained about the quality of care they received from a provider. All cases closed in favor of the Enrollee.

Three members complained about a provider denying treatment. All cases closed in favor of the Enrollee.

#### **Quality of Service**

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

Seventeen members complained about the services being inadequate at a facility. One case closed in favor of the Plan. Sixteen cases closed in favor of the Enrollee.

# 4th Quarter 2020 Grievance Report

Category	Q4 2020	Status	Issue	Q3 2020	Q2 2020	Q1 2020	Q4 2019
Access to Care	72		Appointment Availability	53	33	53	56
Coverage Dispute	0		Authorizations and Pharmacy	0	0	0	0
Medical Necessity	317		Questioning denial of service	310	246	222	187
Other Issues	14		Miscellaneous	10	11	34	14
Potential Inappropriate Care	200		Questioning services provided. All cases forwarded to Quality Dept.	277	210	273	323
Quality of Service	7		Questioning the professionalism, courtesy and attitude of the office staff. All cases forwarded to PR Department	5	8	2	0
Total Formal Grievances	610			655	508	584	580
Exempt**	1050		Exempt Grievances-	1091	986	1620	1140
Total Grievances (Formal & Exempt)	1660			1746	1494	2204	1720



1

# Additional Insights-Formal Grievance Detail

Issue	4th Quarter Grievances	Upheld Plan Decision	Further Review by Quality	Overturned Ruled for Member	Still Under Review
Access to Care	50	30	0	19	1
Coverage Dispute	0	0	0	0	0
Specialist Access	22	15	0	7	0
Medical Necessity	317	184	0	133	0
Other Issues	14	9	0	5	0
Potential Inappropriate Care	200	98	92	10	0
Quality of Service	7	7	0	0	0
Total	610	343	92	174	1



2

# **2020 Member Satisfaction Survey**

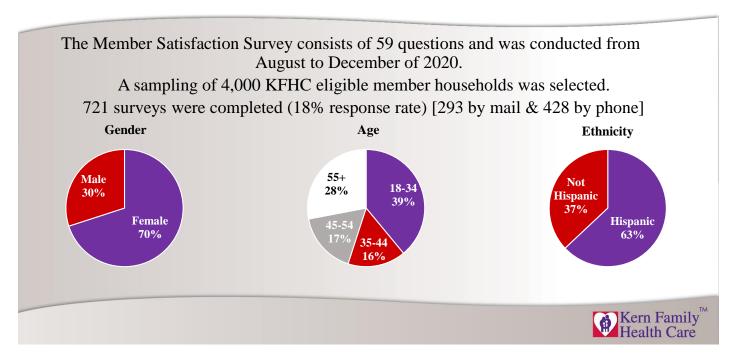


## **Overview**

- The Kern Family Health Care (KFHC) Member Satisfaction Survey (MSS) is conducted annually by SPH Analytics (SPH), a CMS and NCQA certified HEDIS® Survey vendor, to measure member satisfaction with KFHC, their providers and provider access.
- This is the second year KHS utilized the CAHPS® 5.0H Medicaid Adult Member Satisfaction Simulation Survey which will assist our efforts to achieve objectives needed for NCQA accreditation.
- The 2020 KFHC MSS results were measured in comparison to NCQA Quality Compass® All Plans 2019 and the 2020 SPH book of business benchmarks.

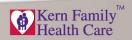


## **Respondent Demographics**



## **Term Descriptions**

- <u>Summary Rates</u> represent the most favorable response percentages ("Yes", "Usually", "Always", rates 8-10 and 9-10 on a rating scale of 0 to 10)
- 2020 SPH Analytics MAS Book of Business Benchmark is the mean summary rate from the Medicaid adult plans that contracted with SPHA to administer the 2020 CAHPS 5.0H survey and submitted data to NCQA (152 health plans).
  - <u>2019 Quality Compass® All Plans Benchmark</u> is the mean summary rate from the Medicaid adult plans that submitted data to NCQA in 2019 (165 plan-specific samples).



# **Summary Rate Scores**

RATING MEASURES Scale = 0 - 10		Family h Care	2020 SPH ANALYTICS CAHPS MAS BENCHMARK	2019 QUALITY COMPASS® MAS ALL PLANS BENCHMARK	KEY TAKEAWAY
	2020	2019	SRS	SRS	Plan scores high
8-10 Rating of Health Plan	81.7%	81.3%	80.3%	77.6%	than Quality Compass.
8-10 Rating of Health Care	77.0%	75.5%	76.9%	75.4%	However, Rating Specialist scores
8-10 Rating of Personal Doctor	84.8%	82.1%	84.2%	82.1%	lower than the S Book of Business
8-10 Rating of Specialist	79.8%	81.1%	84.7%	82.3%	
Significance Testing  Green / Red – Current year score si	gnificantly higher / lowe	r when compared to	trend or benchmark score.		Kern Fami Health Car

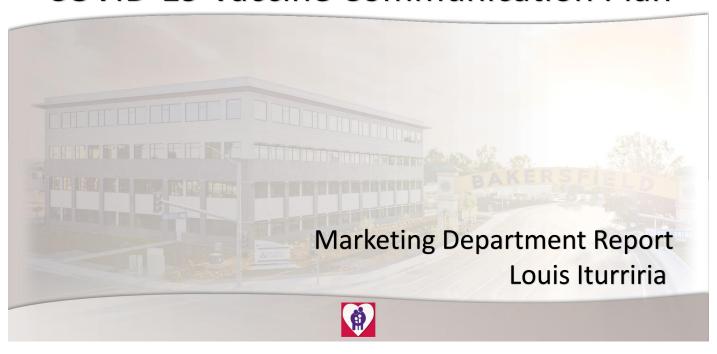
## **Next Steps**

- Continue to discover opportunities for expansion of provider network
  - The survey does not account for the Pandemic's impact on patient satisfaction. Access to professional services fell due to stay-at-home orders. In response some providers reduced office hours or delayed elective procedures which may have influenced the quality rating for Specialists.
- Discover opportunities for alternative care through technology
- Educate and engage members to encourage member action for health status improvement
- Continue working with SPH to provide benchmark data specific to California health plans





# **COVID-19 Vaccine Communication Plan**



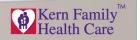
## **COVID-19 Vaccine Communication Plan**

- Direct members to Kern County Public Health Services Department to find out:
  - · When individuals are eligible to receive the vaccine
  - · Where individuals can go to get the vaccine
    - When MyTurn became available, we revised messaging to promote the MyTurn website and tollfree number
- Utilize Centers for Disease Control (CDC) information regarding how the vaccines work, safety of the vaccines and Myths and Facts about the vaccines
- · Promote KFHC Transportation Benefit for members who need a ride to a vaccine appointment
- The plan was originally developed when adults age 65 and older became eligible to receive the vaccine
  - As more individuals became eligible to receive the vaccine, we revised our plan to address a more general audience so that the outreach efforts will be appropriate for more phases of the vaccine rollout



## **COVID-19 Vaccine Communication Channels**

- Website added a COVID Vaccine page
  - <a href="https://www.kernfamilyhealthcare.com/members/important-coronavirus-covid-19-information/covid-19-vaccine-information/">https://www.kernfamilyhealthcare.com/members/important-coronavirus-covid-19-information/covid-19-vaccine-information/</a>
  - Maintain a Vaccination Sites List
    - <a href="https://res.cloudinary.com/dpmykpsih/image/upload/kern-site-353/media/0302aa424aa345e19a954c0691f94426/locations-v9.pdf">https://res.cloudinary.com/dpmykpsih/image/upload/kern-site-353/media/0302aa424aa345e19a954c0691f94426/locations-v9.pdf</a>
  - · Link to website information also added to KFHC Member Portal
- Added vaccine information to COVID menu option on KFHC phone tree and recorded a hold message
  - · Members can connect to MyTurn's toll free number from the KFHC phone tree
- Provided phone scripts to KHS staff who speak to members to inform members about how they can get the vaccine when it's their turn

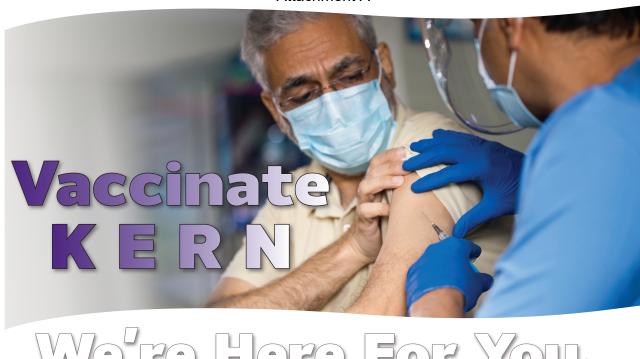


# COVID-19 Vaccine Communication Channels (cont.)

- · Direct Mail
  - Mailed letter to members age 65 and older also included Vaccine Sites List
    - See Attachment A English and Spanish Member Letters
  - Article in Spring 2021 KFHC Family Health Member Newsletter mailed end of April
- Social Media Facebook posts
- Robocalls due to the public health emergency, goal is to send IVR calls to all vaccine eligible members (even those who haven't opted in).
- SMS Text Messaging in progress
  - Working on implementing a text messaging software solution
  - Due to the public health emergency, we are able to send text messages to all vaccine eligible members (including those who haven't opted in)
  - · Developing SMS Text message communication plan



#### Attachment A



#### Dear Member.

You may have heard that the COVID-19 vaccine is being given out in phases. We have good news for you! The Kern County Public Health Services Department (KCPHSD) has started Phase 1b. This means that the COVID-19 vaccine is now being given to people who are 65 years and older.

We want to help you know more about the COVID-19 vaccine, why you should get the vaccine, and where you can go to get it.

#### Here are just a few facts about how safe the COVID-19 vaccine is:

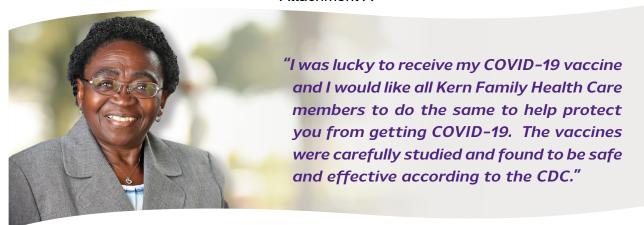
- 1. It will not give you the COVID-19 virus.
- 2. It will not cause you to test positive for the COVID-19 virus.
- 3. You should get the COVID-19 vaccine even if you had the COVID-19 virus.
- 4. It will help protect you from getting sick with COVID-19. Two doses are needed.
- 5. It will not alter your DNA.

#### Here is what you should expect when you get the COVID-19 vaccine and why you should get it:

- 1. You should get a card that tells you the name of the vaccine, the date, and where you got it.
- 2. You will get a printout about the vaccine.
- 3. You will be told when to come back for the second dose.
- 4. You need to keep wearing a mask, follow social distance guidelines and wash your hands.
- 5. You will not be fully protected until after your second dose.
- 6. You may have side effects such as pain and swelling on your skin where you got the vaccine. You may also feel tired, get chills, have a fever or a headache. These side effects should go away after a day.
- 7. Getting the vaccine is a good tool that will help stop the pandemic.

see other side

#### Attachment A



Dr. Martha Tasinga, a Board-Certified Family Practice Doctor with Master's Degrees in both Public Health and Business Administration, is the Chief Medical Officer at KFHC. She has served many health care organizations throughout Southern California and she's committed to ensuring KFHC members receive medical services of the highest quality.

We included a list of provider offices that are giving the COVID-19 vaccine. The vaccine supply and where you can get it may change so please call the provider's office to be sure they still have it and to make your appointment. You can visit the KCPHSD website at www.kernpublichealth.com, or call them at (661) 321-3000. You can also call 661-868-0165 to schedule your appointment at the COVID-19 Vaccine Clinic at the Kern County Fairgrounds.

If you need help, please call the Kern Family Health Care Member Services Department at 1-800-391-2000. We can work with you to protect you and end the COVID-19 pandemic!



kernfamilyhealthcare.com



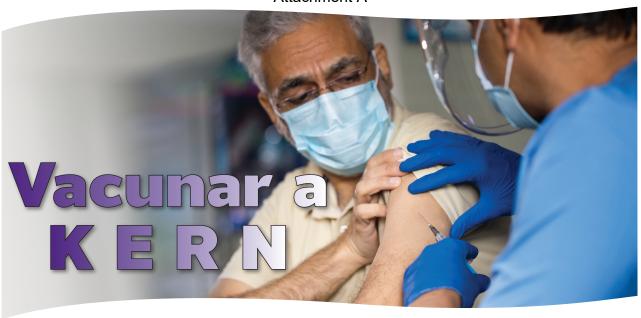






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#### Attachment A



# Estamos Aquí Para Tí.

#### Estimado Miembro,

Es posible que haya escuchado que la vacuna contra el COVID-19 está siendo administrada en fases. ¡Tenemos buenas noticias para usted! El Departamento de Servicios de Salud Pública del Condado de Kern (KCPHSD, por sus siglas en inglés) empezó la Fase 1b. Significa que la vacuna contra el COVID-19 se está administrando ahora a personas de 65 años y mayores.

Queremos ayudarle a conocer más sobre la vacuna contra el COVID-19, por qué debe vacunarse y a dónde puede ir para recibirla.

#### Estos son solo algunos datos sobre qué tan segura es la vacuna contra el COVID-19:

- 1. La vacuna no le dará el virus del COVID-19.
- 2. No causará que usted de positivo a la prueba del COVID-19.
- 3. Debe recibir la vacuna contra el COVID-19 incluso si usted ya tuvo el virus.
- 4. La vacuna le ayudará a protegerse de enfermarse con el COVID-19. Se necesitan dos dosis.
- 5. No alterará su ADN.

## Esto es lo que debe esperar cuando reciba la vacuna contra el COVID-19 y por qué debería recibirla:

- 1. Debe obtener una tarjeta que le indique el nombre de la vacuna, la fecha y dónde la recibió.
- 2. Recibirá un documento impreso sobre la vacuna.
- 3. Se le dirá cuándo debe regresar para la segunda dosis.
- 4. Debe seguir usando una mascarilla, seguir las normas de distanciamiento social y lavarse las manos.
- 5. No estará completamente protegido hasta después de su segunda dosis.
- 6. Es posible que tenga efectos secundarios como dolor e hinchazón en el área de la piel donde recibió la vacuna. También es posible que se sienta cansado, le den escalofríos, tenga fiebre o un dolor de cabeza. Estos efectos secundarios deben desaparecer después de un día
- 7. Recibir la vacuna es una buena herramienta que ayudará a detener la pandemia.

vea al reverso

### KHS Public Policy/Community Advisory Committee Meeting, March 30, 2021

#### Attachment A



La Dra. Martha Tasinga, una doctora de medicina familiar certificada con títulos de maestría en salud pública y administración de empresas, es la directora médica principal de KFHC. Ella ha formado parte de muchas organizaciones de cuidado de la salud por todo el sur de California y está comprometida en asegurar que los miembros de KFHC reciban servicios médicos de la más alta calidad.

Hemos incluido una lista de consultorios de proveedores que están administrando la vacuna contra el COVID-19. El suministro de la vacuna y dónde puede recibirla pueden cambiar, así que llame al consultorio del proveedor para asegurarse de que todavía la tengan y para hacer su cita. Visite el sitio web de KCPHSD en www.kernpublichealth.com, o llámeles al (661) 321-3000. También puede llamar al 661-868-0165 para programar su cita en la Clínica de Vacunación contra el COVID-19 (COVID-19 Vaccine Clinic) en los terrenos de la feria del Condado de Kern.

Si necesita ayuda, llame al Departamento de Servicios para Miembros de Kern Family Health Care al 1-800-391-2000. ¡Podemos trabajar con usted para protegerlo y darle fin a la pandemia del COVID-19!



1-800-391-2000 kernfamilyhealthcare.com



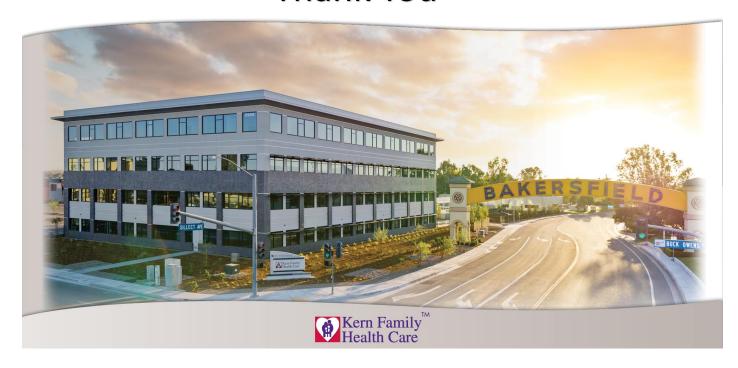






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# Thank You





# Health Education Department 2021 Member Newsletters



# Spring 2021 Newsletter

Delivered to member homes in early May 2021

#### **Topics covered**

- Covid-19 Vaccine
- Dementia\*
- Valley Fever & Covid-19\*
- Anti-depression medication
- · Family planning and Birth control
- Upper respiratory infections
- Member rewards
- Domestic violence
- Telehealth

- **Immunizations**
- Kern Regional Center
- California Children's Services
- Transportation
- Sexually Transmitted Infection Prevention
- **Diabetes**
- Medical identity theft



SPRING 2021

#### You can help stop the pandemic by getting the COVID-19 vaccine!

by getting the COV
We know that some people may
be concerned about getting the
COVID-19 vaccine. Routine steps
and procedures remain in place to
ensure the safety of any vaccine
that is allowed or approved for use.
Studies show that COVID-19
vaccine are good at keeping you
from getting COVID-19
vaccine may help keep you from
getting serously file even if you do
get COVID-19.
The COVID-19 vaccine is a
good tool to help us get back

to normal. COVID-19 vaccines teach our immune systems how to recognize and fight the COVID-19 virus.

to provide immunity.

To help protect yourself
before and after you receive
the COVID-19 vaccine:

Wear a mask to protect yourself
and others and stop the spread
of COVID-19.

## What is dementia? Dementia is caused by changes in • Having trouble with money the brain.

Dementia is a term that covers a range of conditions. It includes Alzheimer's disease.

In this issue COVID-19 or Valley Fever

Telehealth

Sexually transmitted infections

what is Alzheimer's disease?
Alzheimer's list hem scrommon
cause of dementia. Alzheimer's
disease accounts for 60% to 80%
of dementia cases.
Signs and symptoms of of dementia cases.
Signs and symptoms of
Alzheimer's include:
Getting lost in familiar places.

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\*Committee recommendation



# Fall 2021 Newsletter

Delivered to member homes in October 2021

## Topics to be covered

- Breast cancer awareness
- Cervical cancer awareness
- Attention Deficit Hyperactivity Disorder (ADHD)
- Pediatric cardiac murmurs
- Access to interpreter services
- Transportation
- Community resources

- Seniors with diabetes
- Indoor and outdoor air quality
- · Lead poisoning
- Chest pain
- Appropriate antibiotic use
- Pain management
- Member rights





# Questions? Bernardo Ochoa, MPH

Member Health Educator

Bernardo.Ochoa@khs-net.com

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

# KERN HEALTH SYSTEMS CASE MANAGEMENT DEPARTMENT QUARTERLY REPORT

Report Date: January 6<sup>th</sup>, 2020

Reporting Period: October1st, 2020- December 31st, 2020

During the months of October thru December, a total of 1,938 members were managed by the Case Management Department.

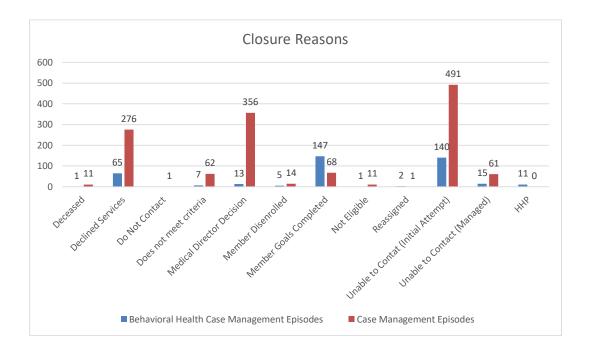
Episode Type	Closed Episodes	Open Episodes	Referral Episodes	Total
Case Management	1,035	255	25	1,315
Behavioral Health Case Management	488	124	11	623

Episode Source other than ACG Modeler	Behavioral Health Management Episodes	Percentage	Case Management Episodes	Percentage
All Internally Generated Claims	1	0.2%	0	0.0%
All Internally Generated Complex Case Management	16	3.1%	190	52.5%
All Internally Generated Grievance	1	0.2%	6	1.7%
All Internally Generated Hospital Discharge	0	0.0%	19	5.2%
All Internally Generated Medical Director	2	0.4%	17	4.7%
All Internally Generated Member Request	8	1.5%	11	3.0%
All Internally Generated UM Generated	17	3.3%	7	1.9%
BH Homeless	1	0.2%	0	0.0%
BH Mental Health	35	6.8%	0	0.0%
CM DM HE Facility Based Social Worker	1	0.2%	0	0.0%
CM DM HE Health Education	4	0.8%	1	0.3%
CM DM HE Member Services	21	4.1%	10	2.8%
CM DM HE Provider	6	1.2%	6	1.7%
CM DM High ER Utilizer	150	29.0%	0	0.0%
Critical High Risk SPD	0	0.0%	1	0.3%
DM HE Social Worker Case Management	3	0.6%	10	2.8%
HE Postpartum Claim	21	4.1%	0	0.0%
HE Prenatal Claim	25	4.8%	0	0.0%
High Risk SPD	205	39.7%	83	22.9%

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QR Provider Relations	0	0.0%	1	0.3%

A total of 1,759 Episodes were closed during the months of October thru December 2020. With 407 BH-CM Episode Type closed and 1,352 CM Episode Type closed.



Members Closed and Referred	Behavioral Health Case	Case Management Episodes
to HHP	Management Episodes	
ННР	23	12

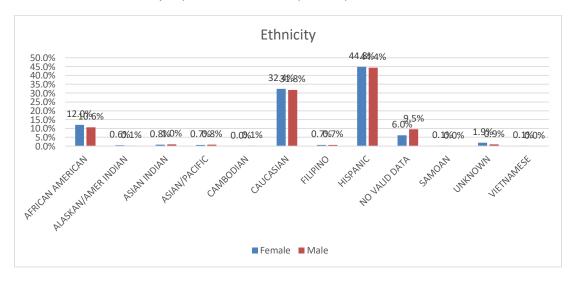
Closed Episodes with Admits within 30 days after Closure	Total
Behavioral Health Case Management	25
Case Management	64
Percentage of closed cases Readmitted	3%

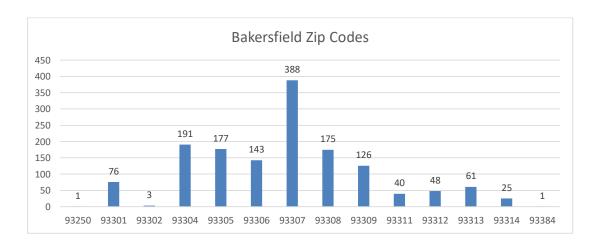
Assessments/Plan of Care	Behavioral Health Case Management Episodes	Case Management Episodes	Total
Assessments	135	236	371
Plan of Care	134	241	375

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

Age	<18	18-40	41-65	>65	Total
Case Management	13	285	928	89	1,315
Behavioral Case Management	56	268	275	24	623

Of the 1,938 members managed during the months of October thru December, the majority of members were female at 56%. The majority of members' ethnicity was Hispanic at 45%.





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## **Outlying Areas**

City	Total
ARVIN	46
BODFISH	6
BORON	5
BUTTONWILLOW	2
CALIF CITY	20
DELANO	82
EL MONTE	1
FELLOWS	2
FRAZIER PARK	8
GLENNVILLE	1
HANFORD	1
KERNVILLE	1
LAKE ISABELLA	19
LAMONT	43
LEBEC	2
LOS ANGELES	1
LOST HILLS	4
MARICOPA	6
MARYSVILLE	1
MC FARLAND	26
MOJAVE	11
N/A	18
POMONA	1
ROSAMOND	7
SHAFTER	37
TAFT	34
TEHACHAPI	48
WASCO	38
WELDON	5
WOFFORD HTS	7

## **Notes Completed**

Note Source	Behavioral Case Management Episodes	Case Management Episodes
Activity Note	1462	1301
Add Episode Note	85	71
Care Plan Problem Note	270	518
Change Status Note	1585	2967
Edit Episode Note	39	265
Episode Note	78	260
Goals	253	368
Interventions	790	519

#### Letters

Letter Template	Behavioral Health Case Management Episodes	Case Management Episodes
Appointment Letter English	41	67
Appointment Letter Spanish	7	20
Consent Form English	5	15
Consent Form Spanish	3	11
Discharge English	14	3
Discharge Spanish	3	2
Educational Material	6	0
Mental Health Alert to PCP	3	0
Suicide Hospital Letter to MD	2	0
Unable to Contact	393	818
Welcome Letter Bilingual	136	275

## **Activities Completed**

Activities Completed	Total
CMA's	2,865
Nurses	1,495
Social Workers	652

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## **Activity Type**

Activity Type		Behavioral Health Case Management Episodes	Case Management Episodes
Clinical Engagement	0		15
Education	0		29
Fax	146		218
Letter Contact	267		354
Member Services	39		51
Phone Call	1308		2476

## **Activity Name**

Activity Name	Behavioral Health Case	Case Management
	Management Episodes	Episodes
Appointment Reminder Calls	34	61
Close Episode for CEG	0	5
Close Episode for UTC	31	23
Community Resources	5	10
Contact Member	345	394
Contact Pharmacy	1	29
Contact Provider	128	395
COVID-19 Education	0	37
Create Work Item	44	63
Follow-up with PCP.	0	1
HHP	0	2
Homeless	3	2
ICT	27	46
Incoming Call	0	16
Inpatient Discharge Follow Up	25	140
Language Line	98	185
Mail Appointment Letter	47	46
Mail Authorization	0	2
Mail Consent Letter	7	21
Mail Discharge Letter	83	120
Mail Educational Material	2	0
Mail Provider Directory	2	2
Mail Unable to contact letter	60	147
Mail Urgent Care Pamphlet	15	0
Mail Welcome Letter	4	1
Mental Health Alert to PCP	5	0
Palliative Care	2	0
Plan of care	134	147
Request Medical Records	33	147
Return Mail	2	8
Schedule Physician Appointment	74	89
Transportation	1	14
Verbal consent to be received	548	990

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### 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 44 percent (844) of the Complex Group during the months of October thru December 2020.

The John Hopkins Predictive Modeler identified SPD's represent 49% percent of the SPD's identified in the Complex Group during the months of October thru December 2020. HRA identified SPD members represent 32% and other sources of SPD members represent 19%.

